



**“It’s Changed my Life”: Incarcerated Individuals Explanations  
of How Volunteering with the Red Cross Facilitated their  
Personal Development**

Thesis presented as part of the requirements of the M.A. Degree in Applied  
Psychology (Mental Health), University College Cork

**University College Cork**

**School of Applied Psychology**

Head of School: Prof. Carol Linehan

Supervisor: Dr. Maria Dempsey

September 2020

**Declaration of Academic Honesty**

I declare that the content of this assignment is all my own work. It has not been submitted of  
any other course/module. Where I have used the work of others it is acknowledged and  
referenced accordingly.

**Signed**

Date 1/09/20



## Contents

|   |                                     |
|---|-------------------------------------|
| Abstract .....  | iv                                  |
| Acknowledgements .....                                    | v                                   |
| Introduction .....  | 1                                   |
| 1 Method.....   | <b>Error! Bookmark not defined.</b> |
| Participants.....   | 5                                   |
| Researcher as Instrument .....                            | 5                                   |
| Procedure .....   | 5                                   |
| Analysis.....   | 8                                   |
| Results .....   | 10                                  |
| An Opportunity to Succeed.....                            | 13                                  |
| Acquiring Skills and Knowledge .....                      | 18                                  |
| Engaging in Meaningful Work .....                         | 23                                  |
| Discussion.....   | 29                                  |
| References .....  | 32                                  |
| Appendix A. Ethics Application.....                       | 40                                  |
| Appendix B. Information Sheet and Consent Form .....      | 60                                  |
| Appendix C. Study Revisions Resulting from COVID-19 ..... | 63                                  |
| Appendix D. Interview Guide .....                         | 63                                  |
| Appendix E. Generating Initial Codes.....                 | 68                                  |
| Appendix F. Theme Development .....                       | 74                                  |
| Appendix G. Reviewing Themes .....                        | 80                                  |
| Appendix H. Defining and Naming Themes .....              | 89                                  |
| Appendix I. Memo Document.....                            | 107                                 |

### Abstract<sup>1</sup>

The Community-Based Health and First Aid (CBHFA) programme is a nine-month course within the Irish Prison System (IPS) which trains incarcerated persons as Red Cross (RC) volunteers and supports them in carrying out health-related projects in their community.

---

<sup>1</sup> Please note that there are slight differences in the target journal's use of headings versus how the American Psychological Society (APA) advises structuring headings. For the purpose of this assignment, the APA 7<sup>th</sup> edition guidelines took precedence.

Previous research on the programme suggests that participation facilitates personal development (PD) for volunteers which could be a step towards rehabilitation for these individuals. This study aims to understand how the CBHFA programme facilitates PD for volunteers. Ten participants were randomly selected from a pool of volunteers across two open prisons in Ireland. All participants identified as Irish males currently volunteering with the RC. Data was collected through semi-structured phone interviews which lasted between 30 to 70 minutes. Questions in the interviews centred around skills, behaviour, self-esteem, self-efficacy and mental health. Interviews were audio-recorded, transcribed and then analysed using thematic analysis (TA). Three key themes were developed from the data set to explain how the CBHFA programme facilitates PD for volunteers; an opportunity to succeed, acquiring skills and knowledge and engaging in meaningful work. These aspects of the programme were reported to improve volunteers self-esteem, self-efficacy and mental health thereby, facilitating PD. This study suggests that the CBHFA programme could be considered a social approach to rehabilitation for volunteers thereby adding to the evidence-base for the programme. As well as this, by identifying the aspects of the programme which facilitate PD, the conditions needed by incarcerated individuals to live a life free from crime are highlighted. This is relevant to the design of future prison programmes and early intervention with high-risk populations.

*Keywords:* incarcerated persons, personal development, volunteering, qualitative, rehabilitation

---

### **Acknowledgements**

I would like to begin by expressing my deepest gratitude to my academic supervisor, Dr.

Maria Dempsey, and my field supervisor, Dr. Conn Dorai-Raj, for their continued encouragement and support throughout this process. Without your patience and guidance, this

project would not have been possible. It was a pleasure to work with you. Additionally, I would like to acknowledge the CBFHA programme coordinators, Dr. Graham Betts-Symonds and Ms. Carrie McGowan. I truly appreciate the assistance and counsel you provided me during this research. Thank you for allowing me to be a part of your work, I really admire it. To all the staff of the IPS and the RC involved in this study, thank you for your service and for being so welcoming. Finally, to those who devoted their time and effort to participate in my study, I am humbled by your generosity and inspired by your stories.

Thank you.

Community-Based Health and First Aid is an approach, developed by the International Federation of the RC (IFRC) and Red Crescent Societies, which aims to empower communities to take responsibility for their health by providing them with skills which are relevant to their local context (Abiodun & Betts-Symonds, 2016). Following an audit of the IPS in 2008, it was proposed to extend such a programme to the prison system, due to standards relating to community-based public health education not being achieved (Abiodun & Betts-Symonds, 2016; Irish Prison Service, 2008). The CBHFA approach was adapted by the IPS, the Irish RC and the Educational Training Boards of Ireland to suit the specific needs of the prison population. This resulted in the development of a nine-month programme which currently runs annually throughout 12 prisons in Ireland (Abiodun & Betts-Symonds, 2016). Through this programme, volunteers learn about the history of the IFRC and Red Crescent's Societies, acquire knowledge on effective communication and the building of relationships (IFRC and Red Crescent Societies, 2009). Volunteers are also expected to follow the seven fundamental principles of the RC, humanity, impartiality, neutrality, independence, voluntary service, unity and universality (IFRC and Red Crescent Societies, 2009). Volunteers complete an assessment of their community which informs the development of an action plan to address priority health needs within the prison. This usually involves peer-to-peer education of health-related topics (IFRC and Red Crescent Societies, 2009). For example, some projects include; smoking cessation courses, overdose prevention programmes and a weapons amnesty (Abiodun & Betts-Symonds, 2016). Volunteers typically conduct several projects during the course and upon completion of the programme, a graduation ceremony is held for volunteers and their families to celebrate their achievement. Post-graduation, volunteers may choose to become a CBHFA facilitator which involves training new volunteers as well as continuing to run health-related projects in the

prison. Some facilitators also have the opportunity to deliver interventions in the wider community with high-risk populations.

Senior management and healthcare workers in the IPS have collected data on several of the CBHFA projects to track the progress of the programme. This data was then collated by Abiodun & Betts-Symonds (2016) and used to evaluate the overall impact of the CBHFA programme in the IPS. This research highlights an improvement in health awareness and practices among incarcerated persons. Some areas of improvement include; prison hygiene, personal hygiene, general health, mental health and disease awareness and prevention (Crowley et al., 2019; Abiodun & Betts-Symonds, 2016). The CBHFA programme now serves as an IFRC and Red Crescent Societies best practice example on community-based health in prison and has won four awards including the World Health Organisation Best Practice in Prison Health award in 2011 (Abiodun & Betts-Symonds, 2016).

Therefore, the CBHFA programme is successful at raising awareness around health-related issues in prisons however, this is not the only benefit of the programme. There have been several studies that indicate that the CBHFA programme also facilitates PD for volunteers. First, during their evaluation of the CBHFA programme, Abiodun & Betts-Symonds (2016) hosted three semi-structured focus groups with volunteers from low and medium-security prisons. During these focus groups, many participants highlighted the programme as life-changing and noted that it altered their identity. Second, Dunne (2018) conducted an examination of peer-to-peer education as part of the CBHFA programme. Dunne (2018) carried out semi-structured interviews with 12 male CBHFA volunteers from two Irish prisons. Five key themes were developed using thematic analysis (TA); enabling change, time well spent, respect, personal growth and challenges. Although this study primarily focused on peer-to-peer education, aspects of the data also suggest PD for volunteers. For example, Dunne (2018) reported that volunteer's wellbeing improved due to

being busy and helping others. Third, O'Sullivan et al. (2018) used a desistance framework to explore incarcerated individual's experiences of the CBHFA programme. This data was collected by interviewing 11 CBHFA volunteers; seven of whom were incarcerated in a medium-security prison, two were serving sentences in an open prison and two were postrelease. TA of this data revealed that participation in this programme prompted a sense of agency among volunteers and facilitated the construction of a 'wounded healer' identity. As well as this, volunteers reported developing more pro-social bonds with other individuals who are incarcerated, staff and families. Similar to the previous studies, this study eludes to the PD of volunteers however, predominantly focuses on linking outcomes of the CBHFA programme to desistance theory.

Therefore, although the PD of volunteers has been noted in several studies, this understanding has always been a byproduct of the primary investigation and therefore has not comprehensively explored. For this reason, this study aims to specifically focus on how the CBHFA programme facilitates volunteer's PD. Understanding this mechanism for change is important for the rehabilitation of incarcerated individuals. Previous research has linked participation in the CBHFA programme to desistance. Particularly, Abiodun & BettsSymonds (2016) reports that in 2015, of the 680 CBHFA volunteers trained in the period 2009-2014, half were now released and of that half, 75% had not re-offended (Abiodun & Betts-Symonds, 2016). In comparison, the IPS (2013) report an overall recidivism rate of 62% within three years, which provides a stark contrast to the rate reported for the CBHFA programme volunteers. As well as this, Dunne (2018) notes the emergence of an alternative pro-social identity, which is indicative of rehabilitation for individuals who are incarcerated according to Maruna (2001). Finally, O'Sullivan et al. (2018) related outcomes of the programme experienced by CBHFA volunteers to core desistance mechanisms such as

identity, agency, generativity and social bonds. Therefore, this research would suggest that engagement in the CBHFA programme promotes desistance.

From a psychological perspective, the CBHFA programme could potentially be considered a social approach to rehabilitation, arising from the biopsychosocial model (Engel, 1977). As such, the CBHFA programme may be useful for the IPS psychology service to consider as a low-level intervention within the roundabout model of service delivery recommended by Porporino (2015). In his review of the IPS psychology service, Porporino (2015) highlighted under-resourcing as an issue that often resulted in incarcerated persons waiting 12 months to access mental health support in the IPS. By appropriately diverting some incarcerated persons to the CBHFA programme, this could be considered a proactive approach to mental health within the IPS and would be consistent with Porporino's (2015) recommendations of creating a motivating rehabilitation environment.

Most incarcerated individuals in Ireland have a history of social exclusion, namely a high level of family, educational and health disadvantage which leads to poor employment prospects (Irish Penal Reform Trust, 2019). The majority of Irish incarcerated individuals have never sat a State exam and over half left school before the age of 15 (Irish Penal Reform Trust, 2019). As well as this, incarcerated individuals are 23 times more likely to come from, and return to a seriously deprived area, compared to the less deprived areas (Irish Penal Reform Trust, 2019). In 2008, of the 520 incarcerated individuals who enrolled in the school at Mountjoy Prison, 20% could not read or write and 30% could only sign their names (Irish Penal Reform Trust, 2019). Finally, in 2011, over 70% of incarcerated individuals were unemployed on committal (Irish Penal Reform Trust, 2019). Clearly, a vicious cycle of social exclusion and crime exists in Ireland (Irish Penal Reform Trust, 2019). This population has been deprived of opportunities to realise their potential however, the CBHFA programme may be a viable way to interrupt, if not break, this cycle. Therefore, by understanding how

this programme facilitates PD for volunteers, this study aims to add to the evidence-base for the programme as well as inspire other prisons around the world to provide similar programmes, which could ultimately lead to more incarcerated persons having the opportunity for possible rehabilitation.

## **Method**

### **Participants**

Ten participants were interviewed for this study. All participants identified as male and Irish. This sample was aged between 25-62 years ( $M= 42.2$ ,  $SD= 11.24$ ). All participants were incarcerated persons of an open prison in Ireland and were completing their current sentence for between 1-18 years ( $M= 6.7$ ,  $SD= 5.83$ ). Participants were all active volunteers of the CBHFA programme however, the length of time they had been volunteering varied from 1-11 years ( $M= 5.5$ ,  $SD= 4.38$ ). Eight of the participants were also trained as CBHFA facilitators.

### **Researcher as Instrument**

The primary researcher for this study was an Irish female postgraduate student in her early twenties. To become familiar with the topic, the researcher read previous and related research on the CBHFA programme, attended a prison-based community health action committee (CHAC) meeting, attended sensitization training in a prison training college and also participated in study planning meetings with academic, field and project supervisors. The researcher had no contact with participants before the interviews.

### **Procedure**

Institutional ethical approval was granted for this study, see appendix A for the ethics application. Participants were recruited by randomly selecting 10 individuals from a pool of active CBHFA volunteers across two open prisons in Ireland. These volunteers were

contacted via telephone by a member of the CBHFA team with whom they were already acquainted. Participants were provided with a description of the study which included what they would be required to do, how long it would take, why the study was being carried out and were provisionally asked if they were willing to participate. Considering literacy issues are a problem for the prison population, the Governor of each prison had an individual meeting with every participant to verbally go through the information sheet and seek consent (Irish Penal Reform Trust, 2019). Moreover, before beginning the interview, the researcher verbally stated the main points of the information sheet to ensure the participant was fully informed in their decision to engage in the study. See appendix B for the information sheet and consent form. All 10 initially selected volunteers participated in the research. The number of interviews conducted was decided based on epistemological, methodological and pragmatic concerns. First, considering the scope of the research question and the homogeneity of the sample, 10 interviews were deemed appropriate to achieve data adequacy (Morse, 2000). Although qualitative research experts argue that there is no straightforward answer to determine sample size, data saturation is often considered the ‘gold standard’ (Baker & Edwards, 2012). Guest et al. (2006) analysed 60 interviews that were conducted with a homogeneous sample and focused research aims and found that saturation of themes was reached by the 12<sup>th</sup> interview. Hennink et al. (2017) added to this by demonstrating through analysis of interview data that code saturation (the point at which no additional issues are identified) was achieved at nine interviews, but meaning saturation (the point at which no further dimensions, nuances, or insights of issues are identified) required 16–24 interviews. However, due to practical issues, it was not viable to conduct more than 10 interviews for this study.

Semi-structured phone interviews were used to collect data for this study. Interviews provide the researcher with an opportunity to explore a participants inner world and the

meaning they assign to their experiences, feelings and attitudes and therefore, were considered an appropriate method of data collection to answer this study's research question (Kvale & Brinkmann, 2009). As well as this, the semi-structured nature of the interviews ensured that data was collected in core areas, for example on the topic of self-esteem however, it also allowed the researcher the flexibility to explore participant's thoughts, feelings and experiences on topics that arose during the interview. This research took place during the COVID-19 pandemic and therefore, telephone interviews were considered the most appropriate method of data collection during this time. Research would suggest that telephone interviews are a suitable alternative to face-to-face in some cases (Harvey, 1988; Tausig & Freeman, 1988; Burke & Miller, 2001; Sturges & Hanrahan, 2004; Novick, 2008). Novick (2008) conducted a review on whether a bias exists against telephone interviews in qualitative research and reported that a common concern was that a lack of visual cues would lead to data loss or distortion however, they found little evidence to suggest that this occurs. Moreover, telephone interviews may allow participants to disclose sensitive information more freely (Novick, 2008). Sturges & Hanrahan (2004) compared interview transcripts of 22 phone versus 22 face-to-face semi-structured interviews with correctional officers and visitors at county jails and found no significant differences in the interview data. Sturges & Hanrahan (2004) conclude that for some studies with a narrow focus and a suitable sample, telephone interviews could be considered a viable alternative. Due to the need for interviews to be over the phone, volunteers from open prisons were invited to participate as they had access to mobile phones which they could be contacted on. This study had to be revised due to COVID-19, see appendix C for a description of the original study.

The interview guide for this study was developed using several resources. First, the IPS had previously set up five focus groups which included assistant psychologists, addiction counsellors and CBHFA volunteers to explain PD. In this context, PD was defined according

to five categories; self-esteem, self-efficacy, mental health, skills acquisition and behavioural change. Therefore, the interview guide incorporated questions on these five domains. Second, the provisional interview script was developed using the guidelines reported by Kallio et al. (2016) in their systematic methodological review on the development of qualitative semistructured interview guides. Several meetings were also held with academic, field and project supervisors to ensure that all core areas were covered. As well as establishing key questions, several prompts were also included to support the research in obtaining relevant data. See appendix D for the interview guide.

Participants were telephoned from the researcher's mobile phone however, the audio for the phone call was connected to the researcher's laptop so it could be effectively recorded. Interviews were recorded offline using the software, Panopto. The interviews lasted between 30 minutes to 70 minutes ( $M= 40$ ,  $SD= 13.58$ ). Each interview began with an introduction by the researcher. Participants were then asked several demographic questions such as; their age, the length of time they had spent in prison and when they joined the CBHFA programme. The interview progressed with questions relating to the participants overall experience of the programme, followed by any external changes they noticed (namely changes in skill and behaviour). Subsequently, internal changes which were defined as; self-esteem, self-efficacy and mental health were discussed. Finally, the interview ended with questions on how the participant viewed their future. After this, the researcher debriefed the participant by asking them if they had any questions and how they felt. The researcher then reminded the participant who to contact if they had questions or were distressed in any way. Each volunteer was thanked for their time and interest in the study.

### **Analysis**

Thematic analysis was chosen as the method of analysis for this study for two reasons. First, TA offers a method of organising patterns of meaning in a data set into themes

(Willig, 2013). By making sense of the collective meanings and experiences of participants in this study, it was possible to answer the research question. Second, TA offers flexibility in allowing the research question to determine the epistemological approach (Willig, 2013). The TA in this study arose from a critical realist perspective, which utilised a specific inductive analysis to construct semantic themes however, it is important to note that these are continua and therefore, other influences may infiltrate the analysis at times.

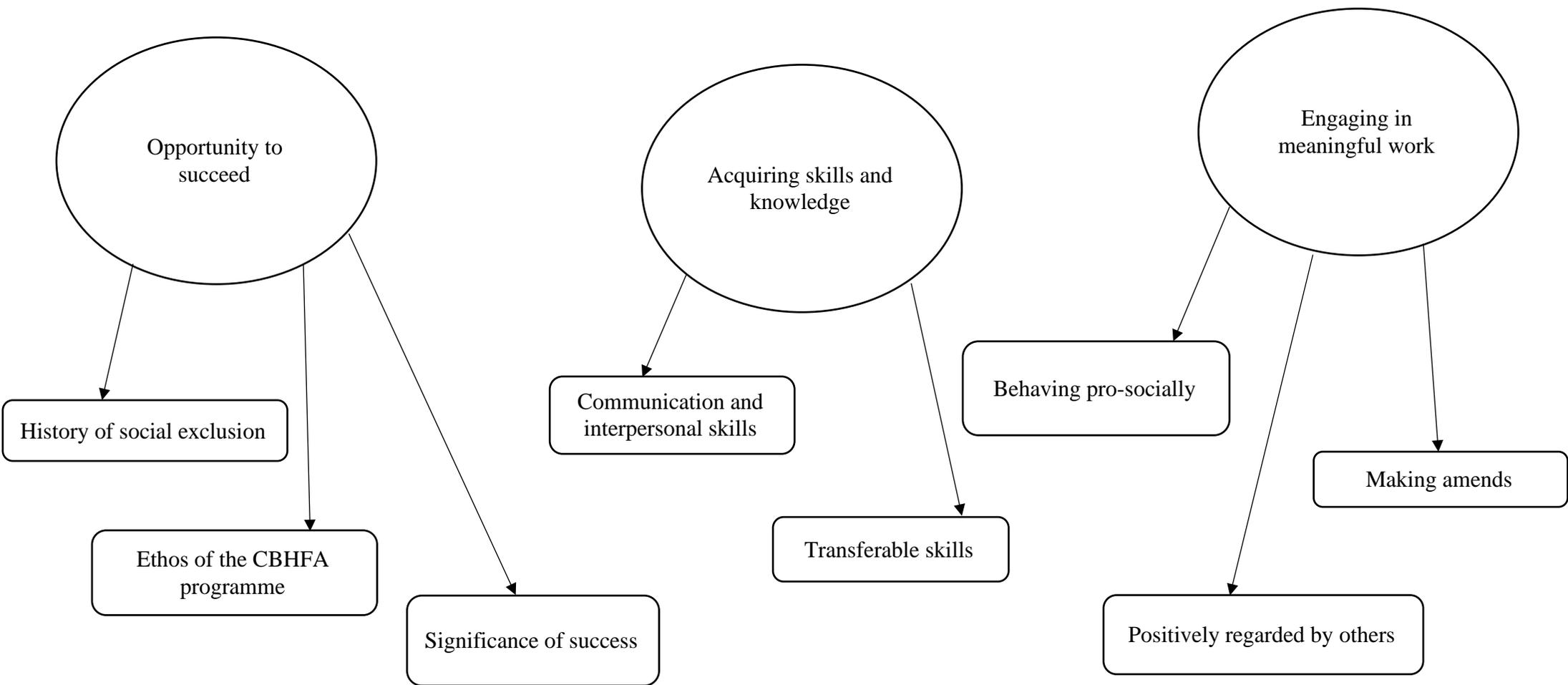
Braun & Clarke's (2006; 2013) six-phase approach was followed to analyse the data. First, the researcher familiarised themselves with the data. This involved completing an orthographic, verbatim transcription of all verbal (and some relevant non-verbal) utterances. This approach is recommended by Braun & Clarke (2006; 2013) as it captures the information which is needed while also remaining true to the original account. Transcripts were then pseudo-anonymised by removing the participant's name and any identifying information relating to them or others mentioned during the interview. Participants were offered the choice of picking their pseudonym during the interview to empower volunteers. The researcher then chose pseudonyms for any participant who did not pick for themselves. All participants were assigned male pseudonyms as they all identified as this gender. Second, each transcript was line coded in relation to the research question. Codes were defined as units of meaning, describing the most basic segments of the data set (Braun & Clarke, 2006; 2013). An example of this phase using Tom's interview can be found in appendix E. Third, codes from each transcript were then sorted into potential themes however, themes were removed, split, merged and collapsed several times during this process. In this study, themes were defined as organised categories of meaning which are either highly prevalent in the data or are segments that capture something particularly poignant and were constructed using the codes from the previous phase (Willig, 2013). Tom's table for this phase of analysis can be seen in appendix F. Themes were then reviewed for internal homogeneity and external

heterogeneity. This stage is illustrated using Tom's data in appendix G. Finally, themes were organised into subthemes and named. An example of this for the second theme is available in appendix H.

For quality assurance, the guidelines suggested by Morrow (2005) in their examination of quality and trustworthiness in qualitative research, were followed. For example, the research team reviewed the coding process as well as the theme development. Furthermore, bracketing through the use of reflexive memos was used to support the researcher in becoming aware of their assumptions and thereby, limiting their influence on the data (Tufford & Newman, 2012). The memo document can be accessed in appendix I. Finally, findings were grounded in quotes in the results section to support the researcher's interpretations (Morrow, 2005).

## **Results**

Three primary themes were identified; an opportunity to succeed, acquiring skills and knowledge and engaging in meaningful work. Themes are not of uniform length but all are supported by participant quotations. The themes provide insight into how incarcerated persons understand their PD resulting from volunteering with the RC. Participant's pseudonyms are referred to throughout this section. A thematic map illustrating the themes and subthemes of this study is displayed in Figure 1.



*Figure 1.* Thematic map showing themes and subthemes

## **Opportunity to Succeed**

The first theme illustrates how volunteers value the opportunities provided by the CBHFA programme. This theme is comprised of three subthemes; history of social exclusion, ethos of the CBHFA programme and the significance of success.

### ***History of Social Exclusion***

Many incarcerated individuals experience barriers to success in their lives. One such barrier is difficulties in education. Some volunteers reported struggling in school which resulted in them not attending regularly which was the case for Adam:

*“I was never really in school much...because when we were younger, teachers had no time for ya, if you’ve no education, if you’re slow learner then, you have your disability, or your dyslexia, you’re forgotten about”*

Similarly, Joe noted that he dropped out of school at a young age; “I never had second-level education like, I left school when I was 12 years of age”. This would be consistent with figures published by the Irish Penal Reform Trust (2019) which report that a majority of Irish incarcerated individuals have never sat a State exam and over half left school before the age of 15. For this reason, some incarcerated individuals have fewer opportunities to develop the skills needed for employment. Particularly, the Irish Penal Reform Trust (2019) reports that 20% of incarcerated individuals cannot read or write and 30% can only sign their names. Therefore, for many of these individuals, their employment opportunities are limited which contributes to their criminal activity. Unsurprisingly, over 70% of incarcerated individuals were unemployed on committal (Irish Penal Reform Trust, 2019). Difficulties with education may result in limited opportunities for volunteers to build self-esteem, which Joe commented is “all very low in prisoners”.

Furthermore, other volunteers identified mental health difficulties as an issue for the prison population. For example, Tom notes; “I had mental health issues meself when I was younger, I used to suffer from depression and things”. This idea is echoed by Luke who adds

that his poor mental health resulted in him self-medicating with drugs; “I used to actually take some, take drugs...self-medicating you might want to say to keep myself happy”.

Previously using substances to cope appeared to be a common problem for volunteers with

Paul also admitted to struggling with addiction before prison:

*“Before it, me mental health was all over the place and some of it was I was self-medicating on drugs”*

According to the biopsychosocial model, mental health difficulties arise from an interplay of biological, psychological and social factors. Therefore, considering the prison population generally have difficulties with social factors like school, work and interpersonal relations, this could contribute to the development of mental health difficulties for this population.

However, the topic of mental health appeared to be difficult for participants to speak about, with some volunteers noting “mental health is major inside prisons” (Adam) however, equally maintaining “I never had mental health issues” (Joe). Generally, participants appeared to be more comfortable speaking about the mental health of the prison population rather than themselves specifically. Although mental health awareness has advanced a lot in Ireland, this study would suggest that a stigma still exists for these incarcerated individuals. This stigma may prevent incarcerated individuals from seeking help for mental health difficulties.

Therefore, a cycle of difficulties with education, limited employment opportunities, low self-esteem, mental health problems and addiction issues exists for some incarcerated individuals. Many of these issues are interconnected and perpetuate the existence of one another.

### ***Ethos of the CBHFA Programme***

The ethos of the CBHFA programme facilitates opportunities for success for volunteers by being informed of the social exclusion faced by the prison population. For this reason, volunteers positioned the CBHFA programme as different from other organisations.

For example, Adam noted how he felt respected by programme co-ordinators and CBHFA teachers, which he had not experienced before:

*“They didn’t disrespect ya, they treated ya as a normal person, which you never got in school, you never got this anywhere else”*

Comparatively, Sam commented on how he felt that the teachers and management of the CBHFA programme believed in him; “they are people on the outside who are believing in ya”. Most volunteers positioned the CBHFA programme as highly supportive. Particularly, some volunteers, like Joe, who had previously struggled within the education system found support easily accessible within this programme:

*“Yeah I can read and write anything but I find spelling very very hard yeah... they [referring to the RC] always do, there’s always someone who can jump in and help you”*

Through respect, belief and support, volunteers felt that their goals were achievable which improved their self-esteem and self-efficacy.

The CBHFA programme also recognises and celebrates volunteer’s strengths. For example, programme co-ordinators recognise that volunteers can connect with other incarcerated individuals in a way that teachers and other prison staff cannot. Therefore, there is a significant emphasis on peer-to-peer education in the programme. This empowers volunteers to have responsibility and a “voice” (Tom) in the prison which they often noted they could express through monthly meetings with prison staff. For example, Luke explains how he felt empowered during the CHAC meetings:

*“We have a CHAC meeting where we go to the Governor and we’re sitting face-to-face with the Chief and the Governor and the medics and the psychologists, and the probation, generally a big meeting of, which we would normally never get there, and we can voice opinions of the, of the, of the prisoners. That ah- which is brilliant, and obviously if you’re in that meeting, you feel very respected and they do treat ya, as not a prisoner, but just as a person”*

This finding is also supported by O’Sullivan et al. (2018) who reported that volunteers developed a sense of personal agency from having a voice in the prison.

This ethos of the CBHFA programme echoes ideas by Rogers (1957) which suggest that certain conditions must exist before change is possible, namely; unconditional positive regard, empathy and congruence. By constructing an environment of respect, belief, support, learning and achieving was made possible for volunteers and changes in self-esteem and self-efficacy were facilitated.

### *Significance of Success*

Volunteers positioned the CBHFA programme as hugely successful and it was clear that they derived a sense of achievement from the work they conducted in the prison community. For example, Michael proudly reflected on his individual contribution to this success “I was proud to come up with the slogan”. Comparatively, Luke commented on how he was proud of being a part of a programme which has received international recognition:

*“Yeah and that’s a another thing actually, volunteer from the very first group, I’m quite proud that it’s basically all over the world now and like obviously from like obviously from myself, speaking at it and like it basically is a national programme now all over the prisons and such. To think that, being a part of that is pretty awesome”*

From conducting successful projects, John noted how “you always get that sense of achievement”. This feeling of achievement appeared to have several consequences for volunteer’s PD. First, repeatedly conducting successful projects encouraged Peter to feel more self-efficacious; “yeah definitely like you have more get up and go and things like you know, ability to do things”. This idea was echoed by both Joe “when I go to get things done now, I just go straight to it” and Dan “I would have a lot more confidence in getting projects done”

Indeed to others, like Sam, this success illustrated that they were capable of achieving, which boosted their self-esteem:

*“Am, it’s self-belief, you know, believing, believing that you can contribute to something that’s positive in your life again, a lot of lads might come from negative environments and then when they see what they can achieve and how positive it is”*

This was also reported by Luke “I feel a lot more confident in meself”. Similarly, Joe also felt that “you learn how to be more confident yourself”. Given the social exclusion faced by the prison population, this was the first time many volunteers felt successful. Before the CBHFA programme, some volunteers believed that they were incapable of contributing positively to the world. This finding is supported by the work of Dunne (2018), who also reported that volunteers were proud of their involvement in the CBHFA programme. Particularly, the participants of the CBHFA programme embraced being able to learn and accomplish as many volunteers had previously not had the opportunity to engage in ‘something good’.

Previously, many volunteers appeared to have an external locus of control which left them feeling like environmental factors controlled their fate. This resulted in many volunteers developing learned helplessness due to the social exclusion they experienced (Hiroto, 1974). However, through the CBHFA programme, volunteers experienced short-term successes which encouraged them to feel in control of their life thereby developing an internal locus of control where success was attributable to their efforts and ability. This encouraged volunteers to expect success, thereby motivating them to learn (Gifford, 2006). In this way, the short-term successes achieved through the CBHFA programme appeared to motivate volunteers towards longer-term goals. Therefore, many volunteers began engaging more proactive activities, such as other prison programmes or education. Through facilitating opportunities to succeed, the CBHFA programme scaffolded a purpose for volunteers beyond prison. This is illustrated through a quote by Peter:

*“I was always in the like I was in the one spot and it was like I was never moving anywhere...being a part of the RC, and doing school work and now I look at, 21 months later and I’m in a much better place now”*

This theme illustrates how volunteers want to succeed however, may find traditional opportunities difficult to access. However, through empowering volunteers with skills and knowledge and by creating an environment of respect, belief and support the CBHFA

programme addresses the social exclusion experienced by many members of the prison population and provides them with an accessible opportunity to grow. This knowledge is useful for the IPS psychology service to consider, particularly some incarcerated individuals may need to engage in this kind of a programme to build up their self-esteem, self-efficacy and mental health before they can participate in education or other self-betterment activities. As well as this, this study would suggest that a stigma around mental health issues still exists in the prison system which could prevent incarcerated individuals from seeking help from supports like the IPS psychology service. Therefore, some incarcerated individuals may be more comfortable participating in more social rehabilitation like the CBHFA programme, opposed to something like individual therapy. This evidence supports the use of this programme as a low-level social intervention for mental health difficulties.

### **Acquiring skills and knowledge**

An aspect of PD identified and considered by participants linked to acquiring skill and knowledge. This theme is divided into two subthemes; communication and interpersonal effectiveness and transferable skills.

#### ***Communication and Interpersonal Effectiveness***

Communication skills were reported as being one of the primary learnings for volunteers of the CBHFA programme. Poor communication skills were highlighted by several volunteers as an issue for incarcerated individuals. For example, Paul reported that poor communication often resulted in frustration for him which contributed to getting into trouble and having difficulties with interpersonal relations.

*“I ended up arguing with the Governor and I ended up in the pad for two days over it because I couldn’t, I didn’t know how to interact with him”*

Similarly, Adam commented, “I used to use my hands all the time instead of talking”.

The CBHFA programme provided volunteers with an opportunity to learn effective communication techniques through modules of the course and practice them by interacting

with the prison community. In this way, the CBHFA programme addressed a cycle of problematic communication, which often leads to punishment and low self-esteem. Many volunteers were now empowered to develop a new cycle of behaviour, which used skills to effectively communicate their needs while staying regulated during interactions. This resulted in improved self-esteem for volunteers and was one of the ways the CBHFA programme addressed the social exclusion experienced by the prison population (Irish Penal Reform Trust, 2019). For example, Joe explains:

*“[the RC] helps people talk about things you know, communicate, don’t be bottling things up like and it, it gives you the skills to grow and present yourself, being able to talk about yourself, than be aggressive or cheeky, but being assertive as well like when you needed something or whatever like, it just, it just prepares you better for talking to these people”*

Many volunteers also improved their interpersonal relations after engaging in the programme. Most volunteers spoke of a hierarchy within the prison system which organised staff and incarcerated persons based on perceived differences. This system restricted communication and interpersonal relations within the prison community. For example, Peter describes how other incarcerated individuals can feel like they are on a different level to you:

*“I mean a lot of people won’t talk for a few weeks...they think they are on a different level to you”*

Michael echoes this idea but explains that through their volunteer status, they transcend the boundaries of the prison hierarchy, allowing them to communicate with all members of the community:

*“We all had our t-shirts, little RC t-shirts...when you went around to the different landings and you had them on, lads did chat to ya and like on the same level as them”*

Conversation became a vehicle for empathy and respect which facilitated insight into the experience of others. Many volunteers who previously abstained from getting to know other incarcerated individuals due to perceived differences, began realising their similarities and relating to others in a more tolerant way. A typical response illustrated by John was; “once

you sit down and start talking to them...like our points aren't that dissimilar". This resulted in the development of more positive relationships within the prison community, particularly among CBHFA volunteers. Many participants commented on the support they received from their fellow volunteers, with some referring to them as "one big family" (Adam). For many incarcerated individuals, entering prison is a distressing experience as it is vastly different to the outside world. As well as this, many incarcerated individuals lose their support system when committed and can struggle with their mental health. Particularly, some participants highlighted prison as "frightening" (Joe), which Michael adds has an impact on incarcerated individual's mental health; "anxiety is a massive problem for anyone in prison". However, all volunteers noted the positive impact of the CBHFA programme on their mental health. For example, when Michael was first committed, he felt isolated and was afraid of integrating into the prison community for fear of being attacked. Through the CBHFA programme, Michael had an opportunity to build relationships with other incarcerated individuals which supported him in feeling more relaxed which improved his mental health.

*"I think primarily, for me anyway, it was getting up and getting to know people and yeah that's how it helped me mentally wise"*

Dan noted similar benefits:

*"I would have been keeping myself to myself and wouldn't have really been integrating too much but with the course you kind of have to do that and again you make more friends and you get in contact with a lot more people so there is, there is that side of it and having more people to talk to I suppose increases your mental health in a, in a good way"*

Moreover, the CBHFA programme also facilitated more positive relationships between volunteers and staff. Previously, many volunteers had a negative perception of staff, believing that staff was against them. However, through communication and viewing others with empathy, respect and tolerance, they transcended simplistic understandings of them as 'staff' and began seeing them as human.

*Adam: "People ah were talking now, you didn't see them as scum, they didn't see us as scum...it's only a uniform, people are human behind it"*

However, in contrast, John explains how positive change in this relationship is modulated by how volunteers regarded staff before beginning the programme. If volunteers had previously not experienced problems with staff, they did not notice a positive change in their relationship after volunteering with the RC; “well I’ve always had like ah, I’ve never had problems with the prison staff anyway”. Abiodun & Betts-Symonds (2016), Dunne (2018) and O’Sullivan et al. (2018) also note the development of pro-social bonds in their studies of the CBHFA programme. First, Abiodun & Betts-Symonds (2016) highlight that there were improvements in volunteer’s relationships with staff due to more direct communication which led to more positive perceptions and understanding. Second, Dunne (2018) reported improved relations with family, other incarcerated individuals and staff which they attribute to incarcerated individuals new volunteer status and the respect volunteers develop for fellow volunteers. Finally, O’Sullivan et al. (2018) connected the pro-social relations which are facilitated through the CBHFA programme with desistance. Particularly, Laub & Sampson (2001) and Hirschi (1969) posit that by establishing a support network, emotional attachments are enhanced, daily routines are altered and volunteers are encouraged to strive toward non-criminal identities. This study adds a rehabilitation dimension to this topic and suggests that through improved communication and interpersonal relations, self-esteem and mental health are boosted for volunteers.

### ***Transferable Skills***

Additionally, volunteers have gained experience and knowledge in a range of other domains. For example, volunteers developed skills in organising and conducting projects, facilitating courses and giving presentations. Moreover, volunteers acquire knowledge on health-related topics as well as being trained in first aid. By developing these skills, volunteers reflected more positively on themselves and their ability to achieve, thereby improving their self-esteem and self-efficacy.

*Peter: "When I first became involved in the RC, I had to stand up on the stage and maybe read out something, I wouldn't have been, wouldn't have been confident but now if they asked me today to do it, I'd have no problem getting up"*

This contributed to volunteers developing a more optimistic outlook for the future and their ability to secure a job and become a valued member of society. For some volunteers, like John, they specifically joined the CBHFA programme to increase their employability:

*"I want to...get employed by the Simon Community and use me degree in that way and that's ah part of me plan so the RC was really for experience"*

However contrastingly, other volunteers previously thought re-joining society would be impossible, particularly for those who had longer sentences or were committed several times. This further supports the existence of a vicious cycle of social exclusion for the prison population (Irish Penal Reform Trust, 2019). In addition to high levels of family, educational and health disadvantage, the stigma of a conviction further perpetuates the social exclusion of incarcerated individuals (Irish Penal Reform Trust, 2019). The criminal label is also noted by O'Sullivan et al. (2018) as a barrier for volunteers to engage in work outside of the prison community. However, the CBHFA programme attempts to interrupt this cycle by providing volunteers with opportunities to build skills during the sentence which will support them in combatting such disadvantages. This also could be useful to consider for the rehabilitation of volunteers, particularly the CBHFA programme could be a way of improving volunteer's ability to re-integrate into society. This was the case for Paul:

*"I have the, the, the skills and the tools to live a normal, to live a normal life, I don't think, I don't think I'm going to have to rent a little apartment and just lock meself away...I think I can be a valued member of society, which I didn't think that I would be years"*

Many of the volunteers appeared to recognise this cycle of social exclusion and wished to use their newly acquired skills and knowledge to educate younger generations to divert them away from a life of crime and addiction. Both Dunne (2018) and O'Sullivan et al.

(2018) also report that volunteer's aspiration to help the youth of society abstain from crime. Particularly, O'Sullivan et al. (2018) add that this signifies a change in identity which suggests desistance. After furthering their education through the CBHFA programme, volunteers recognised it's importance in providing an alternative to crime for younger generations. For example, Adam explains:

*"I learned that there was mistakes, that I would have-, if I had that education to begin with, I wouldn't have made them mistakes"*

Interestingly, Joe, who also struggled with education, had similar views:

*"I left school when I was 12 years of age and I-, and that, like that was a big mistake on my part, it's very hard if I had education I probably wouldn't have ended up in jail"*

In conclusion, this theme highlights the importance of skills and knowledge and how they impact how volunteers feel about themselves and their ability to do things. By acquiring skills and knowledge, volunteers were capable of improving their life. Therefore, skills and knowledge support volunteers in breaking the cycle of social exclusion, which ultimately contributes to their rehabilitation.

### **Engaging in Meaningful Work**

This theme describes the significance volunteers attribute to participating in work that benefits others. Three subthemes constitute this theme; behaving pro-socially, being positively perceived by others and making amends.

#### ***Behaving Pro-Socially***

Through the CBHFA programme, volunteers had an opportunity to engage in work that assists others. For some volunteers, like Tom, they participated in the CBHFA programme to "keep myself busy" which Luke explains improved his mental health: *"Keep the head busy which means like you know, not being on the landings ah, thinking all the time, and just nothing to do except think which is a bad place when you're in prison cause if you, thinking very negative stuff"*

This is also reported by Dunne (2018) who notes how volunteer's mental wellbeing improved by keeping busy and interacting with others. However, this study would expand on the work of Dunne (2018) and add that all volunteers noted that specifically working for the betterment of others was particularly fulfilling. Helping other incarcerated individuals who were struggling was regarded as important and was motivating for many volunteers. Volunteers drew on the skills and knowledge they had acquired through the programme to support their fellow incarcerated individuals. Particularly, volunteers often related to incarcerated individual's struggles which supported them in empathising with their peers. For example, Peter, who had previously struggled with addiction issues prioritised helping others with similar issues:

*“You'd always see someone coming in that you know and you'd see if they were a bit under the weather so maybe when I finished working, I'd go for a walk or whatever and I'd say do you wanna go for a walk, are you feeling down or is everything alright”*

Volunteers often remarked that they felt good after engaging in work which benefitted others. Particularly, volunteers enjoyed noticing positive change in people they had supported. This is consistent with the 'helper principle' developed by Riessman (1965) which suggests that when an individual assists someone else, they also benefit. Moreover, Luks (1988) reports that helpers receive a high from working for the benefit of others. This idea was echoed by all participants, for example, Tom explains; “it's good to see the change in them I find, it makes me feel good about myself”. Similarly, Dan notes:

*“If you can get through to at least one or two, it kind of gives you that little sense of joy afterwards that you've helped someone”*

For many volunteers, being good-natured and being someone willing to help someone else was valued. Therefore, when volunteers behaved in accordance with their values, they felt good about themselves and improved their mental health. This would be consistent with literature on eudaimonic happiness by the likes of Ryan & Deci (2001), who suggest that

individuals will achieve happiness if they live in accordance to their virtues. For example, Sam explains the importance of helping people, “if you’re prepared to help somebody...I don’t think enough people do that”. Comparatively, Luke notes how he wished to be viewed as kind, and as someone who would help other people; “I’m hoping they’d see me being kind and helping people”. Similar to this research, Dunne (2018) notes how through helping others, volunteers also help themselves. This is also comparable to the theme of generativity reported by O’Sullivan et al. (2018). In their study, O’Sullivan et al. (2018) note that volunteers felt empowered by working with others and that this gave them a sense of purpose. By providing volunteers with an opportunity to give back to society, Maruna, (2001) suggests that desistance is facilitated.

### ***Being Positively Regarded by Others***

By engaging in positive work, volunteers were perceived differently within the prison. Volunteers often commented that they were primarily viewed as volunteers rather than prisoners. Again, the label ‘prisoner’ is positioned negatively here and the importance of building an identity that is incompatible with volunteers offending past is emphasised. For example, Paul explains; “RC volunteers are seen as volunteers now and predominantly volunteers rather than prison incarcerated persons”. Due to their status as ‘volunteer’, participants reported feeling respected and valued by the prison community. Particularly, many volunteers noted being treated differently by staff. For example, Michael noted that “you got respect off...the officers” for being a CBHFA volunteer. Interaction with both the Chief and Governor appeared to be significant for many volunteers, giving them a feeling of importance. Luke echoed Michaels observation and expanded on this idea by noting improvements in self-esteem and mental health which occurred from being treated with respect:

*“Like the Chief used to come down and I’d be walking the yard and he’d walk around with me, talking to me about bits and pieces or certain things*

*like...but you feel a little bit important but you know what I mean, a sense of worth of ya, of ya, you know what I mean? In the place which is important, which is good for self-esteem and confidence.”*

This finding is similar to results from Dunne (2018), who also reported how volunteers felt more respected by staff and how this made them feel good about themselves.

Many of the volunteers also spoke of a positive change in how their families viewed them. For some of the volunteers, they felt that this was the first time their family had witnessed them doing something positive. Volunteers graduation was highlighted as a prideful day which illustrated the positive work they were engaging in. Similarly, Dunne (2018) also noted the graduation day as a significant achievement. For example, when remembering his graduation, Joe explained; “my kids really enjoyed it because to them, to them it was a big thing”. However, in contrast, some volunteers noted that their family had always viewed them positively and therefore, their involvement in the CBHFA programme did not prompt a change. However, these volunteers tended to have experienced less social exclusion than others, with many of them having finished education and achieved employment. Therefore, due to having more opportunities for success, they were viewed more positively by their families. How volunteers are perceived by both their family and the wider community is important as research would suggest that expectations influence outcomes, for example, Rosenthal (1973) posits that higher expectations result in better outcomes for individuals through the ‘Pygmalion Effect’. Unfortunately however, due to the social exclusion and stigma experienced by much of the prison population, many incarcerated individuals feel they are bad people, incapable of contributing positively to the world. Therefore, the importance of facilitating accessible opportunities for incarcerated individuals to engage in work which will be positively perceived by others is highlighted as important for their overall outcomes and rehabilitation. The impact of low expectations are candidly illustrated by Joe:

*“If you are constantly told you’re doing wrong, believing it too, being told that you’re bad like you know you start believing in it like”*

Although most volunteers were more positively perceived by others, some commented that a minority of incarcerated individuals viewed their volunteer status negatively. Some incarcerated individuals maintained that CBHFA volunteers were “crawlers” which Michael explained meant that they were working for the benefit of the prison rather than the incarcerated individuals. However, volunteers rationalised this perception by mentalising that these incarcerated individuals were “jealous” (Luke) and were therefore, incorrect in their judgement. In this way, volunteers developed resilience and skills in managing negative perceptions, which will undoubtedly be relevant for the future due to the stigma of having a conviction. Dunne (2018) also mentioned incarcerated individual’s resistance as one of the challenges faced by CBHFA volunteers and how volunteers used understanding to overcome.

### ***Making Amends***

A number of the volunteers spoke of experiencing shame and guilt for their previous behaviour, which led to low self-esteem and poor mental health. Maruna (2001) suggests that expressing such guilt is a sign of desistance for incarcerated persons. This is illustrated through a quote from Paul:

*“I spent a lot of me time hating myself for what got me into prison, not just what got me into prison, the offence that brought me to prison...it really made me feel terrible about meself or hate meself, I didn’t, I didn’t respect meself either”*

Similarly, Sam noted:

*“I made a bad decision and you know, unfortunately it led me to being in here but I, my self-belief kind of went, like I kind of didn’t believe in meself anymore... just everything went, my self-confidence went, I let me family down, I let everyone down”*

However, by doing good through the CBHFA programme, volunteers felt like they were making amends for their previous actions. This improved how volunteers thought and felt

about themselves. For example, Paul was now able to reflect on the good he had done, as well as the bad:

*“I got involved in the RC and I was able to I wouldn’t say balance it out but I when I was doing good for people, I was able to remember the appreciation that I get off somebody rather than remembering the, the bad feeling that I had or thinking of something bad I’ve done”*

Furthermore, volunteers spoke about taking responsibility for their actions. For example, Adam explains how he previously blamed his behaviour on external forces however, through the CBHFA programme has developed an internal locus of control which allowed him to take responsibility for his action:

*“When I thought I was mixed up with the wrong crowd, it was my choice , I chose it, you know [laughs], I blame other people but at the end of the day, you’re the one that went along but there is kind of ways, you know, that people are easily led that if you have programmes there for them”*

However, Adam also acknowledged the disadvantage he faced in his life during his interview. This is regarded by Porporino (2015) as desistance talk. This is also consistent with the work of O’Sullivan et al. (2018) who suggest that the principles of the RC provide a template for volunteers which facilitates the emergence of a pro-social identity. Maruna (2001) notes that this is a successful mechanism of desistance known as the ‘redemption script’. Many of the volunteers appeared to assume the role of a ‘wounded healer’, which may make integrating back into society easier.

This theme illustrates how engaging in positive work adds an element of normality to incarcerated individual’s lives. This would be consistent with the principle of normality endorsed by the prison system in Norway, which suggests that prison life should resemble life on the outside as much as possible to facilitate smooth reintegration into the community. Norway now boasts one of the lowest recidivism rates in the world, with the Governor of Halden prison reporting it to be as low as 20-25% (Høidal, 2018). The CBHFA programme has also been linked to desistance by Abiodun & Betts-Symonds (2016), Dunne (2018) and

O'Sullivan et al. (2018). This study would suggest that by providing volunteers with opportunities for normality, the CBHFA programme facilitates reintegration into the community post-release. This theme also highlights how others view of volunteers behaviour and how this can facilitate integration into a community. Social control theory suggests that pro-social bonds control future temptation to commit crime. Namely, when individuals value and are committed to social relationships, the cost of crime increases as they risk losing these relationships if they commit further criminal acts (Laub & Simpson, 2001; Hirschi, 1969). In this way, the CBHFA programme could be considered an approach to rehabilitation. However, due to the social exclusion experienced by the prison population, they may need to develop skills in effective communication and interpersonal relations before being able to engage in positive work.

### **Discussion**

The research question for this study focused on incarcerated person's explanations of how the CBHFA programme impacted their PD. This study suggests that through having an opportunity to succeed, acquiring skills and knowledge and engaging in meaningful work, volunteers experienced improvements in self-esteem, self-efficacy, mental health, resilience as well as developing an internal locus of control. Therefore, in this way, the programme supported the rehabilitation of volunteers and could be considered by the IPS psychology service as a low-level social intervention within the roundabout model of service delivery recommended by Porporino (2015). This could work to appropriately divert some incarcerated persons from requiring more individual support thereby, alleviating waiting lists for psychologists and maximising rehabilitation for incarcerated persons.

This study has several implications. Theoretically, this study builds on previous research on the CBHFA programme by Abiodun & Betts-Symonds (2016), Dunne (2018) and

O'Sullivan et al. (2018) which suggests that participation in the CBHFA programme stimulates PD. This study identifies specific aspects of the programme and links them to particular elements of PD. This has some practical implications. By pinpointing the aspects of the programme which facilitate PD, the conditions needed by incarcerated individuals to live a life free from crime are highlighted. Therefore, prison programmes and interventions can now be designed to include these conditions to maximise rehabilitation. As well as this, this study supports the Irish Penal Reform Trusts (2019) claim that the prison community is a socially excluded population. Therefore, the results of this study are also relevant for early intervention with high-risk populations to divert them from a life of crime. By providing high-risk populations with more accessible opportunities to acquire skills and knowledge and engage in meaningful work, this could provide this group with an alternative to crime. Finally, this study also has a methodological implication that supports the use of telephone interviews in the place of face-to-face interviews. This is particularly poignant at the moment during the global coronavirus pandemic.

There are also several limitations to this study. First, although this study suggests that the CBHFA programme facilitates PD for volunteers, the quantitative change in these traits over time remains unknown. Particularly, the benefit of completing the CBHFA course alone is unclear. Second, the participants in this study were all residing in open prisons in Ireland. Due to differences in populations between open and closed prisons, the results of this study may not be generalisable to the wider CBHFA volunteer population. Traditionally, incarcerated individuals who are transferred to open prisons would have worked with psychology and would have displayed prosocial behaviour. Therefore, their experience of volunteering with the RC could differ from incarcerated individuals who reside in closed prisons. Third, all participants of this study identified as male and therefore may not represent the views of volunteers of other genders. Finally, all of the volunteers had largely positive

experiences with the CBHFA programme. This may be due to volunteers who had more negative experiences dropping out of the programme and therefore, not being included in this sample. This may mean that the results of this study are ungeneralisable to the wider CBHFA volunteer population.

As research exploring how the CBHFA programme facilitates the PD of volunteers is only beginning, there is much left to study. Particularly, little is known about how time spent volunteering modulates incarcerated individuals PD. Therefore, future research should focus on the benefits of completing CBHFA training alone. To do this, future researchers could use psychometric measures to track changes in traits like self-esteem, self-efficacy, mental health and resilience from baseline to completion of the nine-month course. This would provide insight into whether volunteers experience significant change as a result of completing CBHFA training alone. This knowledge would illustrate whether the CBHFA training can be considered rehabilitative. Additionally, demographic information such as which prison volunteers are residing in as well as their age, gender, education level and employment history could also be collected to determine how these characteristics modulate the PD of volunteers. This would provide information on who the programme works best for and who it does not work well for. This research would add to the evidence-base for the programme and would support professionals in making more appropriate referrals to the programme. As well as this, this proposed research would address the limitations of this study as it would include a more gender-inclusive sample of volunteers from both open and closed prisons. By tracking changes from baseline, those who may have more negative experiences of the programme will also be included.

There are also some strengths to this study. First, a team of professionals were involved in developing and conducting this study. Therefore, expertise from both psychologists and CBHFA programme co-ordinators was incorporated into the design of this

research. As well as this, many of the volunteers had been involved in the RC for significant periods and therefore, had extensive knowledge of the programme while also having time to reflect on their experiences. Moreover, participants were generous in sharing their experiences during the interviews and thus, a rich data set was collected. Finally, the analysis for this study was conducted from a critical realist, inductive approach which treated volunteers as an expert in their development. Therefore, the results of this study represent the voices of participants, which in line the empowering ethos of the CBHFA programme. Regarding individuals as experts in their own lives is echoed in policy documents; Vision for Change and the National Framework for Recovery in Mental Health in Ireland (Health Service Executive, 2017; Government of Ireland, 2006).

In conclusion, this study highlights how powerful it can be for incarcerated individuals to engage in courses like the CBHFA programme which provide opportunities to succeed, endorse the learning of skills and knowledge, and allow engagement in meaningful work. This research hopes to increase support for the CBHFA programme, and similar programmes, so more incarcerated persons have opportunities to break the cycle of social exclusion.

*Sam: "What RC has done for me and how it's changed my life and it's how it's changed me as a person and it's how I want to lead my life"*

### **References**

- Abiodun, N., & Betts-Symonds, G. (2016). *An evaluation of the process of the community based health and first aid in prisons programme (2009–2014): A collaborative study using a 'realist approach'*. Irish Red Cross.
- Bagnall, A. M., South, J., Hulme, C., Woodall, J., Vinall-Collier, K., Raine, G., Kinsella, K., Dixey, R., Harris, L. & Wright, N. M. (2015). A systematic review of the effectiveness

and cost-effectiveness of peer education and peer support in prisons. *BMC Public Health*, 15(1), 290.

Baker, S. E., & Edwards, R. (2012). How many qualitative interviews is enough? Expert voices and early career reflections on sampling and cases in qualitative research

Borgonovi, F. (2008). Doing well by doing good. The relationship between formal volunteering and self-reported health and happiness. *Social science & medicine*, 66(11), 2321-2334.

Braun, V., & Clarke, V. (2013). *Successful qualitative research: A practical guide for beginners*. sage.

Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative research in psychology*, 3(2), 77-101.

Burke, L. A., & Miller, M. K. (2001). Phone interviewing as a means of data collection: Lessons learned and practical recommendations. In *Forum Qualitative Sozialforschung/Forum: Qualitative Social Research* (Vol. 2, No. 2).

Calsyn, R. J., Quicke, J., & Harris, S. (1980). Do improved communication skills lead to increased self-esteem?. *Elementary School Guidance & Counseling*, 15(1), 48-55.

Crowley, D., Murtagh, R., Cullen, W., Keevans, M., Laird, E., McHugh, T., McKiernan, S., Miggin, S.J., O'Connor, E., O'Reilly, D. & Betts-Symonds, G. (2019). Evaluating

peer-supported screening as a hepatitis C case-finding model in prisoners. *Harm reduction journal*, 16(1), 42.

Dunne, E., (2018). *Peer to Peer Education; An Examination of Trained Red Cross Volunteers in an Irish Prison Setting*. Irish Red Cross.

Engel, G. L. (1977). The need for a new medical model: a challenge for biomedicine. *Science*, 196(4286), 129-136.

Englander-Golden, P., Jackson, J. E., Crane, K., Schwarzkopf, A. B., & Lyle, P. S. (1989). Communication skills and self-esteem in prevention of destructive behaviors. *Adolescence*, 24(94), 481.

Gifford, D. D., Briceno-Perriott, J., & Mianzo, F. (2006). Locus of Control: Academic Achievement and Retention in a Sample of University First-Year Students. *Journal of College Admission*, 191, 18-25.

Government of Ireland. (2006). A vision for change: Report of the expert group on mental health policy.

Guest, G., Bunce, A., & Johnson, L. (2006). How many interviews are enough? An experiment with data saturation and variability. *Field methods*, 18(1), 59-82.

Harandi, T. F., Taghinasab, M. M., & Nayeri, T. D. (2017). The correlation of social support with mental health: A meta-analysis. *Electronic physician*, 9(9), 5212.

Harvey, C.D. (1988). 'Telephone Survey Techniques', *Canadian Home Economics Journal* 38(1): 30–5.

Health Service Executive. (2017). National Framework for Recovery in Mental Health. Health Service Executive. <https://www.hse.ie/eng/services/list/4/mental-healthservices/advancingrecoveryireland/national-framework-for-recovery-in-mentalhealth/>

Hennink, M. M., Kaiser, B. N., & Marconi, V. C. (2017). Code saturation versus meaning saturation: how many interviews are enough?. *Qualitative health research*, 27(4), 591-608.

Hiroto, D. S. (1974). Locus of control and learned helplessness. *Journal of experimental psychology*, 102(2), 187.

Hirschi, T. (1969). Causes of Delinquency. Berkeley: University of California Press. 1983  
Crime in the family. *Crime and Public Policy*.

Høidal, A. (2018). Normality behind the Walls: Examples from Halden Prison. *Federal Sentencing Reporter*, 31(1), 58-66.

International Federation of Red Cross and Red Crescent Societies. (2009). Volunteer Manual for Community Based Health and First Aid in Action (CBHFA). International Federation of Red Cross and Red Crescent Societies.  
<https://redcross.eu/projects/community-based-health-and-first-aid-cbhfa>

Irish Penal Reform Trust. (2019). Facts & Figures. Irish Penal Reform Trust.

<https://www.iprt.ie/prison-facts-2/>

Irish Prison Service. (2019). Strategic Plan 2019-2022. Irish Prison Service

[https://www.irishprisons.ie/wp-content/uploads/documents\\_pdf/Document-5\\_IPSSstrategy-2019\\_2022.pdf](https://www.irishprisons.ie/wp-content/uploads/documents_pdf/Document-5_IPSSstrategy-2019_2022.pdf)

Irish Prison Service. (2013). Recidivism Study. Irish Prison Service

<https://www.irishprisons.ie/images/pdf/recidivismstudyss2.pdf>

Irish Prison Service. (2008). Annual Report 2008. (2008). Irish Prison Service

<http://www.irishprisons.ie/images/pdf/annualreport2008.pdf>

Kallio, H., Pietilä, A. M., Johnson, M., & Kangasniemi, M. (2016). Systematic

methodological review: developing a framework for a qualitative semi-structured interview guide. *Journal of advanced nursing*, 72(12), 2954-2965.

Kvale, S., & Brinkmann, S. (2009). *Interviews: Learning the craft of qualitative research interviewing*. sage.

Lafferty, L., Treloar, C., Guthrie, J., Chambers, G. M., & Butler, T. (2017). Social capital

strategies to enhance hepatitis C treatment awareness and uptake among men in prison. *Journal of viral hepatitis*, 24(2), 111-116.

Laub, J. H., & Sampson, R. J. (2001). Understanding desistance from crime. *Crime and justice*, 28, 1-69.

Luks, A. (1988). Helpers high. *Psychology Today*, 22(10), 39.

Maruna, S. (2001). *Making good* (p. 86). American Psychological Association.

Møller, L., Stover, H., Jürgens, R., Gatherer, A., Nikogosian, H., & World Health Organization. (2007). *Health in prisons: a WHO guide to the essentials in prison health* (No. EUR/07/5063925). WHO Regional Office for Europe.

Morrow, S. L. (2005). Quality and trustworthiness in qualitative research in counseling psychology. *Journal of counseling psychology*, 52(2), 250.

Morse, J. M. (2000). Determining sample size.

Novick, G. (2008). Is there a bias against telephone interviews in qualitative research?. *Research in nursing & health*, 31(4), 391-398.

O'Sullivan, R., Hart, W., & Healy, D. (2018). Transformative Rehabilitation: Exploring Prisoners' Experiences of the Community Based Health and First Aid Programme in Ireland. *European Journal on Criminal Policy and Research*, 1-19.

Porporino FJ., (2015). '*New connections*': embedding psychology services and practice in the Irish Prison Service. Ottawa: T3 Associates Inc.

[http://www.irishprisons.ie/wpcontent/uploads/documents\\_pdf/porporino\\_report.pdf](http://www.irishprisons.ie/wpcontent/uploads/documents_pdf/porporino_report.pdf)

Riessman, F. (1965). The "helper" therapy principle. *Social work*, 27-32.

Riggio, R. E., Throckmorton, B., & Depaola, S. (1990). Social skills and self-esteem.

*Personality and Individual Differences, 11(8), 799-804.*

Rogers, C. R. (1957). The necessary and sufficient conditions of therapeutic personality change. *Journal of consulting psychology, 21(2), 95.*

Rosenthal, R. (1973). The Pygmalion Effect Lives. *Psychology today.*

Ryan, R. M., & Deci, E. L. (2001). On happiness and human potentials: A review of research on hedonic and eudaimonic well-being. *Annual review of psychology, 52(1), 141-166.*

Schwarzer, R. (2014). *Self-efficacy: Thought control of action.* Taylor & Francis.

South, J., Woodall, J., Kinsella, K., & Bagnall, A. M. (2016). A qualitative synthesis of the positive and negative impacts related to delivery of peer-based health interventions in prison settings. *BMC health services research, 16(1), 525.*

Sturges, J. E., & Hanrahan, K. J. (2004). Comparing telephone and face-to-face qualitative interviewing: a research note. *Qualitative research, 4(1), 107-118.*

Tausig, J. E., & Freeman, E. W. (1988). The next best thing to being there: Conducting the clinical research interview by telephone. *American Journal of Orthopsychiatry, 58(3), 418-427.*

Terry, G., Hayfield, N., Clarke, V., & Braun, V. (2017). Thematic analysis. *The Sage handbook of qualitative research in psychology*, 17-37.

The Red Cross (2020). Community Based Health and First Aid. Red Cross EU Office  
<https://redcross.eu/projects/community-based-health-and-first-aid-cbhfa>

Tufford, L., & Newman, P. (2012). Bracketing in qualitative research. *Qualitative social work*, 11(1), 80-96.

Vasileiou, K., Barnett, J., Thorpe, S., & Young, T. (2018). Characterising and justifying sample size sufficiency in interview-based studies: systematic analysis of qualitative health research over a 15-year period. *BMC medical research methodology*, 18(1), 148.

Vatankhah, H., Daryabari, D., Ghadami, V., & Naderifar, N. (2013). The effectiveness of communication skills training on self-concept, self-esteem and assertiveness of female students in guidance school in Rasht. *Procedia-Social and Behavioral Sciences*, 84, 885-889.

Willig, C. (2013). *Introducing qualitative research in psychology*. McGraw-hill education (UK).

**Appendix A Ethics Application**

Ref.No. \_\_\_\_\_

**ETHICS APPLICATION FORM**

School of Applied Psychology UCC

(adapted from UCC Social Research Ethics Committee documentation)

# \*ETHICS AMMENDMENT\*

*Introduction*

UCC academic staff and postgraduate research students who are seeking ethical approval should use this application form.

**APPLICANT DETAILS**

|  |   |                           |                                   |
|--|---|---------------------------|-----------------------------------|
| <b>Name of applicant(s)</b>                            | Sophie Marron   | <b>Date</b>               | 10 <sup>th</sup> of November 2019 |
| <b>Department/School/Unit, &amp; Supervisor's Name</b> | School of Applied Psychology, Dr. Maria Dempsey   | <b>Phone</b>              | 0876203868                        |
| <b>Correspondence Address</b>                          | School of Applied Psychology  | <b>Professional Email</b> | 116376383@umail.ucc.ie            |
| <b>Title of Project</b>                                | How Community Based Health and First Aid Training Impacts the Personal Development of Inmates |                           |                                   |

**Authorisation**

Date when this research was considered by the Ethics Committee of the School of Applied Psychology

Result (please check one):

|  |  |
|--|--|
| Approved   |  |
| Approved with minor comments (resubmission is not required)  |  |
| Approved pending clarification (a list of sections and required clarifications must be made below or appended)     |  |
| Approved pending approval from external body (the body or bodies from which approval is pending must be specified) |  |
| Not approved   |  |
| Referred to Social Research Ethics Committee (SREC)  |  |
| Other  |  |

Feedback for the applicant:

Reviewers' signatures:

Date:

*Application Checklist*

This checklist includes all of the items that are required for an application to be deemed complete. In the event that any of these are not present, the application will be returned to the applicant without having been sent to review. Please ensure that your application includes all of these prior to submission. Thank you.

|  |
|--|
| Completed Application Checklist            |
| <input checked="" type="checkbox"/> X      |
| Completed Ethical Approval Self-Evaluation |
| <input type="checkbox"/> X                 |
| Completed Description of Project           |
| <input type="checkbox"/> X                 |
| Information Sheet(s)                       |
| <input type="checkbox"/> X                 |

|   |
|---|
| The Consent Sheet(s) are GDPR Compliant   |
| <input type="checkbox"/> X  |
| Psychometric Instruments (citation) / Interview / Focus Group Schedules   |
| <input type="checkbox"/> X  |
| I have consulted the UCC <i>Code of Research Conduct</i> and believe my proposal is in line with its requirements                     |
| <input type="checkbox"/> X  |
| If you are under academic supervision, your supervisor has approved the wording of and co-signed this application prior to submission |
| <input type="checkbox"/> X  |

### CLINICAL RESEARCH SELF-EVALUATION

**If the research project is clinical in nature, then it must be referred to the Research Ethics Committee of the Cork Teaching Hospitals (CREC).**

**The requirements of CREC are set out in the Committee’s manual, which is freely available from the secretariat ([crec@ucc.ie](mailto:crec@ucc.ie)). In broad terms, prior approval is necessary where the research methodology involves:**

|   |  | YES | NO |
|---|--|-----|----|
| 1 | Therapeutic interaction with a human participant   |     | X  |
| 2 | A clinical trial of, inter alia, a medical device, medicinal product or clinical technique as stipulated under relevant legislation  |     | X  |
| 3 | Development of diagnostic techniques using human participants  |     | X  |
| 4 | Access to, or utilisation of, human tissue and body fluids   |     | X  |
| 4 | Access to, or utilisation of, identifiable medical data concerning individuals (such as clinical records) by parties not directly concerned in the provision of care to these individuals  |     | X  |
| 5 | Interaction with / observation of individuals in a healthcare contact or setting   |     | X  |
|   | If yes to any of the above, consider whether your ethical application needs to be referred to the CREC. If you judge that it falls under the jurisdiction of the School of Applied Psychology, please justify this decision<br><a href="http://www.ucc.ie/en/research/ethics/">http://www.ucc.ie/en/research/ethics/</a> | X   |    |

Due to this project meeting none of the clinical criteria, it is judged as appropriate for the School of Applied Psychology ethics committee.

### SECONDARY DATA ANALYSIS

#### N/A for this study

If this data is not sensitive and there is minimum risk of disclosure of the identity individuals, then the data may be used without ethical clearance.

|    |   | YES | NO |
|----|---|-----|----|
| 1  | Do you consider that this data is sensitive and /or there is a risk of disclosure of the identity of individuals?   |     |    |
| 2  | Did the original study receive ethical approval, if YES, please attach documentation confirming that.   |     |    |
| 3  | Will the data provided to you will be completely anonymous?   |     |    |
| 4  | Will it be impossible to identify participants from resulting reports?  |     |    |
| 6  | Will the use of the data not result in any damage or distress?  |     |    |
| 7  | Was consent secured for the original data collection and were participants asked if they were willing to have their data archived and made available?       |     |    |
| 8  | Does the analysis focus on potentially sensitive personal data?<br>Please specify the nature of the data to be analysed in the description of the research* |     |    |
| 9  | Is the data protected by legislation or particular archival restrictions?   |     |    |
| 10 | Is your use of the data GDPR compliant?   |     |    |
|    |   |     |    |

\*

This could include, but not be restricted to: ethnic or racial origin, political views or religious beliefs, membership of organisations, such as trade unions, physical or mental condition, family life, sexual life, offence history, legal proceedings.

Racial/ethnic origin of the participant

Political opinions

Religious or other beliefs

Physical or mental condition

Sexual or family life

Commission or alleged commission of any offence.

Any proceedings for any offence committed or alleged to have been committed and the disposal of such proceedings or the sentence of any court in such proceedings.

### ETHICAL APPROVAL SELF-EVALUATION

|   |   | YES | NO |
|---|---|-----|----|
| 1 | Do you consider that this project has significant ethical implications? |     | X  |

|    |   |   |   |
|----|---|---|---|
| 2  | Will you describe the main research procedures to participants in advance, so that they are informed about what to expect?  | X |   |
| 3  | Will participation be voluntary?  | X |   |
| 4  | Will you obtain informed consent in writing from participants?  | X |   |
| 5  | Will you tell participants that they may withdraw from the research at any time and for any reason, and (where relevant) omit questionnaire items to which they do not wish to respond? | X |   |
| 6  | Will data be treated with full confidentiality / anonymity (as appropriate)?  | X |   |
| 7  | Will data be securely held for a minimum period of ten years after the completion of a research project, in line with the University's Code of Research Conduct?                        | X |   |
| 8  | If results are published, will anonymity be maintained and participants not identified?   | X |   |
| 9  | Will you debrief participants at the end of their participation (i.e. give them a brief explanation of the study)?  | X |   |
| 10 | Will your project involve deliberately misleading participants in any way?  |   | X |
| 11 | Will your participants include children (under 18 years of age)?  |   | X |
| 12 | Will your participants include people with learning or communication difficulties?  |   | X |
| 13 | Will your participants include patients?  |   | X |
| 14 | Will your participants include people in custody?   | X |   |
| 15 | Will your participants include people engaged in illegal activities (e.g. drug taking; illegal Internet behaviour)?   |   | X |
| 16 | Is there a realistic risk of participants experiencing either physical or psychological distress?   |   | X |
| 17 | If yes to 16, has a proposed procedure, including the name of a contact person, been given? (see no 25)   | X |   |
| 18 | If yes to 11, is your research informed by the UCC Child Protection Policy?<br><a href="http://www.ucc.ie/en/ocla/policy/">http://www.ucc.ie/en/ocla/policy/</a>                        | X |   |
| 19 | The Consent form(s) are GDPR compliant  | X |   |

### DESCRIPTION OF THE PROJECT

#### 19. Aims of the project (the research question being investigated)

The aim of this project is to understand how community based health and first aid (CBHFA) training impacts the personal development of inmates.

#### 20. Brief description and justification of methods and measures to be used. *If applicable, please attach (in APPENDIX 1 below) research questions / copy of questionnaire /*

*interview protocol / discussion guide / etc. materials which the Ethics Committee needs to examine in order to evaluate your application.*

The purpose of this project is to evaluate how community based health and first aid (CBHFA) training impacts the personal development of inmates. This will be achieved through qualitative research. This CBHFA programme is provided by the Red Cross and trains prisoners as volunteers and peer educators on health related topics. This course has been running from October to May for the last ten years throughout ten prisons in Ireland. While substantial benefits of the programme have been noted by both staff and volunteers, the impact of this training has yet to be comprehensively investigated. Therefore, this research is necessary to determine the usefulness of this programme in terms of the personal development of volunteers. Ireland is the first country in the world to extend CBHFA training to prisons and therefore, this project could both inspire and provide a structure for other prisons around the world to follow.

This research will specifically focus on how the course has affected volunteers personal development. Semi-structured phone interviews will be conducted with ten inmates who have been trained as Red Cross volunteers. These interviews will take place in April/May and will last roughly up to an hour. Phone interviews have to be conducted in place of face-to-face interviews due to COVID-19. The questions in the interview will be based around self-esteem, self-efficacy, mental health and social relations with other volunteers, other prisoners, prison staff and family. As well as this, how the volunteers view their future will also be explored. Ten volunteers will be recruited from two open prisons; Shelton Abbey and Loughan House. Only volunteers from open prisons can be recruited for this study, as they have access to phones. This protocol was decided upon after consultation with the psychology team in the Irish Prison Service (IPS). Thematic analysis will be used to interpret the qualitative data. The information sheet to be used for the qualitative component is available in appendix 3. The interview protocol is also attached in appendix 2.

**21. Participants: recruitment methods, number, age, gender, exclusion/inclusion criteria, detail permissions**

Ten volunteers will be recruited from the volunteers from two open prisons; Shelton Abbey and Loughan House. Only volunteers from open prisons can be recruited for this study, as they have access to phones. The CBHFA team will invite volunteers to take part in this research. Ten participants will then be randomly chosen from this pool of volunteers. This may be disappointing for those not chosen however, all volunteers who wanted to be interviewed but were not chosen will be thanked and informed that due to practical constraints only 10 volunteers can be interviewed and selection was done randomly. Volunteers who are chosen to be interviewed will have their names and phone numbers will be transferred to the researcher using a sharefile which is password protected. This information will then be deleted once the calls are completed.

**22. Concise statement of ethical issues raised by the project and how you intend to deal with them**

The research has been developed in accordance with the Code of Professional Ethics of the Psychological Society of Ireland. This project is subject to dual ethical clearance, the original project has already received ethical approval from the Irish Prison Service Research Advisory Panel however, an amendment must also be made to this. It must be noted that throughout data collection at least one other member of the research team will be aware of

when it is occurring. There are several ethical considerations for this study, these are listed below.

### **Risk of harm to researchers.**

The study data collection includes interviewing prisoners. Conducting research with people that have committed violent/sexually violent offences poses possible risks. Therefore, a number of preventative measures will be put in place to minimize the risk of harm to researchers.

### ***Controls.***

1. The researcher will check-in with the project supervisors via email before and after each interview takes place.
2. Project supervisors and IPS staff will be aware of the time of interviews.
3. Researchers will be supported by supervisors in both UCC and the IPS and can use this space to confidentially talk through any difficult thoughts or feelings.
4. The following protocols (outlined below) are designed to prevent potential harm to researchers.

### ***Protocol A: Minor risk of harm to researcher.***

The following signs will be taken to indicate a minor risk of harm to the researcher:

- Insulting language
- Threatening language
- Increased tempo or volume of voice

If the participant exhibits the above signs, the following steps will be taken:

- The researcher will attempt to de-escalate the situation, for example by using calming and reassuring language
- The researcher will offer the participant a short break if they would like to take some time to calm down
- If the risk of harm is reduced (i.e. the above signs are no longer present), the researcher will ask if the participant would like to continue
- If the risk of harm is thought to increase (i.e. the above signs persist or escalate), the researcher will follow Protocol B outlined below:

### ***Protocol B: Moderate or severe risk of harm to researcher.***

The following signs will be taken to indicate a moderate or severe risk of harm to the researcher:

- Verbal threats to harm the researcher
- If the participant exhibits the above signs, the following steps will be taken:
- The researcher will terminate the interview
- Following the incident, the researcher will inform the Prison Governor and the project supervisors of the incident

- Following the incident, the researcher will complete the necessary incident reporting procedures for both the IPS and UCC
- Following the incident, the researcher will discuss the incident during supervision, and seek further support if needed

### **Risk of harm to participants.**

Overall this project is regarded as low risk. However, it does focus on personal experiences of involvement in the CBHFA programme and it is recognised that in reflecting on that there may be potential for discomfort for some participants. If any participant becomes uncomfortable, distressed or experience difficult feelings during the interview, taping will stop and a break will be taken. The participant will have the choice to withdraw from the study or to continue with the interview at that time or at a later date. Time will be given at the end of each interview to check with the participant as to how they are and whether they have any questions. All participants will be guided to seek support from nominated operational staff responsible for the CBHFA programme, chaplaincy, the prison psychology service. A number of measures will be used to minimise and appropriately manage any potential harm or distress to participants. During interviews, participants will be discussing their experiences being trained as a Red Cross volunteer. Whilst the focus of the research is not on distressing content per se, at times reflection and the interview process may bring up difficult feelings. A number of measures will be used to minimise and appropriately manage any potential harm or distress to participants.

### ***Controls.***

1. Participants will be aware in advance of the nature of the research and the areas covered in the interview. Participants will be made aware that they are able to skip any sections of the interview that they do not wish to answer. This information will be communicated by the researcher in the information sheet, during the process of obtaining informed consent and reiterated at the start of each interview.
2. If any participant becomes uncomfortable, distressed or experience difficult feelings during the interview, taping will stop and a break taken. The participant will have the choice to withdraw from the study or to continue with the interview at that time or at a later date.
3. Time will be given at the end of each interview to check with the participant as to how they are and whether they have any questions. Participants will be given a debriefed and informed how to get support if necessary are prisoner: nominated operational staff responsible for the CBHFA programme, chaplaincy, the prison psychology service

### **Freedom from coercion.**

Participation in the research is completely voluntary. There are no incentives for engagement, nor consequences for non-participation. Participants are free to withdraw from the study even after they have initially consented to be involved. Further, participants can withdraw their consent for their pseudo-anonymised data to be used up to one week post interview. This will be communicated to all potential participants and outlined in the

participant study information sheet and consent form. This information will be reiterated verbally at the beginning of each interview.

### **Informed consent.**

In order to participate in the study all prisoners will be required to read the study information sheet and consent form and then provide written consent. Due to the fact that literacy issues are more common in prison populations, documents will be written in accessible language. Furthermore, if literacy issues are pronounced one of the CBHFA team will read the information sheet to the prisoner. All participants will be advised that they can withdraw before, during and up to one week following completion of interview. Participants can do this by contacting the field supervisor, Dr Conn Dorai-Raj or the staff involved in the Red Cross programme.

### **Anonymity.**

Participation in the study will be kept pseudo-anonymous. For example, the research team will not openly disclose the identity of those engaging in the research or link specific participants with particular content of interviews. Furthermore, supervisors with oversight of the research will only have access to pseudo-anonymised data/transcripts.

Participants will be phoned from the researchers mobile phone, but the researchers number will be blocked to protect their personal information. Once the phone call has ended, the researcher will delete the participants mobile number from their phone. Although participants will be phoned from the researchers mobile phone, the audio will be connected to the researchers laptop so it can be effectively recorded. Interviews will be recorded using panopto. All recordings will be recorded offline and will be stored on an encrypted laptop. As soon as is possible, the audio data will be transcribed and deleted from the laptop. Participants name, any identifying information, and identifying information relating to individuals mentioned during the interview will be removed from the transcript. All transcripts will be pseudo-anonymised; pseudonyms will be used in the study write up and dissemination process. Once pseudo-anonymised, original transcripts will be deleted. As per UCC regulations this pseudo-anonymised data will then be stored on a secure server, in password protected files by the research team at UCC indefinitely to allow data to be used in subsequent research in the future. All consent forms will be stored in password protected file on a secure server in UCC until the data has been pseudo-anonymised and the withdrawal period has lapsed. At that point the consent forms will be deleted. The IPS however, will keep a copy of the consent forms for 10 years and will record the prisoners participation on their electronic psychology file. These measures will be explained in the information sheet for participants.

### **Confidentiality.**

Confidentiality will only be breached in instances where a participant indicates a risk of harm to self, information in relation to current or historic child protection concerns or undocumented criminal activity. Participants will be made aware of the limits of confidentiality before engaging in the research. In order to participate in the study all participants will be required to read the information sheets and consent forms. Before providing written consent to their involvement in the study, the member of the CBHFA team

will allow time to answer any questions participants may have regarding the study. Support will be provided for those participants with literacy issues. The procedure regarding breaching confidentiality will also be outlined. If the researcher believes a breach of confidentiality is necessitated they will communicate with both supervisors who will review the situation and determine a course of action. All such communication will be documented, dated and signed. If confidentiality is breached, this will be reported to the Data Protection Unit (DPU) within the IPS. If deemed necessary following this reporting and subsequent investigation, the participants will be informed of the breach.

#### **Disclosure of potential risk of harm to others.**

The following signs will be taken to indicate a risk of harm to others:

- Expression of own desire/intent/plans to harm a named/alluded to individual within or outside of the IPS
- Expression of desire/intent/plans to enlist the assistance of someone else to harm a named/alluded to individual within or outside the IPS
- Disclosure of someone else's desire/intent/plans to harm a named/alluded to individual within or outside the IPS

#### ***Controls.***

If the participant exhibits the above signs, the following steps will be taken:

1. The researcher will inform the participant of the necessity of breaching confidentiality, as previously consented to
2. If necessary or most appropriate, the researcher will terminate the interview
3. Following the interview, the researcher will report the disclosed information to Chief Officer in charge and the Prison Governor
4. If the disclosed information includes specific details about harm to others (e.g. victim, means to be used, time, location), this information will be emphasised
5. The relevant IPS staff will take the necessary steps to manage the risk
6. The researcher may re-schedule the interview for another time, if deemed appropriate in consultation with supervisors

#### **Disclosure of potential harm to self.**

The following signs will be taken to indicate a risk of harm to self:

- Expression of desire to self-harm or commit suicide
- Threatening to self-harm or commit suicide
- Disclosing plans to self-harm or commit suicide

#### ***Controls.***

If the participant exhibits the above signs, the following steps will be taken:

1. The researcher will inform the participant of the necessity of breaching confidentiality, as previously consented
2. The participant will be assured that this is solely for the purpose of their own safety and well-being
3. The participant will be encouraged to seek the appropriate support (e.g. selfrefer to the Psychology Department, Chaplaincy or Healthcare Team)
4. If necessary or most appropriate, the researcher will terminate the interview

5. The participant will be assured that this is solely for the purpose of their own immediate safety and wellbeing, and that the interview can be re-scheduled if they wish
6. Following the interview, the researcher will report the disclosed information to the Chief Officer in charge and the Prison Governor
7. If the disclosed information includes specific details about harm to self (e.g. means to be used, time, location), this information will be emphasised
8. The relevant IPS staff will take the necessary steps to manage the risk
9. The researcher may re-schedule the interview for another time, if deemed appropriate in consultation with supervisors

**23. Arrangements for informing participants about the nature of the study (cf. Question 3 above). *If applicable, please attach (in APPENDIX 2 below) the information letter / online statement / other correspondence you wish to use to inform participants about your study.***

The CBHFA team will contact participants in the open prison and provide them with a description of the study and ask if they are interested in participating. If volunteers choose to participate, they will be given a comprehensive information sheet as to the nature of this study, what they will be required to do and how their data will be used. I will also draw attention to important elements of the information sheet and will also be able to answer any queries that the volunteers may have before, during and after the interview. The briefing for participants is in the interview protocol attached to appendix 1.

**24. How you will obtain Informed Consent (cf. Question 4 above). *If applicable, please attach (in APPENDIX 3 below) the consent form you wish to use.***

The information sheet provides an explanation of the research, what will be required of the participant and how their data will be used. Therefore, volunteers should have all the necessary information as to be able to make an informed decision as to whether they will participate in the study or not. At the end of the information sheet, participants are asked for their consent to take part in the study. This information sheet and consent form will be distributed to participants by the CBHFA team in the prisons prior to the interview taking place. However, I will go through this again before the interview commences.

**25. Outline of debriefing process (cf. Question 9). **If you answered YES to Question 16, give details here. State what you will advise participants to do if they should experience problems (e.g. who to contact for help).****

The debriefing process will include asking the participant about how they feel after the interview, and if they have any questions. Participants should contact nominated operational staff responsible for the Red Cross programme, chaplaincy or the prison psychology service if they experience a problem. Moreover, my field supervisor Dr Conn J Dorai-Raj can also assist if an issue is encountered.

**26. Positive Ethics: What are the benefits of this research: how will it contribute to theory and/or practice, how will it be disseminated, etc**

This research will have several benefits. The CBHFA programmes have been running in Ireland for the last ten years and both staff and inmates alike report the positive benefits of this programme. These benefits are on both an individual and a systemic level. However, this

has yet to be comprehensively investigated. Interviews with volunteers will allow for their experiences to be valued and analysed. This research will therefore, determine the usefulness of CBHFA training on inmates personal development. Ireland is the first country in the world to extend CBHFA training to prisons and therefore, this project could both inspire and provide a structure for other prisons around the world to follow. It is hoped that this research will be published in a related psychology or forensic journal.

**27. Estimated start date and duration of project**

I hope to begin working on this project in April and have it completed by September 2020. However, I did complete some work for the previously proposed project which I hope to adapt to the amended project (for example, the literature review).

Signed Sophie Mazon Date 11/12/19  
 Applicant

Maria Dempsey  
 Signed \_\_\_\_\_ 11<sup>th</sup> Dec 2019 \_\_\_\_\_  
 Research Supervisor/Principal Investigator (if applicable)

***Please submit this form and attachments to [ethics.ap@ucc.ie](mailto:ethics.ap@ucc.ie), with the words ethics application (followed by your full name) in the subject line). Please include a scan of the signatures required. No hard copies are required.***

*This form is adapted from pp. 13-14 of [Guidelines for Minimum Standards of Ethical Approval in Psychological Research](#) (British Psychological Society, July, 2004)*

| <b>GDPR Compliance</b>   |            |           |
|--|------------|-----------|
| Participants own their data and they need to give explicit consent to as how their data is used. Participants have legal recourse should the data be used in ways that they have not agreed to.<br><br>Any breaches of GDPR must be reported to the Data Controller. |            |           |
| <b>Do your consent forms contain the following information?</b>  | <b>YES</b> | <b>NO</b> |
| The contact details of the Data Controller.  | X          |           |
| The contact details of the Data Protection Officer.  | X          |           |
| Who is collecting the data? (e.g. School of Applied Psychology, UCC  | X          |           |
| Why the data is being collected.   | X          |           |

|  |   |  |
|--|---|--|
| Whether explicit participant consent being relied upon as the legal basis for processing the data? | X |  |
| How the data will be processed.  | X |  |
| How long the data will be retained.  | X |  |
| Who the data will be disclosed to.   | X |  |
| The rights participants have in relation to their own data outlined.                               | X |  |
| The right to lodge a complaint with the Data Protection Commission.                                | X |  |
| The existence of study specific automated decision making (e.g. randomized allocation).            | X |  |
| Based on this, are all of the consent forms for this study GDPR compliant?                         | X |  |

**APPENDIX 1.**

*If applicable, please attach research questions / copy of questionnaire / interview protocol / discussion guide / etc. materials which the Ethics Committee needs to examine in order to evaluate your application.*



## **The Impact of Community Based Health and First Aid Training on the Personal Development of Inmates**

### **Interview Protocol**

The aim of this study is to advance understanding of how becoming a Red Cross volunteer impacts personal development from the perspective of inmates who have been trained accordingly. The data collection process will include semi-structured phone interviews.

Each interview will have three sections: introduction, interview and conclusion:

#### **Part 1: Introduction/ Briefing for Participants**

Thanks for taking the time to participate in this research. My name is Sophie Marron and I am a master's student from UCC. As part of my thesis, I am looking at how you have developed as a result of being trained as a Red Cross volunteer. As you may know, the Red Cross programme has been running for years in the prison, but the usefulness of this programme has yet to be properly researched. So we anticipate that this study will provide some indication as to how you and other volunteers are benefitting from the programme. Ireland is also the only country to have a programme like this, so it is hoped that by publishing research on it, it will inspire and provide a structure for other countries to implement such programmes.

So this interview is to get a sense of how you feel you have developed as a result of doing this programme. I have a few points here that I want to touch on, but mostly I'm interested in how you think you developed. This interview will be audio-recorded just so I can transcribe it, and look at what you said after. Usually these kinds of interviews last up to an hour.

So I understand that one of the CBHFA team have provided you with an information sheet and consent form already but I will just run through how your data is going to be used again. This interview will be audio-recorded and I will then transcribe it and delete the audiorecording. I will then assign you a different name to pseudo-anonymise your data. After that, I will then analyse your data, and the data from the other interviews to see if there are similarities between what you and the other volunteers are saying in regards to how you developed throughout the programme. This will then be used to write up my thesis. All consent forms will be stored in password protected file on a secure server in UCC until the withdrawal period has lapsed and at this stage, they will be deleted. The IPS however, will keep a copy of your consent forms for ten years and your participation will be noted on your electronic psychology file. As per UCC regulations the pseudo-anonymised data will be stored on a secure server, in password protected files by the research team at UCC indefinitely so that it can be used in subsequent studies in the future. You are free to withdraw at any point before, during or up to one week after the interview, and you can do this by contacting the field supervisor, Dr. Conn Dorai-Raj or the staff involved in the Red Cross programme. You can also ask to skip any questions which you don't feel comfortable with. Also just to note that although the information you give me is confidential, if you say that you are going to harm yourself, disclose any child protection concern or undocumented criminal activity I will have to pass that information on to chief prison officer and governor. So if that's all ok, we will start but if you have questions at any point, just let me know.

## **Part 2: Interview**

### **1. General Questions**

- Would you like to tell me a bit about the Red Cross programme here?
- What was your experience of the programme? - What motivated you to take part?
  - Positive and negatives of the programme?

### **2. External Changes**

- What skills have you developed from participating in the programme? -  
Examples
  - How do you think developing these new skills has affected you
- What changes have you noticed in your behaviour since starting the programme?
  - What might you do now that you didn't do before the programme?
  - Have your relationships with other members of the prison community changed?
  - Have there been changes in your personal relationships?
  - How do you think the programme triggered these changes?

### **3. Internal Changes**

- How has the way you think about yourself changed since starting the programme?
  - How did you feel about yourself before the programme?
  - How do you feel about yourself now?
  - What things do you like about yourself?

- How do you think the programme affected how you feel about yourself? (Red Cross 7 principles)?
- Is there an example of a time during the programme which you felt good about yourself?
- What's it like being considered a volunteer now?
- How confident are you now in your ability to get things done?
  - Was this different to before you started the programme?
  - Was there any time during the programme where you made plans to do something and then did it?
  - How do you think the programme affected this belief in yourself to get things done?
- In terms of your mental health, what was it like before the programme? - What's it like now?
  - How do you think the programme impacted it

#### **4. Future**

- So you've spoke about changes in behaviour, self-image, ability to get things done, mental health and the skills that you have developed, in what way do you think these changes will affect your future?

#### **Part 3: Conclusion/ Debriefing**

So we're coming to the end of the interview, is there anything else you would like to add that you feel we didn't get a chance to talk about today? Do you have any questions? How are you feeling?

Again, I would just like to thank you again for participating in this study. I'd also like to remind you that when you're thinking back on this interview, if you have any questions, you can contact my supervisor using the details provided on the information sheet. As well as this, if you are distressed in any way after this interview, please seek support from nominated operational staff responsible for the Red Cross programme, chaplaincy or the prison psychology service.

**APPENDIX 2.**

*If applicable, please attach the information letter / online statement / other correspondence you wish to use to inform participants about your study.*

**Information Sheet**

Thank you for considering participating in this research project. The purpose of this document is to explain to you what the research is about and what your participation would involve, so as to enable you to make an informed choice.

The purpose of this study is to understand how being trained as a Red Cross volunteer has impacted your personal development. Should you choose to participate, you will be asked to take part in a one-to-one phone interview with myself, a master's student from University College Cork. This interview will be audio-recorded, and is expected to take up to an hour to complete.

Participation in this study is completely voluntary. There is no obligation to participate, and should you choose to do so you can refuse to answer specific questions, or decide to withdraw from the interview. Once the interview has been concluded, you can choose to withdraw your details at any time in the subsequent week.

All of the information you provide will be kept confidential, pseudo-anonymous and will be available only to the research team. Data will be pseudo-anonymised, meaning that it will be kept as anonymous as possible by assigning you a different name to disguise your identity. The only exceptions to confidentiality are where information is disclosed which indicates that there is a serious risk to you or to others, in the case of a child protection concern or if undocumented criminal activity is revealed. Once the interview is completed, the recording will immediately be transferred to an encrypted laptop and wiped from the recording device. The interview will then be transcribed by the researcher, and all identifying information will be removed. Once this is done, the audio-recording will also be deleted and only the pseudoanonymised transcript will remain. This will be stored on the University College Cork OneDrive system and then on the UCC server indefinitely to allow for the data to be used in future research. All consent forms will be stored in password protected file on a secure server in UCC until the withdrawal period has lapsed and at this stage, they will be deleted. The Prison Service however, will keep a copy of your consent form for ten years and your participation will be noted on your electronic psychology file. There are a number of

advantages to conducting this research. Firstly, The Red Cross programme has been running in Ireland for the last ten years and both staff and inmates alike report the positive benefits of this programme. These benefits are on both an individual and a systemic level. Interviews with volunteers will allow for your experiences to be valued and analysed, allowing for a comprehensive overview of the usefulness of the project. Ireland is the first country in the world to extend community based health and first aid training to prisons and therefore, this project could both inspire other prisons around the world to follow. This research will be used for a master's thesis however, it is also hoped that will be published in a related psychology or forensic journal and presented at related conferences.

We do not expect any negative outcomes from participating in this study. At the end of the procedure, I will discuss with you how you found the experience and how you are feeling. Should you experience distress arising from the interview, you may seek support from operational staff responsible for the Red Cross programme, chaplaincy and the prison psychology service. You may also choose to contact my field supervisor, Dr Conn J DoraiRaj, who can be accessed through a member of your prison psychology service. Myself and my academic supervisor, Dr Maria Dempsey can also be contacted through Conn.

This study has obtained ethical approval from the UCC School of Applied Psychology Ethics Committee and the Irish Prison Service Research Advisory Panel.

If you have a concern about how we have handled your personal data, you are entitled to this raise this with the Data Protection Commission. If you want to raise a concern in regards to this, please contact Dr Conn J Dorai-Raj and he will escalate the issue.

**Table 1**

*Contact Details for the Data Controller and the Data Protection Officer*

| Data Controller  | Data Protection Officer   |
|--|---|
| Prof. John McCarthy<br>University College Cork,<br>Enterprise Centre,<br>North Mall,<br>Cork | Catriona O'Sullivan<br>University College Cork,<br>4 Carrigside,<br>College Road,<br>Cork |

If you have any other queries about this research, you can contact my field supervisor Dr Conn J Dorai-Raj.

If you agree to take part in this study, please sign the consent form overleaf.

### Consent Form

I.....agree to participate in this research study.

The purpose and nature of the study has been explained to me in writing.

I am participating voluntarily.

I give permission for my interview with Sophie Marron to be audio-recorded.

I understand that I can withdraw from the study, without repercussions, at any time, whether before it starts or while I am participating.

I understand that I can withdraw permission to use the data within one week of the interview, in which case the material will be deleted from the recording device or from the data file, depending on which stage the write-up is at.

I understand that the data will be pseudo-anonymised in the write-up by disguising my identity.

I understand that disguised extracts from my interview may be quoted in the thesis and any subsequent publications if I give permission below:

(Please tick one box:)

I agree to quotation/publication of extracts from my interview

I do not agree to quotation/publication of extracts from my interview

---

Participant Signature

---

Date

---

Participant Name (Print)

---

Researcher Name

---

Date

## Appendix B Information Sheet and Consent Form



### Information Sheet

Thank you for considering participating in this research project. The purpose of this document is to explain to you what the research is about and what your participation would involve, so as to enable you to make an informed choice.

The purpose of this study is to understand how being trained as a Red Cross volunteer has impacted your personal development. Should you choose to participate, you will be asked to take part in a one-to-one phone interview with myself, a master's student from University College Cork. This interview will be audio-recorded, and is expected to take up to an hour to complete.

Participation in this study is completely voluntary. There is no obligation to participate, and should you choose to do so you can refuse to answer specific questions, or decide to withdraw from the interview. Once the interview has been concluded, you can choose to withdraw your details at any time in the subsequent week.

All of the information you provide will be kept confidential, pseudo-anonymous and will be available only to the research team. Data will be pseudo-anonymised, meaning that it will be kept as anonymous as possible by assigning you a different name to disguise your identity. The only exceptions to confidentiality are where information is disclosed which indicates that there is a serious risk to you or to others, in the case of a child protection concern or if undocumented criminal activity is revealed. Once the interview is completed, the recording will immediately be transferred to an encrypted laptop and wiped from the recording device. The interview will then be transcribed by the researcher, and all identifying information will be removed. Once this is done, the audio-recording will also be deleted and only the pseudo-anonymised transcript will remain. This will be stored on the University College Cork OneDrive system and then on the UCC server indefinitely to allow for the data to be used in future research. All consent forms will be stored in password protected file on a secure server in UCC until the withdrawal period has lapsed and at this stage, they will be deleted. The Prison Service however, will keep a copy of your consent form for ten years and your participation will be noted on your electronic psychology file. There are a number of advantages to conducting this research. Firstly, The Red Cross programme has been running in Ireland for the last ten years and both staff and inmates alike report the positive benefits of this programme. These

benefits are on both an individual and a systemic level. Interviews with volunteers will allow for your experiences to be valued and analysed, allowing for a comprehensive overview of the usefulness of the project. Ireland is the first country in the world to extend community based health and first aid training to prisons and therefore, this project could both inspire other prisons around the world to follow. This research will be used for a master’s thesis however, it is also hoped that will be published in a related psychology or forensic journal and presented at related conferences.

We do not expect any negative outcomes from participating in this study. At the end of the procedure, I will discuss with you how you found the experience and how you are feeling. Should you experience distress arising from the interview, you may seek support from operational staff responsible for the Red Cross programme, chaplaincy and the prison psychology service. You may also choose to contact my field supervisor, Dr Conn J Dorai-Raj, who can be accessed through a member of your prison psychology service. Myself and my academic supervisor, Dr Maria Dempsey can also be contacted through Conn.

This study has obtained ethical approval from the UCC School of Applied Psychology Ethics Committee and the Irish Prison Service Research Advisory Panel.

If you have a concern about how we have handled your personal data, you are entitled to this raise this with the Data Protection Commission. If you want to raise a concern in regards to this, please contact Dr Conn J Dorai-Raj and he will escalate the issue.

**Table 1**

*Contact Details for the Data Controller and the Data Protection Officer*

| Data Controller  | Data Protection Officer   |
|--|---|
| Prof. John McCarthy<br>University College Cork,<br>Enterprise Centre,<br>North Mall,<br>Cork | Catriona O’Sullivan<br>University College Cork,<br>4 Carrigside,<br>College Road,<br>Cork |

If you have any other queries about this research, you can contact my field supervisor Dr Conn J Dorai-Raj.

If you agree to take part in this study, please sign the consent form overleaf.

**Consent Form**

I.....agree to participate in this research study.

The purpose and nature of the study has been explained to me in writing.

I am participating voluntarily.

I give permission for my interview with Sophie Marron to be audio-recorded.

I understand that I can withdraw from the study, without repercussions, at any time, whether before it starts or while I am participating.

I understand that I can withdraw permission to use the data within one week of the interview, in which case the material will be deleted from the recording device or from the data file, depending on which stage the write-up is at.

I understand that the data will be pseudo-anonymised in the write-up by disguising my identity.

I understand that disguised extracts from my interview may be quoted in the thesis and any subsequent publications if I give permission below:

(Please tick one box:)

I agree to quotation/publication of extracts from my interview

I do not agree to quotation/publication of extracts from my interview

---

Participant Signature

---

Date

---

Participant Name (Print)

---

Researcher Name

---

Date

### **Appendix C Study Revisions Resulting from COVID-19**

This study was conducted amidst the global coronavirus pandemic and had to be adapted during this time. The original study was a mixed methods design which investigated the impact of the programme on volunteers personal development upon completion of the nine-month course. For the quantitative component, psychometric measures were administered to volunteers from 12 prisons across Ireland before beginning the CBHFA programme in October. These included measures on self-esteem, self-efficacy, community self-efficacy and mental health. This element of the research aimed to quantify the change in volunteers personal development over the course of the programme. The post psychometric measures were intended to be distributed upon completion of the course however, due to the coronavirus, the CBHFA programme was disrupted and therefore, this research could not continue. The qualitative element of this study was intended to illuminate the quantitative findings by exploring how the programme supported change in self-esteem, self-efficacy, community self-efficacy and mental health. This was planned to be achieved by conducting ten face-to-face semi-structured interviews with volunteers from three regional prisons in Ireland. However, due to the national lockdown during this time, this was not viable.

### **Appendix D Interview Guide**

#### **Introduction**

- Hi, is this X? Hi X, my name is Sophie Marron, I understand that you've volunteered to take part in my research?
- Thanks so much for this, you're doing me a huge favour!

### **Self and Research**

- So just to tell you a bit about myself and my research; I am a master's psychology student from UCC and as part of my thesis, I am looking at how you have developed as a result of being trained as a Red Cross volunteer.
- As you probably know, the Red Cross programme has been running for years in the prison, but the usefulness of this programme has yet to be properly researched. So we hope that this study will provide some indication as to how you and other volunteers are benefitting from the programme.
- I have a few points here that I want to touch on, but mostly I'm interested in what you think yourself. Usually these kinds of interviews last up to an hour. Is that all ok?

### **Technicalities**

- So I understand that one of the team has provided you with an information sheet and consent form already but I will just run through how your data is going to be used again, if that's ok?
- So this interview will be audio-recorded and I will then transcribe it and delete the audio-recording. I will then assign you a different name to pseudo-anonymise your data. And actually, just on that, is there any particular name you would like me to use? After that, I will then analyse your data, and the data from the other interviews to see if there are similarities between what you and the other volunteers are saying. This will then be used to write up my thesis.
- So, all consent forms will be stored in password protected file on a secure server in UCC until the withdrawal period has lapsed and at this stage, they will be deleted. The Prison Service however, will keep a copy of your consent forms for ten years and your participation will be noted on your electronic psychology file.

- The pseudo-anonymised data will be stored on a secure server, in password protected files by the research team at UCC indefinitely so that it can be used in studies in the future. You are free to withdraw at any point before, during or up to one week after the interview, and you can do this by saying it to me now or by contacting my field supervisor, Conn or the staff involved in the Red Cross programme. You can also ask to skip any questions which you don't feel comfortable with. Also just to note that although the information you give me is confidential, if you say that you are going to harm yourself or someone else, disclose any child protection concern or undocumented criminal activity I may have to pass that information on to chief prison officer and governor.

### **Moving on...**

- I know that's a lot of information, so feel free to ask me any questions. If that's all ok, we will start, I'm going to start **recording** now, is that ok?

### **5. General/ Demographic Questions**

- So just for a bit of context, would you like to tell me your age?
- How long have you been in the prison system?
- When did you join the Red Cross programme?
- What motivated you to take part?
- Would you like to tell me a bit about the Red Cross programme?
- What was your overall experience of the programme?
  - Positive and negatives?

## 6. External Changes

- What skills have you developed from participating in the programme?
  - Examples (first aid etc...)
  - How do you think developing these new skills has affected you •  
Have there been any changes in your behaviour since starting the programme?
  - What was your behaviour like before starting the programme?
  - What might you do now that you didn't do before the programme?
  - Have your relationships with other members of the prison community (other volunteers, other prisoners, prison officers etc) changed?
  - Have there been changes in your personal (family/ friends/ partner) relationships?
  - How do you think the programme triggered these changes?

## 7. Internal Changes

- How has the way you think about yourself changed since starting the programme?
  - How did you think about yourself before the programme?
  - How do you think about yourself now?
  - What things do you like about yourself?
  - Is there an example of a time during the programme when you felt good about yourself? (e.g. presentation?)
  - How do you think the programme affected how you feel about yourself? (Red Cross 7 principles- humanity, impartiality,

neutrality, independence, voluntary service, unity and universality)?

- What's it like being considered a volunteer now?
- How confident are you now in your ability to get things done?
  - Is this different before you started the programme?
  - Was there any time during the programme where you made plans to do something and then did it?
  - How do you think the programme affected this belief in yourself to get things done?
- In terms of your mental health, what was it like before the programme?
  - What's it like now?
  - How do you think the programme impacted it?

## **8. Future**

- So you've spoke about changes in behaviour, self-image, ability to get things done, mental health and the skills that you have developed, in what way do you think these changes will affect your future?

**Closing**

- So we're coming to the end of the interview, is there anything else you would like to add that you feel we didn't get a chance to talk about today?
- Do you have any questions?
- How are you feeling?
- Again, I would just like to thank you again for participating in this study
- I'd also like to remind you that when you're thinking back on this interview, if you have any questions, you can contact my supervisor using the details provided on the information sheet
- As well as this, if you are distressed in any way after this interview, please seek support from nominated operational staff responsible for the Red Cross programme, chaplaincy or the prison psychology service
- Ok, great, thanks so much again, ok goodbye...

**Appendix E Generating  
Initial Codes**

| Transcript | Codes |
|------------|-------|
|------------|-------|

|  |  |
|--|--|
| <p><b>INT:</b> Ok and what kind of motivated you to take part?</p> <p><b>TOM:</b> I was just trying to put myself for any course that was available at the start, there was a lot of different courses going on, I just, I threw myself into anything and everything just to keep myself busy more or less</p> <p><b>INT:</b> Yeah so you wanted to keep yourself busy</p> <p><b>TOM:</b> Yeah keep myself busy, something to do and to be honest with ya, to make meself look good as well at the start but then after, after I joined it then, I became really interested in it then</p> <p><b>INT:</b> Mmm and do you want to tell me a bit about the projects that you did when you were in the programme and stuff like that?</p> <p><b>TOM:</b> Oh so many, the graduations very good, we done ah making sure all the prisoners had regular supply of cleaning equipment for their shelves and hygiene classes, and how to mop out, how to clean cells, there was a problem with getting access to cleaning stuff regularly for prisoners but then we opened up our own stores in the place so prisoners could come to us and get it as they needed it</p> | <p>Putting self forward for courses</p> <p>Wanting to keep busy</p> <p>Keeping busy</p> <p>Programme as something to do</p> <p>Participation in programme makes you look good</p> <p>Becoming interested in programme</p> <p>Starting programme for one reason, stay doing it for another</p> <p>Graduations as positive</p> <p>Different projects completed</p> <p>Emphasis on hygiene</p> <p>Emphasis on self-sufficiency for prisoners</p> <p>Identifying problems and taking steps to rectify them</p> <p>Self-sufficiency for prisoners</p> |
|--|--|

|  |   |
|--|---|
| <p><b>INT:</b> Oh that's cool</p> <p><b>TOM:</b> Yeah it was a good system for us and we done a bit of, we done a 10k run for a charity and things like that, we done mental health weeks, mindfulness classes, a few quizzes, prizes and things...</p> <p><b>INT:</b> Wow that's loads!</p> <p><b>TOM:</b> Yeah there's loads, boxing tournaments and the second year then, half a marathon, we raised more money for charity, yeah it was great, you know what I mean? Yeah well it was only meself there, for the second year, I was running the second year, I was running the smoking cessation class to help lads give up the cigarettes and things, because where I was, [names prison], it's a smoke free prison now part of the prison, so there's a lot of lads that were still smoking, I was smoking myself for nine years so I gave them up myself so I had a bit of experience, so I done the smoking cessation classes through the Red Cross for a year and a half and there's success in it, it was very good</p> <p><b>INT:</b> Yeah and was that a highlight for you to be doing that kind of a class?</p> <p><b>TOM:</b> It was, it was kind of like I done it myself, I kind of ran everything meself you know? It was very good, I never thought when I started two years previously that I'd be doing something like that. It was good, it was a confidence builder for meself as well, no it was very good and it was great</p> | <p>Creating a system that works for prisoners</p> <p>Health-related projects</p> <p>Emphasis on fitness</p> <p>Emphasis on mental health</p> <p>Different projects conducted</p> <p>Raising money for charity</p> <p>Projects as positive</p> <p>Helping prisoners with health-related issues</p> <p>Responding to issues in prison</p> <p>Giving up something himself with project</p> <p>Having experience in a health-related area</p> |
|--|---|

|  |   |
|--|---|
|  | <p>Proud of running everything<br/>himself</p> <p>Projects as positive<br/>Previously thinking he<br/>wouldn't do something like<br/>that</p> |
|--|---|



|  |  |
|--|--|
| <p>when you see, there used to be big course of em, and I had 10, maximum of 10 lads in our course, and there was 2 or 3 out of every course that would give up the smokes, so it was a good achievement, it was good</p>  | <p>Running projects builds confidence<br/>Projects as positive<br/>Getting other prisoners to give up cigarette as achievement</p>   |
| <p><b>INT:</b> Yeah definitely and it's kind of nice to see the end result as well there</p>   |  |
| <p><b>TOM:</b> Yeah it was good, and it, it broke down a lot of barriers with lads as well because lads talking, used do the groups try and do it to by themselves, it was good and it helped them as well, you'd see the lads doing fitness as well, getting more into running and things like that with the 10k run, half marathon, it was great because lads would be building up to it for a couple of months, and it would keep them motivated to keep fit, you understand? Kept them away from other substances and things like that, which is, it was, broke down a lot of barriers</p> | <p>Projects provide an opportunity for lads to talk<br/>Group dynamic central to projects<br/>Projects helping facilitators and attendees<br/>Promoting positive health behaviours<br/>Important for motivation to have a goal<br/>Investing in fitness keeping prisoners away from substances<br/>Projects breaking down barriers</p> |
| <p><b>INT:</b> Yeah and actually just on that, did you notice then say a change in your relationship with like the people you were in the, volunteering with, in your group?</p>   |  |
| <p><b>TOM:</b> Like at the start, you probably wouldn't have associated with, hung around with these kind of lads but it broke down a lot of barriers, like people put up fronts and it's just the environment you're living in, it did break down a lot of things that way, it just brought lads closer together basically and you wouldn't, you wouldn't have talked to each other, you understand?</p>  | <p>Wouldn't have previously associated with volunteers<br/>Programme breaking down barriers<br/>Prisoners putting up a front<br/>Putting up a front because of prison environment<br/>Programme encouraging prisoners to not put up a front</p>  |

**Appendix F Theme Development**

**Tom**

| Skills and education   | Achieving  | Helping   | Others view of you   | More positive stuff<br>(other programmes, future)  | Mis.   |
|--|--|---|--|--|--|
| Identifying problems and taking steps to rectify them<br>Health-related projects<br>Emphasis on fitness<br>Emphasis on mental health<br>Having experience in a health-related area<br>Investing in fitness keeping prisoners away from substances<br>Madness in main jail, difficult to run projects<br>Building confidence to speak before a crowd<br>Building confidence in ability to do things through experience<br>Running a fitness group<br>Fitness helping him focus<br>Investing in fitness results in feeling good<br>Impact of aging | Putting self forward for courses<br>Wanting to keep busy<br>Keeping busy<br>Programme as something to do<br>Participation in programme makes you look good<br>Becoming interested in programme<br>Starting programme for one reason, stay doing it for another<br>Graduations as positive<br>Different projects completed<br>Different projects conducted<br>Giving up something himself with project<br>Proud of running everything himself<br>Projects as positive<br>Previously thinking he wouldn't do something like that<br>Running projects builds confidence<br>Projects as positive | Emphasis on hygiene<br>Emphasis on self-sufficiency for prisoners Self-sufficiency for prisoners<br>Creating a system that works for prisoners<br>Raising money for charity<br>Projects as positive<br>Helping prisoners with health-related issues<br>Responding to issues in prison<br>Projects helping facilitators and attendees<br>Promoting positive health behaviours<br>Prisoners having a positive reaction to projects<br>Trying to help younger generations<br>Noticing lads who may be struggling<br>Trying to involve lads that are struggling<br>Joining fitness course improves motivation<br>Looking out for prisoners<br>Helping others improves own peace of mind<br>Helping others as productive<br>Helping others as positive | Meetings with Governor<br>Volunteers as mediators between prisoners and staff<br>Volunteers as spokespeople for prisoners<br>Positive that volunteers could relay problems prisoners were having to staff<br>Meeting with the Governor as significant<br>Important for Governor to sit down and listen to them<br>Better able to sort out problems with staff when there is a meeting<br>More respect when there is a meeting<br>Staff listen more when there is a meeting<br>Feeling listened to<br>Feeling appreciated for work<br>Change in staffs attitude towards him because he is trying to do good<br>Staff originally having fears about projects<br>Staff surprised by success of projects | The courses he did following participation in the RC<br>Wanting to continue volunteering with RC<br>Difficulty managing work and volunteering on outside<br>Enjoyed all of programme | Difficulty organising projects in new prison<br>Differences between RC in different prisons<br>Differences between volunteering with the RC in various prisons<br>Have to be nice to get to an open prison |

|   |   |   |   |  |   |
|---|---|---|---|--|---|
| Having an outdoor area as important in prison                             | Getting other prisoners to give up cigarette as achievement | Doing nothing as negative                                   | Difference in attitudes of staff towards prisoners          |  | Have to be at the end of sentence to get to open prison |
| Focusing on fitness since coming into prison                              | Important for motivation to have a goal                     | Previously an alcoholic                                     | More friendly interactions with staff                       |  | Prisoners more mature at open prisons                   |
| Putting first aid skills into use   | Different projects conducted by RC                          | Recognising when other prisoners are struggling             | Having something to talk about with staff                   |  | Good lads in open prison                                |
| Recognising when there is an issue  | Having a voice  | Not knowing people as a reason to struggle                  | Staff becoming involved in projects                         |  | Differences in RC activity across prisons               |
| Having the skills to help someone in danger                               | Projects resulting in great days                            | Recognising people are struggling and trying to help        | Volunteers appreciating staff involvement in projects       |  | Lack of support in open prison                          |
| Scary putting skills into use   | Projects being enjoyable                                    | Using exercise to help people who are struggling            | Feeling proud doing speech before family                    |  | Coronavirus impacting viability of projects             |
| Other prisoners having the knowledge to realise how serious situation was | Significance of speech during graduation                    | Sense of community  | Everyone being happy at graduation                          |  |   |
| Having skills to help people choking                                      | Never done anything like that before                        | Prisoners wanting something to do                           | Graduation good for younger prisoners                       |  |   |
| Scary using first aid skills  | Difficulty associated with public speaking                  | Prisoners wanting somebody to organise something            | Good for younger families to see volunteers doing good      |  |   |
| Organising projects   | Graduation as a positive day                                | Prisoners happy to take part in projects                    | Great for family to see you doing something positive        |  |   |
| Recognising problem and taking steps towards a solution                   | Celebrating with a meal                                     | Inviting prisoners to join runs                             | Governors present at graduation                             |  |   |
| Being outside and doing exercise is good for mood                         | Programme as a sign you are going in the right direction    | Welcoming attitude for runs                                 | Good for your family to see you progressing                 |  |   |
| Being outside and doing exercise improves focus                           | Never have done projects only for RC                        | Importance of trying  | Programme gives them confidence that everything will be ok  |  |   |
| Being outside and doing exercise improves health, physically and mentally | Never have done projects only for RC                        | Good community in prison                                    | Support of RC teachers as essential                         |  |   |
| Looking forward to exercise outside                                       | Team work   | Movement from benefiting self to benefiting others          | Support of RC teachers important                            |  |   |
| Difficulty setting up some projects in open prison                        | No previous experience running projects before              | RC as community based                                       | Support there for some things if needed                     |  |   |
|   | RC  | RC based around helping prisoners                           | Becoming discouraged when not getting support with projects |  |   |
|   | Seeing how easy it is to organise projects                  | Helping prisoners as good                                   | Keeping up fitness for family and friends                   |  |   |
|   | More confident in ability to get things done                | Good to know you're doing something positive/productive     | People seeing you doing something and then wanting to do it |  |   |
|   | Has always been committed to things                         | Good to see lads laughing and joking at the end of sessions |   |  |   |
|   | Enjoying conducting fitness projects                        | Good to hear laughter                                       |   |  |   |
|   | Conducting projects keeps mind busy                         | Difference projects make to atmosphere of prison            |   |  |   |
|   | Projects running smoothly                                   | Emphasis on younger generation                              |   |  |   |
|   |   | Observing the positive impact of your work                  |   |  |   |



|  |   |  |  |  |   |
|--|---|--|--|--|---|
|  | <p>Conducting projects by self</p> <p>Conducting projects by self</p> | <p>The ripple effect of one positive choice</p> <p>Volunteers as giving them a leg up</p> <p>Prisoners listening to prisoners</p> <p>Good to see others listening to you</p> <p>Good to see change in prisoners you've helped</p> <p>Seeing positive change in others makes you feel good</p> <p>Previously had mental health issues</p> <p>Previously struggled with depression</p> <p>Seeing self in younger prisoners</p> <p>Recognising when other prisoners are struggling</p> <p>Mental health issues going undiagnosed</p> <p>Seeing self in younger prisoners</p> <p>Mental health bad when sentenced to prison</p> <p>First year of sentence hard for mental health</p> <p>Choosing to become healthy</p> <p>Engaging in positive things to improve mental health</p> <p>Fitness, education, RC, all positive things</p> <p>Engaging in positive things to improve mental health</p> <p>Mental health improving from engaging in positive things</p> <p>Mental health improving slowly</p> <p>Being in a good place now</p> <p>Helping people as good for mental health</p> |  |  | <p>Conducting projects despite pandemic</p> <p>Difficulty conducting projects in an open prison</p> <p>RC facilitators busy training new volunteers</p> |
|--|---|--|--|--|---|



|  |  |   |  |  |  |
|--|--|---|--|--|--|
|  |  | <p>Great to see lads coming out of their shell</p> <p>Great to see lads being more positive</p> <p>Great to see positive change in lads</p> <p>Great to see smiles on people's faces</p> <p>Great to see lads are happy</p> <p>Seeing lads happier makes you feel like you've done something positive</p> <p>Doing something good</p> <p>Person he helped was thankful</p> <p>Feeling good about helping someone in need</p> <p>Conducting projects for benefit of families</p> <p>Good atmosphere created by conducting projects for benefit of families</p> <p>Sharing health-related knowledge with family</p> <p>Sharing knowledge as good</p> <p>Projects provide an opportunity for lads to talk</p> <p>Group dynamic central to projects</p> <p>Projects breaking down barriers</p> <p>Wouldn't have previously associated with volunteers</p> <p>Programme breaking down barriers</p> <p>Prisoners putting up a front</p> <p>Putting up a front because of prison environment</p> <p>Programme encouraging prisoners to not put up a front</p> <p>Programme bringing prisoners closer</p> |  |  |  |
|--|--|---|--|--|--|

|  |  |   |  |  |  |
|--|--|---|--|--|--|
|  |  | <p>Programme providing an opportunity for prisoners to talk</p> <p>Listening to others brings you closer</p> <p>Being on the same wavelength as other prisoners</p> <p>Acknowledging disagreements</p> <p>Becoming closer as a group</p> <p>Becoming good friends with other volunteers</p> <p>Becoming more talkative with other prisoners</p> <p>Acknowledging disagreements between volunteers</p> <p>Gaining insight by talking to people</p> <p>Running projects with other volunteers</p> <p>Prison compared to own home</p> <p>Prisoners compared to family members</p> <p>Officers as outsiders</p> |  |  |  |
|--|--|---|--|--|--|

**Appendix G Reviewing Themes**

**Tom**

|                                |                        |                             |
|--------------------------------|------------------------|-----------------------------|
| Acquiring skills and knowledge | Opportunity to succeed | Engaging in meaningful work |
|--------------------------------|------------------------|-----------------------------|

|   |  |   |
|---|--|---|
| Identifying problems and taking steps to rectify them                     | Putting self forward for courses                             | Emphasis on hygiene   |
| Health-related projects   | Wanting to keep busy   | Emphasis on self-sufficiency for prisoners Self-sufficiency for prisoners |
| Emphasis on fitness   | Keeping busy   | Creating a system that works for prisoners                                |
| Emphasis on mental health   | Programme as something to do                                 | Raising money for charity   |
| Having experience in a health-related area                                | Participation in programme makes you look good               | Projects as positive  |
| Investing in fitness keeping prisoners away from substances               | Becoming interested in programme                             | Helping prisoners with health-related issues                              |
| Madness in main jail, difficult to run projects                           | Starting programme for one reason, stay doing it for another | Responding to issues in prison  |
| Building confidence to speak before a crowd                               | Graduations as positive                                      | Projects helping facilitators and attendees                               |
| Building confidence in ability to do things through experience            | Different projects completed                                 | Promoting positive health behaviours                                      |
| Running a fitness group   | Different projects conducted                                 | Prisoners having a positive reaction to projects                          |
| Fitness helping him focus   | Giving up something himself with project                     | Trying to help younger generations  |
| Investing in fitness results in feeling good                              | Proud of running everything himself                          | Noticing lads who may be struggling                                       |
| Impact of aging   | Projects as positive   | Trying to involve lads that are struggling                                |
| Having an outdoor area as important in prison                             | Previously thinking he wouldn't do something like that       | Joining fitness course improves motivation                                |
| Focusing on fitness since coming into prison                              | Running projects builds confidence                           | Looking out for prisoners   |
| Putting first aid skills into use   | Projects as positive   | Helping others improves own peace of mind                                 |
| Recognising when there is an issue  | Getting other prisoners to give up cigarette as achievement  | Helping others as productive  |
| Having the skills to help someone in danger                               | Important for motivation to have a goal                      | Helping others as positive  |
| Scary putting skills into use   | Different projects conducted by RC                           | Doing nothing as negative   |
| Other prisoners having the knowledge to realise how serious situation was | Having a voice   |   |

|   |  |   |
|---|--|---|
| Having skills to help people choking                                      | Projects resulting in great days                         | Recognising when other prisoners are struggling             |
| Scary using first aid skills  | Projects being enjoyable                                 | Not knowing people as a reason to struggle                  |
| Organising projects   | Significance of speech during graduation                 | Recognising people are struggling and trying to help        |
| Recognising problem and taking steps towards a solution                   | Never done anything like that before                     | Using exercise to help people who are struggling            |
| Being outside and doing exercise is good for mood                         | Difficulty associated with public speaking               | Sense of community  |
| Being outside and doing exercise improves focus                           | Graduation as a positive day                             | Prisoners wanting something to do                           |
| Being outside and doing exercise improves health, physically and mentally | Celebrating with a meal                                  | Prisoners wanting somebody to organise something            |
| Looking forward to exercise outside                                       | Programme as a sign you are going in the right direction | Prisoners happy to take part in projects                    |
| Difficulty setting up some projects in open prison                        | Programme as positive                                    | Inviting prisoners to join runs                             |
| Projects provide an opportunity for lads to talk                          | Never have done projects only for RC Never               | Welcoming attitude for runs                                 |
| Group dynamic central to projects   | have done projects only for RC                           | Importance of trying  |
| Projects breaking down barriers   | Team work  | Good community in prison                                    |
| Wouldn't have previously associated with volunteers                       | No previous experience running projects before RC        | Movement from benefiting self to benefiting others          |
| Programme breaking down barriers  | Seeing how easy it is to organise projects               | RC as community based                                       |
| Programme bringing prisoners closer                                       | More confident in ability to get things done             | RC based around helping prisoners                           |
| Programme providing an opportunity for prisoners to talk                  | Has always been committed to things                      | Helping prisoners as good                                   |
| Listening to others brings you closer                                     | Enjoying conducting fitness projects                     | Good to know you're doing something positive/ productive    |
| Being on the same wavelength as other prisoners                           | Conducting projects keeps mind busy                      | Good to see lads laughing and joking at the end of sessions |
| Acknowledging disagreements   | Projects running smoothly                                | Good to hear laughter                                       |
| Becoming closer as a group  | Conducting projects by self                              | Difference projects make to atmosphere of prison            |
| Becoming good friends with other volunteers                               | Conducting projects by self                              | Emphasis on younger generation                              |
| Becoming more talkative with other prisoners                              | Previously an alcoholic                                  | Observing the positive impact of your work                  |
| Acknowledging disagreements between volunteers                            | Previously had mental health issues                      | The ripple effect of one positive choice                    |
| Gaining insight by talking to people                                      | Previously struggled with depression                     | Volunteers as giving them a leg up                          |
| Running projects with other volunteers                                    | The courses he did following participation in the RC     | Prisoners listening to prisoners                            |
| Prison compared to own home   | Wanting to continue volunteering with RC                 | Good to see others listening to you                         |



|  |  |  |
|--|--|--|
| <p>Prisoners compared to family members</p> <p>Officers as outsiders</p> <p>Difficulty managing work and volunteering on outside</p> <p>Enjoyed all of programme</p> | <p>Volunteers as mediators between prisoners and staff</p> <p>Volunteers as spokespeople for prisoners</p> <p>Positive that volunteers could relay problems prisoners were having to staff</p> <p>Support of RC teachers as essential</p> <p>Support of RC teachers important</p> <p>Support there for some things if needed</p> <p>People seeing you doing something and then wanting to do it</p> <p>Becoming discouraged when not getting support with projects</p> | <p>Good to see change in prisoners you've helped</p> <p>Seeing positive change in others makes you feel good</p> <p>Previously had mental health issues</p> <p>Previously struggled with depression</p> <p>Seeing self in younger prisoners</p> <p>Recognising when other prisoners are struggling</p> <p>Mental health issues going undiagnosed</p> <p>Seeing self in younger prisoners</p> <p>Mental health bad when sentenced to prison</p> <p>First year of sentence hard for mental health</p> <p>Choosing to become healthy</p> <p>Engaging in positive things to improve mental health</p> <p>Fitness, education, RC, all positive things</p> <p>Engaging in positive things to improve mental health</p> <p>Mental health improving from engaging in positive things</p> <p>Mental health improving slowly</p> <p>Being in a good place now</p> <p>Helping people as good for mental health</p> <p>Great to see lads coming out of their shell</p> <p>Great to see lads being more positive</p> <p>Great to see positive change in lads</p> <p>Great to see smiles on people's faces</p> <p>Great to see lads are happy</p> <p>Seeing lads happier makes you feel like you've done something positive</p> <p>Doing something good</p> <p>Person he helped was thankful</p> |
|--|--|--|

|  |  |  |
|--|--|--|
|  |  |  |
|--|--|--|



|  |  |   |
|--|--|---|
|  |  | <p>Feeling good about helping someone in need</p> <p>Conducting projects for benefit of families</p> <p>Good atmosphere created by conducting projects for benefit of families</p> <p>Sharing health-related knowledge with family</p> <p>Sharing knowledge as good</p> <p>Prisoners putting up a front</p> <p>Putting up a front because of prison environment</p> <p>Programme encouraging prisoners to not put up a front</p> <p>Meetings with Governor</p> <p>Meeting with the Governor as significant</p> <p>Important for Governor to sit down and listen to them</p> <p>Better able to sort out problems with staff when there is a meeting</p> <p>More respect when there is a meeting</p> <p>Staff listen more when there is a meeting</p> <p>Feeling listened to</p> <p>Feeling appreciated for work</p> <p>Change in staffs attitude towards him because he is trying to do good</p> <p>Staff originally having fears about projects</p> <p>Staff surprised by success of projects</p> <p>Difference in attitudes of staff towards prisoners</p> <p>More friendly interactions with staff</p> <p>Having something to talk about with staff</p> <p>Staff becoming involved in projects</p> <p>Volunteers appreciating staff involvement in projects</p> <p>Feeling proud doing speech before family</p> <p>Everyone being happy at graduation</p> |
|--|--|---|

|  |  |   |
|--|--|---|
|  |  | <p>Graduation good for younger prisoners</p> <p>Good for younger families to see volunteers doing good</p> <p>Great for family to see you doing something positive</p> <p>Governors present at graduation</p> <p>Good for your family to see you progressing</p> <p>Programme gives them confidence that everything will be ok</p> <p>Keeping up fitness for family and friends</p> |
|--|--|---|

**Appendix H Defining  
and Naming Themes**

**Acquiring skills and knowledge**

|             | <b>Communication &amp; Interpersonal Effectiveness</b>   | <b>Transferable Skills</b>  |
|-------------|--|---|
| <b>Adam</b> | Using communication as a tool for co-operation<br>Using seven fundamental principles in projects<br>Able to appreciate the ripple effects of his actions<br>The programme supported him in seeing the ripple effects of his actions<br>Talking as vehicle for preventative action<br>Prisoners understanding how to communicate effectively with each other<br>Liaising with staff<br>Projects promoting co-operation between inmates and staff<br>Communication between volunteers and officers<br>Co-operation between volunteers and staff on projects<br>Involving outside organisations<br>Co-operation facilitated by appealing to inmates interests<br>Co-operation through projects broke down barriers between staff and inmates<br>Importance of talking to co-operation<br>Inmates not viewing staff as scum because of talking and co-operation (vice versa)<br>Importance of co-operation<br>Breaking down barriers between staff and inmates as achievement<br>Relationships with staff changing due to co-operation, talking<br>Seeing staff as fellow humans rather than officers<br>Being known breaks down barriers<br>Importance of co-operation with people<br>Importance of people joining together<br>Getting help by joining together<br>Programme supported development of friends<br>Everyone within the RC becoming like a family<br>Programme bringing people closer<br>Importance of communication<br>Previously getting in trouble with staff | Breaking concepts down<br>Education as major thing<br>Realising he had skills<br>Doing speeches as a result of programme<br>Considering getting an education as success<br>Education as major in development<br>Education supported him in recognising his mistakes<br>Programme supported people in developing skills<br>Education as important to self-efficacy<br>Recognises education as vital in life<br>Has taught CBHFA<br>Less emphasis placed on studying a topic, more emphasis on experience<br>Being able to give speeches changed his life<br>Needing to come up with new ideas for projects<br>Need to find something to engage prisoners (interests)<br>Wanting to help the younger generation<br>Relate to other people in similar situations<br>Wanting to help young offenders<br>Wanting to share story to help young offenders<br>Prevent people from going down the same path as him<br>Wanting to prevent younger generation from going to prison<br>Helping younger generation<br>Programmes like this could help people who were in his position<br>Can't save everyone, but can save a lot<br>Goal is to help people that were in a similar situation to him by giving anecdotal stories<br>Wants to tell them that they can achieve<br>Teaching others knowledge he has gained<br>Wants to help other prisoners<br>Waiting to get a break<br>Engaging in proactive steps to increase chances of getting break<br>Waiting to get a break<br>Positive outlook on future |

|                    |   |  |
|--------------------|---|--|
|                    |   | <p>Developing programmes to sell to people</p> <p>Wanting to help people</p> <p>Doesn't see a future financially with the RC</p> <p>Education has helped him but mightn't be able to get a job out of it</p> <p>If he could get a job, would stay doing this</p> <p>Has a plan to manage financially</p>   |
| <p><b>Luke</b></p> | <p>Working with other volunteers</p> <p>Doing projects with other volunteers</p> <p>Becoming friends with other volunteers</p> <p>Staying in contact with other volunteers</p> <p>Volunteering with RC encourages you to see people in a different light</p> <p>Viewing people in a different light</p> <p>Empathising with people</p> <p>Ability to see people in a different light gained from doing projects</p> <p>Culture of non-violence and peace teaches volunteers to see the ripple effect of actions</p> <p>Prisoners not knowing officers</p> <p>Officers positioned as against prisoners</p> <p>Ability to see past label</p> <p>Viewing people as human</p> <p>Understanding other people's responsibilities</p> <p>Conducting projects with other volunteers</p> <p>Difference in volunteers attitudes</p> <p>Idea that some prisoners volunteer to tick a box</p> <p>Prisoners who volunteer to look good are difficult</p> <p>Turning back on volunteers who just want to look good</p> <p>Social dynamics in programme</p> <p>Not all prisoners accept support</p> <p>Opportunity to speak to prison staff</p> <p>Interaction with prison staff as positive</p> | <p>Developing skills builds confidence</p> <p>Speaking in front of people as important for confidence</p> <p>Developing from being shy to being able to give speeches now</p> <p>Experience building confidence</p> <p>First aid skills</p> <p>Organisational skills</p> <p>Co-ordinating programmes</p> <p>Gain experience doing projects</p> <p>Programme built self-efficacy</p> <p>Experience doing projects builds confidence</p> <p>Beginning with one project and moving on to doing own</p> <p>Freedom to do projects of own</p> <p>Comfortable speaking in front of people</p> <p>Skills applicable to job interviews</p> <p>Built up experience relevant to job interviews during programme</p> <p>Wanting to continue volunteers after prison</p> <p>Wanting to help other people not come to prison</p> <p>Wanting to educate younger generations</p> <p>Recognising the difficulties faced coming to prison</p> |

|                       |   |   |
|-----------------------|---|---|
| <p><b>Michael</b></p> | <p>Speaking to prisoners about health-related topics</p> <p>Importance of being realistic in the information you are communicating</p> <p>Communicating in an empathetic, understanding way</p> <p>Apprehensive about going to school because of stories</p> <p>Originally being apprehensive about school</p> <p>Being on edge at the beginning of sentence</p> <p>Easy to be drowned out in class</p> <p>Reserved for first few weeks</p> <p>Believes other volunteers would notice a difference in him</p> <p>Taking part in the discussions</p> | <p>Gaining knowledge of health-related topics</p> <p>Learned how to facilitate</p> <p>Had to stand up and speak in front of class</p> <p>Had to stand up and speak in front of class</p> <p>Practically practising skill of facilitating</p> <p>Practising teaching material</p> <p>Learned presenting skills</p> <p>Nervous about facing class during presentation</p> <p>Improved presenting skills from programme</p> <p>Appreciating how difficult it is to give presentations for everyone</p> |
|-----------------------|---|---|

|  |  |   |
|--|--|---|
|  | <p>Horror stories about school</p> <p>Realising those stories were not reality after attending school</p> <p>Difficulties faced when trying to motivate self to attend classes</p> <p>Appealing to prisoners emotions to engage</p> <p>Working in groups</p> <p>Using practical examples to illustrate points</p> <p>Team working for projects</p> <p>Team environment in classroom</p> <p>Working in teams in the programme</p> <p>Issues with staff influencing feasibility of projects</p> <p>Giving realistic advice</p> <p>Social element of RC as good thing</p> <p>Type of crime being a barrier between prisoners</p> <p>Being a RC volunteer broke down barriers between you and other prisoners</p> <p>Being a RC volunteer broke down barriers between prisoners</p> <p>Volunteers working well as a group</p> <p>Getting to know people makes you less on edge</p> <p>Getting to know people through the programme</p> <p>Some volunteers contributing more than others</p> <p>Not having the opportunity to mix with a lot of prisoners</p> <p>Not having the opportunity to mix with a lot of prisoners</p> <p>RC provided an opportunity to meet other prisoners</p> <p>Relationships developed inside the classroom transferable to outside classroom too</p> <p>Difference between in class interaction and interaction outside of classroom</p> <p>Mostly good atmosphere in classroom</p> <p>Some tension in classroom attributable to prison environment</p> <p>Interview vetted volunteered</p> <p>Good atmosphere in classroom</p> <p>Recognising importance of co-operation</p> <p>Difficulty in organising something single-handedly</p> <p>Can get more done if people band together</p> <p>Mostly able to rely on other volunteers</p> <p>Most volunteers willing to help</p> <p>Previously thought that people may have primarily been volunteering to get to an open prison</p> <p>Some people volunteer to get to an open prison</p> <p>Volunteers in open prison still conducting projects</p> <p>Mental health improved from getting to know other prisoners and eradicating fears about school</p> | <p>Felt more comfortable after developing presentation skills</p> <p>Felt more in control of room after developing presentation skills</p> <p>Conducting projects on mental health</p> <p>Education around health-related topics beneficial for some things</p> <p>Helpfulness of information modulated by whether they had learned it before</p> <p>Hoping to finish off first aid training</p> <p>First aid skills and CPR advantageous for job applications</p> <p>Skill developed during programme will stand to him in the future</p> <p>Developing projects in reaction to environment (coronavirus)</p> <p>Identifying health-related concern</p> <p>Providing information on health-related topics</p> <p>Raising awareness about health-related topics</p> <p>Going around to different landings for projects</p> <p>Volunteers organising necessary supplies</p> <p>Glad he participated</p> <p>Improved experience of prison</p> |
|--|--|---|

|  |   |  |
|--|---|--|
|  | <p>Improving mental health by getting to know people</p> <p>The programme helping with transition into prison</p> <p>Transition dependent on prison</p> <p>Change in behaviour after programme</p> <p>More confident after programme</p> <p>Able to speak mind in the group by end of programme</p> <p>Felt capable of sharing opinion in group after programme</p> <p>More inhibited at the beginning of programme</p> <p>Confidence builds as you become more familiar with the group</p> <p>Confidence builds as you become more familiar with the group</p> <p>Helped him come out of his shell</p> <p>Programme has not changed him as a person</p> <p>More confident after programme</p> <p>More integrated into community</p> <p>Laughing with volunteers in the corridors</p> <p>More relaxed after programme</p> <p>More relaxed after participating in programme</p> <p>Different person after programme</p> <p>Felt more relaxed in prison environment after programme</p> <p>Felt more comfortable in prison community</p> <p>Did not anticipate changes in self</p> <p>Programme improved mental health by supporting him in being more relaxed</p> <p>Did not struggle with mental health</p> <p>Anxiety has a problem in prison</p> <p>Programme a way to integrate into prison community</p> <p>Communication between prisoners</p> |  |
|--|---|--|

|                    |  |   |
|--------------------|--|---|
| <p><b>John</b></p> | <p>Previously used to working by self</p> <p>Previously hated working in groups</p> <p>Gaining experience working in a group and appreciating peoples input</p> <p>Learning to work within a group</p> <p>Disagreements associated with working in a group</p> <p>Common goal unifying group</p> <p>Some people volunteering with RC as a means of getting out of prison</p> <p>Genuine people volunteering</p> <p>Being able to recognise genuine people</p> <p>Noticing genuine people in other environments</p> <p>Genuine people sticking the course</p> <p>Being drawn to genuine people</p> <p>Not being drawn to ungenune people</p> <p>Not getting out early because of RC involvement</p> | <p>Wanting to learn about addiction</p> <p>Developing skills to help with community issues</p> <p>Education as a way of improving situations</p> <p>Developed listening skills from programme</p> <p>Team working skills</p> <p>Various projects conducted by volunteers</p> <p>Using projects to target health-related issues in prison</p> <p>Developed skills to assist in future</p> <p>Team working skills relevant to future goals</p> <p>Self-efficacy not improving as already required to be selfefficacious in other parts of life</p> <p>Developing skills from organising and running projects</p> <p>Using previously learned skills in projects</p> <p>Learning from each other</p> |
|--------------------|--|---|

|  |   |  |
|--|---|--|
|  | <p>Building relationships with people you would have previously had nothing in common with</p> <p>Changing beliefs about people</p> <p>Talking as a way of building relationships</p> <p>Talking as a way of understanding another person's perspective</p> <p>Understanding another person's perspective</p> <p>Talking as a means of understanding another person's perspective</p> <p>RC breaks down barriers between people</p> <p>RC provides an opportunity to speak to other prisoners</p> <p>Not previously having problems with prison staff</p> <p>Realising prison staff are human (good and bad)</p> <p>Being easy going relating to not having problems with prison staff</p> <p>Having to regulate self in prison environment</p> | <p>Previously learned life skills benefitting projects</p> <p>Skills developed during programme will help him achieve his goals</p> <p>Programme built confidence</p> <p>Confidence important for achieving goals</p> <p>Long-term thinking</p> <p>Use psychology degree to help people through Simon Community</p> <p>Joined programme to get experience</p> <p>Experience from the RC helping with goals</p> <p>Impact of drugs on society</p> <p>Observing an issue in society and trying to find a way to help (psychology)</p> <p>Concept of addictive personalities</p> <p>Interest in addiction due to family member having addiction issues</p> <p>Appreciating how the Simon Community helped uncle</p> <p>How people can turn their life around with support</p> <p>Regarding people in the Simon Community as good people</p> <p>Hope for change</p> <p>RC part of education</p> <p>RC part of goal to build better communities</p> <p>RC as a step towards goals</p> <p>Volunteer status important as it is a step towards goal</p> <p>Feeling selfish for using RC for goal</p> <p>RC as step towards goal</p> <p>Learning to push for goal in prison</p> <p>Continuing education with RC past programme</p> <p>Committing to volunteering and sticking with it</p> |
|--|---|--|

|                   |  |  |
|-------------------|--|--|
| <p><b>Tom</b></p> | <p>Projects breaking down barriers</p> <p>Wouldn't have previously associated with volunteers</p> <p>Programme breaking down barriers</p> <p>Programme bringing prisoners closer</p> <p>Programme providing an opportunity for prisoners to talk</p> <p>Listening to others brings you closer</p> <p>Being on the same wavelength as other prisoners</p> <p>Acknowledging disagreements</p> <p>Becoming closer as a group</p> <p>Becoming good friends with other volunteers</p> <p>Becoming more talkative with other prisoners</p> <p>Acknowledging disagreements between volunteers</p> <p>Gaining insight by talking to people</p> <p>Running projects with other volunteers</p> | <p>Identifying problems and taking steps to rectify them</p> <p>Health-related projects</p> <p>Emphasis on fitness</p> <p>Emphasis on mental health</p> <p>Having experience in a health-related area</p> <p>Investing in fitness keeping prisoners away from substances</p> <p>Madness in main jail, difficult to run projects</p> <p>Building confidence to speak before a crowd</p> <p>Building confidence in ability to do things through experience</p> <p>Running a fitness group</p> <p>Fitness helping him focus</p> <p>Investing in fitness results in feeling good</p> <p>Impact of aging</p> <p>Having an outdoor area as important in prison</p> |
|-------------------|--|--|

|  |   |  |
|--|---|--|
|  | <p>Prison compared to own home</p> <p>Prisoners compared to family members</p> <p>Officers as outsiders</p> | <p>Focusing on fitness since coming into prison</p> <p>Putting first aid skills into use</p> <p>Recognising when there is an issue</p> <p>Having the skills to help someone in danger</p> <p>Scary putting skills into use</p> <p>Other prisoners having the knowledge to realise how serious situation was</p> <p>Having skills to help people choking</p> <p>Scary using first aid skills</p> <p>Organising projects</p> <p>Recognising problem and taking steps towards a solution</p> <p>Being outside and doing exercise is good for mood</p> <p>Being outside and doing exercise improves focus</p> <p>Being outside and doing exercise improves health, physically and mentally</p> <p>Looking forward to exercise outside</p> <p>Difficulty setting up some projects in open prison</p> <p>Projects provide an opportunity for lads to talk</p> <p>Group dynamic central to projects</p> <p>Difficulty managing work and volunteering on outside</p> <p>Enjoyed all of programme</p> <p>Wanting to continue volunteering with RC</p> |
|--|---|--|

|                   |  |   |
|-------------------|--|---|
| <p><b>Sam</b></p> | <p>Interacting with officers in a different way</p> <p>Imagining other people's perspectives</p> <p>Feeling awkward at the beginning</p> <p>Being exposed to issues through RC</p> <p>Learning about issues by talking to people</p> <p>Learning about issues have a big impact on him</p> <p>Gaining knowledge about issues</p> <p>Learning through talking to people who have experienced issues</p> <p>Impacted by stories he's been told</p> <p>Not having opportunity to gain knowledge only for the RC</p> <p>Changed by speaking to people in groups</p> <p>Changed through education</p> <p>Trying to pass knowledge on</p> <p>Knowledge as life changing</p> <p>Awareness of perception and emotions</p> <p>RC group spending a lot of time together</p> <p>Trusting other RC volunteers</p> <p>RC volunteers relying on each other to solve problems in prison</p> | <p>Interest in counselling and psychotherapy influencing decision to join RC</p> <p>Achieved degree in counselling and psychotherapy</p> <p>Using the RC as experience</p> <p>Group interaction associated with RC</p> <p>Gaining experience as motivation for joining RC</p> <p>Previously worked in a profession involving group work</p> <p>Wanting to get further qualifications</p> <p>Peer-to-peer education as brilliant</p> <p>Being involved in activities outside of prison</p> <p>Facilitating groups through the RC</p> <p>Providing information on risky-health behaviours</p> <p>Group work involved in RC courses</p> <p>Providing information on risky-health behaviours</p> <p>Promoting awareness of risky-health behaviours</p> <p>Providing information on how emotion relates to violence</p> <p>Providing alternative ways to manage emotion</p> <p>Groups supporting interaction</p> |
|-------------------|--|---|

|  |  |  |
|--|--|--|
|  | <p>Trusting each other's opinions</p> <p>Respecting each other's opinion</p> <p>RC breaks down barriers between volunteers and staff</p> <p>Realising that prisoners are welcoming from experience</p> <p>Positive outlook</p> <p>Change in thought process</p> <p>Understanding how feelings impacts actions</p> <p>Not reacting immediately</p> <p>Things can get better by not reacting</p> <p>Being more relaxed</p> <p>RC breaks down barriers with prison staff and family</p> <p>Importance of empathy</p> <p>Being non-judgemental</p> <p>Showing people empathy</p> <p>Being non-judgemental</p> <p>Showing people empathy</p> <p>Being non-judgemental</p> <p>Importance of empathy</p> <p>Being empathetic towards others</p> <p>Empathy as an important learning for him</p> <p>Being empathetic makes a big difference</p> <p>Being non-judgemental</p> | <p>Team work within RC</p> <p>Feeling strange doing projects at first</p> <p>Developing interviewing skills</p> <p>Educating self to keep stimulated</p> <p>Learnt to love education in prison</p> <p>Programmes improving future prospects</p> <p>Continuing work with RC post release</p> <p>RC being a big part of life</p> <p>Opportunities on the outside with the RC</p> <p>Staying with the RC for the rest of his life</p> <p>RC doing a lot for him</p> <p>Appreciating how much the RC has done for him</p> <p>RC volunteers not coming back to prison</p> <p>RC volunteers doing well in life</p> <p>RC volunteers working</p> <p>RC volunteers rebuilding relationships with family</p> <p>RC volunteers achieving something in life</p> <p>RC changing peoples lives</p> <p>Programme supporting people in changing their lives in a positive way</p> <p>Securing employment post release</p> <p>Positive change as amazing</p> <p>Programme builds confidence</p> <p>Self-confidence as key</p> <p>RC building self-confidence</p> <p>Self-confidence making a huge difference in life</p> <p>Constantly progressing with RC</p> <p>Staying with the RC long-term</p> <p>Wanting to progress to counselling</p> <p>Using RC as step towards goal</p> |
|--|--|--|

|                     |   |  |
|---------------------|---|--|
| <p><b>Peter</b></p> | <p>Developing better people skills from programme</p> <p>Better at talking to people now</p> <p>Everyone speaking their own opinion in class</p> <p>Group being quiet for the first while</p> <p>People skills developing from involvement in RC</p> <p>Being more straight with people</p> <p>Having more confidence when talking to people</p> <p>Developing people skills from RC</p> <p>Communication skills</p> <p>Breaking down barriers by talking</p> | <p>Training new volunteers</p> <p>Training new volunteers before being released</p> <p>Facilitating involving training new volunteers</p> <p>Running health-related courses with prisoners</p> <p>Running courses with schools</p> <p>Facilitating providing an opportunity to travel to other prisons to teach courses</p> <p>Developing presentation skills</p> <p>Becoming more confident with experience</p> <p>Confidence building from education</p> |
|---------------------|---|--|

|  |  |   |
|--|--|---|
|  | <p>Getting along well with other volunteers</p> <p>Meeting good people in prison</p> <p>Learning from others</p> <p>Prisoners feeling they are on a different level to other prisoners</p> <p>Prisoners realising they're all on the same level</p> <p>Becoming closer with prisoners by listening to their stories</p> <p>Small group of volunteers</p> <p>Getting on with prison staff now</p> <p>Having more respect for prison staff since programme</p> <p>Small group of volunteers handling all the work</p> <p>Developing a difference perception of staff</p> <p>Perception of staff changing</p> <p>More communication with the Governor as a facilitator</p> <p>Communicating with prisoners about issues</p> | <p>Not being interested in education in school</p> <p>Having no problem with paper work now</p> <p>School focused on learning for your own benefit</p> <p>RC focused on learning to benefit others</p> <p>Being motivated by helping people</p> <p>Facilitating groups</p> <p>Prompting people to reflect</p> <p>Education involved in running courses</p> <p>Education involved in running courses</p> <p>Being educated on topics through the programme</p> <p>Wanting to help in own community</p> <p>Willing to work with RC on the outside</p> <p>Willing to assist probation services on outside</p> <p>Transferring skills to community setting</p> <p>RC changed outlook on future</p> <p>Wanting to help other people with similar issues</p> <p>Wanting to help other people with similar issues</p> <p>Wanting to help own community</p> |
|--|--|---|

|                   |   |   |
|-------------------|---|---|
| <p><b>Joe</b></p> | <p>RC helps people to deal with their problems by helping people to talk</p> <p>RC improves communication</p> <p>RC supports you in developing communication skills</p> <p>RC supports you in learning how to present yourself</p> <p>RC supports you in becoming assertive</p> <p>RC prepares you for interpersonal contact</p> <p>Communication poor in prison</p> <p>Communication poor in prison</p> <p>Poor communication leads to poor interpersonal relations</p> <p>Poor communication getting you in trouble</p> <p>Better communication leads to better interpersonal relations with staff</p> <p>Relationship with other prisoners not changing</p> <p>Prisoners not doing well with teachers</p> <p>Teachers as good people</p> <p>Stigma against teachers</p> <p>RC working a lot with teachers</p> <p>Running courses with teachers</p> | <p>Gaining knowledge of health-related issue</p> <p>Able to educate other prisoners on health-related issues</p> <p>Learning about health-related issues</p> <p>Becoming a facilitator</p> <p>Learning to be more confident in self</p> <p>Developing presentation skills</p> <p>Learning to communicate better</p> <p>Becoming a facilitator</p> <p>Working together in a team</p> <p>Team working as important</p> <p>Building confidence during programme</p> <p>Becoming more confident as a result of developing communication skills</p> <p>Modules taught as part of RC</p> <p>Developing skills and gaining knowledge from RC</p> <p>Various roles within RC</p> <p>Team working</p> <p>Opportunity to do something they haven't done before</p> <p>Opportunity to do something they haven't done before</p> <p>Organising things on own as a facilitator</p> <p>Volunteers conducting different projects</p> <p>Volunteers conducting different projects</p> |
|-------------------|---|---|

|  |  |   |
|--|--|---|
|  |  | <p>Variety of projects conducted by the RC</p> <p>Running projects which prisoners are interested in</p> <p>Trying to cater for prisoners</p> <p>Awareness of what prisoners like and therefore, running projects on this</p> <p>Spreading awareness of health-related issues</p> <p>Learning about health-related issues during programme</p> <p>RC helping you make decisions</p> <p>RC supporting prisoners in thinking about other people's feelings</p> <p>Prisoners traditionally not thinking of others feelings</p> <p>Prisoners being impulsive</p> <p>Behaviour of prisoners not personal</p> <p>Behaviour of prisoners as opportunistic</p> <p>Importance of working in a team in RC</p> <p>A lot of organisation involved in projects</p> <p>Wanting to work with younger generation</p> <p>Wanting to pursue work with AVP</p> |
|--|--|---|

|                    |  |   |
|--------------------|--|---|
| <p><b>Paul</b></p> | <p>Being congruent with prisoners</p> <p>Originally thinking RC was only for disasters</p> <p>Being congruent with prisoners</p> <p>Volunteers seeing the benefits of the programme and communicating them to other prisoners</p> <p>Regulating self because programme had done him good</p> <p>Communication skills</p> <p>RC giving him new found confidence</p> <p>Previously would have been “one of the lads”</p> <p>Previous behaviour due to a lack of confidence</p> <p>Previous behaviour due to insecurities</p> <p>Interacting with other prisoners for projects</p> <p>Interacting with other prisoners for projects</p> <p>Interacting with other prisoners for projects</p> <p>Learned he didn’t need to act in a problematic way to communicate with people</p> <p>Learned he didn’t need to act in a problematic way to feel better</p> <p>Feeling important for the first time</p> <p>Previously thinking he could only feel important by acting like the class clown</p> <p>Understanding the implications of his behaviour on others</p> <p>Developing a feeling of importance through the seven fundamental principles</p> <p>Not interacting with people who committed a sex crime</p> <p>Thinking those who committed a sex crime were different to him</p> <p>Feeling like he cannot judge people because of the crime he committed</p> | <p>Difficulties presenting</p> <p>Feeling nervous before presentation</p> <p>Getting to presentation despite nerves</p> <p>Feeling great after presentation</p> <p>Doing projects as possible</p> <p>Informing prisoners of health-related issues</p> <p>Addressing that information may be difficult to understand</p> <p>Engaging people by appealing to their interests</p> <p>Conducting health related projects</p> <p>Difficulties faced during projects</p> <p>Encouraging people to get tested by appealing to their interests</p> <p>Planning skills</p> <p>Planning skills</p> <p>Difficulties with running projects in the prison</p> <p>Reservations running projects in prison</p> <p>Identifying obstacles and planning how to overcome them</p> <p>By starting a project, it’s an opportunity to spread awareness</p> <p>Learning perseverance through the Red Cross</p> <p>Having to persevere in prison</p> <p>Persevering attitude needed in prison</p> <p>Developing skills in first aid</p> <p>Gaining knowledge of health-related issues</p> <p>Learning from the information involved in projects</p> |
|--------------------|--|---|

|  |   |  |
|--|---|--|
|  | <p>Treating people with the seven fundamental principles of the RC</p> <p>Using the fundamental principles to see people as people and not crimes</p> <p>Becoming non-judgemental</p> <p>Seeing people as the same</p> <p>Took everyone at face value</p> <p>Treating people like they treat you</p> <p>The seven fundamental principles making a significant difference</p> <p>Implementing the seven fundamental principles into life gradually</p> <p>Not originally understanding the seven fundamentals</p> <p>Breaking the principles down</p> <p>Originally the material was difficult to understand</p> <p>Breaking material down into prison language</p> <p>Breaking material down into prison language</p> <p>Material being difficult to understand previously</p> <p>Breaking down difficult concepts into simple language</p> <p>Working together</p> <p>Using language which would be comprehensible to the prison population</p> <p>Information resonating when it is broken down</p> <p>Being non-judgemental</p> <p>Being impartial</p> <p>The seven fundamentals making a big difference</p> <p>Information taking a while to resonate</p> <p>Asking self if he was using principles when interacting with people</p> <p>Originally asking himself all the time but then moving to doing it naturally</p> <p>Behaviour becoming natural over time</p> <p>First time getting up and giving a presentation</p> <p>Respect from prison staff</p> <p>Being able to talk to prison staff</p> <p>Previously not having the confidence to talk to prison staff</p> <p>Difficulties communicating previously</p> <p>Not knowing how to interact with Governor</p> <p>Wasn't assertive</p> <p>Not being confidence</p> <p>Not having the skills to interact</p> <p>Becoming angry because he didn't have the skills to interact</p> <p>RC helped him stay calm</p> <p>Previously thinking staff were against prisoners</p> <p>RC breaking down barriers between prisoners and staff</p> <p>Viewing staff with the seven fundamental principles</p> <p>Seven fundamental principles breaking down barriers between prisoners and staff</p> | <p>Community in prison</p> <p>Issues with living people you are trying to educate</p> <p>If volunteers aren't using the information they are communicating, other prisoners won't listen</p> <p>Took on the information of each project</p> <p>Not going to ask other people to do it if he didn't do it himself</p> <p>Issues with living with the people you are educating</p> <p>Have to be taking on information or prisoners won't listen</p> <p>Have to be taking on information or prisoners won't listen</p> <p>Practicing what he preached</p> <p>Developing researching skills</p> <p>Ensuring the information was factual</p> <p>Taking responsibility</p> <p>Researching skills</p> <p>Learning the information themselves before communicating to community</p> <p>Breaking down concepts in prison language</p> <p>Ensuring information was factual</p> <p>Better outlook on life</p> <p>Facilitating courses</p> <p>Emphasis on thoughts, feelings and behaviours</p> <p>Emphasis on regulating self</p> <p>Importance of perseverance</p> <p>Adjusting plans to suit IPS</p> <p>Resistance by Governors on some projects</p> <p>Learning to change plans</p> <p>Learning to persevere</p> <p>Appreciating what the programme had done for him</p> <p>Programme doing him good</p> <p>Looking forward to future</p> <p>Confident he can get a job, volunteer, be a normal member of society</p> <p>Not worried about being labelled</p> <p>Belief that he can live a regular life</p> <p>Recognising that some people will judge him</p> <p>Confident that he can live his life</p> <p>Confident that people will be ok with him once they get to know him</p> <p>Stigma faced by prisoners</p> <p>Thinks he will be able to live a normal life</p> |
|--|---|--|



|  |   |  |
|--|---|--|
|  | <p>Prison as community</p> <p>Understanding world from staffs perspective</p> <p>Getting along to make the day easier</p> <p>Changing way of thinking</p> <p>Changing way of talking</p> <p>Becoming calmer</p> <p>Being able to look at things from different perspectives</p> <p>Becoming aware of other issues in prison</p> <p>Mindset changing after being involved in the RC</p> <p>Learned about being assertive</p> <p>Developing skills in effective communication</p> <p>Learning how to regulate self during interactions</p> <p>Learning how to effectively communicate</p> <p>Learning to be assertive</p> <p>Learning about non-verbal communication</p> <p>Previously had not learned about body language</p> <p>Felt able to approach people after learning communication skills</p> <p>Needing to use a substance to have the courage to speak</p> <p>Using communication to improve health-related issues</p> <p>More self-efficacious as he is assertive</p> <p>Gaining empathy</p> <p>Becoming more confidence</p> <p>Becoming more assertive</p> <p>Being honest</p> <p>Taking responsibility</p> <p>Communication with various organisations</p> <p>Importance of being honest</p> <p>Importance of being honest</p> <p>Communication with various organisations</p> <p>Writing in a way which the community will understand</p> <p>Learning to be assertive</p> <p>Learning to communicate their point</p> <p>Governors allowing them to do things as they were determined</p> <p>Officer looking to volunteers for help</p> <p>Open communication between staff and prisoners</p> <p>Empowering prisoners</p> <p>Officer concerned about the safety of prisoners</p> <p>Targeting prisoners with reputations</p> <p>Targeting prisoners with reputations</p> <p>Communicating with prisoners with reputations</p> | <p>The label won't have a major impact on his life because he has the skills to live a normal life</p> <p>Believes he can be a valued member of society</p> <p>Reflecting on what he is getting from volunteering</p> <p>Volunteering is giving him the confidence that he can lead a normal life after prison</p> <p>Not wanting to be isolated</p> <p>Wanting to be around people</p> <p>Volunteering gives him confidence that he will manage outside prison</p> <p>Wanting to give himself the best chance of staying out of prison as possible</p> <p>Issue of revolving door in prison</p> <p>Regards continually coming into prison as a waste of a life</p> <p>Giving himself the best chance of staying out of prison</p> <p>Consciousness</p> <p>Realising he needs to work on himself</p> <p>Not wanting to come back to prison</p> <p>Wanting to live a normal life</p> <p>Believing he can live a normal life</p> |
|--|---|--|

|  |   |  |
|--|---|--|
|  | <p>Connecting with prisoners to give up weapons</p> <p>Connecting with prisoners by talking to them</p> <p>Connecting with prisoners by giving them information</p> <p>Prisoners listening to volunteers</p> <p>Prison environment being hostile</p> <p>Idea of "who do you think you are"</p> <p>Communicating to prisoners that he is just trying to help</p> <p>Congruence improving trust</p> <p>Communication improving trust</p> <p>Organising projects which include both staff and inmates</p> <p>Mixing staff and inmates breaks down barriers</p> <p>Both sides become more sympathetic to the other by doing things together</p> <p>Emphasising to prisoners the staffs perspective</p> <p>Emphasising that staff are human</p> <p>Emphasising that staff have responsibilities</p> <p>Being empathetic towards staff</p> <p>Not wanting to negatively impact staff</p> <p>Not wanting staff to negatively impact him</p> <p>Realising they are both required to be in the prison</p> <p>Realising staffs responsibilities</p> <p>Need to respect each other</p> <p>Getting the staff involved in projects</p> <p>Involving staff in projects increases respect</p> <p>Having the staff and inmates doing the same things</p> <p>Emphasising that both staff and inmates are human</p> <p>Emphasising similarities between prisoners and staff</p> <p>Emphasising similarities between prisoners and staff</p> |  |
|--|---|--|

|                   |   |   |
|-------------------|---|---|
| <p><b>Dan</b></p> | <p>Developed communication skills</p> <p>Better listener as a result of listening to lads share experiences in class</p> <p>Better listener as a result of programme</p> <p>Better listener from listening to other volunteers experiences</p> <p>Running courses with community members</p> <p>Programme improved team working skills</p> <p>Difficulties with working in a team</p> <p>Not being able to do things his way</p> <p>Wanting things done his way</p> <p>Not like past experiences of team hierarchy</p> <p>Can't tell people what to do in RC</p> <p>Volunteers doing things their way</p> <p>Difficulties working in a team</p> | <p>A lot of the programme can relate to your personal life</p> <p>Developed first aid skills</p> <p>Better public speaker</p> <p>Facilitation training particularly improves public speaking skills</p> <p>Duty to stand up and be heard when facilitating</p> <p>Being pushed out of comfort zone when public speaking</p> <p>Being nervous the first few times publicly speaking</p> <p>Experience contributes to feeling less nervous</p> <p>Experience contributes to feeling less nervous</p> <p>Found it interesting when he got involved</p> <p>Better at public speaking after the programme</p> <p>Wouldn't have done public speaking before the programme</p> <p>Education around topics as eye-opening</p> |
|-------------------|---|---|

|  |   |  |
|--|---|--|
|  | <p>More tolerant as a result of programme</p> <p>Lots of positives to working in a team</p> <p>Splitting workload of projects</p> <p>Having banter and craic within team</p> <p>Half of volunteers doing it because they are interested</p> <p>Half of volunteers doing it for the cert</p> <p>Difference in attitude between volunteers doing it because they are interested versus because they want a cert</p> <p>Regarding self as someone who gets on with everyone</p> <p>Not treating volunteers differently based on their intentions with course</p> <p>RC like a social group</p> <p>No difference in relationship with staff before and after programme</p> <p>Regards self as someone who gets on with everybody</p> <p>No previous problem with staff</p> <p>Getting to know people as a result of running courses</p> <p>Becoming close with people you are running courses with</p> <p>Relationships lasting after courses</p> <p>More social interaction outside of class as a result of getting to know people through running courses</p> <p>Values changing as a result of programme</p> <p>Not originally valuing getting to know people</p> <p>Previously would have kept to himself</p> <p>Getting to know other volunteers from programme</p> <p>Building a social circle from programme</p> <p>Programme improved his mental health</p> <p>The programme facilitated integration into the prison community</p> <p>Making more friends as a result of programme</p> <p>Expanding social circle as a result of programme</p> <p>Having more people to talk to improves mental health</p> <p>Programme provided an opportunity to make friends (particularly when new)</p> <p>Getting to know friends through volunteers</p> <p>Regards himself as someone who gets along with everyone</p> <p>Used to doing things by himself</p> | <p>Not knowing theory before programme</p> <p>Being taught material through RC classes</p> <p>Needing to brush up on material</p> <p>The more you run courses, they more information you remember</p> <p>Not being able to apply some learnings to personal life</p> <p>First aid skills relevant to personal life</p> <p>Feeling brilliant after learning skills</p> <p>Importance of actually doing the skill</p> <p>Doing it correctly elicits satisfaction</p> <p>Important to practically do skill</p> <p>Will definitely help people in the future after being involved in programme</p> <p>Wanting to continue to facilitate group</p> <p>Applying skills learned to different contexts</p> |
|--|---|--|

**Appendix I Memo Document**

- Communication between staff and inmates: valuing the insight of different people
- Semantic themes allow me to treat the participant as expert

- Co-operation, talking allowed prisoners to view staff as human rather than just an officer (transcended simplistic black-and-white thinking)
- Programme gave volunteers purpose
- Self-efficacy- possibly modulated by prior experiences
- Taking responsibility for self and actions (repeated across interviews)
- Not previously having problems with prison staff modulated whether programme improved relationships
- Repeated use of the phrase “broke down barriers” across interviews
- Meetings with Governor and Chief appear to be significant across interviews- respect, feeling special, having a voice
- The concept of doing good in the prison
- Helping younger generations is a trend across interviews
- Seems to be a change in thinking across interviews, an awareness, identifying problems and looking at how to fix them
- Seeing the prison as a community, helping members of the community
- Support from other volunteers running projects
- Rewarding to see positive change in people you’ve helped
- Differences in how participants experience RC in open prison, some say there’s loads of support and loads to do, P5 says opposite
- Importance of support, becoming discouraged when not getting a response (P5)
- Listeners programme often mentioned
- Repeated prison staff looking at you as doing good
- Graduation ceremony repeatedly mentioned
- Programme coordinators and teachers have a v significant and positive impact
- A lot of participants had addiction issues

- Something about locus of control, previously thinking they couldn't change things, RC support them in recognising that they can
- Possible theme: building confidence through support, respect, education
- Something about hierarchical system in prison, volunteers constantly talking about being on different levels to other prisoners, this is a barrier overcome by talking
- Possible theme: doing good
- Possible theme: opportunities of progression (link to hope)
- All the prisoners speak quite reflectively
- Possible theme: gives you an option
- Mental health improves by learning how to communicate
- Ability to mentalise improved (p8)
- Prisoners being able to communicate with other prisoners in a way that staff can't
- Staff encouraging prisoners to reflect
- Difficult to separate out impact of RC from impact of psychology and other programme.