See below recent articles and other items of interest on Offending Behaviour:

**Journal articles**

If you wish to see the full text, please reply to this email or contact your local health or workplace library.

*Journal of Intellectual Disabilities and Offending Behaviour*

**Coping with stress: the experiences of service-users with intellectual disabilities in forensic services**

John Burns, Alexandra Lampraki, (2016) "Coping with stress: the experiences of service-users with intellectual disabilities in forensic services", Journal of Intellectual Disabilities and Offending Behaviour, Vol. 7 Iss: 2, pp. -

**Abstract:**

**Purpose**

It is now widely acknowledged that stress negatively impacts holistic and well-being and has been identified as a major global concern. This article reports on a qualitative research study which sought to explore the experiences of stress and the use of coping strategies from the perspective of people with intellectual disabilities (ID) currently residing within the forensic in-patient services of one NHS Trust.

**Design/methodology/approach**

Data were gathered via focus group discussions involving 20 service-users with an ID. The
data was subject to thematic analysis.

Findings
Data analysis produced three key themes: Experiencing stress; Sources of stress and Coping with stress.

Practical implications
The findings of the research study have implications for practice. These include the need to utilise appropriate stress assessment measures and implement effective stress reduction and management programmes to address the holistic needs of people with ID, to ensure forensic services are truly high quality, person-centred and recovery focused.

Originality/value
Whilst stress experienced by people with ID residing in community settings has been explored, no studies have focused on how stress is experienced by people with ID residing in forensic services. This paper seeks to address this gap in the literature.

Publisher:
Emerald Group Publishing Limited

Journal of Intellectual Disabilities and Offending Behaviour

The support needs of learning disability nurse facilitators of sex offender treatment programmes: a discussion

Keeley Catherine Smith, (2016) "The support needs of learning disability nurse facilitators of sex offender treatment programmes: a discussion", Journal of Intellectual Disabilities and Offending Behaviour, Vol. 7 Iss: 2, pp. -

Abstract:

Purpose
The role of the learning disability [LD] nurse has developed and expanded significantly within recent years, especially their responsibility for delivering a variety of specialist treatment programmes. This paper discusses the facilitation of Sex Offender Treatment Programmes [SOTP] and the issues this raises in providing support for LD nurses.

Design/methodology/approach
This is an opinion paper and the views and opinions expressed are solely those of the author and do not necessarily reflect the views of any organisation or group with which the author is affiliated. The aims of this paper are: 1) to explore the support needs of the LD nurse facilitators of SOTPs; 2) to consider the practical implications of providing clinical supervision and support for LD nurse facilitators of SOTPs; and 3) to highlight the need for further research in this area.
Findings
Findings: This paper does not contain original research findings but offers a discussion of the support needs of the LD nurse who facilitate SOTP, concentrating on the specific themes of training, clinical supervision and support.

Practical implications
Implications for clinical practice are identified and recommendations for further research are made.

Originality/value
Originality/value: Whilst this is not the first consideration of the support needs of facilitators of SOTPs, it offers a contribution to the discussion of how best to support the LD nurse to continue to deliver the high-quality, specialist care for people with learning disabilities.

Development of the community based individual risk mitigation profile (IRMP) for people who have intellectually disability and at risk of offending

John Hutchinson, Victoria Dunn, (2016) "Development of the community based individual risk mitigation profile (IRMP) for people who have intellectually disability and at risk of offending", Journal of Intellectual Disabilities and Offending Behaviour, Vol. 7 Iss: 2, pp. -

Abstract:
Purpose
The aim of this paper is to discuss the development of the community-based Individual Risk Mitigation Profile and to examine its effectiveness for people who have an intellectual disability, and are at risk of offending, through the use of a case study.

Design/methodology/approach
Case Study and literature review

Findings
The tool has been found to be useful and accessible by clinicians. It has a particular focus on joint sharing of opinion on risk and decision making in a structured and contained Multi-disciplinary forum, that is evidence based and defensible. This multi-disciplinary approach meets recommendations in best practice in relation to risk.

Research limitations/implications
A current limitation to the IRMP has not been evaluated for reliability and validity, though a research study is being planned.

Originality/value
The Paper highlights the usefulness of a community based risk profile assessment and linked risk mitigation process.

**Title:** Substance Use, Offending, and Participation in Alcohol and Drug Treatment Programmes: A Comparison of Prisoners with and without Intellectual Disabilities.

**Citation:** Journal of applied research in intellectual disabilities : JARID, May 2016, vol. 29, no. 3, p. 289-294, 1468-3148 (May 2016)

**Author(s):** McGillivray, Jane A, Gaskin, Cadeyrn J, Newton, Danielle C, Richardson, Ben A

**Abstract:** Many offenders with intellectual disabilities have substance use issues. Offending behaviour may be associated with substance use. Prisoners with and without intellectual disabilities were compared in terms of their substance use prior to imprisonment, the influence of substance use on offending, and their participation in alcohol and drug treatment programmes. Substance use was similar in prisoners with and without intellectual disabilities in the year prior to their current prison terms. Prisoners with intellectual disabilities were much less likely to report that substance use was an antecedent to the offences leading to their imprisonment. The completion rate of alcohol and drug treatment programmes was much lower for those with intellectual disabilities. Substance use may be as common in prisoners with intellectual disabilities as those without this condition. Services may need to reflect on whether their treatment programmes are meeting the needs of all prisoners. 2015 John Wiley & Sons Ltd.

**Source:** Medline

**Title:** A comparison of seclusion rates between intellectual disability and non-intellectual disability services: the effect of gender and diagnosis

**Citation:** Journal of Forensic Psychiatry and Psychology, March 2016, vol./is. 27/2(265-280), 1478-9949;1478-9957 (03 Mar 2016)
Author(s): Turner K.V., Mooney P.

Language: English

Abstract: Introduction: The use of seclusion as a means of managing the extreme behaviours forensic patients in secure settings is a controversial yet often common practice, despite there being little evidence that seclusion as a practice has any significant therapeutic value for the patient. The aim of this study was to explore the use of seclusion and whether this differs as a function of gender and diagnosis across secure services. Method: This study collated data from 11 medium and low secure hospitals that admit male and female patients, with some services providing services for patients with intellectual disability (with or without co-morbid disorders), and others for patients with mental illness and/or personality disorder only. Results: Both gender and diagnosis were associated with differential seclusion rates. Seclusions were three times longer for patients in the non-ID compared to the ID service. Male seclusions (for any diagnosis) were around twice as long as those in female services. Female ID patients spent significantly less time in seclusion compared to other groups. Female ID was associated with two to three times the number of seclusion events per patient compared to other groups. No statistically significant association between the type of service and the reason for a patient being secluded. Conclusions: A range of organisational factors that determine the use and duration of seclusion are cited and merit further exploration. High rates of psychiatric co-morbidity and the complexity of patients admitted to services may also mediate risk and use of seclusion. The study supports the use of early intervention techniques and the adoption of positive behaviour support.

Publication Type: Journal: Article

Source: EMBASE