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In their own words: A qualitative exploration of Agnew's storylines among imprisoned offenders

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Abstract

Agnew (2006) developed the concept of “storylines,” which are a category of variables that temporally exist between stable background factors (i.e. low self-control) and temporary situational factors (i.e. the absence of capable guardians). Storylines begin with some event that is out of the ordinary that temporarily alters the individual’s background factors, individual interactions with others, and/or settings encountered by an individual in ways that increase the likelihood of crime. Using data collected from thirty-five in-depth interviews with British convicts, this study will examine the presence of the five major storylines conducive to crime developed by Agnew (2006). Additionally, evidence of a sixth storyline will also be discussed followed by policy and practice implications of these findings.

Keywords: prisoner reentry, storylines, criminological theory, mental health

Introduction

Criminological theory suggests that both background factors, which remain relatively stable over an extended period of time, and/or situational factors, which refer to short-term characteristics of a situation, increase the likelihood of crime. Background factors refer to the individual's mean or modal standing on a range of individual or environmental characteristics over a period of several weeks or longer including level of self-control (Gottfredson & Hirschi, 1990) and level of parental supervision (Agnew, 2005). Situational factors refer to the characteristics of an individual or an individual's environment immediately before the crime occurs (Birkbeck and LaFree, 1993; Clarke and Cornish, 1985), and are "active" only for a brief period (Agnew, 2006) including "righteous anger," provocation by others, the absence of capable guardians, the presence of attractive targets for crime, or the presence of an audience (Agnew, 2005; Baron, Kennedy & Forde, 2001; Felson, 2002; Katz, 1988; Miethe & McKorkle, 2001; Wilkinson, 2002) .

This dichotomy, however, fails to account for life events that may significantly, but temporarily, modify an individual's background characteristics or the situations they are likely to encounter (Agnew, 2006). According to Agnew (2006), storylines refer to this category of variables in the temporal space between background and situational factors which consider the importance of these temporary life events. In other words, a storyline is a "temporally limited, interrelated set of events and conditions that disrupts their typical life routine and that increases the likelihood that individuals will engage in a crime or a series of related crimes," (Agnew, 2006, p. 121). Specifically, the storyline can lead to temporary increase in strain, reduction in social control, increase in the social learning of crime, and/or increase in those individual background factors that are conducive to criminal behavior (e.g. low self-control). The storyline can last from minutes to weeks and ends when some event restores the individual's level of strain, social control, social learning for crime, opportunities for crime or individual characteristics to their prior levels (Agnew, 2006). In this way, storylines may add to our understanding of crime by acknowledging the context of criminal behavior beyond characteristics of the immediate situation, as well as acknowledging the potential mutability of background factors. As Agnew (2006) notes, storylines can enhance our understanding of the causes of crime and can have important implications for policies and practices to reduce crime.

The consideration of storylines as a major contributing factor of crime highlights an overlooked category of variables, yet, according to Agnew (2006), the relationship between storylines and crime can be explained through existing theoretical mechanisms. However, these "storylines" should be distinct and discernable from background or situational variables. Storylines therefore function as a catalyst for criminal behavior in addition to, and in collaboration with, the more stable background factors and short-term situational factors generally considered in criminological theory (Agnew, 2006). For instance, background and situational variables that foster the social learning of crime may be temporarily increased by a new relationship formed with an offender. Relatively stable forms of external social control may be temporarily reduced by a job loss, thereby eliminating the constraining effect on offending (Agnew 2006).

Research supporting a storylines framework asserts that restricting our understanding of criminal offending to only background factors is incomplete, failing to account for the fact that many individuals with background factors linked to offending (i.e. low self-control or poor parental supervision) do not engage in crime (Baron, 2012) and that individuals with background factors conducive to offending engage in crime only a small part of the time (Collins, 2008). For example, while research has shown that abusive family backgrounds are oftentimes associated with violent offending (Johnson, 2004) this is not always the case. Boyd (2001) found that only 30% of young boys who are exposed to acts of intimate partner abuse will engage in violence against an intimate partner later in life.

Furthermore, Spatz Widom, Czaja and DuMont (2015) found that adults who were physically abused as children were no more likely to abuse their own children than were other adults their age.

Additionally, although self-control is a relatively stable background characteristic, discovering that a romantic partner has cheated may reduce self-control and result in a violent act when encountering the rival days later. Despite the situational factor of encountering said romantic rival diminishing self-control, it is the ongoing dispute with this individual – the storyline – truly motivating the violent offense. In addition to an *unresolved dispute*, Agnew (2006) identifies four additional major storylines that contribute to criminal behavior: *a desperate need for money, a close involvement with an offender, an opportunity for crime, and a break with conventional others or institutions.*

As Agnew (2006) notes, even life-course researchers tend to assume background factors, like self-control, are stable. Although such researchers argue that an individual's standing on the causes of crime may change over time, such change is said to occur primarily during major turning points in the individual's life, like the transition from adolescence to adulthood (Sampson and Laub 1993). Furthermore, while a few researchers acknowledge that there may be monthly changes in certain variables that are usually thought to be stable over long periods (i.e. employment status, marital status and drug use), more frequent changes, like changes in self-control due to situational factors, are largely ignored by life-course researchers (Farrington, 1992; Griffin & Armstrong, 2003; Horney, 2001; Horney, Osgood & Marshall, 1995). Furthermore, as Riggs and Murphy (2013) note, storylines are different from the life course approach, in that emphasis is placed on how individuals construct their own criminal activity. Typically, life course research assumes that there are definite stages in people's lives that are normative or occur naturally (Elder, 1985). Within a storyline approach, however, individuals are understood to be capable of making choices and constructing their own life paths (Hutchison, 2005).

Agnew (2006) has called for additional research on storylines to utilize both quantitative and qualitative methods. Qualitative methods that reveal the context of respondents' pathways to offending, such as intensive interviews, may be particularly useful in identifying additional storylines as well as the mechanisms by which storylines lead to crime for individual offenders. As Kavanaugh (2010) notes, the storylines approach is advantageous in understanding offending behavior because it relies on the offender narratives, including the full story of how and why someone becomes involved in criminal activity, rather than forcing preexisting analytical frameworks onto those who are studied.

While numerous studies have utilized Agnew's (2006) storylines approach to examine how background and situational factors impact sexual assault and physical assault offending and victimization (Kavanaugh, 2010), initiation into substance use (Carbone-Lopez, Gatewood Owens & Miller, 2012; Rigg & Murphy, 2013) and relapse, recidivism and desistance of drug-involved offenders (Bachman, Kerrison, O'Connell & Paternoster, 2013), virtually no studies have empirically tested Agnew's five major storylines. Using data collected from thirty-five in-depth interviews with British convicts, this research contributes to the existing literature in the following two ways: 1) it is one of the first studies to examine the presence and function of the five major storylines in offenders' narratives of their criminal behavior and 2) it recognizes another potential storyline in addition to Agnew's (2006) established major storylines.

In the sections that follow, we first describe the five major storylines identified by Agnew (2006) and we further develop and expand on a sixth storyline called *experiencing acute symptoms of mental illness* that Agnew does not consider to be a major storyline. Second, we describe the data and methods used to examine the presence of the five major storylines as well as the sixth storyline on *experiencing acute symptoms of mental illness*. Third, we present the findings of the five major storylines and propose the addition of a sixth

major storyline to Agnew's framework. We conclude with a discussion of the findings and policy and practice implications of these findings.

A Brief Summary of Agnew's Five Major Storylines

Storyline #1: A Desperate Need for Money. There are three key components to this storyline: *something happens* that creates what is perceived as a *temporary but desperate need for money* and the individual *believes that there are no good legitimate options for obtaining such money*. Agnew (2006) points out a range of events that many lead to this desperate need for money, including poor budgeting between paydays, temporary employment problems, temporary loss of other financial support, demands that debts be repaid, gambling losses, drug binges, and the pressure to pay legal fines or fees.

Storyline #2: An Unresolved Dispute. This storyline has four key elements as outlined by Agnew (2006): *Someone does or says something that the individual did not like*, which challenges their core identity or core values, interferes or threatens to interfere with valued activities, removes or threatens to remove valued possessions and/or poses a risk to physical well-being. The individual *blames the other* for this negative treatment and *experiences one or more negative emotions*, such as anger. Finally, the individual views crime as the best way to respond to this negative treatment. In explaining this storyline further, Agnew (2006) identifies several types of negative treatment that are most likely to lead to unresolved disputes conducive to crime, including but not limited to abusive behavior (i.e. assaults, threats or accusations) directed against the individual or someone close to the individual or romantic disputes that arise due to competition or unfaithfulness.

Storyline #3: A Brief but Close Involvement with a Criminal Other(s). This storyline has three key elements according to Agnew (2006), including: *the individual gets involved with another individual or group who differentially reinforces crime, models crime, prevents beliefs favorable to crime or otherwise pressures or entices the individual to engage in crime* (Hochstetler, 2001, Warr, 2002). While individuals often develop close connections with other criminals over long periods of time, sometimes these associations are more fleeting (Agnew, 2006). It is the length of the association with the criminal other that distinguishes this storyline from a background characteristic or situational factor.

Storyline #4: A Brief, Tempting Opportunity for Crime. As Agnew (2006) points out, individuals may encounter tempting opportunities for crime that transcend particular situations and last from several hours to weeks. The brief but tempting opportunity for crime storyline has two key elements: *Something happens* that causes an individual to *perceive the cost of crime as low and the benefits as high over a period of time* (Agnew, 2006). This storyline increases crime for reasons related to control, social learning, rational choice, and routine activities theories—all of which argue that crime is more likely when the costs of crime are perceived as low and the benefits as high (e.g., Akers 1998; Clarke and Cornish 1985; Felson, 2002). As Agnew (2006) notes, because the opportunity for crime is temporary, the (usually pre-disposed individual) may have a strong desire to immediately capitalize on it.

Storyline #5: A Temporary Break with Conventional Others and/or Institutions. This storyline has two key elements: The individual *initiates or is respondent to a temporary break with conventional others and/or institutions*. This break causes the individual to *believe that the costs of crime are low*. This break with conventional others and/or institutions generally falls into one of three categories as described by Agnew (2006), including (a) conventional others temporarily leave the individual or force the individual to leave (i.e. parents go on a short trip,

an individual breaks up with a romantic partner or a worker experiences a temporary layoff); (b) an individual temporarily leaves conventional others and/or institutions (i.e. a juvenile skips school or runs away from home or an adult quits working for a period of time) and (c) conventional others or institutions temporarily lose their ability to function in a normal manner (i.e. parents may ignore their child because they become sick or the police may become much less responsive because they are overwhelmed with a collective disturbance or natural disaster).

A New Major Storyline: Experiencing Acute Symptoms of Mental Illness. Agnew (2006) notes that *experiencing acute symptoms of mental illness* is another potential storyline but he stops short of calling it a major storyline and he offers no detailed description of this potential storyline, simply stating that crime sometimes results when individuals “experience acute symptoms of mental illness – like delusions or hallucinations.” In the present study, we expand on this potential storyline and offer a description of this new major storyline to be considered in the current study as well as future research.

Numerous studies have documented high rates of mental illness in jail and prison populations. A 2006 study found that nearly half of all prison and jail inmates had at least one mental health issue (James & Glaze, 2006). However, the vast majority of mentally ill individuals do not offend. For example, research shows that most people with mental illness are not violent and only 3%–5% of violent acts can be attributed to individuals living with a serious mental illness (U.S. Department of Health & Human Services, 2017). Additionally, prison itself can exacerbate pre-existing mental health issues and create new mental health issues among those who have never experienced them (Haney, 2006; Haney, 2001; Kupers, 1999). Numerous characteristics of incarceration have negative effects on mental health, including overcrowding, high levels of violence, lack of privacy, idleness, isolation from social networks, stress of release, and inadequate health services, especially mental health services, in prison (World Health Organization, 2005). These environmental factors can lead to anxiety, depression, Post Traumatic Stress Disorder (PTSD) and other mental health issues in prisoners who previously had no serious mental health issues (Villines, 2013). In addition to the deprivations of ordinary prison life, further concerns arise with solitary confinement, a form of imprisonment where an inmate typically spends 23 hours a day with little or no programming or human interaction. Many prisoners in solitary confinement experience panic, anxiety, rage, depression and hallucinations, especially when confined for long periods of time (American Psychological Association, 2014).

Furthermore, research suggests that there are certain factors that increase the chance that an individual with a mental illness will offend, including having a co-occurring substance use disorder, being unemployed and not receiving treatment for a mental health disorder (Kopel & Cramer, 2015). Thus, we describe this storyline as having two key elements. First, *an individual who may or may not have a diagnosed mental health disorder, experiences acute symptoms of a mental illness, such as depression, mania, anxiety, feelings of guilt, extreme anger, hallucinations or delusions*. In some cases, these negative mental health symptoms are the result of residual strain from abuse, neglect, or bullying suffered as a child or an adult or from the permanent loss of conventional other, such as the death of a loved one, permanently having your children taken away, or a permanent break-up with a significant other (as opposed to a temporary break-up, in which case that would be *the temporary break with conventional others/institutions* storyline; Agnew, 1992). In other cases, these negative mental health symptoms are a direct result of an untreated or undertreated mental illness, such as an individual with paranoid schizophrenia who experiences delusions or hallucinations. Second, *the symptoms of the mental illness are untreated, undertreated, self-medicated with drugs/alcohol or are drug/alcohol-induced and*

ultimately lead to offending (including illicit drug use itself) as one potential form of release of these negative emotions.

Using data collected from in-depth interviews of British offenders, the purpose of this study is to 1) examine the presence and function of the five major storylines outlined by Agnew (2006) in offenders' narratives of their criminal behavior, 2) provide a detailed description of a sixth storyline called *experiencing acute symptoms of mental illness*, and 3) examine the presence and function of the *experiencing acute symptoms of mental illness* storyline to determine if it should be considered a major storyline.

Methods

Sample and Data Collection

The data used to explore the 'storyline' framework is derived from transcribed interviews with committed British offenders, conducted as part of a 2005 study by Peninsula Medical School at University of Exeter and funded by the National Institute for Mental Health in England (NIMHE). The study was focused on the mental health and help seeking behaviors of prisoners. Participants were drawn from a list of prisoners who were scheduled for release each week, sampling them until the target of 35 cases were reached. Young offenders and offenders classified as being at risk of suicide were oversampled. Additionally, it is important to note that the sampling strategy for the dataset specifically aimed to understand potential experiences of mental distress faced by offenders. As such, we recognize that the data used for the present study are most likely biased towards the *experiencing acute symptoms of mental illness* storyline. Furthermore, these interviews were not specifically intended to test the storyline framework; however, as discussed below, a content analysis of these interviews proved suitable for exploring the framework. A total of 35 original and 20 follow-up interviews were conducted by one interviewer in the original study: these were loosely structured, allowing for the offender to freely explore past offending and life history. Background, situational and temporal aspects of offending were readily distinguishable in many of these histories; however, the strength of the unstructured interviews also presented a clear limitation with respondents who were less forthcoming with the original interviewer. Notwithstanding this limitation, elements of the five original major storylines emerged in 24 of the 35 prisoners interviewed in the original study as discussed below. Additionally, the new major storyline that we propose – *experiencing acute symptoms of mental illness* – came up in a total of 18 prisoner interviews, making it the most common storyline.

The study respondents were approached and given a comprehensive explanation of the study whilst in the prison wing on which they were located. To offset potential anxiety so soon prior to release we explained that their participation was voluntary, and that the research was not to be conducted by, or associated with, Her Majesty's Prison Service (HMPS). Respondents were given a copy of the study description and a minimum of twenty-four hours to decide whether they wished to participate. Within the next few days, the investigator that previously explained the study returned to the prison, obtained consent, and interviewed respondents in a secure interview room in the prison. After interviews were completed, respondents were offered compensation in the form of a ten-pound food voucher, which invariably appeared to surprise respondents.

The research process, including study design, and development of the topic guide and semi-structured questionnaire, was guided by the input of 'The Revolvers', the users' involvement group of 'The Revolving Doors Agency', a voluntary sector organization that provides services to ex-offenders with mental health problems. The initial topic guide was piloted with three members of their group located in London. The final interview schedule adopted questions derived following user group consultation, pilot interviews and review of

the extant literature; it covered a variety of issues over four primary domains. However, participants were also encouraged to digress from the schedule to talk about their lives and other issues relevant and important to them. All topics were explored in each interview, which lasted between one to two hours.

All prisoners interviewed in the first phase of data collection were followed up approximately 4-8 weeks after their release so that information about specific barriers to health service utilization, their transition from prison into the community, and potential experiences of mental distress, could be obtained. While the intent was to conduct face-to-face interviews at follow up, this was sometimes not possible in a population of individuals where homelessness and transience are common and often compounded by other major psycho-social constraints. For these reasons, some follow up contacts were made by letter or telephone. Thus, interviews were conducted with 19 of the 35 original participants, though information was made available for a further nine participants. The location of respondents when they were followed-up was as follows (n=28):

- 6 back in prison
- 6 temporarily living with parents
- 5 temporarily living with friends ('sofa surfing')
- 3 living in car/caravan
- 3 homeless
- 3 in own council accommodation
- 2 living in a hostel/bedsit

Data Analysis

All interviews were taped with permission and transcribed verbatim. Data were analyzed thematically using some of the principles of grounded theory, including the constant comparison method which was used to identify deviant cases or exceptions to the emerging relations between codes. A variety of other techniques were employed, such as open coding of the early data, reflexivity methods, and several peer group reviews which involved blind coding of three interviews by three researchers to ensure reliability of the coding scheme (Straus & Corbin, 1990). All interviewers agreed on the final themes that emerged from the data.

Results

Of the thirty-five interviews conducted prior to release, six (16%) were with young offenders (aged 18-20 years). The age of the respondents ranged from a minimum of 18 years-old to a maximum of 52 years-old with a mean age of 30 years-old. All but one were unmarried, twenty-three (66%) had one or more children, and ninety-seven percent of the sample was white-British. The sentence length of participants in the sample ranged from 1 months to 30 months with an average sentence of 6 months. The number of prior convictions for the sample ranged from a minimum of 0 to a maximum of 116 with an average number of 18 prior convictions; the number of prior times in prison also varied greatly from a minimum of 0 to a maximum of 32 with an average of 5 prior times in prison.

In the first part of this study, we examined the presence of Agnew's five major storylines followed by evidence of our proposed sixth major storyline. These findings are based on both the 35 initial interviews as well as the 20 follow-up interviews to be as thorough as possible in uncovering the five major storylines outlined by Agnew (2006). Based on our analysis, varying levels of support were found for four of the originally proposed storylines: *a desperate need for money, an unresolved dispute, a brief, but close involvement with a criminal other, and a brief tempting opportunity for crime*. The fifth proposed storyline,

a *temporary break with conventional others and/or institutions* was not supported by this research. Evidence from the offender narratives for four of the original major storylines and our sixth proposed major storyline are discussed in detail in the sections that follow.

Storyline 1: Desperate Need for Money

With respect to the first storyline of a *desperate need for money*, six offenders delineated a common narrative where periods of escalating drug dependency culminated in an intense, temporary need for money as they chased their spiraling drug use. Respondent MH, aged 24, expressed this sentiment in his interview:

I've been in prison twice for mainly shoplifting...we're homeless...just to make sure she [girlfriend] was fed...to keep her happy...I was on drugs...managed to get off...It's hard work...trying to make something out of nothing...I ended up getting a heroin habit...just going off the rails...taking loads of drugs, robbing...becoming a bum.

Respondent PD, aged 20, maintained a similar stance:

Heroin...it's evil stuff and I've lost a lot of things for it...family, friends, money...and for getting into shoplifting. I've only done it for drugs...the evil stuff, the little devils that are sat on my shoulder going to go shoplifting.

As Agnew (2006) propositioned, a critical difference between those whose drug use is a situational or background factor and those whose drug use represents a temporal strain, is directly related to the degree in which their drug use spikes coupled with their ability to cope (i.e. availability of resources). For these respondents, as drug use increased and existing resources and sources of support were unable to meet new, temporary demands, increases in negative emotionality and reductions in social control were witnessed. Respondent AS, aged 25, captured this aspect:

If I ain't using drugs I'll be all right and I'll be able to cope. It's when I start using the drugs it leads to like criminal activity and that, and that puts me back in here...the days seem easier until you like run out of money really, and then ... I dunno, you end up back here like...that's the only reason I commit crime, to get money to buy drugs.

Alternatively, Respondent MJ, aged 20, maintained that his escalating drug use led to his involvement in more serious offenses, specifically, drug dealing, in order to conceal his need for money and his drug habit from his generally supportive, upper income family:

I walked into my dad's house...asked for some money to buy DVDs...and he was like what do you spend all your money on...when I start going out and I'm taking a couple of hundred quid like 2 times a day, or once a day, it adds up, a couple of grand a week. And he said to me what do you spend all your money on and I was like I don't know, just crap, I suppose...I just didn't want to tell him, I just felt ... because he's a respected businessman and I can imagine if it got out for him.

Storyline 2: Unresolved Dispute

The *unresolved dispute* storyline was the second most supported in this research: nine of the 35 prisoners expressed elements of it in either the initial or follow up interview. The strain mechanism within this storyline prominently featured dimensions of negative

emotion resulting from interpersonal conflict and temporally, this storyline was the clearest to distinguish from background and situational variables. For instance, Respondent PR, aged 42, who had immigrated to England, expressed how his upbringing had influenced both his temperament and importantly for him, his morality:

It was rough...all the kids, like here, swear at their mother and father and tell them 'up yours' and the parents get treated like rubbish...I grew up actually with my grandparents ... [but then my] stepfather... he started hitting me...I just want to make it clear I'm like a person...the more you hit me the more I get angry. I mean... I don't trust people at all. I don't trust anybody...English women like shagging everything and yeah...no thank you.

As Respondent PR encountered certain situations, these background variables informed his response, which was rooted in moralistic anger and negative emotionality:

There was this fellow where I was staying...was injecting heroin in front of two 16-year-old girls. So... [OK] what do you call it, I bitch slapped him. They gave me 28 days". Similarly, in another encounter "I slapped 2 people ... because they irritated me...one fella was working on his laptop, so I took his laptop and I threw it against the window, slapped him 'cos he was irritating ... I was speaking to him and he was just like acting as if he was ...God's gift to the earth...he snubbed me, So I slapped him... And the second fella who I tried to speak to, he just looked at me and he just carried on with his laptop. So I took his laptop and threw it against the window and gave him a slapgiving and then the police tried to arrest me, and I hit the police as well.

Respondent DM, aged 45, describes a similar moralistic anger in his conflict with another prisoner:

So one chap came into the wing I was on, he was serving life for raping and strangling a 4-year-old girl. So I decided you can't stay here, you have to go, bye-bye, meaning go to sleep. So I went to work and I got a block of wood and I got a big 6-inch nail and I tapped it into the wood, filed the head off it, took it back to the wing. And at night he was in his cell, door open, so I walked in, [inaudible] but it lodged between the heart and the lung.

Respondent CW, aged 20, who had a history of alcohol abuse, illustrated how the situational or background variables precede and are distinct from the temporal conflict that may produce strain:

Yeah, that's really like the worst problem. I was drinking about 2 bottles, 3 litres a day...when me and the missus split up and she wouldn't let me see my son... she wouldn't let me see my little boy, so ... I went through a bit of a bad stage ...I got a bit pissed up and I went round S's mum and dad's house and put a brick through their window...I was all pissed up and that, and like she said you won't see your boy.

An important point to be made concerning these three offender narratives is that the circumstances that produce negative emotion are intrinsically tied to the background variables, which inform responses to temporal conflict and condition the level of strain that can be coped with by the offender.

Similarly, as Agnew (2006) notes, abusive behavior, such as accusations, directed at someone close to the individual is a form of strain that leads to strong negative emotions such as anger and temporarily reduces self-control. Additionally, such disputes provide a justification for crime. Respondent SJ, aged 45, provided an example of this:

I kidnapped a police informer with a gun. Cos ... err ... a lad in Plymouth who I knew did a robbery on Plymouth bus station, but the girl he used at the bus station with him with blonde hair, at the time the robbery was going down at the bus station me and my ex-wife was walking across the bus station. So the police informer, after he was robbed and all that, and the fellow just ran away with his girlfriend and the proceedings of the robbery, he turned round and saw me and I, my ex-wife, and put her name up. So she was arrested, and she was looking at a 4 - 6-year sentence for a robbery she didn't do. So I had to go and catch him and ... err ... held him for 2 weeks and then took him down the lawyer's office and made him retract his statement against my ex-wife.

Respondent LH, age 23, provided a more classic example of the unresolved conflict storyline as envisioned by Agnew (2006):

I haven't been involved in any violence since oh five years now...a revenge attack on someone who hit my best mate. He got hit on the head with a hammer and he was in hospital in intensive care for about four months...I didn't take kindly to it because he was like a brother to me...the police didn't do anything about it and I saw him walking down the street about four days later laughing and joking...couldn't take it, so I took the law into me own hands."

Likewise, when Respondent SS, aged 28, got fed up with his mother's boyfriend physically abusing her, he stepped in to protect his mother. He explains, "I don't get on with my stepdad. In fact, last time I saw him I beat him up actually. But that was ... I had a reason for it, he was beating up my mum, so I beat him up - quite badly, I put him in hospital.

As another example of this storyline, Respondent FM, aged 47, described how he assaulted a friend of his after his friend attempted to rape his wife:

It's what I'm here for, 'cos a bloke tried to rape her a while back. My friend tried to rape her, and I didn't know anything about this. And I got to find out about it, so when I found out, he was there in the house with [identifying name] and I was out getting a bottle, some drink, and ... she knew that I knew, so she locked me out. I said let me in, she said, no, you're going to start. I said no, I'm not, I said open the door and let me in. But she wouldn't let me in, so I booted the door down, and I said I'm here. He dropped the charges because he knew he was in the wrong.

Respondent MP, aged 23, provided another salient example of this storyline. He expressed how he and his friend encountered a group of individuals in a bar that his friend, who is a bouncer, had kicked out of the bar the week before and how this led to a fight:

Well, it was a nightclub and it was her 21st birthday and we were all out, and D's a doorman and he threw out the local football team the week before and 'cos he was out they got nasty and he got a glass bottle shoved in his face. So, of course, it all kicked off from there and it spilled onto the streets. There were 20 people fighting.

Respondent MH, aged 24, also provided an example of the *unresolved conflict* storyline when describing how he assaulted the man that his wife had been cheating on him with both times he went to prison:

But if she did sleep with someone else ... because I ended up beating someone up because they said the baby was theirs and all that, then I got in quite a lot of trouble for it. She says that she didn't, but I don't know, I don't believe her. Because I know for a fact that when I was in prison last year she was doing stuff with someone else, and just the fact I beat him up - and people don't tend to lie to you when you beat them up.

Storyline #3: A brief, but close involvement with a criminal other

A total of eight offenders expressed support for the *brief but close involvement with a criminal other* storyline. For example, when asked how he became involved in drugs which led him to start shoplifting to support his habit, Respondent PD, aged 23, stated, "I was smoking pot, met a couple of lads who were 19 at the time and they used to give me stuff, I started then, 13/14 I got into the... ecstasy and stuff, cocaine and that."

Hagan and McCarthy (1997) note that many individuals who run away from home temporarily come under the influence of "street families" or others who encourage crime. Respondent SJ, aged 45, who was abandoned by his mother as a newborn and suffered years of physical abuse from his father and brothers, explained how he ran away to Paris at the age of 14 to escape the abuse and met a group of Canadians who convinced him to transport illegal firearms over the border to Spain:

I bugged off abroad. It's what I used to do, I used to ... it was quite mad really, I used to whip down to [identifying place], to ports, and sneak on trucks and end up in Europe. And then I'd end up in Paris at like 14 years old, walking around Paris and France. I loved it, though, because it gave a sense of freedom to me, you know, I was away from it all. I ended up in Spain. I met these Canadians, they were all right, so we travelled through France, we were going down to Toulouse in the [identifying place] and then we got into Spain. They said you've got to do us a favour and I said what's that, and they said take these over the river - because in the Pyrenees you've got a big river going through the Pyrenees - and instead of going up to Andorra, through the checkpoint, in them days it was just like a fence, he said take this bag with a couple of guns in it, a couple of Brownings. So I've jumped in the river and gone through the Pyrenees. I got picked up by [identifying name] and ended up in a place called [identifying place] in the Basque country and did 4 years in there in Spain.

Likewise, Respondent TB, aged 38, describes how his brief romantic involvement with his ex-girlfriend led him to get involved with drugs and intimate partner violence:

I've never got in trouble like that. Until I met E, my ex-partner. She intimidated me, made me feel [inaudible] in front of people and that. From 1985 to 1996 not one bit of trouble did I get in with the Old Bill, the police and that. And then I started getting into trouble and getting caught. She used to like intimidate me, beat me up. I used to laugh at men beating up women (sic) and that, until you actually go through it yourself - it's a different matter then, isn't it? I [inaudible] giving it her back, but she really deserved it. She tried to get me [inaudible], made me paranoid, telling people

that I'd knocked all her teeth out. The dentist took all her teeth out because they were rotten through the smack and heroin. When I was first with her she went on it ... because she went into prison for a couple of weeks and when she come back out they stopped her script so she ended up doing the heroin and I went I'll have a bit of that and she went, no, you'll get hooked on it, and I went no. Next minute, bang, I'm hooked on it.

Another example of the *brief but close involvement with criminal others* is provided by Respondent AR, aged 22, who was introduced to alcohol and drugs at the age of 16 when he moved from a quiet town to a rundown part of Barnstaple:

I lived in a little village for a few years called West Buckingham, a good 10 miles from anywhere, so there wasn't much to do out there anyway. So we started off ... I got a few police cautions and that, just for like going out with air guns, nothing major. It all stemmed from when I moved to Barnstaple at 16. I moved into a council estate. It's like an estate, like a run-down estate, that sort of thing. And that's when I met up with mates and that and began drinking, that's when I was introduced to the drink and that. When I moved here and I saw 3 kids on the quay, little kids, 10 - 12-year-olds ... Smoking and drinking. I thought, where am I? I always kind of thought of the English as prim and proper before I moved here. And it was quite a shock. That's when I got my first offence, that was '99. Well, I still lived at my mum's house until I was 16, but she lost her house due to rent arrears, not paying the rent, I went to ... err ... some sort of housing thing where you've got to be in at 11 o'clock at night and that. I stayed there for a few months and then moved on and started lodging with people, mates and that.

Similarly, Respondent JA, aged 27, explains how he ran away to escape his abusive mother and was introduced to crack by two prostitutes he met:

When I got a little bit older, when I got to about 14, it was just the final straw one day, my mum was beating me and slapping me, and whereas before I would just cover up and take the beatings, this time I just blew my lid, I said don't fucking hit me no more. And my mum just went crazy even more and starting picking things up and hitting me. I just got away from her and run, and I just run like Forrest Gump, I just run and run, and I ended up in Southampton. And that was me. I met a couple of working girls and they introduced me to crack. I was only a kid, so they said to me come and stay - they felt sorry for me and said come and stay with us, and I stayed with them, didn't know they were working girls at the time. So I just went to their place and they came back with some crack and I just started smoking with them.

Storyline #4: A Brief Tempting Opportunity For Crime

Regarding the *brief but tempting opportunity for crime* storyline, one offender presented support for it. As Agnew (2006) points out, individuals may encounter tempting opportunities for crime that transcend particular situations and last from several hours to weeks. Respondent AB, aged 31, expressed how he learned how easy it was to shoplift from a group of teenagers he met after moving back to Plymouth:

I lived in Nottingham with [my aunty] and her boyfriend. And her boyfriend was gross and me and him did not connect at all, there weren't a bond there or nothing. So I kept myself to myself, I spoke to my aunty but I didn't speak to him. And I just

missed Plymouth and after about a year I came back to Plymouth and that's when it all started - mixing with the wrong people and all that. Hanging around with the wrong people, err ... that was it, and getting introduced into shops. You know ... how easy to nick something instead of buying it.

In this example, Respondent AB learned from a group of teens in Plymouth how to effectively shoplift and that the risk of getting caught for shoplifting, if done right, were low.

An Additional Storyline: Experiencing Acute Symptoms of Mental Illness

A total of 18 offenders substantiated the *experiencing acute symptoms of mental illness* storyline, making this the most common storyline in the present study although we acknowledge that the data used to explore the “storylines” framework oversampled offenders classified as being high risk of suicide so it is possible that the findings around this sixth major storyline are artificially inflated. As discussed previously, these negative mental health symptoms, such as depression, mania, anxiety, guilt, extreme anger, hallucinations or delusions, can be the result of (a) residual strain from abuse, neglect or bullying as a child or an adult, (b) the permanent loss of a conventional other, such as the death of a loved one, the permanently having your children taken away or a permanent break-up with a significant other and/or (c) an underlying mental illness. These negative mental health symptoms are often untreated, undertreated, self-medicated with drugs or alcohol or are alcohol-induced and ultimately lead to offending as one potential avenue to release these negative emotions. Interestingly, many of the respondents in the current dataset experienced this storyline not just once, but many times.

Respondent LR, aged 35, provides an excellent example of how losing his father led to him experiencing anger and depression, which led to offending: “When I lost me old man, I went on a bit of a rampage and (laughs) I took me mum’s car, which I shouldn’t have, and I went on like a 4 ½ hour police chase.” Similarly, Respondent SC, aged 37, states, “The day I went to the funeral... because I’d been off for a couple weeks off the drink. But when my father got killed – well, not killed, but died, what it is, we went back to the pub and (laughs) as I say, I got arrested again for drinking and driving, all sorts really.” In this example, Respondent SC explains how he had stopped drinking for several weeks but began drinking again to cope with the depression he was experiencing after his father passed away.

Respondent DR, aged 52, also discussed how losing his son sent him into a depression, which led him to go on a drug binge:

Err ... my depression with regards to losing somebody on 2 areas was when I lost my son. His mother and I had actually split up and I was able to get my mum at the time to phone her and ask her if there was a chance I could go to the funeral. I completely lost it - I’d promised I wouldn’t make a scene and I was actually at the church service ... I knew if I’d actually gone to the main funeral myself, I would have ... packed up. So I was so depressed I drove the car back to my mate’s place, parked it in the car park because I went on the binge.

Respondent CH, aged 22, who has a history of hearing voices and uses both drugs and alcohol to self-medicate, provides an example of how losing his grandfather led him to go on an alcohol binge, which ultimately led to a violent assault on his roommate:

When my grandad died. I just found him. Three days before September 11th, 2001, before 9/11, the Sunday before 9/11. 2001. Worst bit. Just came in one day drunk and he [his roommate] wouldn't let me in, so I punched, kicked the door, trying to get the door open, and my foot went through the glass and caught the person in the leg and he came up in bruising and charged me for assault and I ended up in jail for 4 months.

Respondent PR, aged 42, who has been diagnosed with schizophrenia and self-medicates with alcohol, discussed how a psychotic episode exacerbated by alcohol use led up to his assault on two police officers:

'Cos it was in the newspapers stating recovering alcoholic, 'cos they know I've got schizophrenia as well. So I don't know if that helps towards my case or not, I don't know. But it's just when I drink really, I've just got to stay off the old vodka, vodka and brandy. I can drink anything else, but just vodka and brandy is a no-no for me. I hear voices and things like that, but I don't know what they call mental health. I get angry if somebody pisses me off but...

Conversely, Respondent GC, aged 24, explained how he believes his negative mental health symptoms – specifically hearing voices – were drug-induced and led to offending:

When I was using amphetamines and everything, I become quite unstable mentally, and, and I started hearing voices through drug, um, psychosis and it was quite hard. Yeah, yeah it was, it was quite hard, but when I was using the drugs and that is why I don't want to go back to using the drugs because of the state...because of the state my mind was in, know what I mean, it really did... I went a bit nuts in the head, I was with my then girlfriend and, er, er, I pointed a toy gun at a policeman. Then the armed response turned up and I wouldn't put down the gun and I was telling them to shoot me, so they put me, um, they put me in a hospital for, er, a few days to do an evaluation.

Several respondents also noted experiencing negative mental health symptoms periodically as a result of abuse, neglect or bullying they experienced. Respondent AR, aged 22, provides a prominent example of how being bullied as a child and not sticking up for himself during that time informs his response to conflict in pubs, stating:

It's just a bit of bullying, isn't it? I used to like dodge parts of the school and that where people might be. Certain parts of the school where I knew certain people would be, I'd walk round them and miss that bit of the school just to avoid them. A lot of it was just words, but sometimes they'd grab hold of me and that. The words was worse really. As soon as I get in trouble now in the pub, I just hit 'em. I just throw a punch at them. And just go on drinking. But I think that might be why I fight so much now. So that they know that I can't be bullied.

Specifically, when Respondent AR, gets into disagreements at pubs, it brings him back to being bullied, making him angry and ultimately leading him to resort to violence to resolve the conflict and ensure that he isn't a target of violence as an adult. Agnew (2006) notes that individuals may experience more than one storyline at a time. The specific example above also fits with the *unresolved conflict* storyline.

A few respondents discussed how permanently losing custody of their children among other things, led them into a downward spiral back into drugs and crime. Respondent JA, aged 27, provides a relevant example of this:

When I lost my home, my 2-bedroomed flat, the build-up to me losing my 2-bedroomed flat, to me losing custody of my son. Err ... I don't know, this kind of world, and just get on with it, get on with destroying everything around me. Don't get me wrong, not like destroying ... like physically hurting people, not like that, just self-destruct for myself, just go back onto the drugs, end up staying in this place, that place, forget that I've got rent to pay.

Discussion & Implications

“Storylines begin with some event that is out of the ordinary, and this event temporarily alters the individual's characteristics, interactions, and/or settings for interaction in ways that increase the likelihood of crime” (Agnew, 2006: 119).

Agnew (2006) notes that a storylines approach to criminal behavior can lead to interventions to prevent crime and recidivism. The present study revealed that the *experiencing acute symptoms of mental illness* storyline was the most discussed in these offender narratives. Although Agnew (2006) acknowledges that other storylines exist, including *experiencing acute symptoms of mental illness*, he focuses his attention on what he contends are the five *major* storylines. Given this storyline's strong presence in the offender narratives discussed here and in other research, we recommend that *experiencing acute symptoms of mental illness* be considered a major storyline.

The *unresolved dispute* storyline was the second most frequently cited in these offenders' narratives. In fact, nine of the 35 offenders experienced this storyline and all nine turned to violence to resolve their dispute. In offering evidence-based interventions to alter this storyline and prevent crime, Agnew (2006) recommends teaching offenders conflict resolution skills. Additionally, a large body of research shows that cognitive behavioral therapy can reduce violence and offending for both adult and juvenile offenders (Lipsey, 2009; Laundenberger & Lipsey, 2005). Beliefs, attitudes and values affect the way individuals think and can impact how they view problems and cognitive behavioral therapy can help individuals replace distorted thinking and perception with prosocial thinking, which can change the individual's behavior. Characteristics of distorted thinking patterns can include poor problem solving skills and decision making, an inability to consider the consequences of one's behavior, an egocentric viewpoint with a negative view or lack of trust in other people, a hampered ability to accept blame for wrongdoing, an inability to manage feelings of anger and the use of violence and force as a means to achieve goals (Clark, 2010).

Furthermore, the *brief but close involvement with a criminal other* storyline came up in a total of eight offender narratives in the present study. In the current study, seven out of the eight respondents who exhibited this storyline explained how they were introduced to drugs and alcohol by older individuals as a teen and how this led to their involvement in crime. Examining this storyline within the context of the background and situational factors gives a more complete picture. Many of these respondents also noted that they were the victim of abuse or neglect at home and did not have any positive role models in their lives at the time. Research has long shown that crime-prone youth are more likely to come from families where parents are abusive or neglectful, provide harsh or erratic discipline, or exhibit marital discord. They tend to live in communities rife with drugs, crime, guns, and poverty, where positive role models and safe, constructive recreational opportunities are scarce

(Mendel, 1995). A large body of research has documented strategies to reduce these risk factors for delinquency and substance abuse in youth. Programs that strengthen family functioning, including teaching parents how to cope with stress, eliminate coercive parenting and reward positive behaviors has been shown to decrease involvement in substance use and delinquency (Terzian, Hamilton, Ling & Moore, 2009; Latimer, 2001). Involvement in high-quality afterschool programs has also been linked with decreased drug abuse and delinquency as they offer youth a safe place to go, thus reducing opportunities for delinquent and other risky behaviors during afterschool hours (Gottfredson, Gottfredson and Weisman, 2001). Similarly, youth development programs can help youth develop strong emotional and social competence (e.g. effective communication skills, problem-solving skills, self-efficacy, conflict resolution skills, emotional awareness, leadership skills, peer-refusal skills), which decreases the likelihood that youth will engage in substance abuse, delinquency and other risky behaviors (Durlak & Weissberg, 2007; Catalano, Hawkins, Berglund & Olson, 1998). Relatedly, research shows that youth who have positive relationships with adults and who receive mentoring in the context of a long-term supportive relationship are less likely to abuse substances, commit delinquent acts and be involved in other risky behaviors (Bandy & Moore, 2010; Tierney, Grossman & Resch, 1995).

The fourth most common storyline was a *desperate need for money*. In the present study, all six respondents who experienced this storyline did so because they needed money to support their drug habit. Furthermore, when examining the *experiencing acute symptoms of mental illness* storyline, numerous respondents noted that they used drugs to self-medicate and a few respondents discussed how they believed the negative mental health symptoms they experienced prior to engaging in offending were drug-induced. Additionally, many respondents admitted that abusing drugs/alcohol inhibited their ability to develop effective coping skills to deal with negative mental health symptoms in a constructive and healthy way. Indeed, a large body of research has documented that offenders are often under the influence of drugs or alcohol when they commit their offenses (Mumola, 1999), often have a history of substance abuse (Belenko & Peugh, 1998) and often commit crimes to obtain money to buy drugs (Mumola & Karberg, 2006). Numerous studies conducted in the United States, Great Britain and elsewhere have found that substance abuse treatment for prisoners who need it can be very effective at reducing drug use and recidivism upon release, especially if they include an aftercare component (Olson & Lurigio, 2014; UK Drug Policy Commission, 2008; Wexler, Melnick, Lowe & Peters, 1999; Field, 1998; Belenko & Peugh, 1998; Hiller, Knight & Simpson, 1999; Wexler, 1995). Research has also shown that correctional-based substance abuse treatment can be very cost-effective given that it reduces recidivism and reincarceration (Daley, Love, Shepard, Petersen, White & Hall, 2004). However, despite the fact that correctional-based substance abuse treatment programs can be very effective, many offenders who could benefit from treatment do not receive it. For example, a 2009 report by the National Center for Addiction and Substance Abuse (CASA) found that only 11% of inmates with substance abuse disorders received any treatment during their incarceration (CASA, 2009). Similarly, a study conducted by Mumola and colleagues (2006) found that only 15% of prison inmates who met the criteria for a substance use disorder received drug treatment. Given the fact that effective correctional-based substance abuse treatment can reduce both crime and cost to taxpayers, correctional-based substance abuse treatment programs should be expanded.

Many respondents also noted the difficulty in securing and maintaining employment as a result of both their criminal record and their substance use. For individuals with a criminal record, engagement in outpatient substance abuse treatment has been shown to not only increase employment, but also increase wages (Dunigan, Acedevo, Campbell, Garnick, Horgan, Huber, Lee, Panas & Ritter, 2014). However, even if they are able to refrain from further drug use, ex-offenders still face the stigma of a criminal record and this has

negative impacts on employment prospects (Visher, Debus & Yahner, 2008; Petersilia, 2003; Thompson & Cummings, 2010). The stigma of a criminal record is evidenced both formally in the explicit legal restrictions on employment for ex-offenders as well as implicitly in the reluctance of employers to hire ex-offenders (Uggen & Staff, 2004; Pager, 2003). In the United States there has been a movement to reduce the barriers to employment for individuals with a criminal record by implementing criminal record policy reforms. For example, 35 states and 150 cities and counties around the country have adopted a “ban the box” policy, which prohibits *most* employers from asking on an *initial* job application if the applicant has ever been convicted of a crime. The goal of these policies is to give individuals a fair chance at being considered for the job rather based on their skills and experience than being excluded from the initial pool of candidates because of their criminal record (Avery, 2019). Given the newness of most criminal record policy reforms, research on their effectiveness is somewhat limited (Avery, 2019). However, the studies conducted so far indicate that criminal record policy reforms both increase employment for and decrease recidivism of individuals with a criminal record (Craigie, 2017; D’Alessio, Stolzenberg and Flexon, 2015).

Interestingly, no evidence for a *temporary break with conventional others and/or institutions* storyline was found in these offender narratives. Given that the majority of the respondents in this sample were recidivists and had been to prison dozens of times, it is very likely that any ties to conventional others/institutions had been permanently severed long ago or had never existed in the first place. As Crouch (1993) notes, many individuals in prison have “little to no ties to the community or the dominant conventionality.” Indeed, many of the respondents in the present study discussed being a victim of abuse and/or neglect at home and that they did not have any positive role models at home. Another possible explanation for this is that it is difficult to detect breakdowns with conventional individuals especially (e.g. prosocial family members) because they often occur gradually. Furthermore, theories that focus on the influence of social bonds on offending tend to focus specifically on juveniles (e.g. Hirschi, 1969). In the present study, all respondents were adults so this may partially account for the lack of evidence of this storyline in the present study. While these possibilities are speculative, future research should continue to explore the viability of this storyline to different offender populations.

Limitations

The study has a number of strengths and weaknesses. We had 100% agreement to participate and a significant number were re-interviewed following release, adding continuity to the data. However, because this study was based on self-report data, it is subject to the limitations of self-report data, including the accurate memory and honesty of the respondents. Additionally, the interviews utilized for the present were intended to uncover mental health needs and help-seeking behaviors of inmates rather than offending behaviors explicitly and were largely unstructured. Thus, it is very possible that some respondents did experience some of these storylines despite not coming up in the interviews. Future research examining the storylines framework should utilize more structured interviews that specifically inquire about respondent perceptions of their offending behavior.

Generalizability is limited because the sample was drawn from a prison in South-West England that predominantly holds white British male offenders with sentences of less than one year. Additionally, because the original intent of the study was to investigate mental health needs, offenders classified as being high risk of suicide were oversampled as one-quarter of the sample had been flagged by prison staff as suicidal or high-risk of self-harm. Specifically, the study relied on a purposive, non-probability sample. It is therefore unclear to what extent our findings might relate to long-term offenders, minorities, women, and inmates not deemed high risk of suicide. The perspectives explored here, however, are illustrative of

those commonly referred to as 'revolvers' or 'churners', who frequently move through the prison system. Future research should continue to test for the presence of the major storylines developed by Agnew (2006) on different populations (i.e. male offenders versus female offenders; juveniles versus adults; property versus violent offenders) as well as consider the possibility of adding additional storylines to this existing framework.

Conclusion

Agnew (2006) advanced the concept of "storylines" in an effort to expand the categories of variables considered in the criminological literature. Although this framework provides diverse causal mechanisms for criminal behavior, virtually all theories assume that background and/or situational factors play a fundamental role in crime. Agnew (2006) points out that although background and situational factors are integral to criminological theory, individuals also experience life events that may temporarily change their background characteristics or the kinds of situations they encounter that increase the likelihood of crime. In the present study, we found support for four of the five major storylines as developed by Agnew (2006). Additionally, based on the present study, we recommend that experiencing acute symptoms of mental illness be considered a sixth major storyline.

Declarations of Interest

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