

Step Up Programme
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Programme Evaluation
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Executive Summary

The Step-Up programme has been developed to assist offenders to develop the skills necessary to successfully utilize the education, training and other resources available to obtain employment and become more personally and economically stable. The programme focused on helping participants improve their self-confidence, resilience and psychological well being which are seen as foundational to their moving into employment and self-sufficiency.

While the programme addressed core skills such as listening, communication, decision-making, relationships, self-esteem, confidence, and teamwork, the most fundamental core issue to be addressed by the programme for these women was their mind sets - their thinking - their attitudes – their self-defeating, dysfunctional belief systems. Behavior is precipitated by thought therefore the behavior does not change until the thinking changes. What was needed was to shift women’s state of mind to a healthier level reducing stress and anxiety, anger and self-doubt and engaging their innate resiliency, common sense and wisdom.

Utilising an inside-out, psycho-educational approach to behavioural change, the programme taught the women to understand about how they create their own feelings, moods, beliefs systems and states-of-mind via the use of personal thought. This understanding was seen as the key change agent.

This report summarizes an evaluation of the relationship between the “Step-Up Programme” training and the subjective well-being of the participants as indicated by resilience, self-confidence, general well-being and Thought recognition. The evaluation answers the question “Did the training influence subjective well-being, resilience, self-esteem and the understanding of the function of thought?”

Participants completed four surveys measuring resilience, subjective well being, self-esteem and understanding thought. Additionally, at the conclusion of the training participants were asked to respond to specific questions regarding their experience of the training called Journals..

Upon review of the data, the answer to the evaluation questions is “Yes,” learning about how individual well-being is created moment to moment did result in the participants experiencing improved levels of subjective well-being which also created positive changes in both their personal lives. They became more aware of their own feelings and more tolerant of and less reactive to others and noticed shifts in their own levels of well being, feeling less stressed, calmer and more reflective. They began to recognize the connection between thoughts and experience. Changes in the desired direction were found for all domains surveyed.

Summary Findings

Survey data measures:

- Statistically significant improvement for WHO-5 well-being
- RS-14 (self-esteem) overall average 23% increase in scale scores
- RSES (resilience) overall average 32% increase in scale scores
- WHO-5 (well-being) overall average 36% increase in scale scores
- 100% of the pre/post surveys data showed improvement in the three domains of resilience, self-confidence, well-being
- 85% showed improvement pre/post test scores for understanding thought

Rosenberg Self-Esteem Scale (RSES) and Resilience Scale (RS-14) results suggest participants:

- Feel more confident, more capable, better able to handle difficulty, better able to handle multiple tasks, consider themselves more reliable, no longer take things personally, feel life has more meaning and are more satisfied with themselves.

WHO-5 Well Being Index results suggests participants:

- Feel less stress and more calm and relaxed; experience more joy in life and find life interesting and feel better physically.

The SBI-34 Understanding Thought Scale results suggest participants:

- Feel better able to manage change; are more forgiving and less frustrated; feel life is less difficult; like themselves more, get over things quicker and feel less affected by their past.

"I learned thoughts are a state of mind. We only feel the way we do because of the thoughts that we have placed in our head. If we didn't focus on the thoughts we had then we wouldn't have mixed feelings and do things that we know we shouldn't do. The class has changed the way I think and the way I feel." - - Programme Participant

I. Introduction

In times of limited financial resources it is widely acknowledged that one of the greatest concerns of the criminal justice systems is lowering the recidivism rates. The AIM for Women Programme is a programme to address this concern. While employment is recognized as perhaps the most critical component to reducing re-offend rates, it is understood that it is not enough to help someone get a job but they must be able to keep the job. Therefore, it has also been recognized that “soft skills” play an important part in reducing the re-offend rates. They have identified skills such as self-confidence, resilience and general well being as pre-requisite to moving women offenders into employment and self-sufficiency.

The Step Up Programme takes this one step further. This programme is about helping individuals take responsibility for their own lives. But you cannot just mandate that people be responsible. People will innocently continue mired in their own dysfunctional habits, attitudes and thoughts unless they gain the understanding to change. This programme is an intervention that addresses the most fundamental variable in this cycle of criminality, poverty and welfare dependency - peoples thinking, their attitudes, beliefs, states of mind.

Before any more money is spent on training and counseling and job placement, a core course about how we function psychologically - how we think - a core course to address negative self-defeating thinking ,needs to be taught. Understanding the importance of one’s state of mind and how that impacts your behavior is critical to behavioral change. To measure the impact of the training pre and posttest were given to the women to measures changes in well being, resilience, self-esteem and understanding thought.

II. Participant Confidentiality

The confidentiality of all the individuals who participated in this evaluation has been maintained. Only the facilitator, Janet Lindsay, knows any identifying information. Only the anonymous 4 Letter Identifier was provided to the evaluator Linda Ramus. No identifying information will be provided in any report. Trends in individual scores on any of the evaluation surveys will be reported to the individual if requested. Informed consents were obtained from all participants.

III. Training Intervention

The Step UP programme consisted of eight weekly group sessions each session lasting approximately 1.5 hours. An initial induction and assessment was followed by the group sessions that focused on the 3 Principles of mind, thought, and consciousness, the role and function of thought, states of mind, and the connection between feelings, emotions, moods and thought. The groups focused on understanding your past; healthy relationships and personal well being; listening and communication

and stress and anger. Issues the women themselves brought up also influenced what was discussed in a group session. The facilitator, recognizing the innate wisdom of each individual, would often directed the women to look to themselves for their answers. In addition to the group sessions, the participants were also provided eight weekly 1:1 coaching calls to consolidate the work completed in the groups and provide mentoring and coaching as needed.

The training outcomes would be healthier relationship, greater self-esteem and self-confidence, less stress and more mental clarity. In addition they would experience greater subjective well-being which has been defined as “the individual’s current evaluation of her happiness .. an individual’s emotional and cognitive interpretation and evaluation of one’s own life.” (Joshi, 2010). It is how one thinks about one’s life satisfaction in general and more specifically how one feels in specific areas of life such as relationships and work. As such it is a generalized indicator of a person’s state-of-mind would be better prepared to enter employment.

IV. Data Collection

Quantitative data was collected using the Resilience Scale RS14, Rosenberg Self-Esteem Scale (RSES), WHO-5 Well Being Index and SBI-34 Understanding Thought Scale. Table 1 provides the schedule of testing. There was approximately 2 months between the pre and post tests.

Pre-Test	Nov. 8-14, 2012
Post-Test	Jan 30-31, 2013
Demographic Data	Nov 2012
Journal Entries	Nov 2012 – Jan 2013

In addition basic demographic data was collected for all participants. The data was collected at the beginning of the programme.

Gender	Female				
	10				
Age	18-20	21-25	26-30	31-35	36-40
	2	1	4	1	1
Ethnicity	British	White	White Black Carib.		
	4	3	3		
Marital Status	Never Married	Married	Divorced		
	7	1	1		
Education	Certificate	NVQ Level 2	NVQ Level 3	GCSE	
	1	2	2	3	
Number Children	0 Children	1 Children	2 Children	4 Children	
	3	5	1	1	
Employment	Currently Employed	Unemployed	Never Employed		
	3	6	1		

V. Evaluation Methodology

Given the training objectives, the evaluation methodology was designed to assess the participants' self-reported states of resilience, self-esteem, well being and understanding of thought. It was decided a mixed method, pre/post test measure design would provide a more comprehensive understanding of training impact. Quantitative data was collected prior to the start of the first training and at the conclusion of the training. The narrative/journaling data was to be collected concurrent with training.

- WHO-5 Well Being Index
- RS-14 Resilience Scale
- SBI-34 for Understanding Thought and inside-out nature of reality
- Rosenberg Self-esteem Scale (RSES)
- Journals

The WHO 5-item Well-Being Index (WHO-5) Developed by World Health Organization Collaborating Center for Mental Health Frederiksberg General Hospital, the WHO-5 is a short screening instrument for monitoring emotional well-being and the detection of depression in the general population. It is comprised of 5 positively worded items related to positive mood, vitality and general interests. Each of the five items is rated on a 6-point Likert scale from 0="Not present" to 5="Constantly present." The raw scores range from 0 to 25, 0 representing the worst possible well-being and 25 representing the best possible quality of life.

RS-14 The Resilience Scale (RS) was developed to evaluate the levels of resilience in the general population. The RS-14 is composed of 14 items and uses a 7 point Likert scale with items answered from 1-Strongly Disagree to 7-Strongly Agree. A Raw score of 98-82 indicates "Very high" resilience tendencies, 81-64 "High" resilience tendencies, 63-49 "Average," 48-31 "Low" resilience tendencies, and 0-14 "Very low" resilience tendencies. Resilience is considered important to individual well-being because it is seen as the ability to successfully cope with change or misfortune and find meaning amidst confusion and tumult. The RS-14 was developed by Dr. Gail Wagnild, and Heather M. Young.

SBI-34. "Understanding Thought and Inside-Out Nature of Reality" is a 34 item instrument using a 4 point Likert scale from Agree to Disagree. It has 9 positively worded and 25 negatively worded statements. The SBI-34 is used to assess changes in participants understanding of their use of thinking as it relates to success, clarity, resiliency and moods. It is used to assess changes in thoughts, feelings, perceptions, and/or behaviors as a function of changes in understanding the nature of thought. The SBI-34 is still under development. However, the results obtained from pilot testing the SBI-34 have shown good reliability. The SBI-34 was developed by James Shumway, PhD., Judith Sedgeman, PhD., Scott Cottrell, PhD. and Deborah Larimer, MA

Rosenberg Self-Esteem Scale (RSES) The RSES is a ten-item Likert scale with items answered on a four-point scale — from strongly agree to strongly disagree. Five of the items are positively worded statements and five are negatively worded. The scale measures stated self-esteem by asking the respondents to reflect on their current feelings. The Rosenberg self-esteem scale is considered a reliable and valid quantitative tool for self-esteem assessment. The scale was developed by Dr. Morris Rosenberg.

Journal Entries. To get a more complete picture of the impact of the training, the participants were asked to described in their own words what impact the training had on them. Using a guided inquiry approach, the participants were asked to respond in writing to four open-ended questions concerning their individual experience of the training. Between each class they were to reflect on and respond to 4 questions: 1) What did you learn that was new for you? 2) What did you learn that was helpful to you and why? 3) What was the most significant thing that you learned and why? 4) Has anything changed for you in your life regarding relationships, how you are feeling about yourself, how you are handling challenges and decisions and

how you are feeling about life in general? The questions were developed by the trainer and evaluator.

VI. Data Analysis

It is unfortunate that with the exception of one participant, the participants were unable to maintain their journals. Reviewing the journals of the one participant it is apparent that the journals would have given us a better understanding of just how the training impacted them. The following is complete journal for this one participant.

Participant Journal Entry

*I learned to take others feelings into consideration. What has changed for is that I leaving my boyfriend.
WooHoo*

I learned thoughts are a state of mind. We only feel the way we do because of the thoughts that we have placed in our head. If we didn't focus on the thoughts we had then we wouldn't have mixed feelings and do things that we know we shouldn't do. The class has changed the way I think and the way I feel.

I realized I have more confidence than I thought I did. Things are looking up for me now. My heads becoming more straight and I feel like I have got my confidence back and there is so much more I want to do with my life now. I'm now single and depending on myself and thinking for myself. I am no longer someone's robot.

I learned the past should stop being thought about so it can be dead and gone so we are able to move forward with our lives and only think positive things so that we can not only think different but feel different within ourselves and make the future better.

I have learned to listen to others and relate to what they are saying and learning how to control my feelings in the right way.

I have learned how to overcome your fears by accepting them.

I have learned what makes a great relationship - what is the most important thing that makes up a relationship.

I learned how much I can actually change as I have never realized how much the relationship between me and my mum means so much and that love is unconditional.

I'm learning to be more independent.

While this one journal entry gives some insight into what the participants were learning and how they were changing, the narrative data was to be only a piece of the evaluation. The following is the analysis of the quantitative data provided by the four surveys.

At pre test we had a sample size of N=10. However, at post test we only had 7 paired for the RS-14, WHO-5 and SBI-34 and 5 paired for RSES. With this very small sample size, we used the Wilcoxon paired signed rank test to test for difference pre/post. At the 95% confidence interval, for the WHO-5, the Wilcoxon paired signed rank test shows that the observed difference between pre and post measures is significant for this measure of well-being. Responses were analyzed by summing the numerical value of the responses to each survey item thereby yielding one score per participant for the entire scale – an aggregate analysis.

	WHO-5		SBI-34		RS-14		RSES	
$\alpha = .05$	Pre	Post	Pre	Post	Pre	Post	Pre	Post
Mean								
N=	7		7		5		7	
W value	28		2		21		11	
	Significance		No significance		No significance		No significance	

In addition to the W value we also looked at trends, directions of change and proportion of changes. While significance was not found for the SBI-34, RSES or RS-14, the observed change trended in the desired direction for all three. Table 4 represents the scale scores for the surveys. In all but the SBI-34 a higher score on the post test represent a positive change. Because 25 of the 34 items on the SBI are negatively worded statements, a negative score indicates change in the desired direction.

	RS-14			WHO-5			SBI-34 Pre			RSES Pre		
	Pre	Post	Change	Pre	Post	Change	Pre	Post	Change*	Pre	Post	Change
1	48	61	+27.1%	44	60	+36.4%	104	113	+8.7%	11	16	+45.5%
2	94	None	--	100	None	--	107	None	--	19	None	--
3	72	79	+9.7	40	56	+40%	104	93	-10.6	14	21	50%
4	75	75	0%	64	84	+31.3%	87	83	-4.6%	19	None	--
5	57	73	+28%	44	56	+27.3%	94	92	-2.1%	15	12	-20%
6	62	82	+32.2%	60	76	+26.7%	94	83	-11.7%	13	None	--
7	87	None	--	64	None	--	71	None	--	22	None	--
8	72	78	+8.3%	28	36	+28.6%	56	54	-3.6	15	17	13.3%
9	39	75	+92.3	44	60	+36.4%	102	96	-5.9%	6	15	150%
10	56	None		44	None	--	98	None	--	13	None	--

Note: For the SBI-34, a negative number indicates change in the desired direction.

In reviewing the data, one participant’s scores seem to stand out. Participant No. 9 on the RSES shows a change of 150% and on the RS-14 shows a 92.3% change. Upon re-examination of her RSES survey, she did made some significant change. On item “I take a positive attitude toward myself” she went from a “Strongly Disagree” to “Agree.” On item “All in all I am inclined to feel that I am a failure” she went from “Strongly Agree” to “Disagree.” On the RS-14 her responses showed 3 to 4 point change from “Strongly Disagree” to “Strongly Agree” – “I feel proud that I have accomplished things in life,” “I feel that I can handle many things at a time,” “I am determined,” “I can get through difficult times because I’ve experienced difficulty.”

To better understand the results we also have plotted the frequency of responses by item for each scale. The following is an examination of the surveys by individual item to see where the changes occurred. We have tallied the number of responses for each possible response. We are only showing responses for those for which we have a matched pre/post. Therefore in some cases there are only 4 or 5 matched responses. Using this type of analysis we can see how they shifted in the direction of greater well being. Because we can see the questions/statements themselves, it tends to give more of a voice

to the participants.

Table 5: RS-14 Resilience Scale Scores Summary														
1-Strongly Disagree (SD), 4-Neutral, to 7-Strongly Agree (SA).														
	N=7							Post						
	Pre													
	1	2	3	4	5	6	7	1	2	3	4	5	6	7
1. I usually manage one way or another	1			1	2	2	1				1	1	5	
2. I feel proud that I have accomplished things in life	1	1	1	2		1	1				1	3	1	2
3. I usually take things in stride		2		1	3	1				1	2	3	1	
4. I am friends with myself	1	2		1	3					1	2	3	1	
5. I feel that I can handle many things at a time	1	1	1	1	3						3	2	2	
6. I am determined	1		1		3	1	1				1		2	4
7. I can get through difficult times because I've experienced difficulty	1		1	1	1	1	2				1	1	3	2
8. I have self-discipline			1	3	1	2				1	1	3		2
9. I keep interested in things			2	2		3			1	1	1	1	2	1
10. I can usually find something to laugh about	1		1	1	3	1						3	2	2
11. My belief in myself gets me through hard times		2	1	3	1	1					2	3	2	
12. In an emergency, I'm someone people can generally rely on	1			1	2	2	1					2	3	2
13. My has meaning		1	1		2	3					1	2	2	2
14. When I'm in a difficult situation, I can usually find my out of it			1	3	2	1					2	3	2	

The table shows:

- There is a decided shift from negative responses to more positive responses.
- Post test there are no “Strongly Disagree responses compared to 8 at Pre.
- There are 17 “Strongly Agree” responses Post compared to just 6 at Pre.
- At Pre test there were 27 negative responses versus 5 at Post.
- Post training the participants appear to feel more self-confident and positive.

Table 6: Rosenberg Self-Esteem Scale (RSES) Scale Score Summary									
Strongly Agree (SA), Agree (A), Disagree (D), Strongly Disagree (SD)									
	N=5				Post				
	Pre								
	SA	A	D	SD	SA	A	D	SD	
1. On the whole I am satisfied with myself		3	2			4	1		
2. At times, I think I am no good at all	1	2	1		2	1	1		
3. I feel that I have a number of good qualities		3	2			5			
4. I am able to do things as well as most other people.		5				5			
5. I feel I do not have much to be proud of	2	2	1			3	1	1	
6. I certainly feel useless at times	1	4				2	2	1	
7. I feel that I'm a person of worth, at least on an equal plan with others		1	3			4			
8. I wish I could have more respect for myself	2		3			2	2	1	
9. All in all, I am inclined to feel that I am a failure	1	2	1				3	1	
10 I take a positive attitude toward myself		1	2	1		3	1		

The sample size was smaller for the RSES, N=5. In addition some of the responses to items were left blank reducing even more the matched pairs available for comparison. However, with the exception of item No. 2, the responses all trend in the desired direction although not as clearly as in the RS-14. The table shows participants:

- Feel more self-respect and positive about themselves and equal to others
- Feel they are not failures and have more to be proud of

Table 7: WHO-5 Well Being Scale Score Summary										
	Pre					Post				
	All of the time	Most of the time	More than ½ the time	Some of the time	At no time	All of the time	Most of the time	More than ½ the time	Some of the time	At no time
N=7	5	4	3	2	1	5	4	3	2	1
1. I have felt cheerful and in good spirits			3	4			4	2	1	
2. I have felt calm and relaxed				6	1	1	2	2	2	
3. I have felt active and vigorous	1	2	1	2	1		3	2	2	
4. I woke up feeling fresh and rested		2	1	2	2		1	2	3	1
5. My daily life has been filled with things that interest me			2	2	3		3	1	3	

The WHO-5 was the only survey that showed significance using the Wilcoxon. Well being is an important indicator. Studies indicate that people with high levels of well-being engage in more challenging, goal directed behaviors with a larger sense of purpose in life. In general people with high levels of well being are more in harmony with themselves and others. In a high state of mind, people express less stress and anxiety, are more creative, experience improved decision-making and function more efficiently. As with the previous two tables, we visually see the shift to more positive responses.

- There were 2 times as many positive responses at Post test (25) as at Pre test (12).
- 5 of the 7 respondents said they felt calmer and more relaxed more than ½ the time versus zero at Pre test
- Participants indicated they physically felt better after the training.

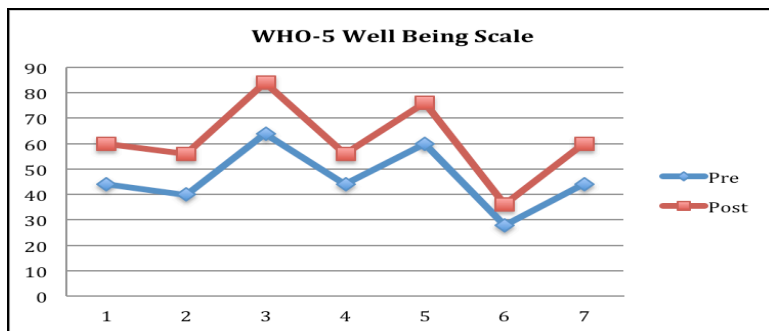
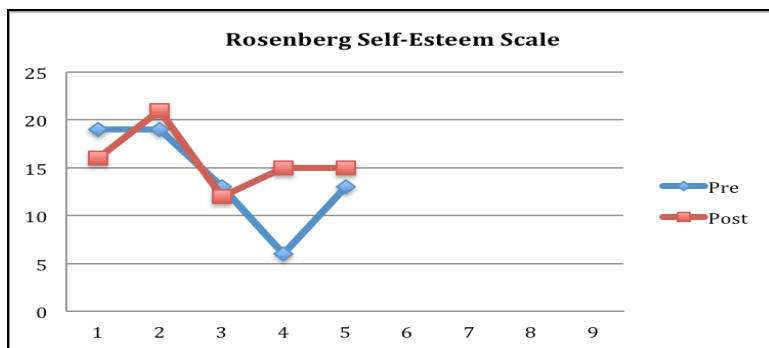
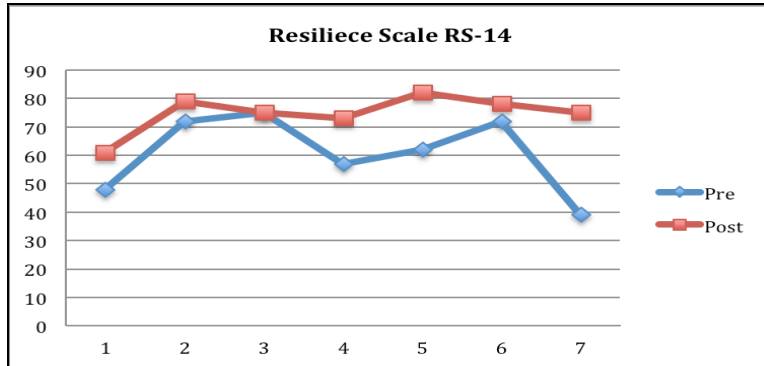
Table 8: SBI-34 Understanding Thought Scale Score Summary								
4=Agree; 3=Tend to Agree; 2=Tend to Disagree; 1=Disagree	Pre				Post			
N=7	4	3	2	1	4	3	2	1
2. I trust my own wisdom	1	4	1		1	6		
4. When someone hurts me, I know I will get over it	2	1	3	1		4	2	
9. I know I will be ok	1	4	2		1	6		
12. I see humor in life	2	4	1		1	6		
16. I don't stay frustrated	1	3	3			5	2	
19. Change is easy for me.	1	1	4	1	1	3	3	
23. When I feel stressed, I bounce back quickly	1	3	1	1		5	1	
27. I laugh easily	1	4	1		4	1	1	
31. I enjoy life		3	2	1	1	3	1	
The following items are negative statements. Lower scores indicate improvement								
1. It's hard for me to forgive	4	1	1	1	1	2	3	1
3. I am easily upset	1	3	1	1		2	3	1
5. My life is difficult	1	4	2			2	5	
6. I struggle to avoid mistakes	1	3	3		1	3	3	
7. Making decisions is hard work	1	4	2		1	3	3	
8. My life is boring	1	4	2			1	5	1
10. I feel the way I do because of stuff that happens around me	3	2	1	1	1	5	1	
11. I get nervous when I have to make choices	1	4	2		1	3	3	
13. When I can't figure something out I get frustrated	3	3	1		3	2	2	
14. Life is stressful	4	2	1		1	5	1	
15. I can't escape my past	5	1	1			5	2	
17. I've got a lot on my mind	3	3	1			4	3	
18. I worry	2	5			1	5	1	
20. I feel out of control		2	4			1	4	1
21. I have difficulty getting over things	3	2	2		1	3	2	1
22. I feel resentful		1	5			2	3	1
24. I worry about my life	2	3	1		2	3	1	
25. People take advantage of me	2	2	2			4	2	
26. My failures frustrate me	3	3			2	4		
28. I dislike being alone	5	1			4	2		
29. If I don't like something, I get upset		2	3	1		2	4	
30. I get annoyed at other people's mistakes		2	3	1		1	5	
32. I don't like myself	2	2	2			2	3	1
33. Other people's demands upset me		2	3	1	1	2	3	
34. I get disappointed		4	2		1	3	2	

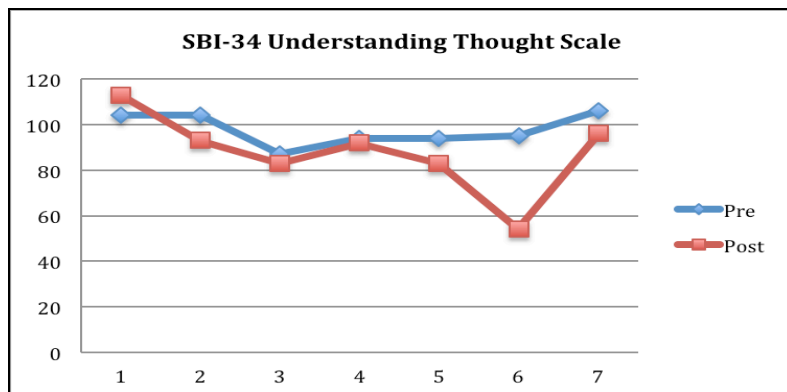
While the data trends in the desired direction, the SBI-34 tends to show the least amount of positive change. The SBI-34 was developed to assess how much people perceive outside events do not determine their experience and how they feel about themselves and their circumstances. Positive changes are more apparent with the negatively worded items suggesting the training had a positive impact changing how they understand personal thought as the source of their experience. After the training Post test survey results indicate participants:

- Are not as easily upset after the training
- Are More positive about life – see life isn't so difficult
- See that outside circumstance are not responsible for how they feel
- Are not as annoyed by other people
- Less troubled by their past
- Feel life is less stressful

Trends

A good way to evaluate data is visually look at the direction in which the numbers move. The direction of the scale scores suggest that the participants' well-being improved after the training. When we look at the data graphically, the trends for all four domains appear to be in the desired direction for change.





VII. Conclusion and Discussion

More recently the field of psychology has shifted its focus from illness to health. Out of this shift in focus has emerged the field of positive psychology. Positive psychology, however, continues to focus on outside circumstance and see well being as contingent on external circumstances. Therefore treatment or interventions focused on changing those circumstances or putting something back into the individual. The individual is not seen as possessing innate resources to overcome external challenges. Traditional approaches see the need for multiple interventions targeting each deficiency. This upon examination often appears overwhelming and unrealistic due to limited time and resources.

Step Up proposed that increased self-awareness is the key intervention to address the numerous perceived deficits. Self-awareness about states of mind and thought is critical to changing behaviors and old habit. Understanding the importance of one's state of mind and how that impacts your behavior is critical to behavioral change. A simple understanding of how thought works to create our moment-to-moment experience leads people to naturally engage healthier thinking, experience greater self-confidence, exhibit resilience, have better relationships and live with less stress, anxiety and anger. (Bond 2007, McMahan-Woneis 2002, Sedgeman 2008) The philosophy of this approach regarding living a crime and drug free life, is to connect each person to his/her innate health or wisdom and common sense.

The focus of this approach changes one's fundamental understanding about experience. No other model does this - but this is key. This model sees experience, or our personal reality, as created by our free use of thought. The thinker creates her reality via what she is thinking moment to moment. This is different but it is the key to the changes experienced by any participant. An insight into this simple concept changes everything. The prevailing understanding is that the external world acts on us and determines our experiences. Therefore you have to change or accommodate or put up with the outside world. That can be overwhelming. But seeing how a simple shift in thought will change how a person experiences those external circumstances is freeing.

Evaluating this type of "soft skills" training is not clear-cut. The surveys used are subjective, asking participants to rate themselves, their feelings and emotions. Most survey instruments used are based on Likert scales which are subject to several biases. Among them is the inability of participants to adequately discriminate how they feel. At pre test participants may initially rate themselves highly and then find that their ratings drop as they become more self-aware. The ratings

may appear to improve only slightly or in some case appear to drop. This may not represent regression but rather be an indicator of increased trust and more self-awareness which are positive developments. Additionally answers may be influenced by the individual's mood, the time of day (tired, sleepy) and their educational level and whether they are mandated to the training. With this type of client trust is key. So one key to base lining may be taking the time to establish trust before administering the pre test.

Because of the small sample size it is difficult to generalize about the findings. Additionally, because there is no follow-up data yet available at 6 to 12 months post programme, we cannot say this programme reduced recidivism rates and increased employment and employment retention. Additional research is needed to answer the research this question. However, overall the data indicates that the programme had a positive effect on the women in the 4 domains studied and suggests that the programme should continue to be provided to female offenders.

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