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“I don’t really see any kind of change” – multi-perspective analysis of a circle of support and accountability for young people who have previously demonstrated harmful sexual behaviour

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ABSTRACT

It is estimated that young people commit between 20% and 60% of sexual offences against children. While social isolation is a recognised risk factor for harmful sexual behaviour in young people, strong childhood attachments, developing social skills and belonging to peer groups are key protective factors. Community Circles of Support and Accountability (CoSA) is a community-based intervention that was originally developed for adults with sexual convictions and has now been adopted with young people who display harmful sexual behaviour. CoSA directly addresses issues of social isolation by providing individuals (known as Core Members) with a circle of social support made up of volunteers, professionals and a coordinator. There is now an established evidence base for CoSA with adults; the current study aims to explore the experience of a young person’s CoSA. Interviews were conducted with a Core Member, their guardian (grandmother), CoSA volunteer and the CoSA Coordinator. Multi-perspective interpretative phenomenological analysis was used to analyse the data, and three superordinate themes were established: (i) Contested self-change, (ii) Negotiating relational boundaries and (iii) Toward “normalcy”.

PRACTICE IMPACT STATEMENT

This research highlights the difficulties and complexities in working with this client group and sustaining the intervention’s positives. It highlights that sustaining treatment gains without increasing the social capital and context in the individual’s wider world can be challenging and can limit full participation within the intervention. The research demonstrates the importance of helping the Core Member experience safe, bounded and meaningful relationships.

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Introduction

Harmful Sexual Behaviour (HSB) is a term used to describe inappropriate sexual behaviours. It is often the preferred language when reporting on actions demonstrated by young people under the age of 18 (Wiggins et al., 2013), as it helps to prevent negative labelling and stigmatisation (Azoulay et al., 2019) of young people. However, the available evidence suggests that young people perpetrate between 20-60% of child sexual abuse (see, e.g. Malvaso et al., 2020 and Campbell et al., 2020). It

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is therefore important to produce cost and clinically effective approaches to manage HSB in adolescents (Fonagy et al., 2015). A qualitative systematic review of young people's interventions for HSB by Campbell et al. (2020) highlighted five key themes in successful YP interventions: the relationship between the young person and those involved in delivering the intervention, the role of parents/carers, the context in which the HSB took place, the YP learning how to share information about their offence appropriately to others and the importance of equipping YP with skills, such as social skills, self-esteem and self-efficacy in addition to skills relating to more focused areas such as anger management, and identifying triggers to them committing HSB.

One prevalent form of child sexual abuse perpetrated by young people is sibling sexual abuse (Yates, 2017). Sibling child sexual abuse can be broadly divided into three types (1) normative sexual interactions with siblings – behaviour between young siblings that exists within expected developmental norms; (2) inappropriate or problematic sexual behaviour involving siblings – behaviour between siblings that fall outside developmental norms, and which may cause developmental harm to the children involved; (3) Sibling sexual abuse – behaviour that causes sexual, physical and emotional harm, including sexually abusive behaviour which involves violence (Yates, 2017; Yates & Allardyce, 2021). Children who have sexually abused a sibling may often have experienced abuse and trauma themselves. Research has shown that pathways into – and out of – these behaviours are very different for children and for adults. These children are not “mini-adult sex offenders”. Such abuse is commonly experienced as a crisis within the family, and the ripple effect having a devastating impact on the family (Yates & Allardyce, 2021).

Young people who display harmful sexual behaviour experience high levels of trauma and abuse (Hallett et al., 2019). Due to these adverse childhood experiences, many young people who display HSB should be viewed as at long-term risk for a range of issues, including mental health disorder, drug use, and suicide (Norman et al., 2012). Further, insecure interpersonal attachments caused by abuse can play a substantial role in the development of HSB and poor sexual boundary management (de Bruijn et al., 2006; Zaniewski et al., 2020). Gorden et al. (2021) highlighted that acquiring strong attachments and meaningful relationships was important for desistance for those young people who display harmful sexual behaviour. In addition, finding a place within a social group or network, belonging, hope for the future and being able to find positives in negative events are protective factors for individuals with a sexual conviction(s) are important for desistance of harmful sexual behaviour (De Vries Robbé et al., 2015; Farmer et al., 2012).

As well as experiences of trauma, young people with harmful sexual behaviour have a diverse range of psychological needs. van Outsem et al. (2006) reported that adolescents with HSB were significantly more likely to experience lower levels of self-esteem (see also Seto & Lalumiere, 2010), emotional loneliness, external locus of control, and poor social networks (Gorden et al., 2021). Campbell et al. (2020) found social isolation to be prevalent in young people during the period in their life when perpetrating harmful sexual behaviour. Social isolation is a recognised risk factor for harmful sexual behaviour in young people, and it is vital for intervention to target it effectively (Hackett, 2010). Indeed, for intervention with HSB, the emphasis should be placed on “lasting social anchors” in the young person's life (Hackett et al., 2012, p. 3).

Circles of Support and Accountability (CoSA) is a community-based programme that is predominantly focused on helping adults who have been in prison for a sexual offence, to manage their risk of harm and safely integrate back into society. These individuals are known as Core Members (Wilson et al., 2009), and they are supported by an inner Circle of between three and seven trained volunteers and an outer Circle of trained professionals, overseen by a coordinator. CoSA are now running internationally, as well as in prisons, to support the transition from custody to community (Azoulay et al., 2019; Kitson-Boyce et al., 2019). The relational aspects of CoSA are related to protective factors as they can create a sense of belonging among core members (Blagden et al., 2018; Kitson-Boyce et al., 2019; Richards, 2020) and thus help service users to manage their own risk and desist (McCartan & Kemshall, 2020). As such, research has found that participation in a CoSA leads to significantly lower rates of violent, sexual and general recidivism (Clarke et al., 2017; Duwe, 2018; Wilson et al., 2005).

Young People's Circles of Support and Accountability (YP CoSA) are a relatively recent adaption of the Circles model. They are delivered by a small number of services across the UK, including the Safer Living Foundation charity (SLF) and Circles South West (Azoulay et al., 2019). Similar to adult CoSA, the Core Members are supported by volunteers with multi-agency input, with referrals to YP CoSA coming through a range of channels, but primarily through children's services when these services can no longer support the YP through lack of capacity and high level of need but nevertheless have concerns that the YP is still in need of support. Support is focused on reducing their risk factors of (re)offending, including social isolation, low self-esteem and favourable attitudes towards crime. This prosocial intervention aims to provide the young person with the social network and skills to scaffold their reintegration into the community whilst managing any risk (Circles South West, 2021). As such, the Coordinators seek to improve social confidence in the YP (through the meetings with volunteers) and help identify and engage in hobbies and activities in which the YP expresses an interest. For example, the YP might express an interest in role-playing games, and a couple of the volunteers would accompany the young person to a group role-playing evening in the local town centre. Not having to go alone to events such as these both motivates the YP to try something new, but also means that the experience is less intimidating for the YP. Ideally, the volunteers would accompany the YP until they are confident to attend such social events alone. The emphasis on CoSA for young people is socially driven and welfare orientated and should not focus on risk (Hillyard, 2017). It is also essential that YP CoSA providers appreciate the developmental and cognitive differences between young people and adults and do not treat young people as mini adults, which is often the case with interventions for young people with harmful sexual behaviour (Caldwell, 2010; Hillyard, 2017).

There is now an established evidence base for CoSA, but far less for YP CoSA, and research needs to shift its attention onto adapted versions of Circles such as those for young people (Hocken et al., 2018). This study was designed to explore the experience of a YP CoSA from the different perspectives of those involved in the CoSA process, including the Core Member, CoSA Volunteer, CoSA Coordinator and guardian/parent perspectives. This multi-perspective case study will give insight into the experience of YP CoSA from different stakeholder/participant positions. In addition, it will begin an understanding of the change/progress that individuals make while on YP CoSA and any tensions within these perspectives.

Method

Design

The study design was a multi-perspective interpretative phenomenological analyses (see Larkin et al., 2019) of a Young Person's Circle of Support and Accountability. Ethical approval was granted by a University Social Science Ethics panel in the UK.

Recruitment, sampling and participants

The participants were obtained from a YP CoSA provider within England, UK. The Circles coordinator advertised the research within their premises and purposive sampling was used to identify the participants. In line with guidance from Smith et al. (2009), four participants were recruited for this multi-perspective case study of a YP CoSA: (i) the young person (Core Member), (ii) their grandmother (who was also their primary caregiver), (iii) a volunteer on the Core Member's CoSA and (iv) the YP CoSA coordinator. The sample's demographic information is detailed in Table 1.

The Core Member was 17 years of age at the time of interview and started his Circle when he was 16. Although not convicted at the time of interview there were numerous allegations of rape and sexual assault of half-siblings and an unrelated child.

Table 1. Sample information.

Participants	Age (years)	Gender	Circle details
(i) Core Member	17	Male	Started a Circle in July 2019 after disclosures of harmful sexual behaviour against younger siblings and an unrelated child.
(ii) Core Member's Primary Caregiver	60	Female	Grandparent and primary caregiver of Core Member
(iii) Circle Volunteer	20	Female	Volunteer who had been working with the Core Member during their Circle
(iv) Circle Coordinator	28	Female	Manages and oversees YP Circles

Data collection

One-to-one semi-structured interviews were conducted with each participant in a private and purpose-built interview room at a UK University. The interview guides were developed to explore approximately five areas, including expectations, experiences, changes, aspirations and levels of support. Questions were open-ended and allowed participants to expand on their perspectives. The interviews ranged from 45 to 75 min. At the time of interviewing, participants had been engaged in their CoSA for over 12 months, and the CoSA had ended approximately one month prior to the research interviews. Interviews were digitally recorded and transcribed verbatim.

Analytical procedure

Traditionally, interpretative phenomenological analysis (IPA) is concerned with the meanings that particular experiences, events, and states hold for individuals (Eatough & Smith, 2007). IPA allows researchers to glean insights from the expert (the research participants) and get closer to the insider perspective (Brocki & Wearden, 2006). Multi-perspectival IPA retains a commitment to ideography in data collection and analysis but extends this by combining two or more focal perspectives, permitting us to consider a given phenomenon's relational, intersubjective, and microsocial dimensions (Larkin et al., 2019). If we examine the space in between individuals, their interactions with each other, and their co-constitutive meaning-making processes – or intersubjectivity – we are likely to gain a fuller understanding of the phenomenon (Loaring et al., 2015). As such, multi-perspectival IPA is particularly relevant where the phenomenon under investigation is especially relational or social, such as a caring relationship, or systemic, such as families and teams (ibid). For example, Xuereb et al. (2016) used multi-perspective analysis to explore the lived experience of both patients and physicians, in order to understand participatory decision-making within the context of medical consultations. Following this recent branching of IPA, we aim to analyse the space between individuals, which in this case is the reported interactions between the members of a YP CoSA (all interviewed individually on a one-to-one basis with a member of the research team), to gain a greater understanding of the relational aspects of the Circle through the eyes of its constituent parts. While the use of a multi-perspective dimension captures the importance of hermeneutical, phenomenological and ideographical philosophies, it also helps to develop both theoretical and applied psychology (Larkin et al., 2019).

IPA coding was approached using the same procedure across all interviews in order to conceptualise the multiple perspectives. First, the data were coded descriptively, analysing the basic explanation of the language; the analysis subsequently moved towards linguistic coding focusing on the function of the language and how it was conveyed. Next, conceptual coding was used, allowing for a more interpretative analysis, focusing on overarching psychological understandings of the topic (as per Fereday & Muir-Cochrane, 2006). Finally, a cross-case analysis was conducted for Core Member, volunteers, caregiver and coordinator to generate a set of initial themes. This multi-perspective analysis can be helpful where the phenomenon is particularly relational, and the design reflects participants who are “tangled in the same web” (Larkin et al., 2019, p. 186). The focus on an individual case is apposite for IPA, and the analysis of multiple perspectives around a specific case has a useful

place in generating a richer and deeper understanding of the topic in question (see Tamez, 2017). This form of qualitative analysis allows for an understanding of intersubjective and relational dimensions of the phenomenon (in this case, a YP CoSA). Intersubjectivity, in particular, with its coming together and acknowledgement of subjectivities in shared meaning, is central to the emergence of new perspectives and patterns of behaviour (Stevanovic & Koski, 2018). This position acknowledges that understanding experience is located in a complex multi-dimensional space of interrelations and mutual meaning-making (Larkin et al., 2019). Understanding the intersubjectivity of experience is essential in contexts such as psychotherapy (Boston Change Process Study Group, 2013), as well as contexts such as YP CoSA. In the present study, themes across participants were clustered, and a set of superordinate themes for all participants was generated (as per Xuereb et al., 2016). The analysis unpacks the key aspects of each superordinate theme in line with previous precedents (e.g. Blagden et al., 2017).

Results

The analysis of participants' transcripts generated three superordinate themes: (i) Contested self-change, (ii) Negotiating relational boundaries and (iii) Toward "normalcy". Each superordinate theme, together with its set of subordinate themes, is examined below.

Superordinate theme 1: contested self-change

This theme centres around personal change within the Core Member from multiple perspectives and highlights how contested and nuanced self-change can be within an intervention, specifically here in a YP CoSA. Figure 1 details the superordinate theme and overlapping sub-themes from the data analysis.

This theme highlights divergence in how the participants construe change in the Core Member, and indeed, whether there is any change at all. The Core Member feels that they *should* have changed, since they have benefited from a CoSA for approximately a year, with two volunteers, meeting each week, and they were provided with the intervention because it *would* or *should* change them. However, they are uncertain as to whether they can recognise any affective, cognitive and/or behavioural changes in themselves.

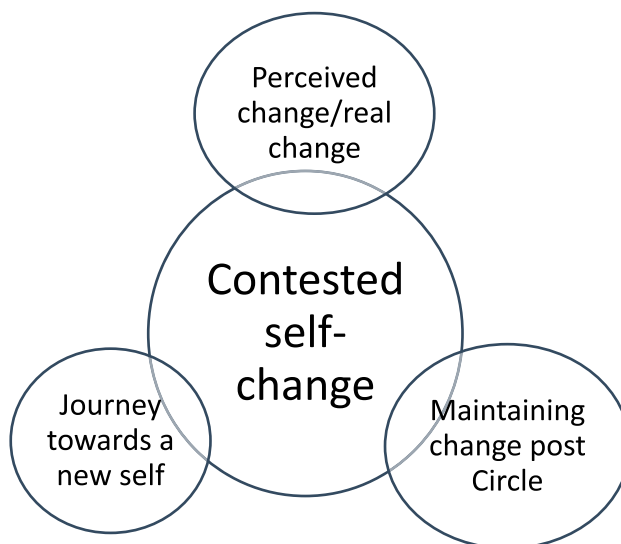


Figure 1. Superordinate theme 1 Contested self-change with subordinate themes.

There was a conflicted sense of personal change and progression within the Core Member's extracts. For example, Extract 1 highlights how the Core Member seems to perceive his progression negatively and feels as though he has not made any significant personal change; he is unable to perceive any emotional change in himself and the lack of behavioural change, or at least change in daily activities, serves to reinforce this lack of change in himself.

Extract 1

Core Member: Erm erm I don't really see any any kind of change in mood in me really I do I do I do feel like at and because erm I haven't and because I kind of don't have any activities to do any more apart from obviously playing on my game at home and that is really what I do every single day apart from that, that is it, so I feel a bit of a bit of a failure.

As highlighted in Extract 1, it appears that once the intervention ceased and associated reintegrative activities no longer occurred, the Core Member regressed to his past behaviour of playing online games and staying at home. This also gave rise to feelings of "failure" within the Core Member; such feelings (whether real or not) can impede an individual's hope for the future (Dwerryhouse et al., 2020). The Core Member's perceived lack of change is important, as actual change is reflected in an individual's behaviour in their environment. There is growing emphasis that treatment change is *doing* change and actually demonstrating the prosocial behaviours individuals learn within programs (Fox, 2017; Langton & Worling, 2015). In other words, there is a need for individuals to *do* desistance and not just *talk* desistance (Blagden & Perrin, 2016).

Extract 2

Core Member: I have got to keep that positivity going but if I don't I can't I don't ... that is it really just got to see the positives on everything but with me I don't keep positive things you see I turn them sometimes straight back into the bad things and then stay like it for a week or so

Relatedly, Extract 2 details the Core Members struggle with positivity and how he can ruminate on negative feelings. While he reflects that he gained a sense of positivity from the Circle, he is struggling to maintain this, now that the Circle has ended. Such feelings can persist for significant periods of time, and the Core Member believed that since the intervention had wound down, he did not have the support to manage these conflicted emotions.

Extract 3

CM: It was hard to sort of talk about obviously about losing my dad and all that ... [but] I can open up to anything now

Although the Core Member did not appear to recognise change within himself, it did appear that the intervention had assisted with psychological flexibility. For example, the Core Member discusses a shift in perspective and how they relate to others – they open up more now and can discuss issues that are emotionally challenging. Mental and behavioural shifts are a marker for increases in psychological flexibility, being open and accepting of emotional experiences, being willing to engage in difficult activities to persist in the direction of important values, allows a person to pursue a meaningful life (Kashdan & Rottenberg, 2010). There is tension and ambivalence in the Core Member's appreciation of self-change through the CoSA intervention. However, this is not uncommon in individuals' transitions in self-identity, as change is a challenging process, which may not be immediately recognised (Gonçalves et al., 2018).

Extract 4

Volunteer: You can see it makes a difference in him from the beginning and end you can see a difference ... you can see a difference in his personality and to how he is now ... he is more happy and willing to do a lot more like at the start it took a lot for him to be willing to do something to encourage him so I think as he has got more comfortable with us and he is more willing to do anything like he will give stuff a go like he is on about trying cooking and getting more life skills and everything.

Extract 5

Volunteer: He is so worked up over school because he is trying to get moved and he is so fixated on it and he repeats that a lot ... you hear a lot about his school again he goes on a lot about his school and how he is frustrated about it and his behaviour inside school isn't the best.

In contrast to the Core Member's perspective, the volunteer perceives the Core Member to be displaying a substantial behavioural change from the start to the end of the Circle meetings. Extract 4 highlights the progress and change within the Core Member during the Circle sessions and how the sessions have assisted him with social and living skills. The development in prosocial skills seems to be an observable marker for progress in the Core Member. Through relating with the volunteers and the volunteers fostering a positive relationship, the volunteer has noted that the Core Member is acquiring more life skills and is willing to try new things. This is important, as enabling prosocial skills through interventions is crucial for long-term improvements in a young person's behaviour (Campbell et al., 2020). However, there is again some tension here, in that the Core Member has not internalised the observable change witnessed by the volunteer. It is possible that the Core Member does not recognise the change he had made, or the Core Member is recognising that change has not translated outside of the sessions and has not contributed to a decisive momentum for change (Göbbels et al., 2012). This is highlighted in Extract 5, where the volunteer concedes that the Core Member's school behaviour is not the best and how he is fixated on school issues. It can also be noted in the Core Member's own reflection (Extract 1) that his behaviour has regressed without the intervention. It may be that while the Circle assists with generating positive changes and experimenting with new skills and behaviours, it may not be sufficient to sustain long-term change. This appears somewhat supported by the Core Member's Grandmother (Extract 6).

Extract 6

Grandmother: Yeah he is always in a happy mood when he comes back from there and he will sit down and he will sometimes, he will sit and talk to us, but then if he is on his own all day he doesn't want to come down in the evening then he will want to sit in his room and watch his football or play his PlayStation.

His grandmother recognises this change in behaviour and mood in the Core Member, and the positive changes from the Circle appear to have an initial ripple effect from the session, in that it facilitates more open and communicative relationships at home. However, the impact is short-lived, and he soon reverts to his perceived normal daily behaviour of being isolated, shut off and not relationally engaging. Hackett and Smith (2018) suggest that when working with young people displaying harmful sexual behaviour, focusing on developing social interaction and prosocial skills is important, as such skills are often impaired within this population. This theme, however, highlights that sustaining and enacting those skills can be difficult post-intervention and that personal change can regress without continual support or available situations to practice those skills. This additional support is needed to ensure treatment gains (Campbell et al., 2020).

Superordinate theme 2: managing and negotiating relational boundaries

Throughout the differing participant perspectives, there was a recognition that the relationship the Core Member has with the volunteers is meaningful to the Core Member, but that boundaries could become blurred without firm boundary setting by the volunteers and the CoSA Coordinator. Figure 2 presents the subordinate themes of this superordinate theme.

This theme explores how the Core Member can become overly attached to the CoSA and the volunteers themselves, and how this may impede relationships elsewhere. There is also a theme of dependence, negotiation of boundaries within the CoSA, as well as managing the expectations of the Core Member.

Extract 7 and 8 highlight how the Core Member is making sense of and understanding the relational boundaries of his CoSA. However, there appears to be uncertainty about how his relationships with his CoSA will evolve and how to act with the volunteers.

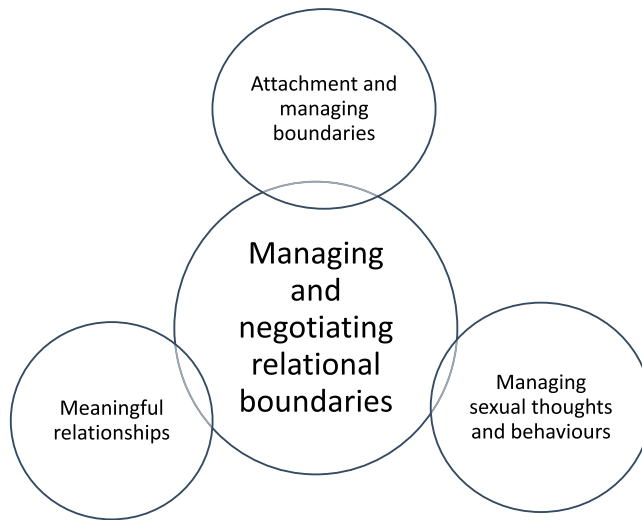


Figure 2. Managing and negotiating relational boundaries and subordinate themes.

Extract 7

Core Member: They're brilliant they're brilliant they're lovely, they treat me to everything like maccy d's [McDonald's] anything and I and I do I do feel like I should repay them sometimes maybe with a gift or something but I don't know if that would be the right way to go.

Extract 7 highlights how the Core Member feels accepted by the volunteers and how this gives him the desire to want to give something back to them. Reciprocity is a relational aspect that has previously been highlighted as necessary in relationships between friends, but also a quality that can be translated into a professional relationship, such as between a young person and their social workers (McLeod, 2010). The capacity and opportunity to reciprocate is an essential consideration in building links between Core Members and their volunteers, both to encourage relations between the Core Member and volunteers, but also since it helps individuals enact "good" selves (see, e.g. Perrin & Blagden, 2014).

Extract 8

Core Member: It feels like we are going on the relationship together like as friends ... when I get older then obviously when I move and maybe move and maybe live in [CITY] I can go and see them any time.

Extract 8 highlights how the Core Member is making sense of and understanding the relational boundaries of his CoSA. He is working through his relationship with the volunteers, who are reasonably close in age to him (20 and 22 years). However, there appears to be uncertainty about how his relationships with his CoSA will evolve and how to act with the volunteers. The Core Member feels supported and appears to construe the relationships with the volunteers as authentic. However, there is a potential for over-identification of volunteers as "friends", which could become a significant boundary issue, as well as potentially a source of distress when the CoSA ends, and the volunteers are no longer in contact with him. The difficulties in managing endings of CoSA, as well as boundary/interpersonal difficulties, have been found in previous research (e.g. Dwerryhouse et al., 2020, Lowe & Willis, 2019). However, Richards (2020) argues that a reframing of CoSA relationships so that solidarity (working towards shared common good), reciprocity (shared problem solving and working "with" core member) and subsidiarity (assisting with resources to attain an ethically-sound goal) are central for enabling constructive relationships.

An expectation that the “friendship” will extend beyond the CoSA represents a challenge for the volunteers and coordinator to manage, which is highlighted in extract 9.

Extract 9

Coordinator: I sometimes do remind him a little bit just because I worry a little bit about boundaries ... its crossed boundaries in a way for him because he thinks they are like his best friends ... I do remind him, you know, they are volunteers, they are here to help you so you know it is a difficult boundary ... They are here just for you they don't get paid for it they are also volunteers so don't cross your boundaries with them they are not your friends ... I think he would call them his best friends he has got nobody else erm I don't know whether they know how important they are to him.

The coordinator reflects on appropriate boundaries and how they reiterate the purpose of the volunteers to the Core Member to try and help the Core Member navigate the boundaries with his volunteers more appropriately. The coordinator also highlights how the Core Member construes the volunteers as “best friends”. Part of the Core Member’s dependency is due to his isolation, not having any other appropriate relationships with others and a lack of meaningful relationships outside of the CoSA. The CoSA ending could therefore have a significant impact on the Core Member, and he seems to be wrestling with what the ending may mean to him emotionally, as illustrated in Extract 10.

Extract 10

Core Member: I do like like working with them they are really nice they are really nice and obviously I am obviously going to be a bit heartbroken when I have to leave them.

The development of prosocial relationships and strong social networks can increase confidence and social skills necessary for leading a good life (Ward et al., 2007), as well as countering some of the risk factors for this client group, such as social isolation, low self-esteem and poor social skills (Almond et al., 2006). Without replacement relationships, or hope of meaningful relationships, the loss of the CoSA could be devastating for the Core Member, resulting in negative emotions, and poorer well-being and consequently potentially causing a regression to previous behaviour. Where there is little evidence that the social and relational skills developed in the CoSA are not observable in the Core Member’s lived world, it may mean the Core Member becomes too dependent on the CoSA and could potentially lead to over-dependence on the volunteers and blurred boundaries. This may contribute to an unsolved inability to create further positive relationships and consequently improve their well-being.

Extract 11

Volunteer: Yeah I think I think if you carried it off for longer than a year I think he would get too attached maybeBecause he will like latch on because he doesn't have any friends at the moment, if we can't make a Circle or if we are late by ten minutes he gets really annoyed and upset So think if we dial it down after a year it would be a good chunk to be like look we have finished now you have had a year we have finished now and that is all we can be with you for and that will be okay, but if it carried on that would be a struggle to then let us go.

The narrative presented in Extract 11 suggests that there has been a substantial level of attachment displayed in the young person from the perspective of the volunteer. His lack of social relationships is potentially causing an overdependence on his relationships with CoSA volunteers. When attachment transitions into dependence, it can be a risk factor for displaying these behaviours again (Zaniewski et al., 2020). Although the therapeutic relationship has been emphasised as an essential factor in achieving effective interventions, acknowledging the boundaries and dynamics is important to avoid dependency issues interfering with the young person’s progression (Campbell et al., 2020). The Core Member displaying annoyance when the volunteers are unable to attend sessions suggests that issues of dependence and expectations were an existing challenge and that it affected his attitudes towards the CoSA.

Extract 12

Volunteer: Not necessarily bad comments it was just like I don't think I saw him for a couple of weeks and he came up to me and was like you look really beautiful today I was like thank you I really appreciate that and then we moved on and then he kept at it ... and then erm all of sudden he brushed his hand down my leg.

Interviewer: Okay.

Volunteer: And I thought well that isn't appropriate, that is a boundary that you shouldn't cross and once we had a conversation and it hasn't really happened again anyway, so it just needed that telling him that you can't do that don't do that.

Here the volunteer is discussing when dependence and over-familiarisation become a problem, which has manifested from comments to physical actions. These behaviours are testing the boundaries with the volunteer to see if certain boundaries are moveable. Adolescents who are unaware of others' physical boundaries, or who have not learned how to respect those boundaries, are at a higher risk of displaying unwanted sexual behaviours (de Bruijn et al., 2006). Research has also found that individuals who have displayed harmful sexual behaviour have difficulties in interpreting social cues and, consequently, in responding appropriately (Burk & Burkhart, 2003). The volunteer displaying firm boundaries and addressing this relationally through conversation helped maintain constructive relationships with the young person. One of the most important aspects of intervention with young people displaying harmful sexual behaviour is appropriate boundaries and modelling of such boundaries, as this allows for generalisation beyond the intervention (Bonner et al., 1999). The extracts from the Core Member and volunteer display how boundaries are negotiated and managed, which is inherently complex when working with young people with harmful sexual behaviour. In Extract 13 below, the young person's grandmother demonstrates her awareness of his poor boundaries and hopes from the YP CoSA.

Extract 13

Grandmother: Well I suppose it is a positive female role model so erm it is going to help him to have more respect for women and perhaps be able to interact in a respectful way and be a friend rather than a potential lover.

The Core Member's grandmother is hopeful that prosocial modelling from the female volunteers will help the Core Member be more respectful and appropriate with other females.

Superordinate theme 3: toward "normalcy"

In desistance literature, "normalcy" is the reintegration into the community; it is where individuals have moved on from their offending selves, have a sense of hope for the future and a belief that they are able to lead a good life (Göbbels et al., 2012). Figure 3 details the superordinate theme "toward normalcy" and its related subordinate themes.

The theme of "toward normalcy" focuses on how the YP CoSA assists with this process of "normalcy" and with integrating the Core Member into the community. In Extracts 14 and 15, the Core Member speaks about how the YP CoSA has assisted him with integrating into the community and how this is countering his years of social isolation.

Extract 14

Core Member: What has helped me with is that erm that they they obviously take me around town to to and integrate me into the community and erm that is the whole point really to getting to a normal mentality again and that is what that is what is really needed I think now because I have been isolated for almost two and a half years now.

Extract 15

Core Member: We do we have a laugh we do we always laugh and erm yeah and I always say to them that we could be a great football team together, we are really good together erm and I do like like working with them they are really nice, they are really nice [to me].

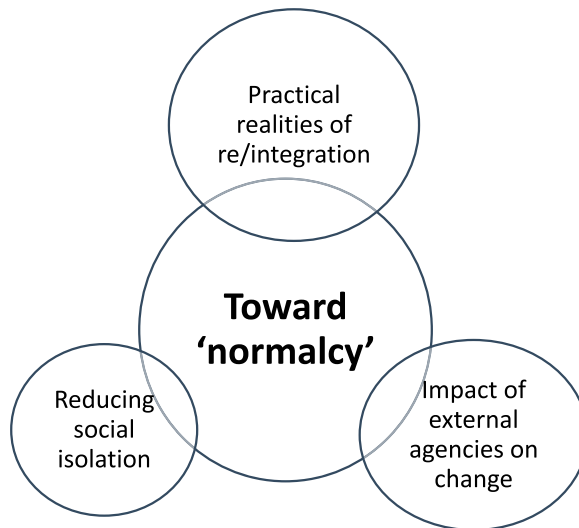


Figure 3. Superordinate theme “toward normalcy” and its related subordinate themes.

The fostering of good social skills through the work of the CoSA volunteers and coordinator, the ability to work constructively together while being able to relate and have a “laugh” with the Core Member, is enabling the Core Member to begin to feel part of the world around him again. This is an essential aspect of the reintegrative process and could provide the Core Member with a catalyst to work towards having more healthy relationships (Ward et al., 2007). However, there is ambiguity here and perhaps ambivalence within the Core Member as he discusses integration, but also earlier, he discusses how he is back being isolated again. It is not clear how this helped him join the community, though it may be that the process of reflecting back on the CoSA made him feel part of the community again.

Extract 16

Coordinator: A couple of the meetings I have gone to and just sat back and watched him with the volunteers and, you know, I I okay I have got one really good example that he does at the end of every Circle meeting they do like a fist pump and a [demonstrates a handshake].

Interviewer: A handshake yeah.

Coordinator: Like a little special handshake that they have got and I don't do that with him only they do and he does it with them too and that was quite a bit of a like you know when I first saw him do that with him that was kind of nice.

Extract 16 examines a positive example of the CoSA relationship through the symbolism of a personalised, unique handshake. The coordinator identifies that this is personal to the Core Member and the volunteers; thus, this activity is something unique, which they share as a group. This demonstrates a sense of social belonging because the Core Member has developed routines that he only shares with this specific group. HSB can result from a need for social belonging or connectedness; when provided through an intervention, this can reduce the risk of recidivism (Allardyce & Yates, 2013). Clearly, being part of the CoSA is meaningful for the Core Member.

Extract 17

Grandmother: I think it has definitely helped I think that has definitely helped because it's familiarising with talking to people it is getting used to it is not so erm panicky for him if you know what I mean. It is by familiarisation if you

know what I mean and he gets used to talking to people he will think its okay to just have a chat, rather than thinking oo there is a really pretty girl I'm gonna go and do something.

Interviewer: Inappropriate behaviour

Grandmother: Behave inappropriately and I think it is good to mix with that kind of people and also in a way be supervised so and told right and wrong.

The Core Member's grandmother highlights the importance of the relationships between the Core Member and the volunteers and how this has helped him in social settings. His relationship and interactions with the volunteers have allowed him to build confidence in communications skills, to help him identify cues and become accustomed to normal social interaction. The modelling of good social skills from the volunteers has allowed the Core Member to become familiar with appropriate social interaction, particularly with females close to his age. Indeed, the relationship between the young person and the practitioner is critical to intervention engagement, skills acquisition, and positive outcomes (Belton et al., 2014; Campbell et al., 2020). The "worry" for the grandmother, which reoccurred in her interview, was what would happen to the Core Member when the support stopped and how she was "upset when youth offenders [support] dropped out". The "worry" then was that the Core Member's progress might diminish without additional support from other agencies or organisations. This worry seems prudent considering how isolated the Core Member has become since the CoSA began to end. It is crucial that young people who present with HSBare supported, and that intervention is relationship-based in order to be effective (Campbell et al., 2020). However, there comes the point when an intervention ends, and the legacy is what comes next; this requires further thought with interventions with young people.

Summary and discussion

This study is the first multi-perspective case study of a Young Person's CoSA examining and exploring the Core Member's self-change through the process. Understanding the process of the YP CoSA through the broader relational context enabled a rich holistic interpretation to contribute to the emerging evidence base for this adapted CoSA intervention. This research highlights the difficulties and complexities in working with the client group and in sustaining the positives of the intervention (Hackett, 2010). It highlights that sustaining treatment gains without increasing the social capital and context in the individual's wider world can be challenging and can limit full participation within the intervention (Healy & Rodriguez, 2019). While others within the CoSA had recognised positive changes within the Core Member, the Core Member was struggling to notice the change within him, particularly post-intervention, where he had begun to regress in his behaviour. This highlights the potential need for reinforcing and highlighting change from those within the Circle for the Core Member. This links to the Pygmalion effect in that self-change occurs not only through self-appraisals and attributions but also from the reactions and reflected appraisals of others (Maruna et al., 2009). It also highlights that real change is hard, and the regressing to more comfortable behaviours can be expected without further intervention. Often people, especially young people, are prone to regressing to previous states, those more comfortable, as change can be anxiety-provoking and so individuals can feel safer by taking a few steps back in their process of change to a position that feels more familiar to them (Fransella, 2005; Lillevoll et al., 2013). Indeed, transformations in one's identity require people to make substantial and, at times, global shifts in one's self-understandings and require significant effort in renegotiating interpersonal interactions (Veysey et al., 2009).

However, this research also demonstrated that the CoSA did assist the Core Member in how they related to others, which is a key outcome in intervention with young people (Fonagy et al., 2015). Furthermore, the experience of safe and meaningful relationships within the Circle are crucial for the Core Member and can enable "headspace" for individuals to contemplate change (Blagden et al., 2016, 2017). Forging strong, meaningful therapeutic relationships is an integral part of the change process (Duncan et al., 2020; Ross et al., 2008), and Dahle (1997) reported that a critical

predictor of treatment readiness is client trust in the treatment provider. According to Hackett (2010), by providing the Core Member with support and strong foundations of friendship, the volunteers can assist him in resolving any issues or risky behaviours he may be experiencing, thus, decreasing the likelihood of problematic behaviours reappearing.

While the Core Member in this particular YP CoSA could not recognise change within themselves, it may be that “the very entry into a therapeutic relationship ... permits the client to entertain and “try out” possibilities of being that provide a temporary means by which the worldview is reconfigured” (Spinelli, 2007, pg. 87). It may be that working closely with trained professionals will bring about change in the young person, even if they may not recognise it. Though much more research is needed into this adaptation of CoSA to ensure that the CoSA model is applicable and effective for young people (Hillyard, 2017; Hocken et al., 2018).

Future directions and limitations

Limitations of this research include the difficulties of examining an intervention in which every party (including several members of the research team and all the participants) are invested. This has the potential to confound the findings. One of the methods we adopted to reduce this was to appoint an independent auditor to review and reflect on the analysis, as suggested by Berman and Reich (2010), as a means of reducing investigator bias. Biases in the participants and their responses should also be considered, as they are heavily invested in the CoSA and its benefits.

There is a need for more research to suggest the conditions and mechanisms that could sustain and maintain treatment gains in CoSA interventions for young people. This should also consider the extent to which the YP was socially isolated prior to their HSB. This is important since the YP will now be facing a double whammy of proximal factors (e.g. social phobia) and the hostile attitude of society towards people who have been convicted of a sexual offence.

Further research should examine how aspects of the Circle may bolster and contribute to behaviour change in the YP, and whether this change is sustained long-term. Failure of CoSA for YP should also be monitored, and criteria for “success” carefully evaluated (see Dwerryhouse et al., 2020, for a consideration of what success and failure look like in a Circle).

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