social sciences

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Sociodemographic and Psychological Profile of Offenders in Alternative Penal Measures: A Comparative Study of the TASEVAL, PRIA-MA, and reGENER@r Programs

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Abstract

Gender-based violence (GBV) and traffic offenses pose significant public health challenges and contribute to widespread social issues globally. This study examines the sociodemographic and psychological profiles of individuals who commit traffic offenses and GBV, focusing on three alternative penal programs: TASEVAL (for traffic offenses), PRIA-MA, and reGENER@r (both for GBV). The study involved 54 participants distributed across these programs, using various psychometric tests to assess their profiles. Participants across the three programs (TASEVAL, PRIA-MA, and reGENER@R) were comparable in age (mean range 39.13–40.69 years) and nationality, with roughly half having prior contact with the justice system. Educational levels varied, with TASEVAL participants mainly completing secondary education (43.8%), PRIA-MA participants primary education (43.8%), and reGENER@R participants post-secondary education (59.1%). Employment status differed slightly, with TASEVAL and reGENER@R participants mainly employed (62.5% and 63.6%, respectively), while most PRIA-MA participants were unemployed (56.3%). Family characteristics varied across groups. In TASEVAL, having a partner and no children predominated (62.5% and 31.3%); in PRIA-MA, not having a partner and having two children predominated (62.5% and 37.5%); and, in reGENER@R, not having a partner and having one child predominated (59.1% and 31.8%). No significant differences were observed in sociodemographic variables. Regarding psychological characteristics, results across all groups indicate a marked presence of psychopathological symptoms and difficulties in emotional intelligence domains, with a significant correlation between psychological traits and coping strategies. These findings highlight the importance of tailoring alternative penal measures to the specific characteristics of each group to enhance effectiveness and reduce recidivism.

Keywords: psychological profile; alternative penal measures; TASEVAL; PRIA-MA; reGENER@r; gender-based violence; traffic offenses

Academic Editors: Iris Almeida, Ana Cristina Neves, Andreia Matias, Cristina Soeiro, Ricardo Ventura Baúto, Susana Monteiro and Georgios Antonopoulos

Received: 20 June 2025
Revised: 12 September 2025
Accepted: 28 September 2025
Published: 3 October 2025

Citation: Sánchez, Ana Isabel, Aida Fernández, Almudena Lorite, Clotilde Berzosa Sáez, Elena Miró, María Pilar Martínez, and Raúl Quevedo-Blasco. 2025. Sociodemographic and Psychological Profile of Offenders in Alternative Penal Measures: A Comparative Study of the TASEVAL, PRIA-MA, and reGENER@r Programs. *Social Sciences* 14: 589. https://doi.org/10.3390/socsci14100589

1. Introduction

Both gender-based violence (GBV) and road safety violations represent critical public health concerns, generating far-reaching social consequences that affect a substantial num-

ber of victims globally (see, for example, Galera et al. 2023; Ruiz-Pérez and Becerra-Vargas 2025). In this context, ensuring road safety is increasingly emerging as a priority challenge for the international community (Butsenko 2022).

According to the World Health Organization, approximately 1.19 million people die each year in traffic accidents, while an additional 20 to 50 million individuals sustain non-fatal injuries, many of which result in permanent disabilities (World Health Organization 2023). In Spain, in 2023, 1806 people died and 9265 were seriously injured in traffic accidents that occurred on both interurban and urban roads (Dirección General de Tráfico 2024). According to the Ministerio de Justicia, Instituto Nacional de Toxicología y Ciencias Forenses (2024), 48.2% of the drivers who died in traffic accidents and underwent toxicological analysis had consumed alcohol, psychotropic drugs, and/or recreational substances, either alone or in combination. Furthermore, the most recent official data from the Directorate-General for Traffic (DGT) indicate that 1154 people died in road traffic accidents on interurban roads in Spain in 2024—an increase of 14 fatalities compared with the previous year (Dirección General de Tráfico 2025).

Regarding traffic offenders, although no single profile can be definitively established (see Alonso et al. 2025), various studies have identified common characteristics within this population. In Spain, Escamilla-Robla et al. (2021) reported that individuals sentenced to alternative measures for road safety offenses were predominantly male (87.6%), aged between 18 and 45 years (72%), and of Spanish nationality (76.1%). Half were single (49.7%), while one-third were married or in a domestic partnership (32.9%). More than half (55.8%) were parents. Nearly half had completed lower secondary education (44.4%), and only 14.4% had attained higher education. In terms of offenses, the most frequently committed violations under the Spanish Criminal Code include driving without a valid license (Article 384) and driving under the influence of substances (Article 379) (Escamilla-Robla 2018).

Alcohol consumption remains one of the most prevalent risk factors associated with traffic violations (Escamilla-Robla et al. 2022, 2024) and is the most frequently detected substance among deceased drivers (Instituto Nacional de Toxicología y Ciencias Forenses 2023). Excessive alcohol use has been linked to an increased likelihood of traffic rule violations and a higher risk of recidivism (Pallín 2017), sometimes leading to the development of a substance use disorder (Escamilla-Robla 2018; Escamilla-Robla et al. 2022; Valero et al. 2017). This pattern of substance use has also been studied as a potential predictor or contributing factor in high-risk driving behaviors among repeat offenders (Padilla et al. 2018) as well as in individuals whose driving licenses have been revoked, with addiction being the most prevalent psychiatric diagnosis within this group (Valero et al. 2017). Moreover, research indicates that offender drivers not only exhibit higher levels of alcohol and substance consumption compared with non-offender drivers but also demonstrate a reduced ability to separate substance use from driving (Castro et al. 2023).

In Spain, individuals convicted of road safety offenses are often sentenced to community service. In response, the DGT, the University Institute for Traffic and Road Safety (INTRAS) at the University of Valencia, and the General Secretariat of Penitentiary Institutions collaborated to design and implement specialized workshops aimed at raising awareness and providing re-education on road safety. These workshops specifically target individuals convicted of traffic-related offenses whose sentences involve community service. This initiative led to the development of Traffic Safety Evaluation Workshops (TASEVAL), a road safety awareness program based on alternative penal measures to incarceration. TASEVAL consists of a series of activities designed to equip offenders with the skills necessary to address and overcome the circumstances that led to their offenses (Secretaría General de Instituciones Penitenciarias 2014).

Empirical research has identified specific psychological traits among TASEVAL participants, including elevated levels of impulsivity (Escamilla-Robla et al. 2021). These traits, combined with sensation-seeking tendencies and alcohol consumption, appear to be predictive factors for offending behavior (Dahlen et al. 2005). Moreover, anger has been shown to influence driving behavior, increasing the likelihood of committing traffic violations. This effect is further intensified by low emotional intelligence, which is associated with a higher propensity for risky driving (Hidalgo-Fuentes 2021).

Although traffic-related offenses and gender-based violence present very different manifestations, both share characteristics that allow them to be addressed within a common framework. They are behaviors of high social risk, with a marked tendency toward recidivism, which justifies the need for preventive and psychoeducational interventions aimed at transforming offenders' attitudes, beliefs, and lifestyles, beyond mere punitive sanction.

Violence against women is among the most frequent forms of violent death affecting women worldwide, particularly in the form of intimate partner homicide. It represents the most severe and visible manifestation of structural gender inequality and poses a direct threat to women's fundamental rights, including the rights to life, physical and mental integrity, health, dignity, and freedom (Gómez-Pulido et al. 2024; Granda-Vivas and Moral-Jiménez 2025; Pérez de la Varga et al. 2024; Vinagre-González et al. 2023).

In the Spanish legal context, Organic Law 1/2004 on Comprehensive Protection Measures against Gender-Based Violence defines the term "gender-based violence" as violence perpetrated against women by their current or former male partners within the framework of an intimate relationship and stemming from a position of power based on gender. In Spain, GBV remains a deeply rooted problem, with 25 women murdered so far this year up to August 2025 (Government Delegation against Gender Violence 2025). In 2024, 48 murders were recorded, 58 in 2023, and, since official records began in January 2003, the total number of women killed by their partners or ex-partners amounts to 1311 (Government Delegation against Gender Violence 2025).

According to the report of the General Council of the Judiciary (CGPJ) for the first quarter of 2025, a total of 47,865 complaints of GBV were registered in Spanish judicial bodies, which represents an increase of 4.28% compared with the same period in 2024 (Consejo General del Poder Judicial 2024). In Europe, the prevalence of GBV ranges between 16% and 23%, highlighting the urgent need for further advancements in the treatment and prevention of violence against women (Astudillo-Reyes et al. 2024).

A distinct profile has not been clearly identified among GBV offenders (Loinaz et al. 2012b; Remón-Chozas 2022). However, studies involving participants in alternative sentencing programs suggest a general profile characterized by a male offender between the ages of 36 and 46, of Spanish nationality, single or without a stable partner, with a basic level of education, either childless or with only one child, and employed—although with a higher unemployment rate than that of the general population (López-Barreira and Moral-Jiménez 2020; Remón-Chozas 2022; Sordi-Stock 2015; Van Hoey et al. 2021).

The most common criminal offense among individuals subject to alternative measures for GBV is domestic abuse under Article 153 of the Spanish Penal Code, followed by breaches of restraining orders (Article 468), threats (Articles 169 and 171), bodily harm (Articles 147 and 148), and habitual physical or psychological abuse (Article 173) (Sánchez et al. 2024).

Regarding psychological characteristics, no clear impairments in emotional intelligence or empathy have been identified among GBV offenders (Loinaz et al. 2012a), although some individual components may be affected, such as poor emotional regulation or difficulties in expressing and managing their own emotions (Echeburúa and Amor 2016).

Additionally, offenders often resort to avoidant coping strategies to manage stress and interpersonal conflicts (Moral et al. 2011).

The prevalence of mental disorders in this population is relatively low (Echeburúa and Amor 2016; Pujol and Mohino 2019). In cases where a mental disorder is present, it is necessary to assess the symptoms exhibited by the individual, as the risk may increase in some situations. However, GBV offenders frequently exhibit psychological deficits such as heightened anger expression and increased hostility (Norlander and Eckhardt 2005; Romero-Martínez et al. 2016, 2023), among other problems (Cormos et al. 2023; Niehaus et al. 2025).

Additionally, substance abuse is frequently observed among those sentenced to alternative measures, with a significant proportion of offenses committed under the influence of alcohol or drugs (Remón-Chozas 2022). Recently, Astudillo-Reyes et al. (2024) reported that the presence of alcohol and/or drug use among individuals who commit GBV offenses influences both their perception of reality and the manner in which they express aggressive behavior—whether impulsively or compulsively. Many offenders display habitual substance use or even substance use disorders (Van Hoey et al. 2021), which not only facilitates violent behavior but also increases the risk of recidivism (Pérez Ramírez et al. 2017) and the perpetration of more severe violence (Cafferky et al. 2018). On the other hand, recent studies show that adverse childhood experiences (ACEs) are a significant factor in intimate partner violence (IPV) perpetrators and should be addressed in intervention programs (Expósito-Álvarez et al. 2025).

In 2023, judicial authorities issued and processed 23,328 mandates to the Services for the Management of Penal and Alternative Measures (SGPMA) related to alternative sentencing for traffic offenses. Additionally, 37,074 mandates were recorded for the imposition of alternative penal measures in GBV cases (Secretaría General de Instituciones Penitenciarias 2023).

Considering that these two types of offenses account for the highest number of convictions resulting in alternative penal measures, the general objective of this study is to analyze and compare various sociodemographic and psychological characteristics of individuals sentenced to alternative penal measures under the TASEVAL program for traffic offenses and the PRIA-MA and reGENER@r programs for GBV offenses. The specific objectives of the study are as follows: (1) to develop a psychosocial profile of participants in each program, including their sociodemographic and criminal characteristics; (2) to compare the psychological characteristics of the groups; (3) to examine potential relationships among psychological variables within each group.

2. Materials and Methods

2.1. Participants

Participants were selected by personnel from the Social Insertion Centre [removed for blind review] as part of the General Secretariat of Penitentiary Institutions, Ministry of the Interior, Spain (SGPMA). This step had to be taken due to the nature of the alternative measure, which established mandatory attendance and participation for the subjects in order to avoid a prison sentence.

A total of fifty-seven potential candidates who met the eligibility criteria were proposed for participation in the study. However, two participants from the TASEVAL workshop and one from the PRIA-MA program were expelled. Consequently, the final sample consisted of sixteen participants in the TASEVAL program, twenty-two in the reGENER@r workshop, and sixteen in the PRIA-MA program. The variable sex was not relevant in this study, as the legislation stipulates that GBV must be committed by a man (Article 1 of the LOMPIVG), and, therefore, 100% of the sample consisted of male participants.

The eligibility criteria were as follows: (1) males over 18 years of age; (2) a current sentence for one or more GBV offenses or traffic offenses; (3) a sentence of up to 60 days of community service; and (4) attendance at the workshop or program and adherence to participation rules.

Regarding the criminal characteristics of the sample, the following types of offenses were recorded according to the Spanish Penal Code: (1) in the TASEVAL group, the most common offense was driving without a license (Article 384), committed by 68.8% of participants, followed by driving under the influence of substances (Article 379), committed by 31.2%; (2) in the PRIA-MA group, the most frequent conviction was for battery (Article 153.1), accounting for 43.8% of cases, while aggravated assault (Articles 151.1 and 151.3) represented 31.3%, coercion (Article 172.2) occurred in 12.5% of cases, and threats (Article 171.4) and threats involving harassment (Articles 171.4 and 173.4) accounted for 6.3% and 3.1%, respectively; and (3) in the reGENER@r group, the most common offense was bodily harm (50%), followed by aggravated bodily harm (27.3%), threats (13.6%), and threats with harassment and coercion, each representing 4.5% of the sample.

2.2. Measures

A sociodemographic questionnaire was used to collect information on participants' age, educational level, occupation, marital status, and types of offenses and recidivism.

Coping Responses Inventory—Adult Form (CRI-A) (Moos 1993; Spanish adaptation by Kirchner Nebot and Forns i Santacana 2010). The CRI-A consists of 48 items and assesses a person's coping responses to problems and stressful situations using a Likert-type scale ranging from 0 ("no") to 3 ("almost always"). It is composed of eight scales measuring Logical Analysis, Positive Reappraisal, Seeking Guidance and Support, Problem-Solving, Cognitive Avoidance, Acceptance or Resignation, Seeking Alternative Rewards, and Emotional Discharge. Cronbach's alpha for the Spanish version ranged from 0.50 to 0.70 (Kirchner Nebot and Forns i Santacana 2010).

Brief Symptom Checklist (LSB-50) (De Rivera and Abuín 2022). The LSB-50 was used to assess psychological and psychosomatic symptoms experienced in recent weeks. It consists of 50 items rated on a 5-point Likert scale and includes two validity scales (Minimization and Magnification), three general indices (Global Severity Index, Number of Positive Symptoms, and Positive Symptom Intensity Index), seven symptom scales (Obsessive Sensitivity, Anxiety, Hostility, Somatization, Depression, Strict Sleep, and Extended Sleep), two subscales (Sensitivity and Obsessive-Compulsion), and a Psychopathological Risk Index. This index measures an individual's overall risk of experiencing psychological or psychopathological problems. Higher scores indicate a higher level of general psychopathological risk. The scale demonstrates high reliability, with coefficients ranging from 0.79 to 0.96.

Emotional Intelligence Test (MSCEIT) (Mayer et al. 2023; Spanish adaptation by Extremera and Fernández-Berrocal). The MSCEIT assesses both experiential and strategic emotional intelligence. It evaluates four branches (Emotional Perception and Emotional Facilitation (experiential area) and Emotional Understanding and Emotional Management (strategic area). A total score provides an overall measure of emotional intelligence. The Spanish adaptation demonstrates high internal consistency, with a reliability coefficient of 0.95 overall, 0.93 for the experiential area, and 0.90 for the strategic area.

The Drug Abuse Screening Test (DAST) (Skinner 1982; Spanish adaptation by Pérez Gálvez et al. 2010). The DAST is a screening tool designed to identify drug abuse or dependence. The 20-item version, which uses dichotomous "Yes/No" responses, was employed. The Spanish adaptation demonstrated excellent internal consistency, with a Cronbach's alpha of 0.93.

The Cognitive and Affective Empathy Test (TECA) (López-Pérez et al. 2008) consists of 33 items rated on a Likert scale from 1 ("I totally disagree") to 5 ("I totally agree"). It measures four dimensions: perspective-taking and emotional understanding (cognitive empathy), as well as empathic joy and empathic stress (affective empathy). Higher scores indicate greater empathy. The test has strong internal consistency, with a Cronbach's alpha of 0.86 and a split-half reliability coefficient also of 0.86 (López-Pérez et al. 2008).

State-Trait Anger Expression Inventory (STAXI-2; Spielberger 2024; Spanish adaptation). The STAXI-2 measures the expression, control, and experience of anger, differentiating it into two main components: state and trait anger. It includes 49 items divided into six scales: State Anger, Trait Anger, Anger Expression-Out, Anger Expression-In, Anger Control-Out, Anger Control-In, and an Anger Expression Index. Regarding its psychometric properties, it shows good internal consistency, with alpha values of 0.89 for the State Anger scale and 0.82 for the Trait Anger scale, while the Expression scales present lower values (0.69 and 0.67), but still acceptable.

The CAGE questionnaire (Cutting down, Annoyance, Guilty, and Eye-opener) (Ewing 1984; Spanish version by Rodríguez-Martos et al. 1986). The CAGE is a 4-item screening tool for the early detection of alcohol-related problems. Responses are dichotomous ("Yes"/"No"), and the total score categorizes individuals into four groups (social drinking, risky drinking, harmful drinking, and alcohol dependence). The instrument demonstrates adequate psychometric properties. With a cut-off score of 1, sensitivity ranges from 86% to 90%, while specificity ranges from 52% to 93% (Rodríguez-Martos et al. 1986). The ROC curve equals 0.89 with a standard error (SE) of 0.0128 (Buchsbaum et al. 1991).

The Social Desirability Scale (SDS) (Crowne and Marlowe 1960; Spanish version of the Ferrando and Chico 2000). The SDS consists of 33 true/false items designed to assess the tendency to present oneself in a socially favorable manner. Higher scores indicate greater self-presentation bias toward social desirability. The scale is unidimensional and demonstrates robust internal consistency in its Spanish adaptation, with a Cronbach's alpha of 0.78.

2.3. Programs

TASEVAL is a road safety awareness workshop designed to be an alternative penal measure for serving sentences in cases of traffic safety offenses. Its goal is to promote changes in attitudes and behaviors and raise awareness of the importance of complying with traffic regulations, aiming to reduce recidivism among road users. The program consists of eight psychoeducational sessions, each lasting four hours, and is based on a re-education and awareness approach that emphasizes cognitive, emotional, and attitudinal change. Key topics addressed include speed, alcohol and drug use, reckless driving, distractions, and social values, among others (Lijarcio et al. 2016).

PRIA-MA aims to eradicate violent behaviors and reduce recidivism, address dynamic risk factors associated with gender-based violence offenders, promote engagement with treatment through a positive and motivating approach, and improve participants' psychological functioning. It is aimed at individuals sentenced to less than two years of imprisonment. The program has an average duration of six months and is based on a cognitive-behavioral approach, focusing on awareness of harm, impulse control, and the development of empathy and skills for peaceful conflict resolution. It is divided into three phases: (1) evaluation and motivation; (2) intervention, which addresses aspects such as emotional intelligence, anger management, and sexist beliefs, among others; and (3) follow-up, conducted one month after the intervention ends, aiming to assess individual progress and reinforce the achievements attained (Suárez Martínez et al. 2015).

Finally, reGENER@R aims to reduce recidivism among GBV offenders, support the development of strategies to maintain healthy and egalitarian relationships, and encourage reflection on the benefits of adopting an egalitarian model of masculinity. The reGENER@R workshop covers ten topics; in this study, it was adapted to eight sessions (32 h in total) to meet the minimum required hours for participants' sentences, with a weekly frequency of 4 h per session. It is aimed at men convicted of gender-based violence (GBV) offenses, either sentenced to community service or to custodial sentences of less than one year (Bascones Pérez-Fragero et al. 2020).

2.4. Procedure

Sociodemographic data were collected through a self-administered questionnaire, supplemented by a psychological evaluation process using various self-report measures. The evaluation took place with the authorization and collaboration of the SIC, where participants attended sessions of the TASEVAL, reGENER@r, and PRIA-MA workshops, during which the respective evaluation tools were administered.

Participants were fully informed about the research and provided written consent after receiving detailed information regarding the study. The research received approval from the Ethics Committee (see Institutional Review Board Statement).

These sessions were supervised by two evaluators. In the first session, the voluntary nature of participation was emphasized, along with the anonymity of the collected data. The programs adhered to a structure set by the General Secretariat of Penitentiary Institutions, under the Ministry of the Interior of the Government of Spain.

2.5. Statistical Analysis

Data were analyzed using JASP software (version 0.17.2.1) (JASP Team 2023). Basic descriptive statistics are reported as the mean (M), standard deviation (SD), and percentage (%). A p-value of <0.05 was considered statistically significant, and 95% confidence intervals were applied.

To compare sociodemographic and psychological characteristics between groups, the χ^2 test was used for categorical variables and one-way ANOVA for continuous variables, following confirmation of homogeneity of variances via Levene's test. For post hoc comparisons, Tukey's test was applied when equal variances were assumed, and Tamhane's T2 test was used when equal variances could not be assumed.

Effect sizes were calculated using η^2, with values between 0.01 and 0.04 indicating a small effect, values from 0.06 to 0.11 a medium effect, and values above 0.14 a large effect (Cohen 1988). Relationships between variables were assessed within each group using partial correlations (controlling for substance use), with values classified as low (0.10–0.29), medium (0.30–0.49), and high ($\geq$0.50) (Cohen 1988).

3. Results

3.1. Comparison of Sociodemographic and Criminal Characteristics

Table 1 presents the means and standard deviations of the three study groups for the variables of age, educational level, employment status, marital status, number of children, nationality, and prior contact with the justice system. No significant differences were found between the three groups for any of these variables (all $p > 0.07$).

Table 1. Sociodemographic variables of the three study groups.

	TASEVAL (*n* = 16)	PRIA-MA (*n* = 16)	reGENER@r (*n* = 22)	F/χ^2	*p*
Age (M, SD)	39.13 (9.49)	40.69 (10.36)	39.86 (10.79)	0.09	0.912
Educational level (%)				8.34	0.214
None	6.3	6.3	4.5		
Primary	18.8	43.8	13.6		
Secondary	43.8	18.8	22.7		
Post-secondary	31.3	31.3	59.1		
Employment status (%)				14.61	0.067
Unemployed	25.0	56.3	36.4		
Employed	62.5	43.7	63.6		
Student	12.5	-	-		
Relationship status (%)				2.44	0.295
Yes	62.5	37.5	40.9		
No	37.5	62.5	59.1		
Number of children (%)				9.28	0.421
0	31.3	31.3	27.3		
1	18.8	25	31.8		
2	12.5	37.5	22.7		
3	25	6.3	18.2		
4	6.3	-	-		
6	6.3	-	-		
Nationality (%)				15.70	0.109
Spanish	81.3	81.3	81.8		
Colombian	18.7	-	4.5		
English	-	-	9.1		
Ukrainian	-	-	4.5		
Moroccan	-	12.4	-		
Ecuadorian	-	6.3	-		
Prior contact with the justice system (%)				0.61	0.738
No	56.3	43.7	54.5		
Yes	43.8	56.3	45.5		

3.2. Descriptive Statistics of Psychological Variables

Regarding the CRI-A scales, adaptive coping strategies are described first. For Logical Analysis and Positive Reappraisal, group means ranged from M = 9.8 to 12.4 (SD = 3.3–4.5). Relative to the normative values (Logical Analysis: M = 10.38, SD = 3.57; Positive Reappraisal: M = 9.83, SD = 3.86), this pattern suggests use around the normative mean—on average, slightly higher. All groups exceeded the normative mean in Seeking Guidance and Support (M = 9.4–11.3; SD = 3.4–4.7) (normative mean M = 7.71; SD = 3.52), suggesting a stronger-than-average tendency to seek social support. Problem-Solving scores were similar to the normative mean (M = 11.32; SD = 3.83) (M = 10.3–11.5; SD = 3.6–4.8), indicating comparable use of active Problem-Solving strategies across groups.

For more passive coping strategies, Cognitive Avoidance (CA), Acceptance or Resignation (AR), and Seeking Alternative Rewards (SR) were slightly above normative means (CA: M = 7.21; SD = 3.59; AR: M = 6.74; SD = 3.67; SR: M = 6.08; SD = 3.63), with scores ranging from M = 7.8 to 10.4 (SD = 3.4–4.6), indicating slightly higher-than-average use

of Avoidance, Passive Acceptance, and Seeking Alternative Rewards behaviors. Finally, Emotional Discharge (ED) was slightly above the normative mean (M = 4.63; SD = 3.24) (M = 5.5–6.4; SD = 3.2–4.3), reflecting a moderate tendency to express negative emotions.

For psychopathological variables measured using the LSB-50, the TASEVAL group scored in the 90th percentile on the Global Severity Index (M = 0.85; SD = 0.77), the Symptom Intensity Index (M = 2.26; SD = 0.83), and the Psychopathological Risk Index (M = 0.56; SD = 0.80). On the Number of Present Symptoms scale, the group scored in the 75th percentile (M = 19.31; SD = 13.30). In the PRIA-MA group, the scores were as follows: 85th percentile for the Global Severity Index (M = 0.74; SD = 0.69), 75th percentile for the Number of Present Symptoms scale (M = 18.93; SD = 11.86), 65th percentile for the Symptom Intensity Index (M = 1.74; SD = 0.56), and 90th percentile for the Psychopathological Risk Index (M = 0.51; SD = 0.73). Finally, the reGENER@r group scored in the 80th percentile on the Global Severity Index (M = 0.71; SD = 0.53), the 75th percentile for the Number of Present Symptoms scale (M = 18.77; SD = 10.20), the 65th percentile for the Symptom Intensity Index (M = 1.77; SD = 0.47), and the 90th percentile for the Psychopathological Risk Index (M = 0.45; SD = 0.29). For all subscales, the mean scores for all three groups were at or above the 65th percentile. As a comparison group, the normative data from the general population were used.

In terms of emotional intelligence as measured by the MSCEIT, the TASEVAL group had an average Emotional IQ (M = 92.47; SD = 16.72), with all subscale scores within the average range, except for Deficient Emotional Understanding (M = 89.13; SD = 12.60). The PRIA-MA group showed slight limitations in emotional intelligence, with an average Emotional IQ of 77 (SD = 10.28). In the reGENER@r group, Emotional Understanding (M = 88.05; SD = 15.66) and the Strategic Area (M = 88.38; SD = 16.07) were slightly below average, while the remaining scales were within the average range, yielding an Emotional IQ of 92.21 (SD = 15.25).

Regarding anger expression and control as measured by the STAXI-2, the mean scores for the subscales in all three groups were at or below average for Anger Expression (Pc = 20–50), while Anger Control scores were above average (Pc = 55–80). Notably, both the PRIA-MA and reGENER@r groups had mean scores on the External Anger Control subscale at the 40th percentile (M = 15.06; SD = 5.64). Furthermore, participants in the reGENER@r group scored in the 55th percentile on Internal Anger Expression (M = 13.18; SD = 4.46). On the overall Anger Expression Index, the TASEVAL group scored in the 20th percentile (M = 21.19; SD = 10.08), the PRIA-MA group in the 30th percentile (M = 23.50; SD = 8.41), and the reGENER@r group in the 45th percentile (M = 27.18; SD = 9.12).

In the TECA, the mean scores for the General Index were in the 75th percentile for both the TASEVAL (M = 114.56; SD = 16.42) and reGENER@r (M = 117.18; SD = 16.75) groups. In contrast, the PRIA-MA group scored in the 55th percentile (M = 109.44; SD = 16.57), with a mean score for Perspective Taking in the 40th percentile (M = 26.19; SD = 4.45).

3.3. Comparison of Psychological Characteristics

Significant differences between the groups were found using one-way ANOVA in various variables. In the LSB-50, differences were identified in the Symptom Intensity Index ($F = 3.76$, $p < 0.05$, $\eta^2 = 0.13$). According to post hoc contrasts, the TASEVAL group showed a higher level of symptom intensity compared with the reGENER@r group.

In the MSCEIT, significant differences were observed between the three groups. In Emotional IQ ($F = 5.19$, $p < 0.01$, $\eta^2 = 0.19$), post hoc tests revealed that the PRIA-MA group scored lower than both the TASEVAL and reGENER@r groups. In the experiential area ($F = 5.95$, $p < 0.01$, $\eta^2 = 0.21$), post hoc contrasts indicated lower levels in the PRIA-MA group compared with the reGENER@r and TASEVAL groups. In the strategic area

(F = 3.93, $p < 0.05$, $\eta^2 = 0.14$), post hoc tests showed higher levels in the TASEVAL group compared with the PRIA-MA group. In Emotional Perception (F = 7.75, $p < 0.001$, $\eta^2 = 0.24$), post hoc tests indicated that the PRIA-MA group had lower levels than the other two groups. In Emotional Management (F = 3.77, $p < 0.05$, $\eta^2 = 0.13$), post hoc tests revealed a higher level in TASEVAL compared with PRIA-MA. Regarding the other instruments used, no statistically significant differences were found between the group means (values ranging from F = 0.09, $p = 0.92$ for Seeking Alternative Rewards to F = 2.19, $p = 0.12$ for Perspective Taking).

With respect to substance use as measured by the CAGE, the groups differed in their pattern of alcohol consumption ($\chi^2 = 41.84$, $p < 0.001$). It is worth noting that 50% of the participants in TASEVAL exhibited a pattern of alcohol use that could be categorized as more severe than social drinking. This was observed in 37.5% of PRIA-MA participants and 13.6% of those in the reGENER@r program (Figure 1). In the DAST-20, the mean score for the TASEVAL group (M = 6.56; SD = 3.76) was above the screening cutoff (>5), with 75.3% of participants scoring above the threshold. This situation occurred in 37.8% of PRIA-MA participants (M = 3.94; SD = 4.20) and 36% of reGENER@r participants (M = 4.41; SD = 4.64).

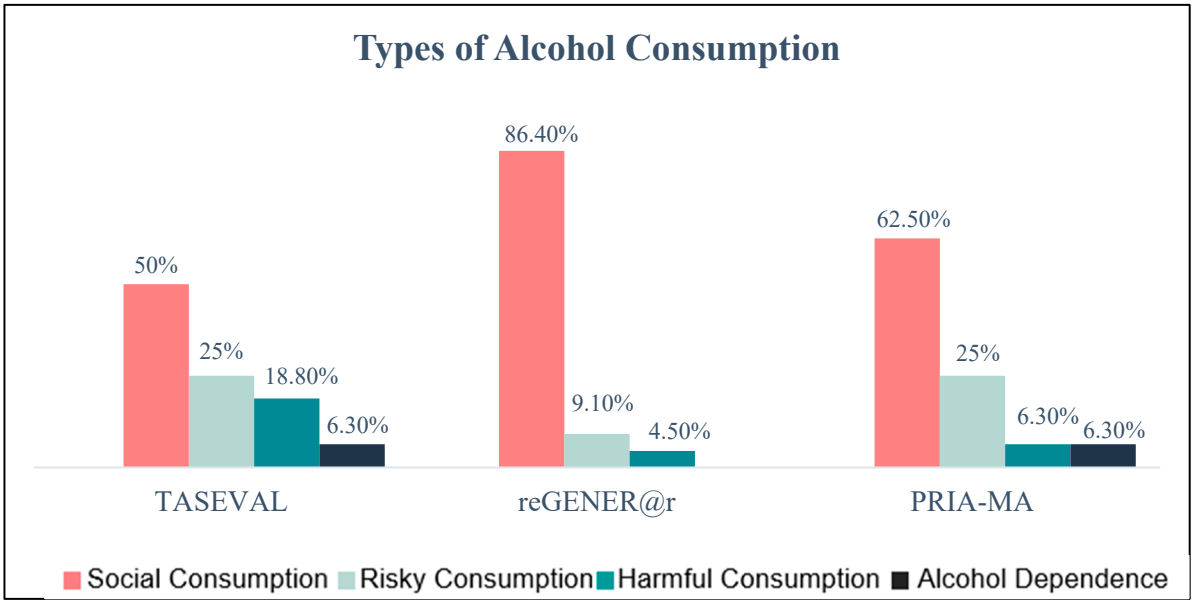

Figure 1. Types of alcohol consumption according to CAGE in participants of the three programs.

Considering these findings, it was deemed appropriate to control for the impact of substance use on the relationship between psychological variables. Partial correlations were computed using the CAGE and DAST-20 data as control variables. The psychological variables included were, first, four coping strategies from the CRI-A (Logical Analysis, Problem-Solving, Cognitive Avoidance, and Emotional Discharge), which represent both avoidance and approach strategies, to study the relationship of other variables to coping styles. The Global Severity Index and Psychopathological Risk Index, which are global scales from the LSB-50, were included to analyze the relationship between the presence of psychopathological symptoms and other parameters. The State Anger, Trait Anger, and Anger Expression Index scales from the STAXI-2 were used to examine how anger relates to other variables. Additionally, Emotional IQ from the MSCEIT and the Global Empathy Index from the TECA were used to study the links between emotional intelligence, empathy, and the aforementioned psychological characteristics.

3.4. Pattern of Relationships Between Variables

In the TASEVAL group, all correlations were high and positive (Table 2). Logical Analysis showed significant correlations with Cognitive Avoidance (r = 0.59, $p < 0.05$), the Global Severity Index (r = 0.59, $p < 0.05$), and the Psychopathological Risk Index (r = 0.63, $p < 0.05$). Significant correlations were also found between Problem-Solving and Cognitive Avoidance (r = 0.55, $p < 0.05$), and the latter with Emotional Release (r = 0.57, $p < 0.05$). The Global Severity Index and the Psychopathological Risk Index presented a significant correlation (r = 0.97, $p < 0.001$), and the Global Severity Index also correlated significantly with Anger State (r = 0.61, $p < 0.05$) and the Global Empathy Index (r = 0.58, $p < 0.05$). The Psychopathological Risk Index showed significant correlations with Anger State (r = 0.60, $p < 0.05$) and the Global Empathy Index (r = 0.56, $p < 0.05$). Regarding the Emotional CI scale, the only correlation observed was with the Global Empathy Index (r = 0.88, $p < 0.001$). Finally, the Trait Anger scale significantly correlated with the Anger Expression Index (r = 0.74, $p < 0.01$).

Table 2. Correlations of psychological variables with control of the effect of consumption in TASEVAL.

	1	2	3	4	5	6	7	8	9	10	11
1. Logical Analysis (CRI-A)	—										
2. Problem-Solving (CRI-A)	0.40	—									
3. Cognitive Avoidance (CRI-A)	0.59 *	0.55 *	—								
4. Emotional Discharge (CRI-A)	0.48	0.35	0.57 *	—							
5. Global Severity Index (LSB)	0.59 *	0.24	0.103	0.48	—						
6. Psychopathological Risk Index (LSB)	0.63 *	0.17	0.70	0.48	0.97 ***	—					
7. Emotional Intelligence (MSCEIT)	0.20	0.54	0.09	0.05	0.35	0.32	—				
8. State Anger (STAXI-2)	0.32	−0.21	0.19	0.25	0.61 *	0.60 *	0.18	—			
9. Trait of Anger (STAXI-2)	0.30	0.14	0.34	0.29	0.53	0.51	0.38	0.25	—		
10. Anger Expression Index (STAXI-2)	−0.43	0.33	−0.06	0.05	0.33	0.32	−0.09	0.31	0.74 **	—	
11. Global Empathy Index (TECA)	0.34	0.40	−0.09	0.10	0.58 *	0.56 *	0.88 ***	−0.04	0.29	−0.17	—

* $p < 0.05$; ** $p < 0.01$; *** $p < 0.001$.

In the PRIA-MA group (Table 3), the correlations were also high and positive. Logical Analysis significantly correlated with Emotional Discharge (r = 0.63, $p = 0.05$), while Cognitive Avoidance correlated with the Anger Expression Index (r = 0.57, $p < 0.05$). The Global Severity Index showed a significant correlation with the Psychopathological Risk Index (r = 0.89, $p < 0.001$). The Anger State scale significantly correlated with the Global Empathy Index (r = 0.54, $p < 0.05$).

Table 3. Correlations of psychological variables with control of the effect of consumption in PRIA-MA.

	1	2	3	4	5	6	7	8	9	10	11
1. Logical Analysis (CRI-A)	—										
2. Problem-Solving (CRI-A)	0.05	—									
3. Cognitive Avoidance (CRI-A)	0.38	−0.05	—								
4. Emotional Discharge (CRI-A)	0.63 *	0.17	0.49	—							
5. Global Severity Index (LSB)	0.27	0.47	0.30	0.46	—						
6. Psychopathological Risk Index (LSB)	0.41	0.28	0.45	0.42	0.89 ***	—					
7 Emotional Intelligence (MSCEIT)	−0.26	0.26	−0.39	0.01	−0.35	−0.44	—				
8. State Anger (STAXI-2)	0.08	0.03	−0.15	0.04	0.22	0.02	−0.18	—			
9. Trait of Anger (STAXI-2)	−0.30	0.16	−0.36	−0.45	−0.09	−0.37	0.22	0.53	—		
10. Anger Expression Index (STAXI-2)	0.14	0.20	0.57 *	0.50	0.24	0.23	−0.20	0.01	−0.29	—	
11. Global Empathy Index (TECA)	−0.45	−0.10	−0.13	−0.22	−0.16	−0.38	−0.38	0.54 *	0.40	0.05	—

* $p < 0.05$; *** $p < 0.001$.

In the reGENER@r group (Table 4), high, positive, and significant correlations were found between Logical Analysis and Problem-Solving (r = 0.68, $p < 0.001$), as well as with Emotional Release (r = 0.70, $p < 0.001$), and a medium significant correlation was observed between Logical Analysis and Cognitive Avoidance (r = 0.46, $p < 0.05$). Problem-Solving presented high, significant, and negative correlations with the Psychopathological Risk Index (r = −0.60, $p < 0.01$) and the Anger Expression Index (r = −0.58, $p < 0.01$), and a medium negative correlation with Anger State (r = −0.45, $p < 0.01$). The Global Severity Index presented high, positive, and significant correlations with the Psychopathological Risk Index (r = 0.87, $p < 0.01$) and Anger State (r = 0.58, $p < 0.01$), and a medium positive correlation with the Global Empathy Index (r = 0.48, $p < 0.05$). The Psychopathological Risk Index showed high, positive, and significant correlations with Anger State (r = 0.69, $p < 0.001$) and the Anger Expression Index (r = 0.56, $p = 0.01$). The Emotional CI showed a high, significant, and positive correlation with the Global Empathy Index (r = 0.65, $p < 0.01$).

Table 4. Correlations of psychological variables with control of the effect of consumption in reGENER@r.

	1	2	3	4	5	6	7	8	9	10	11
1. Logical Analysis (CRI-A)	—										
2. Problem-Solving (CRI-A)	0.68 ***	—									
3. Cognitive Avoidance (CRI-A)	0.46 *	0.30	—								
4. Emotional Discharge (CRI-A)	0.70 ***	0.38	0.30	—							
5. Global Severity Index LSB	−0.08	−0.38	0.03	0.25	—						
6. Psychopathological Risk Index (LSB)	−0.26	−0.60 **	−0.15	0.05	0.87 ***	—					
7. Emotional Intelligence (MSCEIT)	0.33	0.30	−0.26	0.09	−0.09	−0.18	—				
8. State Anger (STAXI-2)	0.02	−0.45 **	0.02	0.11	0.58 **	0.69 ***	0.13	—			
9. Trait Anger (STAXI-2)	−0.18	−0.11	−0.05	−0.08	−0.05	−0.09	−0.04	0.13	—		
10. Anger Expression Index (STAXI-2)	−0.42	−0.58 **	−0.10	−0.23	0.28	0.56 **	−0.45	−0.04	0.33	—	
11. Global Empathy Index (TECA)	0.12	0.02	−0.22	0.17	0.48 *	0.34	0.65 **	−0.45	0.33	−0.06	—

* $p < 0.05$; ** $p < 0.01$; *** $p < 0.001$.

4. Discussion

Evidence-based interventions aimed at prisoners should be considered important, even for those at the preventive level (Andrade et al. 2024; Espinosa-Gárate et al. 2025). Firstly, concerning the first specific objective, the results obtained in the TASEVAL group exhibit similarities with previous studies (Escamilla-Robla et al. 2021), indicating a profile predominantly composed of Spanish men with secondary education. However, a notable difference from prior findings is the absence of partners and children among the participants. Regarding GBV programs, the identified characteristics largely align with the existing literature (Expósito-Álvarez et al. 2024a; López-Barreira and Moral-Jiménez 2020; Remón-Chozas 2022; Sordi-Stock 2015; Van Hoey et al. 2021), with an average age close to 40 years and a predominance of individuals without a partner. Nevertheless, in the present study, most participants reported having two children, which represents a slight deviation from these previous findings.

Moreover, significant differences were observed between the groups. In PRIA-MA, the predominant educational level was primary education, and a high proportion of participants had prior judicial records, which may be related to the severity of their sentences. In contrast, in reGENER@r, the most common educational level was post-compulsory education, and more than half of the participants had no prior criminal record, suggesting sociodemographic differences among program participants.

From a psychological perspective, the findings reveal the presence of psychopathological symptoms across all three groups. This aligns with previous research associating such symptoms with a predisposition toward neuroticism and anxiety in traffic offenders (Faílde-Garrido et al. 2016) and hostility in GBV offenders. However, participants demonstrated medium-to-high scores in global empathy, further reinforcing evidence that challenges the assumption of empathy deficits in GBV offenders (Loinaz et al. 2012a).

In the case of TASEVAL, the findings indicate that emotional understanding represents an area for improvement, potentially affecting the quality of interpersonal relationships and self-awareness (Extremera et al. 2006). Furthermore, the group exhibited significantly lower scores in general anger expression, which contrasts with existing literature on traffic offenders. This discrepancy may be attributed to the nature of committed offenses, which are not necessarily associated with aggressiveness. However, substance use emerged as a significant concern within this group, consistent with previous studies linking alcohol abuse to traffic rule violations (Pallín 2017).

Regarding the PRIA-MA group, deficiencies were observed across all areas of emotional intelligence, consistent with studies indicating that intimate partner offenders tend to score lower in this construct. Impaired emotional intelligence has been identified as a risk factor for the perpetuation of psychological violence. Furthermore, this group exhibited low scores in external anger control, a pattern previously documented in research on intimate partner offenders (Norlander and Eckhardt 2005; Romero-Martínez et al. 2016).

Among reGENER@r participants, slight deficiencies were observed in emotional comprehension and reasoning, consistent with findings on GBV offenders. Intervention programs for GBV offenders in Spain have shown promising results. Recently, Sánchez et al. (2024) reported significant improvements in variables such as cognitive avoidance, emotional attention, and hostile sexism and a reduction in violent behaviors following the implementation of the reGENER@r program. Alarcón Delicado (2023) reported a recidivism rate of 6.3% among those who completed the PRIA-MA program, as well as a positive evaluation of the program by its participants.

In addressing the second specific objective, significant psychological differences were identified among the groups. Notably, TASEVAL participants exhibited a higher intensity of psychopathological symptoms compared with reGENER@r participants, whereas PRIA-MA participants demonstrated lower emotional intelligence competencies relative to the other groups. This is very important for potential expert reports and counter-reports (Palomares-Rodríguez et al. 2024). With respect to substance use, 50% of the participants in the TASEVAL group exhibited a pattern of alcohol use that could be classified as more severe than social drinking (CAGE). This was observed in 37.5% of PRIA-MA participants and 13.6% of participants in the reGENER@r program. On the DAST-20, 75.3% of TASEVAL participants scored above the screening cutoff (>5), compared with 37.8% of PRIA-MA participants and 36% of reGENER@r participants. These results highlight the importance of tailoring interventions to address alcohol and drug use in these populations (Expósito-Álvarez et al. 2024b; Wickens et al. 2025).

Regarding the third objective, correlation analyses revealed distinct patterns across the groups. In TASEVAL, a higher prevalence of psychopathological symptoms was associated with increased transient anger, more frequent use of cognitive-approach coping strategies, while greater state anger was associated with higher empathy. In PRIA-MA, higher anger expression was related to the use of avoidant coping strategies as well as greater empathy. Finally, in reGENER@r, a greater reliance on behavioral-approach coping strategies was linked to a lower presence of psychopathological symptoms and reduced anger intensity. Additionally, in this group, a higher prevalence of psychopathological symptoms was associated with elevated state anger and greater overall anger expression, while higher

empathy levels correlated with better emotional intelligence. The correlations identified among psychological variables provide practical guidance for intervention planning, allowing for program content and strategies to be adapted to the specific psychological profile of the participants.

In short, the incorporation of psychoeducational intervention programs as a condition for the suspension of a prison sentence represents a paradigm shift in the Spanish judicial system, moving from a purely punitive approach to one aimed at reducing recidivism and promoting social reintegration. In this context, gaining an in-depth understanding of the sociodemographic and psychological profiles of participants in programs such as TASEVAL, PRIA-MA, and reGENER@r is particularly important. This knowledge not only allows interventions to be tailored to participants' actual needs but also enhances program effectiveness and ensures that these measures fulfill their rehabilitative function. Moreover, TASEVAL, reGENER@r, and PRIA-MA produce effects beyond the individual level, contributing to social reintegration, violence prevention, and the protection of fundamental rights, thereby strengthening the capacity of the legal and social system to respond to behaviors that undermine the dignity, freedom, and equality of individuals.

Limitations and Future Directions

Despite these findings, certain limitations should be acknowledged. First, the small sample size may limit the generalizability of the results. Furthermore, the scarcity of prior research on the psychological characteristics of participants in these programs, particularly in the case of reGENER@r, poses an additional constraint. Future research should aim to increase the sample size to enhance the representativeness of the results and to assess the effectiveness of program adaptations tailored to the specific characteristics of participants. Additionally, it would be important to examine, within the TASEVAL program, potential differences in the sociodemographic and psychological profiles of men and women who commit traffic-related offenses.

Another limitation of the study was the lack of inclusion of other relevant risk factors that influence offending behavior. For instance, in the case of gender-based violence (GBV) offenders, the role of childhood trauma or adverse developmental experiences is recognized, while in traffic offenses, the influence of impulsivity and other personality factors is highlighted. This underscores the need for future research to incorporate these factors.

The findings suggest that all three groups exhibit high levels of psychopathological symptoms and difficulties in emotional intelligence domains, underscoring the need to evaluate and refine intervention strategies within these programs. Moreover, it would be of interest for future research to incorporate multivariate approaches to more robustly examine group differences.

Author Contributions: Conceptualization, A.I.S., A.F., A.L. and C.B.S.; methodology and formal analysis, A.I.S., A.F., A.L. and M.P.M.; assessment and intervention A.F. and A.L.; writing—original draft preparation, A.I.S., A.F. and A.L.; writing—review and editing, A.I.S., A.F., A.L., E.M., R.Q.-B. and M.P.M.; supervision, A.I.S. and C.B.S.; project administration, C.B.S.; funding acquisition, R.Q.-B. All authors have read and agreed to the published version of the manuscript.

Funding: This research received no external funding.

Institutional Review Board Statement: The study was conducted in accordance with the Declaration of Helsinki, and approved by the Ethics Committee of the University of Granada (n°: 4772/CEIH/2025).

Informed Consent Statement: Informed consent was obtained from all subjects involved in the study.

Data Availability Statement: The data presented in this study are available on request from the corresponding author.

Acknowledgments: We would like to express our gratitude for the support received from all the professionals who collaborated in this work. Our sincere thanks go to the *Centro Matilde Cantos Fernández* (Granada) and to the Penitentiary Institutions (SGIP) for facilitating this project, which aims to shed light on and contribute knowledge to the intervention strategies carried out within the penitentiary environment.

Conflicts of Interest: The authors declare no conflicts of interest.

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