

Tough is not Enough

– Getting Smart about Youth Crime

A review of research on what works to reduce offending by young people

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Foreword

Offending by young people is of great concern to New Zealanders, particularly given the perception that serious and violent offending by young people is increasing. Effective measures are needed to bring youth crime rates down. An investigation of what might actually succeed in doing this is therefore timely.

This literature review sets out to answer the question “what works to reduce crime by young people?” The brief answer is “a great deal”. Rigorous international research shows that many things work to stop young people offending, and some things don’t work. As well as describing the interventions which the best research shows are effective, the review goes beyond this to identify the broad principles that underpin successful interventions.

We know from international research that crime is one of the results when young people fail to do well in the four environments of positive development. These involve success in family, school/work, positive peer group and community development. One of the clearest characteristics of interventions that work is that they help young people start to succeed in one or more of these areas.

This review is a valuable resource for people working on solving the problem of youth crime, from policy analysts to programme providers, and I am pleased that the Ministry of Youth Affairs has been able to contribute to it.

Anne Carter
Acting Chief Executive
Ministry of Youth Affairs

Contents

3	FOREWORD
9	EXECUTIVE SUMMARY
15	INTRODUCTION
16	PART I: PATTERNS AND TRENDS OF OFFENDING AMONG YOUNG PEOPLE
16	Persisters and desisters
18	Serious and Violent Juvenile Offenders
18	Identifying Persistent Offenders
20	PART II: THE BEST TARGETS FOR INTERVENTIONS
20	Introduction
21	Overview of Studies of Risk Factors
23	<i>The Big Eight (Including the Big four)</i>
25	New Zealand Research on Risk Factors
26	Risk Factors for Serious Juvenile Offenders
29	The Relationship between Family Risk Factors and Antisocial Peers
29	The Relationship between Economic Stress, Neighbourhood and Parenting Style – the ‘Epidemic Model’
31	The Importance of School Participation
31	Do Young Women have Different Risk Factors to Young Men?
33	Conclusion: Risk Factors for Young Women
34	Conclusion: All Problems of Young People which Lead to Crime and Could Usefully be Addressed by Interventions

Contents

CONTINUED

34	Individual Factors
34	Family Factors
35	School/work Factors
35	Peer related Factors
35	Community and Neighbourhood Factors
36	RISKS TO ADDRESS AS A PRIORITY
36	For 'Desisters' or Adolescent-Limited Offenders
36	For 'Persisters' or Early Onset Offenders
38	PART III
	PROCESSING OF OFFENDERS
38	Family Group Conferences
41	Offender-Victim Mediation
42	Policing
43	Diversion
45	Probation and Parole, including Restitution and Fines
46	Drug courts
47	Incapacitation
47	What Does not Look Promising
49	SUMMARIES
	WHAT IS PROMISING IN PROCESSING YOUNG OFFENDERS
50	WHAT DOES NOT LOOK PROMISING
51	CONCLUSION

Contents

CONTINUED

52	PART IV: RESPONDING TO OFFENDERS WITH EFFECTIVE SERVICES
52	Introduction
52	Does Anything Work?
53	The Nature of ‘What Works’
57	<i>The Effectiveness and Nature of Cognitive-Behavioural Approaches</i>
57	‘What Works’ Generally
58	Effective Approaches in Residential and Non-Residential Settings
59	<i>What is Effective in Non-Residential settings</i>
60	<i>What is Effective in Residential settings</i>
62	The Importance of the Family in Interventions with Young People
63	<i>Family Therapy</i>
63	<i>Functional Family Therapy</i>
64	<i>Multi-Systemic Therapy</i>
66	<i>Conclusion – Family Interventions</i>
66	School-Based Programmes
70	<i>Conclusion: School-Based programmes</i>
70	Mentoring Programmes
72	<i>Conclusion: Mentoring Programmes</i>
72	Substance Abuse Treatment for Young People
74	Programmes for Violent and Aggressive Youth
75	Support for Young Offenders after Interventions (After-Care)
76	Serious and Violent Juvenile Offending
76	Characteristics of Effective Staff
79	WHAT DOES NOT WORK
82	Conclusion – What Does not Work

Contents

CONTINUED

83 SUMMARY OF ‘WHAT WORKS’

83 In General

84 For Younger Offenders

85 For Older Offenders and Those who Start Later

85 In Residential Settings

86 In Non-Residential Settings

86 For Chronic Offenders

87 Processing Young Offenders

87 In Schools and Education

88 For Drug Abusing Young People

89 SUMMARY OF ‘WHAT DOESN’T WORK’

90 EFFECTIVE WAYS TO ADDRESS INDIVIDUAL RISK FACTORS FOR OFFENDING

94 BIBLIOGRAPHY

Executive summary

There is hope. More than ever before, we know what to do to reduce offending by young people. We know more about how to spend taxpayer dollars wisely to protect the public and reduce the likelihood of serious, violent crime by young offenders than at any other time in the history of society. We also know more about how to build on young people's strengths and address their weak areas so that they are less likely to offend than ever before.

This paper summarises the booming area of research on effective ways to stop young people offending. It is based on the most recent – and reliable – research. One thing that all the reviews and meta-analyses looked at agree on is this:

THERE IS HOPE – OFFENDING BY YOUNG PEOPLE CAN BE REDUCED.

They also agree that no single approach will do this (although there are some approaches that usually don't work). What they indicate is that delivering the right kinds of interventions, to the right people, in the right way, will reduce offending anywhere from five to 50 percent.

The 'right people' in this case are persistent young offenders. They are responsible for most of the crime committed by young people, both serious and trivial. The 'persisters' start offending young – before age 14 and as early as 10 – and start committing serious crimes fairly early in their careers. While this is bad enough, what is worse is that they keep offending well into their twenties and beyond, long after 80 percent of young offenders have given it up as a bad job.

These persistent offenders come to the attention of the authorities early in life, and need to be recognised and channelled into interventions sooner rather than later. The other offenders, usually called 'adolescent limited' or 'low risk', tend to stop offending with minimal intervention. Police cautioning or a court appearance will often be enough to stop this group. These facts point to the first characteristic of effective interventions:

THE WORST CASES NEED THE MOST ATTENTION.

Apart from their early and spectacularly busy criminal careers, the main distinguishing characteristic of persistent young offenders is the number of problems they experience. They come from families who are overloaded with problems and under-equipped with coping skills. Together with their families, persistent young offenders show a range of problems that may include substance abuse, criminal behaviour, accommodation difficulties, poverty, unemployment, mental health problems, violence, neglect and abuse of every type imaginable, poor education, and more.

The question that we have been grappling with so long is: which of these problems lead to crime? Unless we know this, it is hard to know where to best address our time and energy. Fortunately, this is another area of research that has been booming.

And so we come to the second characteristic of effective interventions:

**EFFECTIVE INTERVENTIONS WITH YOUNG PEOPLE ADDRESS THE
KNOWN CAUSES OF OFFENDING.**

These risk factors for offending are:

- Having few social ties (being low in popularity, and engaging in few social activities)
- Mixing with antisocial peers
- Having family problems, particularly poor parental monitoring of children and negative parent-child relationships
- Experiencing barriers to treatment, whether low motivation to change, or practical problems such as difficulty in attending appointments due to lack of transport and work hours
- Showing poor self-management, including impulsive behaviour, poor thinking skills, and poor social/interpersonal skills
- Showing aggressiveness (both verbal and physical, against people and objects) and anger
- Performing and attending poorly at school, lacking positive involvement in and feelings about school
- Lacking vocational skills and a job (for older offenders)
- Demonstrating antisocial attitudes that are supportive of crime, theft, drug taking, violence, truancy and unemployment
- Abusing drugs and alcohol
- Living in a neighbourhood that is poor, disorganised, with high rates of crime and violence, in overcrowded and/or frequently changing living conditions.
- Lacking cultural pride and positive cultural identity.

One thing that almost all studies agree on is that the most effective approach in changing these risk factors for the better is to target more than one of them, and use a variety of techniques to change them. The research shows that effective interventions are multi-faceted and multi-modal, that is, they:

TARGET MULTIPLE CAUSES OF OFFENDING USING MULTIPLE TECHNIQUES.

This means that instead of simply trying to improve achievement at school, an intervention may also aim to improve parents' skills in supervising their children and spending positive time with them on school-related activities. Or it may target both employment skills and education at the same time. The one proviso here is that the young person must demonstrate the needs that are being targeted.

The other part of this is that staff use a number of techniques with the young person. This is covered more fully in the next principle, but could mean not only modelling new skills and responding positively when the young person uses them, or writing a contract with them that says they will get rewards if they go to school.

The next question is: how do effective interventions go about addressing these risk factors? Put simply, the answer is:

EFFECTIVE INTERVENTIONS TEACH NEW SKILLS IN ACTIVE WAYS.

In particular, they use cognitive and behavioural techniques. There is nothing mysterious about these – they are simply jargon for the techniques that most parents use to bring up their children. Parents show their children how they want them to behave, and then respond positively when children mimic them.

They also teach them useful ways to think about situations, whether by instruction or example. A parent who responds to someone laughing by assuming that person is laughing at them teaches their child to take neutral events personally, and jump to conclusions. If they also respond aggressively to someone laughing, they are well on the way to teaching that child how to be violent.

Likewise, in effective interventions, staff model the kinds of behaviour and values they want to see, rather than lecturing about them. They then respond positively when young people imitate them. Good staff also give young people opportunities to practice the new skills they are learning, rather than expecting them to learn it all from the whiteboard.

Effective interventions also teach new ways of thinking, such as using problem solving techniques, or becoming aware of the kinds of ‘hot’ thoughts that lead to anger and violence and changing them to ‘cooling’ thoughts.

Lastly, the more of these techniques that an intervention uses, the more likely it is to have an impact. These interventions are known as “multi-modal” approaches and are reliably more effective. They use a number of techniques to target a number of risk factors.

As well as teaching new skills in active ways, effective interventions pay attention to what happens between people, which is where most learning takes place. Put simply:

GOOD OUTCOMES NEED GOOD PEOPLE.

This means staff who are able to relate to young people easily, establishing warm and friendly relationships, but also setting limits and enforcing the rules. Good staff are not too hard and not too soft.

It also means making sure that young offenders spend most of their time with people who respect the law and are succeeding in constructive activities. This might be through school, work, mentoring, or leisure pursuits like sports. Above all, it means keeping antisocial young people away from each other as much as possible, and encouraging them in contexts other than their antisocial peer group.

Another clear message from the research on ‘what works’ with young people is that:

**EFFECTIVE INTERVENTIONS TOUCH THE FOUR CORNERS OF A YOUNG PERSON’S LIFE –
FAMILY, SCHOOL/WORK, PEER GROUP AND NEIGHBOURHOOD.**

Young people are often still living with their family and greatly affected by what happens within it. So it is no surprise that involving the family increases effectiveness. The peer group is just as great an influence, and having an impact on this corner of life has rich paybacks in terms of reduced offending. Improving attendance and achievement at school is a surprisingly effective intervention, even with chronic offenders. Neighbourhood factors are also risk factors for offending, although they are not looked at in depth in this paper.

One of the less often addressed questions in youth justice is ‘does the way a young person is processed in the criminal justice system have any impact on their future offending?’ This paper takes a brief look at this question, and comes up with a tentative answer:

GOOD PROCESSING SEEMS TO MAKE GOOD OUTCOMES MORE LIKELY.

In particular, fair and respectful treatment by youth justice personnel seems to make a positive difference to outcome. Meetings between victims and young offenders, sometimes including their families, also seem to make a difference. Arrest seems to have little positive impact on offending. Particular types of sentences also seem to have little impact on offending, with the exception of probation and restitution/fines. One thing that does come through from the research is that sentences seem to be more effective when they have services attached to them that address risk factors, and use the relationship between youth justice staff and young people to foster change.

Another important message from the research on ‘what works’ is:

RESIDENTIAL INTERVENTIONS HAVE TO WORK HARDER TO SUCCEED.

Some rigorous studies show that interventions where young people live-in are less effective than the same interventions run on a day attendance basis, while others only show a trend in this direction. Overall, it is clear that live-in interventions can be effective as long as they are well-designed and extremely well-run. It seems that interventions are not only less costly when they are not live-in, but also more likely to be effective. This is probably because when antisocial young people get together they tend to encourage each other to be even more antisocial. Where live-in interventions work, it’s because the programme is carefully designed to include the most effective approaches, and run to high standards, usually in a dedicated unit or residence.

So this is what does work, so far. But what doesn't work? What either doesn't have an impact on offending or increases it? The most reliable conclusion about what doesn't work is:

TOUGH IS NOT ENOUGH.

Interventions that focus only on 'getting tough' with young offenders almost always fail. These include boot camps, scared straight, shock probation, para-military training and any other intervention that tries to scare or punish young people out of crime.

The reasons are fairly simple. The young people who are the most serious and persistent offenders are usually that way because they grew up in families so plagued with problems that they simply didn't learn a lot of the skills and values necessary to live a successful, law-abiding lifestyle. These are skills like getting along with other people, knowing how to solve problems, stopping and thinking before acting and the three r's, reading, writing and arithmetic. They also failed to learn values such as respect for the safety of others, or their property, because their families didn't show this respect themselves.

This is not to say that persistent young offenders should be seen as victims who have no responsibility for their actions. To the contrary, they need to be held accountable, and this is a characteristic of effective interventions. To this extent, effective interventions are tough.

But while a child who knows how to read is more likely to do his reading homework when given a sharp reminder to do so, not even the worst punishment can make a child read when he doesn't know how. You could shut him in his room for years on end, and he still wouldn't learn. Instead, he needs to be given an opportunity to learn the skills that make reading possible. He also needs to be exposed to the values and standards that tell him reading is important, and why.

In just the same way persistent young offenders need not only to be held accountable for their behaviour, but to be exposed to opportunities to learn new behaviour, and the values that will help them to value that behaviour. It comes as no surprise then that the most effective interventions are the ones that do just that.

Having clear rules and sanctions, fairly applied, and holding young people accountable for their behaviour is as far as tough goes before it stops being effective. Even then, rules and sanctions must be combined with other interventions to have an impact on offending.

In summary then:

1. **THERE IS HOPE – OFFENDING BY YOUNG PEOPLE CAN BE REDUCED.**
2. **THE WORST CASES NEED THE MOST ATTENTION**
3. **EFFECTIVE INTERVENTIONS WITH YOUNG PEOPLE ADDRESS THE KNOWN CAUSES OF OFFENDING.**
4. **TO HAVE THE MAXIMUM IMPACT, TARGET MULTIPLE CAUSES OF OFFENDING USING MULTIPLE TECHNIQUES.**
5. **EFFECTIVE INTERVENTIONS TEACH NEW SKILLS IN ACTIVE WAYS.**
6. **GOOD OUTCOMES NEED GOOD PEOPLE.**
7. **EFFECTIVE INTERVENTIONS TOUCH THE FOUR CORNERS OF A YOUNG PERSON’S LIFE – FAMILY, SCHOOL/WORK, PEER GROUP AND NEIGHBOURHOOD.**
8. **GOOD PROCESSING SEEMS TO MAKE GOOD OUTCOMES MORE LIKELY.**
9. **RESIDENTIAL INTERVENTIONS HAVE TO WORK HARDER TO SUCCEED.**
10. **TOUGH IS NOT ENOUGH.**

Introduction

This paper sets out to examine the most recent and rigorous research into ‘what works’ to reduce offending by young people. A ‘young person’ in this context is taken as being someone between the ages of 10 and 19 years. The paper goes beyond the accepted ‘youth justice’ system, comprising Police and Child, Youth and Family Services, to also consider probation and prison.

Part I of the paper starts by looking briefly at patterns of offending by young people, particularly the small group of offenders responsible for the majority of offending.

Part II of the paper examines the problems and characteristics of young people that put them at risk of offending. These are the obvious targets for interventions – if the causes of offending can be found, then they can potentially be changed. The most recent and reliable research in this area is canvassed to give a picture of what the best targets for intervention are.

Part III of the paper looks briefly at what – if any – impact the way offenders are processed has on offending. This includes the way police deal with young offenders, the impact of various sentences, use of approaches such as Family Group Conferences, and the combination of processing and other interventions.

The last, and largest, section of this paper is Part IV, which deals with effective responses to offending by young people. This is split into several sections, starting with a general ‘what works’ section, which gives an overview of current research into interventions which reduce re-offending. The paper then goes on to examine more specific issues, including effective approaches in residential and non-residential settings, the importance of working with the families of young offenders, programmes for aggressive and violent youth, drug programmes, support after intervention, and characteristics of effective staff. An overview of what the research tells us ‘doesn’t work’ to reduce re-offending follows.

Part IV concludes with summary tables of ‘what works’ generally, and in each specific area, and ‘what doesn’t work’, as well as a table outlining effective approaches for each of the main risk factors identified in Part II.

PART I:

Patterns and Trends of Offending among Young People

One truth that has emerged from the burgeoning research is that not all offenders are made the same. Of all the young men who commit at least one offence (and at least a quarter of them do) the vast majority will settle into a law abiding lifestyle by their mid-twenties. At this point they will only have committed a few trivial crimes. But around 15-20 percent of the 'ever offended' group will take to it like a fish to water, and go on merrily committing many property crimes and a few violent crimes until they are reasonably senior (Lovell and Norris 1990, Moffit 1993).

This pattern of quite large numbers of young men committing at least one crime, but only a small group being responsible for a large proportion of all crimes, is as evident in New Zealand as it is internationally (Lovell and Norris 1990, Moffit 1993). Around 75 percent of young people in New Zealand never offend. Of those 25 percent who do, the vast majority (80 percent) offend only once or twice. The remaining 20 percent of young offenders tend to commit a high number of crimes across a greater number of years.

Contrary to some perceptions of a 'crime wave' amongst young people, lifecourse persistent young offenders comprise only four percent of all young people. Around three percent of New Zealand boys and less than one percent of New Zealand girls will be responsible for half of their generation's juvenile offending (Scott 1999).

The pattern holds in Australia. One in two young males and one in three young women in that country commit at least one crime, most of these minor crimes. Only a small group of youth (most of them male) commit serious crimes, both violent and non-violent. That's the good news. The bad news is that this small group (around six-ten percent of juvenile males) commits 50-70 percent of all general crime and 60-85 percent of all serious crime committed by youths (Tolan and Gorman-Smith 1998, cited in Boni 1999).

PERSISTERS AND DESISTERS

These two groups of young offenders have been named persisters and desisters. The desisters commit at least one crime, but tend to start later in adolescence, after 13, and stop offending by age 24 to 28 (Moffit 1996). In contrast, the persisters start early, before age 14 and as early as 10, offend at high rates and keep offending into adulthood. They are most likely to attract custodial sentences because of the extent of their offending history. Both groups commit serious offences, but the persisters tend to commit more of them, partly because they are committing crime at such a high rate over a long period (Lovell and Norris 1990, Scott 1999).

Persisters show a high number of risk factors from an early age, whereas desisters tend to show only two – substance abuse and mixing with antisocial peers (Quinton et.al. 1993, Fergusson and Horwood 1996, Fergusson et.al. 1996, all cited in Scott 1999). Persisters engage in five to 20 times as much offending as lower risk young offenders. They start their antisocial behaviour with

minor problems in early childhood, move on to serious problem behaviours, then begin serious offending. As they continue their criminal career, they commit serious offences along with a high rate of less serious offences (Loeber and Farrington 1998).

Terrie Moffit is one of a group of researchers who has put forward the notion of persistent versus desisting offenders. She cites research from a number of sources that shows that 85 percent of young people who offend stop by age 28 (Moffit 1996). She goes beyond reported crime to look at self-reported deviant behaviour and finds that 'antisocial behaviour begins long before the age when it is first encoded in police data banks' (1996:12). She puts the start of antisocial behaviour as early as three.

Moffit presents fairly convincing evidence that those young people who start behaving in antisocial ways (for instance, violently) at a young age continue to do so until after their late twenties, when their peers have gone on to other things. For instance, she quotes one study by Nagin and Land in 1993 that showed that offending remained high and stable from age ten to thirty-two for a group of working-class London men labelled 'high-rate chronic offenders'. She also provides convincing evidence that this group rarely makes up more than 10 percent of all males in an age cohort. She concludes that:

'a substantial body of longitudinal research consistently points to a very small group of males who display high rates of antisocial behaviour across time and in diverse situations. The professional nomenclature may change, but the faces remain the same as they drift through successive systems aimed at curbing their deviance: schools, juvenile-justice programs, psychiatric-treatment centers, and prisons' (1996:15).

In the same chapter, Moffit also examines the evidence for the existence of a discrete group of young people who start behaving antisocially but do not persist with it, whom she calls 'adolescent limited'. She describes the tendency of males behaving badly during adolescence as so common that it is almost the norm. Overseas figures run to one-third of males being arrested during their lifetime for a serious criminal offence, while 80 percent have police contact for some minor infringement, most of them while adolescent. Even more startling is the research Moffit cites on self-reports of crime which 'have now documented that it is statistically aberrant to refrain from crime during adolescence' (1996:15). In New Zealand, about one third of an age cohort took up the antisocial ways usually only noticeable in the small 'persistent' group once they were aged between eleven and fifteen. While late starters, they made up for this by breaking the same variety of laws as their antisocial peers, and as frequently, as well as appearing in Youth Court as often. By age 18, only seven percent of the New Zealand boys who were interviewed denied any delinquent activity in the previous year. But both overseas and New Zealand research would suggest that most of these young men would cease all offending by their mid-twenties (Moffit 1996, Lovell and Norris 1989).

Moffit (1996) mentions further characteristics of the 'adolescent limited' group, including that they may start and end their offending careers quite abruptly. They may also behave antisocially in some environments (such as with friends) and not in others (such as school) so that there is less agreement between parents, teachers and the young men about their antisocial behaviour, and they 'have sporadic, crime-free periods in the midst of their brief criminal careers'.

SERIOUS AND VIOLENT JUVENILE OFFENDERS

Unfortunately, it may not be as clear and simple as Moffit (1993, 1996) and other researchers paint it. Research by Loeber, Farrington and Waschbusch (1998 in Loeber and Farrington 1998) suggests that there may be a group of serious violent young offenders who are not chronic offenders. Neither do they appear to be typical ‘desisters’, with their pattern of high rates of varied offending across a limited time period. Rather, there seems to be a group of young people who commit serious violent offences without a history of much other crime at all.

According to this research, only a third of chronic offenders had committed at least one violent crime. But although the bulk (80 percent) of chronic offenders were also serious offenders not all serious offenders were chronic offenders. That is, while only 30 percent of persistent offenders committed crimes of violence, fully 80 percent had committed at least one serious nonviolent crime (such as burglary, serious larceny, motor vehicle etc). So persistently chronic offenders are much more likely to commit serious crimes than violent crimes.

Just to confuse matters, half of all young people who commit at least one violent offence also offend chronically (five times or more). This means that half of the young people who commit violent offences do so in the context of a whole raft of other ongoing offending, serious and non-serious.

The other half commit only violent offences, and not very many of them (op cit). This does not fit with the pattern describe by Moffit (1996) above, where ‘desisters’, while starting late, offend at quite high rates during their short career and try their hand at the full range of crimes. All of this suggests that there may be special indicators for violent offenders other than the ones that predict chronic offending.

The authors also found little evidence of specialisation. The serious juvenile delinquent with only violent offence was rare. Most serious juvenile delinquents (those who commit at least one serious crime in their career, whether violent or not) committed one serious violent offence and several serious non-violent offences.

IDENTIFYING PERSISTENT OFFENDERS

Clearly, persistent young offenders are such a scourge that it is imperative to find out who they are – and to stop them – as early as possible. The most efficient way of doing this is probably to identify and work with high risk families when children are very young. But as this paper is concerned with young people from age 10 to 19 who are involved in some way in the youth justice system, this is beyond its scope. So it becomes the task of the youth justice system to identify those young people most likely to offend at as early an age as possible, and then shepherd them into effective interventions.

However, this is not an area without controversy. Among Australian researchers there is some disagreement about the best age to identify persistent offenders. Coumarelos (1994) carried out an analysis of cost-effectiveness and concluded that it is more cost-effective to intervene after a young person has made several court appearances. She suggests that intervening after the first court appearance is not as cost-effective. This is because the proportion of young people who will turn out to be non-persistent offenders and leave the youth justice system without intervention is greater at first appearance. It is only after a number of appearances (often taken as five) that chronicity of offending starts to become clear.

However, Couramelos (1994) does not investigate the possibility of using risk prediction strategies to identify persistent offenders even at first court appearance. This could mean a greater impact at that early point through focussing on high risk young people, rather than waiting until they keep turning up in court. Factors that could be used to identify this group include age at first appearance, most serious offence at first appearance, age at first self-reported offence, family background (particularly multi-problem families, and those with poor supervision and low affection), schooling history, alcohol and drug use, and history of abuse and neglect (Couramelos 1994).

In contrast, Cain (1996) warns that if intervention is left as late as Couramelos suggests, antisocial attitudes and behaviours will become more entrenched. He argues that 'both financial and social costs will be reduced by identifying high-risk youth offenders at their first court appearance and selectively targeting them with programmes and services' (Cain 1996, cited in Barwick 1999).

The nub of the question here is: how effective is the risk prediction tool being used? If it has a high hit rate, and can predict with 70 percent plus accuracy which young people are most likely to re-offend, then it may well save money if used earlier. This is particularly true if it can identify the bulk of those likely to commit a serious offence or receive a residential (and therefore costly) sanction.

Work in the adult justice system suggests that this is indeed a possibility (Bakker, O'Malley and Riley 1999). But the key here has been to focus on 'tombstone' or static risk factors – things like age at first offence, number of prior offences and other things that cannot be changed by time. This is all very well in the adult system, where offenders have a few years under their belt to accumulate convictions and sentences which help predict their future. But it is harder with young offenders who are just starting off their offending careers.

However, it is very important to do so. As Graeme Scott (1999) so vividly puts it 'most recidivist adult offenders are young offenders who grew up' (pers.comm.). The majority of offenders in the adult system started offending at a young age, so if they can be identified at a young age we could save a huge amount of outlay on police processing, court appearances and sentences.

PART II:

The Best Targets for Interventions

INTRODUCTION

While it seems that almost everyone has an opinion about what should be done to reduce crime, it is only recently that good information has become available on the kinds of problems that actually lead to crime. It stands to reason that addressing these causes of crime is the most promising way to reduce offending by young people. This section therefore looks at problems that research shows are worth addressing to reduce crime by young people.

These problems are identified by looking at all the difficulties and stresses that might lead to a person getting involved in antisocial or even illegal behaviour. Taken as a group, these problems are usually described as ‘risk factors’. Lisa Hema (1999c) gives the following definition of risk factors:

“risk indicators or factors are those aspects of an individual, family and/or surrounding neighbourhood/society that contribute to the individual acting in spite of the possibility of harmful consequences for the individual or others”.

This group of factors which put people at risk of offending is usually divided into two groups:

1. ‘dead’ or ‘tombstone factors’, usually referred to in the research as ‘static risk factors’ because they don’t change. These are factors such as age at first offence, number of prior offences, total time in custody, age and gender. They are very good predictors of who will offend again, but cannot be changed by any intervention
2. ‘live’ risk factors, often called ‘dynamic’ risk factors in the research because they can change. These are aspects of the individual or their environment such as poor family monitoring of children, mixing with antisocial peers, doing poorly at school, or impulsive behaviour. They are often referred to as ‘criminogenic needs’ or simply ‘needs’ because they are needs of the individual that lead to criminal behaviour. Because they can be changed, they are the prime targets for intervention.

This section looks at the whole range of risk factors, but puts more emphasis on those that can change because they are more relevant to reducing re-offending. It is fairly evident that if a problem makes offending more likely, then having a positive impact on that problem will make offending less likely.

Before looking at the full range of risk factors, it is useful to enquire into how many young people show risks for offending. Joy Dryfoos summarised findings for the incidence of high risk

behaviour for three risk factors: substance abuse, delinquency (also known as antisocial behaviour) and school failure (in Hema 1999c). She found the following:

- about 15 percent of all 14-17 year olds fell into the **Very High Risk** category with almost two thirds having been arrested and most having been intensely involved in a number of high risk activities
- a further 15 percent were categorised as **High Risk** but had not yet reached court
- 35 percent of all 14-17 year olds were **Medium Risk**, involved in at least one or two high risk behaviours but not as intensely as their high risk peers
- only 20 percent of this group was categorised as **Low Risk**, involved in risky behaviours to a limited degree but not sufficiently to place their futures in jeopardy.

This is a worrying indication that quite a number of young people are involved in some risky behaviours.

OVERVIEW OF STUDIES OF RISK FACTORS

One recent study which looked at what predicts offending focussed in particular on those things that could be changed by intervention – the natural targets of rehabilitation. The researchers, Hawkins, Herrenkohl et.al. (in Loeber and Farrington 1998) reviewed the literature and found the following predicted offending:

- Individual factors including:
 - medical or physical condition (for example pre-natal and post-natal complications)
 - psychological characteristics (for example aggressiveness, anti-social behaviour)
- Family factors including:
 - parent criminality
 - child maltreatment
 - family or marital conflict
- School factors including:
 - academic failure
 - truancy and dropping out of school
- Peer related factors including:
 - delinquent siblings
 - delinquent peers
 - gang membership
- Community and neighbourhood factors including:
 - poverty
 - community disorganisation
 - availability of drugs.

Interestingly, this review shows that dysfunction in any of the four areas in which youth development takes place (family, community, school and peer group) can lead to criminal behaviour. The nature of the dysfunction which leads to offending is very specific, however.

Lisa Hema undertook a comprehensive review of risk factors for Child, Youth and Family Services in New Zealand (1999c). She grouped risk factors under the following headings:

- **Neighbourhood**, including extreme poverty, poor living conditions, high unemployment, disorganised neighbourhoods with high populations, high crime and violence rates and low levels of resident attachment to the area, high turnover of population with consequent lack of attachment to neighbours, availability of drugs and firearms, and adult involvement in crime.
- **Family**, including poor family management practices, poor parental supervision and monitoring, harsh or inconsistent parental discipline, parental failure to set clear and consistent limits and expectations, family and marital conflict including verbal and physical abuse, and favourable parental attitudes towards crime.
- **School**, including academic failure, lack of attachment or commitment to school, early and persistent antisocial behaviour at school from 5-10 years, truancy, dropping out and school transitions.
- **Individual**, including alienation and rebelliousness, early initiation of violence and delinquency, sensation seeking and low impulse control, perinatal difficulties, minor physical abnormalities and brain damage.
- **Peer**, including sibling influence, violent and delinquent peer groups, mixing with peers who hold favourable attitudes towards delinquency and gang membership.

In an unusual move for a literature that is usually firmly focussed on the dark side of human nature, Hema also listed some of the factors that protect against risk. These include:

- being female
- having high intelligence
- having a positive social orientation
- being of a resilient temperament
- having supportive relationships with family members or other adults
- healthy beliefs and standards, including family and community norms that are opposed to crime and violence, and support educational success and healthy development (Hema 1999c).

Don Andrews and Robert Hoge, two Canadian criminologists, make the point that ‘the causes of youthful criminal activity are complex, and ... reside in a network of interacting variables relating to the characteristics and circumstances of the young person’ (Hoge and Andrews 1998). They divide them into six major groups:

- a) the developmental history of the youth
- b) attributes of their family situation, including inadequate parental supervision, inappropriate discipline, inconsistent parenting and poor relationships with either their mother or father
- c) personality, behavioural and cognitive attributes, including verbal and/or physical aggression, tantrums, short attention span, poor tolerance of frustration, and little appropriate guilt
- d) educational and employment experiences, including disruptive behaviour in the classroom and/or school grounds, low achievement at school, problems with school mates and/or teachers, truancy and unemployment

- e) peer group associations, particularly having acquaintances or close friends who are involved in antisocial activities, and having few acquaintances and friends who are involved in positive activities
- f) positive beliefs and attitudes towards crime and other antisocial activities, including defying authority, and either not seeking or actively rejecting help.

Andrews also cites a number of risk factors which he refers to as the ‘big four’ and the ‘big eight’ respectively. While these are risk factors for offenders of all ages, there is no reason to assume they do not apply to young people.

The Big Eight (Including the Big four)

- mixing with antisocial peers who are involved in delinquency or crime
- history of antisocial behaviour (includes any previous offence but can also include fighting, bullying and ‘hidden’ offending)
- antisocial personality (impulsive, restlessly aggressive)
- antisocial attitudes (supportive of crime and other antisocial acts, not supportive of education, work and other conventional activities)
- problems at home, particularly poor parental supervision of activities and friends, and low parental warmth
- problems at school/work, with achievement/attendance
- leisure/recreation, including use of free time, with a lack of positive recreational activities and much time spent in passive recreation such as TV and video games
- substance abuse (Andrews and Bonta 1994).

Andrews’ research with his colleagues also shows that the more severe any of these problems is, or the greater the number of these problems that they have, the more a person is at risk of future crime (McLaren 1998b). Persistent offenders tend to show the most severe and greatest numbers of risk factors from a relatively early age. As Scott (1999) notes, desisters and persisters are at separate ends of a continuum of offending defined primarily by the number of risk factors the young person has experienced.

Recent research by Dowden and Andrews (1999) provides more stringent measures of risk factors for young offenders. Ranked in order of their correlation with the effect sizes of the interventions that targeted them, they look like this:

- other criminogenic needs (all needs not elsewhere stated in this list)
- family: supervision of activities, restrictions on hours away from home, acceptability of friends and acquaintances
- family: affection, warmth
- barriers to treatment (not defined)
- self-control of emotions and behaviour
- anger/antisocial feelings
- vocational skills and job
- academic
- prosocial model
- antisocial attitudes.

There are a number of interesting points that fall out of this research. The first is that ‘other criminogenic needs’ is the most powerful. From the discussion in this paper, this seems to refer to the finding that increasing the *number* of risk factors addressed by an intervention increased its impact.

The second is that family factors come at the beginning of it, rather than towards the end as they do with Andrews’ ‘Big Eight’ list, indicating that this research finds family factors more important than previous research. The third is that reducing antisocial peers does not appear on the list because its correlation with effect size is not statistically significant. It is difficult to know what to make of this, given that it ranks so high in the Big Eight, but this may be because of the very low number of studies (8) that targeted reducing antisocial peers.

As a later section makes clear, risk factors to do with the family tend to mediate and lead to the risk factor of mixing with antisocial peers, and the result above could be a reflection of this. Another possibility is that there are not very many interventions effectively targeting this risk factor, or they are not being studied widely, because of a lack of understanding of the importance of antisocial peers.

Barriers to treatment is a factor that does not appear in any other study, and it is difficult to know what this represents. It could refer to increasing motivation, but could also refer to reducing practical barriers to involvement, such as lack of transport and working long hours, by coming to the family home in the evening. These are specifically addressed by Multi-Systemic Therapy, which is one of the more effective interventions available (refer Part IV for more details).

One of the factors that has come up in every list so far is ‘mixing with antisocial peers’. This usually means mixing with other young people who are truanting from school, using (and selling) drugs, and involved in petty theft and assault. While this is clearly an important risk factor to target with any intervention, recent research by Ary et.al. (1999) suggests that peer influence is only powerful when there has been a major breakdown in the parent-child relationship.

Australasian research backs up international research, confirming risk factors under each of the five areas of individual, family, peer, school/work and community/neighbourhood. Weatherburn and Lind (1997 cited in Boni 1999) found the following risk factors to be most significant for Australian juveniles:

- neglect
- poverty
- single parent families
- crowded dwellings.

However, when they carried out a path analysis on the risk factors they found neglect to be the most important causal influence, mediating the effects of all the other factors.

Other Australian researchers have found the following to be most predictive of reappearance in the justice system:

- age at first offence
- type and severity of first offence

- number of offences
- progressively smaller gaps between offences (Cain 1996 and Coumarelos 1994 cited in Barwick 1999).

Unfortunately for those of us interested in effective intervention, these are all ‘tombstone’ factors that cannot now be changed. However, these are useful for the very important job of identifying persistent offenders, as ‘dead’ factors are very powerful in predicting future offending (Bakker, Riley and O’Malley 1999). While ‘live’ or dynamic factors which can still be changed are mildly predictive, they do not seem to reach the reliability of the dead factors in predicting future crime.

NEW ZEALAND RESEARCH ON RISK FACTORS

In the New Zealand setting, Gabrielle Maxwell and Alison Morris have investigated factors that are associated with re-offending by young people (1999c). These are correlates rather than established causes of offending, but important in that they are the first truly New Zealand predictors that have been identified.

- Early life experiences:
 - not being cared for as a child
 - having a young parent and parents separating or living apart
 - showing signs of psychological disturbance
 - family having little money, living in many places
 - parental criminality and involvement in the use of drugs
 - harsh physical punishment, physical, sexual and/or emotional abuse
 - witnessing family violence, being a victim of bullying
 - family not knowing where their children were when they went out, or not supervising children’s leisure activities
 - not having a relationship with their father.
- Early negative outcomes:
 - being a problem child at home and school
 - early detected and self-reported offending
 - not being involved in sport, not having constructive spare time occupations
 - doing badly at school, not having school qualifications
 - early involvement in sex.
- Family group conference events:
 - young person and parents feeling shamed at the family group conference
 - not being remorseful.
- Subsequent life events:
 - not gaining employment after the family group conference
 - not having a job or close friends since the family group conference
 - not having had some training since the family group conference.

While Maxwell and Morris (1999c) have used a different method of categorising risk factors than has been used elsewhere, it is clear that many of the factors they have identified would fit under the individual, family, school/work and peer headings used elsewhere. Their important new findings concern events at the family group conference, and matters of cultural pride, although the latter did not make it through the analysis as one of the key predictive factors.

Also identified in their research are some factors concerning the family group conference which predicted **not** being reconvicted. These are equivalent to the ‘protective factors’ cited by Hema (op cit). They are:

- remorse: the young person completing tasks, feeling sorry and showing it, and feeling they had repaired the damage, as recalled by both the parent and young person
- not feeling shamed: both the parents and the young person not being made to feel like a bad person
- participation: parents participating in decision making and young people feeling involved in the family group conference decision making
- acceptance: both the parents and young person agreeing with the family group conference outcome
- meeting: the young person meeting the victim and apologising to him/her.

RISK FACTORS FOR SERIOUS JUVENILE OFFENDERS

One of the best studies of the predictors of crime in young people who become violent or serious delinquents was recently reported by Lipsey and Derzon (1998, cited in Loeber and Farrington 1998). It identified two groups of risk factors, each for a different age group. Each is ranked here in order of effect size, which reflects its impact on offending, from greatest to least. Young people aged six-11 were most likely to go on to commit crimes at ages 15-25 if at this younger age they:

- had previously committed a non-serious offence
- were using alcohol, drugs or tobacco
- were male
- came from a family of low socio-economic status
- had antisocial parents (involved in crime, violence or showing psychopathology).
- were aggressive (verbally, physically, towards people or objects).

Of more direct relevance to this review, the strongest predictors of criminal behaviour among the older 12-14 age group once they reached 15-25 were (in order of statistical significance):

- lack of social ties (low popularity and few social activities)
- mixing with antisocial peers
- having committed a non-serious offence.

One thing of interest here is the way the risk factors change as the young person moves through developmental stages associated with puberty and reaching adolescence. General antisocial behaviour (substance use and non-serious offences) and family factors (poor and/or antisocial parents) give way in importance to interpersonal factors outside the family as the child ages – popularity, social activities and mixing with antisocial others. Committing non-serious antisocial acts is the only risk factor the two age-groups share.

Lipsey and Derzon (1998) go on to rank the risk factors for each age group to compare their importance at the two life stages:

6-11 AGE-GROUP		12-14 AGE GROUP
Rank 1 group		
Non-serious offences Substance use		Social ties Antisocial peers
Rank 2 group		
Gender Family socio-economic status Antisocial parents		Non-serious offences
Rank 3 group		
Aggression Ethnicity		Aggression School attitude /performance Psychological condition (impulsivity, daring) Parent/child relations Gender Physical violence

What is clear for the group we are most interested in (12-14) is that social activities and relationships come into prominence, and substance abuse and family characteristics subside in importance. However, we should remember that family and school factors mediate peer relationships, and so are important targets for this reason (Ary et. al. 1999). These rankings are reflected in the final list of risk factors and appropriate interventions at the end of this section.

The good news about these lists is that most of the risk factors in them can be changed by intervention (the exception is gender). The even better news is that interventions exist which can reliably affect the most serious of these risk factors. These are explored in the ‘responding to offending’ section.

In the same volume, Loeber and Farrington identified a number of risk factors which serious and violent juvenile offenders will display (cited in Scott 1999). These include:

- substance abuse
- antisocial parents, involved in crime, drug use etc
- conduct disorder, involving poor control of behaviour and aggressive/hostile behaviour
- deviant peers who are also involved in petty crime, substance abuse etc
- gang involvement
- school failure
- a background of abuse, particularly sexual abuse.

Multi-Systemic Therapy (MST) is one of the most effective interventions to emerge in recent years, reducing re-offending rates by up to 50 percent. What’s more, it works with chronic,

violent, recidivist young offenders who are headed for prison, and it does so in the community. One of the reasons that MST is so successful appears to be that it targets the problems that actually lead to offending.

In a 1990 article, Charles Borduin and Scott Henggeler, the originators of MST, looked at the correlates of delinquency to date. They came up with the following list:

- lower levels of sociomoral reasoning
- social skills deficits
- impulsivity and attitudinal bias
- cognitive deficits, including misinterpreting communications from others
- problematic parenting strategies
- inconsistent parental discipline strategies, with varying responses to the same misbehaviour
- negative parenting
- inadequate parental monitoring of activities, how much time is spent away from home
- low rates of positive communication and high rates of hostile communication in families
- difficulties in family cohesion and adaptability
- association with delinquent peers
- poor school performance
- neighbourhood of residence
- stress on single mothers
- family's social support network.

Of all of these, associating with delinquent or antisocial peers was the most powerful predictor of delinquent behaviour.

However, there is one major problem with this approach. While delinquents (and their families) are far more likely to show these characteristics than other people, it is not clear whether they offend because of these problems, or these problems happen because they offend, or whether they just happened to occur together. To offset this, Borduin and Henggeler (1990) looked at two studies of causal modelling of offending. These found causal pathways to offending from the following risk factors:

- prior delinquency
- current involvement with delinquent peers
- lack of conventional bonding with family
- lack of conventional bonding to school
- parental monitoring
- academic skills
- adolescent social skills.

So these became the targets for intervention by MST, which accounts for a great deal of its success. Borduin and Henggeler (1990) also noted that the risk factors fell into four environments – family, school, peer group and neighbourhood – which are the four places where young people grow up. This focus on risk factors in the key social environments seems to be a critical aspect of successful practice with young people.

THE RELATIONSHIP BETWEEN FAMILY RISK FACTORS AND ANTISOCIAL PEERS

The most powerful of all the risk factors looked at in the last section turned out to be current involvement with antisocial peers. But this was mediated by other risk factors, in particular conventional bonding to family, conventional bonding to school, parental monitoring and adolescent social skills. This meant that when bonding to family and school, monitoring by parents of what their kids were up to, and adolescents' skills in communication were taken into account, involvement with antisocial peers lost some of its power as a risk factor.

More recent research has supported this conclusion. A study by Ary et.al. (1999) shows that the antisocial peer group only starts to exert an influence when relationships with parents start to unravel. Families in which there were high levels of conflict and low levels of positive relationships were more likely to develop inadequate monitoring of children by parents, and associations between children and antisocial peers. Therefore, while poor monitoring and antisocial peers are risk factors, they spring initially from high conflict and negative family relationships.

Interestingly, this research showed that while these factors can lead to antisocial behaviour in childhood and early adolescence, they are also risks for antisocial behaviour developing in mid to late adolescence – that is, for the adolescent limited group of young offenders.

These findings are important for three reasons.

Firstly they suggest that the key setting for intervention with young offenders is in the family, as this is the place where the major risk factors have their source, and addressing risk factors in the family can potentially reduce the risk factor of antisocial peers. Secondly, they make it clear that one way of reducing the impact of antisocial peers is to build up other 'protective' factors, such as success at school, positive and warm parent-child relationships, good parental monitoring of where kids go and who they mix with, and good social skills. Encouraging young people to make new friends who don't offend still will be an important strategy, but achieving it will be greatly helped by this focus on other risk factors. Finally, this is a clear instance of protective factors knocking out a powerful risk factor, which is part of a model of 'resilience' now coming into vogue.

THE RELATIONSHIP BETWEEN ECONOMIC STRESS, NEIGHBOURHOOD AND PARENTING STYLE – THE 'EPIDEMIC MODEL'

One of the factors often mentioned as a possible risk factor for crime by young people is economic stress, or poverty (often described as socioeconomic status, or SES). This has not emerged thus far in this review as a significant risk factor, although Lipsey and Derzon (1998) identified it as a second ranked risk factor for younger children (six – 11 years). By the time young people reached 11 to 15 years this risk factor had apparently dropped out (Lipsey and Derzon 1998). But two studies reviewed for this paper suggest a relationship between economic stress and youth involvement in crime that might not be immediately apparent from the meta-analyses, one that interacts with both parenting style and neighbourhood factors. One is a pioneering study by Wilson (1980) and the other a recent Australian study (Weatherburn and Lind 1998).

Due to time constraints it has been impossible to thoroughly review economic stress, so these studies should be taken as indicative only.

Wilson (1980:232) reviewed parenting style as a risk factor for delinquency and concluded that “parents who are lax in the supervision they give their children are highly likely to produce delinquents”. However she noted that this is in areas that have high offender rates, and that there was a close association between lax supervision methods and severe social handicap. The latter resulted from problems such as prolonged or frequent unemployment, physical or mental disabilities in the family, and “an often permanent condition of poverty” (Wilson, 1980:233). She also noted that high population densities, overcrowding and numerous children contributed to lax parenting styles by increasing the likelihood of playing in the street, delegation of parenting to older siblings and withdrawing close supervision of play when other peoples’ children are involved, in order to avoid conflict with neighbours. Wilson concluded by cautioning against using these findings only to put pressure on parents to improve supervision, and instead advised that social disadvantage as well as parenting skills need to be addressed.

Weatherburn and Lind (1998) looked at the relationship between poverty, parental supervision style, child abuse/neglect and the number of antisocial peers in the neighbourhood. They found that child neglect rises as the poverty of an area increases, based on the number of households with low income. Average rates of participation in juvenile crime also rose as neglect rates increased. To examine whether low income had a direct impact on juvenile crime, or was mediated by other factors, Weatherburn and Lind carried out a path analysis. They found that the largest path coefficients ran from poverty to neglect, and then to delinquency. The paths from single parent families to both neglect and abuse were also larger than most, but abuse did not have a strong link with delinquency. While causal relationships could not be established by this analysis, the authors concluded that the findings suggested that economic and social stress exert most of their effects on crime by increasing the risk of child neglect, and thus disrupting parenting patterns.

When they examined data on peer involvement in crime in each neighbourhood they found a suggestion that being allowed out very often any evening is associated with a significantly higher likelihood of involvement in crime only for those who reside in crime-prone neighbourhoods (Weatherburn and Lind 1998). They take this as tentative evidence in support of a theory that neighbourhoods with large populations of delinquents will have higher levels of interactions between young people involved in crime, and those at risk of involvement. In addition, Weatherburn and Lind cite studies which indicate that the effect of inept parenting is greatly reduced when the influence of peers is taken into account. Together with studies reviewed above which show that peer influence becomes a risk only once there are problems in the family or at school, this suggests that peer influence is only a problem once parenting processes are disrupted.

This is a superficially confusing mass of data. However, Weatherburn and Lind (1998) pull it all together in a theory they call the ‘epidemic model of delinquency’. This proposes that:

economic stress increases juvenile participation in crime because it disrupts the parenting process thereby rendering juveniles more susceptible to delinquent peer influence (1998:4).

This is a plausible theory which draws on what is known about the risk factors of poor parental supervision, antisocial peers, child neglect and economic stress to form a coherent process. According to this model, economic and social stress increase the likelihood of child neglect, and consequent poor parental supervision. Young people who experience this poor parenting become more vulnerable to involvement in crime. If these vulnerable young people also reside in crime-prone neighbourhoods, they are far more likely to have contact with young people who are actively involved in crime. Because their families are not a protective factor, they are much more vulnerable to their antisocial influence. The model suggests that the number of young people involved in crime in a particular neighbourhood will not increase until the level of economic stress reaches a level where it pushes numbers of youths vulnerable to crime past a certain limit. This limit is known as the 'epidemic threshold'. They predict that once this limit is crossed, the growth in youth crime will accelerate beyond what would have been expected from the amount of economic stress present, although the reasons for this are not made clear.

While this research does not represent a definitive finding on the causes of crime, it presents a plausible theory which brings together a number of risk factors in a causal path. It also suggests policy directions to use resources most efficiently, by addressing a combination of parenting style, social support to reduce neglect, economic support to reduce poverty and peer relationships. Interestingly, this model receives support from data on effective interventions covered later in this paper, the most effective of which target all of these factors. It also suggests that involvement in crime is the result of disruption to normal developmental pathways, and that reducing such disruption is integral to reducing youth offending. As such, it appears a theory worthy of extensive investigation. The only developmental factor missing from this model is school participation, and this is examined in the next section.

THE IMPORTANCE OF SCHOOL PARTICIPATION

Lipsey (1992) found that impact on delinquency was more strongly linked with participation in school by young people than with school achievement or changes in psychological measures. Neither of the latter had a significant relationship with delinquency. Simply participating in school appeared to lead to changes in psychological measures, interpersonal adjustment, academic performance and vocational accomplishment. Lipsey concluded that "while change in psychological variables and interpersonal adjustment...does not seem to be closely linked to change in...delinquency, it does seem to be closely linked to change in...school participation which, in turn, is linked to change in delinquency" (1992:142). So it appears that increasing participation in school by young people is a key part of reducing their antisocial behaviour and offending.

DO YOUNG WOMEN HAVE DIFFERENT RISK FACTORS TO YOUNG MEN?

Risk factors for young women have received less attention from the international research community than those for young men. This is largely because they form such a small group. In the last three years for which figures are available, female offenders have never made up more than 15 percent of the total pool of young offenders in New Zealand aged less than 20 (Spier 1997, 1998, 1999). However more studies are now appearing which look at women in particular, so it is now more possible to address the question of whether there are any risk factors specific to young women.

Perhaps the most recent study of risk factors for young women was carried out by Stephanie Funk and published in 1999. She examined what predicted re-offending for males and females combined, males alone and females alone. For the mixed group, six factors significantly predicted re-offending (ranked in order from most to least predictive:

- young person placed in detention
- young person aged 13 or 14 at focus offence
- evidence of family financial hardship
- poor behaviour in school
- young person placed in special education classes
- frequency of prior offences.

Funk then separated out the factors that predicted re-offending for just the young males. She found that all but one of the factors from the combined model predicted re-offending in the male only model – special education was replaced with association with antisocial peers. This male only model predicted their re-offending as well as the combined model.

But when she separated out risk factors for young women alone she found quite a different picture. Only four factors predicted re-offending by young women, rather than the six found with the combined and male only models. And only one of these four factors was also in the other models, that of being placed in detention. The four factors that predicted re-offending by women were (ranked from most to least predictive):

- having been placed in detention
- having been abused as a child
- having run away from home
- frequency of prior offences against the person.

This model predicted re-offending by girls twice as well as the combined model.

These findings suggest very strongly that young women are put at risk of re-offending by some very different factors from young men. Three of these factors are ‘dead’ or static factors that are more use in predicting future crime than as targets of intervention. The remaining factor is a promising target for early intervention with young women – if child abuse in a family with girls is reduced, this may well have more impact on future offending by girls than boys. However, it still doesn’t give us a good idea of promising intervention targets with older girls.

Four other studies could be located for this paper which dealt with the criminogenic needs of women, and only one of them deals specifically with young women. In 1994 Simourd and Andrews examined risk factors for male and female delinquents. Unlike the study above, they found that the same factors emerged for both male and female delinquents. These risk factors are listed below in descending order of correlation with re-offending.

- antisocial peers
- temperament or misconduct problems
- educational difficulties
- poor parent-child relationships
- lack of attachment to convention.

These are very similar to the general list of risk factors for male young offenders and contradict the finding by Funk that young women have different risk factors – and by implication, intervention needs – to young men.

The other three studies of women of all ages show the following collection of risk factors:

- dependant on illegal sources of income
- dependant on welfare
- history of self-injury
- being a single mother
- not in a stable relationship
- psychiatric hospitalisation
- marital/family problems
- employment difficulties
- substance abuse
- poor community functioning
- antisocial associates/social interactions
- antisocial attitudes (Bonta et.al.1995, Anderson and Riley 1991, Motiuk and Brown 1993).

Clearly, many of these factors would be less likely to apply to younger women. Some would form useful targets for interventions, such as increasing vocational skills and aiding young women into work, addressing substance abuse and improving relationship skills. Reducing antisocial attitudes and associates and increasing prosocial attitudes and associates would also seem to be good targets for intervention. Reducing the likelihood of single parenthood for young women, as well as welfare dependency, also seem promising targets.

CONCLUSION:

RISK FACTORS FOR YOUNG WOMEN

The evidence here is somewhat mixed, but it appears that young women do have some risk factors for offending that differ from those of young men. Hence, they may require somewhat different interventions. Preventing abuse as a child seems particularly important for young women, and may prevent running away from home, which seems to be another risk factor. The only other factor which seems specific to young women is reducing the likelihood of becoming a single mother. Other than this, it seems that young women share many of the risk factors experienced by young men. Interventions that are particularly targeted at young women, and take into account their particular experiences, may therefore be more successful than generic interventions. But any intervention will probably also need to address the basic risk factors listed in the summary to have an impact.

CONCLUSION:

ALL PROBLEMS OF YOUNG PEOPLE WHICH LEAD TO CRIME AND COULD USEFULLY BE ADDRESSED BY INTERVENTIONS

It is clear from the research reviewed above that it is now possible to identify the best targets for interventions with young people who are at risk of offending or re-offending – the targets most likely to lead to less offending in the future. This section summarises the findings of all the studies reviewed here about the full range of risk factors that can lead to offending by young people. Any of these could usefully be addressed by an intervention.

However, some come through as more powerful and important than others, and they should receive priority for intervention. We can also say something at this point about what targets are most important for offenders who start young and keep going into adulthood, and those who start in their mid-teens and stop by their mid-twenties. Two further tables in the following section give a shorter list of the most potent predictors of offending for persistent and adolescent limited offenders. A list of effective interventions which address each of these risk factors can be found at the end of Part IV.

INDIVIDUAL FACTORS

- substance abuse and use, particularly at a young age
- barriers to treatment (such as low motivation, practical difficulties with transport and availability to attend appointments because of work hours)
- history of aggressiveness and antisocial behaviour (fighting, bullying, assault and violence against objects, theft) and anger
- antisocial attitudes (supportive of crime, violence, drug use, and gangs etc)
- poor self management (impulsive, daring, doesn't think before acting, doesn't use problem solving techniques)
- social skills deficits and thinking skills deficits
- poor use of free time, not being involved in sport or having constructive spare time activities, few social activities, passive leisure activities such as TV
- early initiation of violence and delinquency
- early involvement in sex
- running away from home
- conduct disorder
- being a problem child at home and school
- being a victim of bullying.

FAMILY FACTORS

- neglect (being left home alone, insufficient food/clothing)
- abuse (physical and/or sexual)
- family or marital conflict, including verbal and physical abuse
- poor monitoring and supervision (parents don't know where the child is or who s/he is with, may show little interest)
- poor relationship with parents (parents show little warmth and caring, may focus more on punishment, little time spent together in positive activities), lack of relationship with father
- young or single parent, or parents living apart
- lack of bonding by young person with family
- harsh or inconsistent parental discipline
- parental criminality, including attitudes favourable to crime, use of drugs and violence.

SCHOOL/WORK FACTORS

- academic failure (failing exams or failing to move forward a year)
- truancy and dropping out of school
- little attachment to school or interest in school
- not having school qualifications
- placed in special education classes
- early and persistent antisocial behaviour at school from 5-10 years
- lack of vocational skills and job.

PEER RELATED FACTORS

- poor social ties (low popularity and few social activities)
- mixing with anti-social peers (friends who are involved in missing school, selling/using drugs, petty theft, fighting/assaults, hold attitudes favourable towards delinquency)
- gang membership or involvement
- delinquent siblings
- lack of prosocial models.

COMMUNITY AND NEIGHBOURHOOD FACTORS

- extreme poverty
- community disorganisation, high rates of crime and violence, high population, high turnover of residents, unemployment, adult involvement in crime
- availability of drugs and guns
- poor living conditions, overcrowded dwellings, frequent changes of home
- lack of attachment by residents to neighbourhood and other community members.

Risks to Address as a Priority

As noted above, some of the targets listed in the last section take priority over other risk factors for intervention. Targeting these problems above others is likely to result in a greater reduction in re-offending, because they are more powerful causes of offending. These lists are based on the most recent rigorous research available, particularly Dowden and Andrews (1999), where effect sizes are given, and Lipsey and Derzon (1998).

FOR 'DESISTERS' OR ADOLESCENT-LIMITED OFFENDERS

Young people in this group start offending at 14 or later, don't make many court appearances and have fewer risk factors. Also called 'adolescent limited' offenders, they tend to show two risks in particular. These are substance abuse and antisocial peers, and should be the priority for intervention (Fergusson 1996, cited in Scott 1999). The next highest risk factors for this group are poor parental monitoring and negative relationships with parents, with other identified risks coming after these (Ary et.al. 1999).

The following table gives an order of priority for addressing risks.

- mixing with antisocial peers
- substance abuse
- family problems – poor parental monitoring, negative parent-child relationships
- poor performance and attendance at school, negative feelings about school
- others as per 'persisters' list.

FOR 'PERSISTERS' OR EARLY ONSET OFFENDERS

This group starts offending young, usually before 14 and often before 10. They tend to come from multi-problem backgrounds, and are most likely of all offenders to keep offending into adulthood, and attract costly custodial sanctions. All identified risks (and they will have many) need to be addressed with this group. The more of these risks that are addressed, the more effective the intervention will be. Top priority should be given to improving social ties, reducing antisocial peers, improving parental monitoring and positive relationships with the young person, and school performance.

Targets for intervention are given in order of priority from highest to lowest in the following list.

1. having few social ties (being low in popularity, and engaging in few social activities)
2. mixing with antisocial peers
3. having family problems, particularly poor parental monitoring of children and negative parent-child relationships

4. experiencing barriers to treatment, whether low motivation to change, or practical problems such as difficulty in attending appointments due to lack of transport and work hours
5. showing poor self-management, including impulsive behaviour, poor thinking skills, poor social/interpersonal skills
6. showing aggressiveness (both verbal and physical, against people and objects) and anger
7. performing and attending poorly at school, lacking positive involvement in and feelings about school
8. lacking vocational skills and a job (for older offenders)
9. demonstrating antisocial attitudes that are supportive of crime, theft, drug taking, violence, truancy and unemployment
10. abusing drugs and alcohol
11. living in a neighbourhood that is poor, disorganised, with high rates of crime and violence, in overcrowded and/or frequently changing living conditions
12. lacking cultural pride and positive cultural identity.

PART III:

Processing of Offenders

One of the great mysteries of youth justice is whether different methods of processing young people have any impact on their offending. Processing includes the way police deal with young people, both their manner and the processes they use. It also includes the way youth justice coordinators and social workers deal with young people, and Family Group Conferences. Lastly, it applies to the way youth court judges deal with young people and the sentences they hand down.

Probably the most interesting aspect of this question is whether processing interacts with programmes in a way that makes both more effective together than on their own. There are some indications that this is the case in the adult arena (Syers and Edleson 1992), in that the combination of arrest and rehabilitation seems to have more impact on domestic violence than either on its own.

Some researchers have recently started to look at the impact of processing on its own, and in conjunction with programmes. Such studies are still rare, and not very many have been carried out in the youth justice arena. But some ground breaking research is starting to take place in New Zealand, particularly with regard to Family Group Conferences. Much of this research takes place in the context of restorative justice, which is concerned with involving victims and community members in criminal justice processes, facilitating dialogue between victims and offenders and making amends both materially and emotionally to victims (Umbreit 1998).

Other processes are more mainstream, such as probation, parole and cautioning by the police. Unfortunately, there has been very little research in this important area, and so this review is of necessity somewhat scanty. What research has been carried out is often not experimental, and does not give reliable (or sometimes any) indications of the impact of processing on re-offending. For this reason the conclusions that are drawn at the end of the section are tentative rather than definitive, but give some suggestions for fruitful ways forward.

FAMILY GROUP CONFERENCES

There has been great interest internationally in the phenomenon of Family Group Conferences (FGCs), where young people who have offended come together with members of their families, victims, police, and youth justice staff. All attendees at these conferences discuss the offending and talk about how the young person might make amends, and be less likely to offend in the future. A plan summarising the actions to be taken to reduce offending is discussed and, if agreed on and approved by the Judge implemented, thus avoiding conviction. While seen as a positive development in general, there has been less certainty about what impact FGCs have on offending.

While a definitive study of the impact of FGCs on offending, both retrospective and prospective, is still in the planning stage, one study indicates that they may contribute to lessening the likelihood of re-offending even when there are other powerful predictors of offending present.

Long term outcomes for a young person attending a FGC are likely to be most positive in terms of offending if the conference is able to lead to remorse without shaming either the parents or the young person. The particular elements of FGC which seem important are:

- that the process seems fair to parents and involves young people in it and in the decisions arising from it
- that neither the young person or their parents are made to feel like a bad person at the FGC
- that the young person feels remorseful at nor after the FGC (Maxwell 1999, Maxwell and Morris 1999c).

This is an interesting finding given the emphasis that is often put on tough measures that create a feeling of shame, such as boot camps and ‘scared straight’ approaches. This finding adds weight to the general finding that punitive approaches are not as effective as approaches which are more constructive in their nature. It also suggests that this general principle may apply as much to processing of young offenders as to programmes for them.

Another study of FGC’s by Morris and Maxwell (1998) concludes that:

- victims were willing and able to participate in restorative justice processes
- a significant proportion of victims felt positively toward the process and were satisfied with the outcomes
- offenders were held accountable
- reconviction rates were no worse and possibly better than for court-based samples
- factors in restorative justice processes may be linked to a lower probability of reconviction.

The authors found that 26 percent of young people who attended an FGC were reconvicted afterwards. In the absence of a similar comparison group, it is difficult to judge the significance of this result. The authors compared it with outcomes for other groups of young people undergoing sentences, both here and overseas, and found it was no worse and possibly better than the outcomes for other processes. Certainly, in the New Zealand context, young people who attend FGCs are likely to have a fairly high risk of reconviction, as 80 percent of complaints about young people are dealt with by the Police and go no further. Therefore, the group of young people going through FGCs are those who are offending seriously and/or persistently, and could be expected to come back into the system at quite a high rate. However, the issue of impact on offending will not be settled until a rigorous experimental design is applied to the data.

In terms of the factors that Morris and Maxwell (1998) found led to a lower probability of reconviction, four are of interest in this review. The first two are that reconviction was more likely if:

- extended family were present at the FGC
- the offender failed to apologise for their actions.

The second two are that persistent reconviction was more likely if:

- welfare services were provided to the offender
- victims were not present at the FGC.

The authors note that the first factor is probably related to the seriousness of the offence, and the gravity with which it is regarded by the family. It could also be interpreted as a suggestion that the presence of family is counterproductive – neither possibility is conclusively proven. The presence of remorse came up in the research mentioned above, and appears to be a significant

factor. Lastly, having victims present at the FGC seemed to decrease the likelihood of re-offending, which concurs with the research on mediation in the 'Victim-Offender Mediation' section following.

FGCs are now being imported from New Zealand and trialled in other places. In Australia, Wagga Wagga police introduced a new system of cautioning juvenile offenders in 1991, along with a variation on the FGC system (Moore, Forsythe and O'Connell 1998). The main difference between the Wagga Wagga and New Zealand FGC system is that in Australia FGCs are convened by police, rather than social welfare staff. The focus in the Australian process is more on the incident and repairing the harm it caused than on the offender, and preparation by the police is less extensive than by New Zealand youth justice coordinators.

This study of FGCs is unusual in that it looks at re-offending rates after an FGC, and compares them with re-offending rates for those offenders who had not gone through the FGC process. A control group design was used, with the control group drawn from records prior to the introduction of FGCs. Reapprehension by police in the Wagga Wagga district was the criterion used for re-offending. The researchers found that there was no major change in the proportion of young people reapprehended within nine months after the FGC process was introduced. This was irrespective of whether their initial disposal had been cautioning or court appearance. So from this perspective, FGCs did not appear to make an impact on re-offending.

However, the study did find that after the FGCs were introduced in Wagga Wagga the percentage of young people being dealt with through the court decreased by over 20 percent (from 50.6 percent to 27.9 percent). The numbers of youths dealt with by cautions accordingly increased by a similar amount (from 49.4 percent to 72.1 percent). Anecdotal evidence suggested that the youths being placed before the courts were the most serious offenders and those with a substantial criminal history. The fact that reapprehension rates did not increase over this period suggests that almost a quarter more young people could be dealt with by cautioning without increasing re-offending rates (Moore, Forsythe and O'Connell 1998). Other analysis carried out by the researchers indicated that no net widening had occurred. The increase in the proportion cautioned can therefore be assumed to come from the pool of offenders who would previously have been placed before the courts.

The authors also investigated whether the higher numbers reapprehended by police after being placed before the court (rather than cautioned) was due to the way they were processed. As discussed above, this group appeared on anecdotal evidence to have a higher risk of re-offending to start with. Chi-square analysis was used and showed that reapprehension rates were dependent on how a juvenile was processed.

Given the possibility that this group was higher risk, this cannot be taken as conclusive without close comparison of the two groups on factors like prior apprehensions, court appearances and convictions, time in custody, age at first offence and other indicators of likelihood of re-offending. This did not appear to have been done. However, the authors indicate that the cases being cautioned after FGCs were introduced were some of these 'tougher' individuals, and this did not lead to an increase in re-offending. So there appears some likelihood that reapprehension rates were lower for higher risk cases that were dealt with by cautioning under an FGC system than when they were dealt with by court appearance under the old system. This constitutes a reduction in re-offending, although statistical analysis would be needed to ascertain whether this reduction was due to chance or the actual intervention.

Other research in Australia was carried out on conferences which took place as part of Reintegrative Shaming Experiments, known as RISE. The diversionary conference in RISE involves a meeting between the offender and some of their family or friends, the presence of the victim if possible, and a police officer who facilitates the meeting. It takes around an hour and a half, and looks at what the young person did, what harm was caused, possible more severe consequences that might have occurred, and ways to repair the harm. RISE is targeted at three groups of young offenders:

- young people under 18 years charged with property offending with personal victims
- young people under 18 convicted charged with shoplifting detected by shop security staff
- people under 30 years of age charged with violent offences.

It also looks at drink drivers of any age. Early research found that both victims and offenders experienced conferences as being fairer than court, and victims also felt they were treated better than in court, with more information given about the processing of a case (Strang 1999). The most recent research available from the website for the experiment (www.aic.gov.au/rjustice/rise/progress/1999.html) gives indications of some long-term impacts on attitudes and behaviour. However, results of a two year follow-up of re-offending are not yet available.

The use of FGCs is increasing in Australia. To date conferencing in some form is being used in New South Wales (where the Wagga Wagga experiment was based), Australian Capital Territory, Victoria, Western Australia and South Australia. Both Western Australia and South Australia have incorporated conferencing into youth justice legislation (although not necessarily for all offending) and family conferences or meetings take place as part of the normal youth justice system state wide (Wundersitz and Hetzel 1996). While most of the research emerging from this burgeoning use of conferences appears to focus on how well they are being implemented rather than what impact they are having on offending, hopefully this upsurge in practice will result in a similar upsurge in hard data on outcomes.

These results in no way represent conclusive evidence that FGCs reduce re-offending by young people. They do suggest, however, that the way young people are dealt with – in this case a ‘restorative’ approach, stressing accountability by the offender and involving the victim, and treating both with respect – could have a positive impact on their offending. When combined with effective rehabilitation, which Part IV of this paper shows can have a significant impact on re-offending, this could significantly increase the overall impact of intervention.

OFFENDER-VICTIM MEDIATION

Mark Umbreit recently reviewed the impact of a mediation programme between victims and offenders running at a number of sites in America. This involved juvenile offenders meeting with victims along with a trained mediator, answering questions about their behaviour, and working together with the victim to develop a restitution plan. He found a high level of client satisfaction with the process among victims (79 percent were satisfied) compared with a comparison group who did not participate in face to face mediation (57 percent were satisfied). A higher percentage (81 percent) of offenders successfully completed their restitution plan after mediation compared with offenders who did not take part in mediation (58 percent). Levels of fear of further victimisation were also reduced, from 23 percent of victims before mediation to 10 percent after mediation. Fewer victims were upset about the crime after mediation (49

percent) than were before mediation (67 percent). Statistical significance was not given for these differences.

Clearly, mediation had some positive impacts in terms of reducing emotional harm to the victim and increasing the likelihood of restitution taking place. The next question is – did it reduce further offending? Umbreit found that ‘somewhat fewer additional crimes were committed by juvenile offenders’ in his multi-site study – nine percent less to be exact. (Eighteen percent of offenders who had received mediation committed further crimes compared to 27 percent of those who did not). He does not report statistical significance. While not with a stunning result, this is still positive. However, a description of the two groups being compared is not given, meaning that the result may have been due to one group having a lower risk of re-offending to start with.

Umbreit also reports two English studies (Marshal and Merry 1990, Dignan 1990 cited in Umbreit 1998) which find positive but non significant reductions in re-offending after mediation. The one statistically significant finding reported in his paper is for a study by Nugent and Paddock (1995 cited in Umbreit 1998) who found a significant reduction in re-offending following mediation. The magnitude of the difference is not given, unfortunately.

Mara Schiff expands on this in her review of restorative justice interventions in the same journal (1998). She notes that ‘limited data show that offenders who participate in VOM (victim-offender mediation) have lower recidivism rates compared with similar offenders experiencing traditional juvenile justice system processing’. Schiff cites in particular Pate (1990), Umbreit and Coates (1992b, 1993) and again Nugent and Paddock (1995), so this does increase the pool of support for the effectiveness of mediation for young offenders.

This provides some support for the positive impact of victim-offender mediation on re-offending, although the data is limited, and the impact seems modest. It also provides some support for using this process to increase the likelihood of restitution plans being completed.

POLICING

Policing is often seen by the public as the panacea for offending – more police equals less crime. In fact, very little is known about the impact of policing on offending. Perhaps the most comprehensive statement on the topic comes from Sherman et.al. in their mammoth 1998 review of the literature. They conclude that connecting policing to risk factors for offending is the most important aspect of making policing effective. Simply hiring more police and having them more active has not shown a great impact on re-offending.

The four approaches that Sherman et.al. list as effective are:

- increased directed patrols in street-corner hotspots of crime, or at high-risk times
- proactive arrests of serious repeat offenders
- proactive drunk driving arrests
- arrests of employed suspects of domestic assault.

Obviously, not all of these apply equally to young people, but the first two are particularly relevant. The second point is probably the most important, along with the fact that arrest of some juveniles for minor offences reliably doesn’t work.

However, an examination of the tables of studies provided by Sherman suggests that this is not actually accurate for juvenile offenders. All but one study (including the most rigorous study) found that arresting juveniles resulted in increased offending. The only exception was for first offenders who were arrested. However, this may be misleading, as the juveniles who were arrested may have been at high risk of re-offending, whatever the approach used with them.

Another effective approach which isn't covered in the above list is police treating offenders fairly, which was associated with lower offending in several studies (Sherman et.al.1998). Goldblatt and Lewis (1998) concur with this finding. They looked at studies of police efforts to reduce fear and suspicion towards themselves, and to treat people with respect. The conclusion was that such approaches were promising and had a positive effect on the degree of cooperation the police got from the community, and on re-offending for domestic violence. None of these were specifically with young offenders, however.

DIVERSION

Diversion from formal justice systems is used in fairly widely internationally. Maxwell, Morris and Anderson (1999) describe diversion as 'limiting the offender's penetration into the criminal justice system'. This can happen at a number of points in the criminal justice process – before a charge is laid or a young person appears in court, as with the police diversion scheme, or after a court appearance but before conviction and sentencing occurs.

It is a grab bag category of intervention, including approaches as diverse as recreation, advocacy, brokerage to resources, vocational or educational training, and group or individual counselling (Palmer 1994). Palmer also noted that frequency and duration of client contacts varied considerably across diversion initiatives.

In terms of its effectiveness, Redondo et.al. (1997) found that diversion had a moderately positive impact, reducing re-offending by a mean of 19.4 percent. They do not give any detail on what diversion involved, or whom it was used with. Palmer took a look at diversion as part of a review of 'what works' generally. He noted that 'while diversion has often been viewed as having little effect on recidivism...some reviewers have added that a modest percentage of such programs comprise clear exceptions' (1994:23). As researchers have found with other classes of intervention, it can be difficult to assess the effectiveness of a particular type of intervention as a whole, as individual programmes can vary so much in quality and intensity.

It seems that in some instances diversion can be as effective as further processing through the justice system, and in some cases even more effective, possibly depending on exactly what diversion involves. Adding weight to this finding, Palmer notes that large numbers of studies of diversion have now been analysed, and a large number of those studies were methodologically adequate, with some even reaching excellence. He concludes that for diversion 'modest-to-moderate' reductions in offending were the rule, in addition to some negative findings.

Unfortunately Palmer does not analyse which diversion interventions were more effective, other than mentioning 'service oriented' approaches as effective, based on a 1990 study by Andrews et.al. Given the variety in diversion approaches, it seems fair to say that diversion that accords most closely with 'what works' in general will probably be more effective.

This is supported by the Andrews et.al. (1990) meta-analysis, which found that diversion which was 'service oriented' was more effective. That is, diversion which is:

- more intensive with higher risk cases
- actively addresses known risk factors (criminogenic needs)
- uses cognitive-behavioural techniques such as staff actively modelling skills and encouraging young people to practice them
- is delivered in ways that the offender is most likely to respond well to (which may include cultural content) will be more likely to have a positive impact.

New Zealand research gives an indication of just how wide a range of approaches a diversion intervention may use. Outcome evaluation of two local diversion programmes – Project Turnaround in Invercargill and Te Whanau Awhina in Auckland – list the components that make up each (Maxwell, Morris and Anderson 1999). Both interventions started with a meeting between community representatives, the offender and family and the victim to decide on a plan of action to reduce future offending. Offenders were referred by the Court to the interventions. While the projects were officially directed at adult offenders, 33 percent of people on Project Turnaround and 50 percent on Te Whanau Awhina were aged 17-19 years, making it appropriate for conclusion here.

The main features of Project Turnaround were:

- confronting offenders with the consequences of their offending, both for victims and themselves
- having the victim present during this wherever possible
- focussing on reparation to the victim and the community
- planning rehabilitation to prevent future offending, and possibly measures for increasing reintegration into the community
- involving nominated members of the community in making decisions about how the offending will be responded to.

The Te Awhina Whanau diversion programme was similar, except that it dealt mainly with Maori offenders and involved victims in a face to face meeting with offenders far less often. It also took place on the marae, with the meetings with offenders being held in the wharehau (meeting house). It included:

- confronting offenders with the consequences of their offending for victims, for themselves and for the Maori community, and vigorously challenging them about their behaviour and lifestyle
- having whanau/family present during this wherever possible
- encouraging the person who had offended to become part of the whanau at Hoani Waititi marae
- focussing on reintegrating offenders into the community in order to prevent future offending, with an occasional focus on rehabilitation
- making plans to recompense the victim and community
- involving nominated representatives of the community in decision making.

Comparison of outcomes with a matched sample of offenders with similar offences, demographics and offending history showed that after 12 months there was significantly less reconviction for those participating in the schemes. Reconviction rates for Project Turnaround

graduates were 16 percent compared to 30 percent for a matched group. For Te Whanau Awhina rates were 33 percent compared to 47 percent for controls. Seriousness of offending was also reduced, and there were tentative indications that reconviction was lower for participants who were seen as having successful outcomes from the programme.

It should be noted that Te Whanau Awhina dealt with offenders with a significantly more serious offending history, who may therefore have had a higher risk of re-offending than Project Turnaround participants. This may explain the higher rates of re-offending for the group who went through Te Whanau Awhina. However, part of this variance may be explained by the greater emphasis in Project Turnaround on rehabilitation such as violence prevention and drug and alcohol programmes, or by the greater emphasis on reparation at Project Turnaround.

PROBATION AND PAROLE, INCLUDING RESTITUTION AND FINES

‘What works’ research has tended to focus on interventions rather than sentences. One exception to this is the 1992 Lipsey meta-analysis, which found that release on probation or parole had an 11 percent positive impact on offending, probation or parole with a reduced caseload an eight percent impact, and any other enhanced form of probation or parole a seven percent impact. Restitution while on probation or parole led to a mean reduction in re-offending of eight percent (Lipsey 1992). While this is not a huge impact, individual studies have also shown restitution to be successful during the 1970’s and 1980’s (Palmer 1994).

In the more recent Lipsey and Wilson meta-analysis of ‘what works’ for serious and violent young offenders the authors examined the effectiveness of various strategies with offenders on parole and probation (in Loeber and Farrington 1998). Restitution for probationers and parolees came into the ‘promising’ category, where there were positive but inconsistent effects. The effect size was only 15, which represents only a seven percent decrease in re-offending.

Sherman et.al. (1998) looked at three studies of fines (including day fines) while on probation. They found that fines led to significantly fewer arrests when added to either a probation sentence or probation plus prison in one study, and day fines led to significantly fewer technical violations. Fines appeared promising, particularly when added to other sanctions, but the evidence is not substantial enough to say they are truly effective.

James Byrne, in ‘Smart Sentencing’, concluded that probation is a reasonably successful approach, and gave some indications of what makes it effective (Byrne, Lurigio and Petersilia 1992). In a recent review of research on exactly what makes probation work, McLaren (1999) found that effective probation has the following elements:

- up to one hour of weekly contact for higher risk offenders, during which the probation officer actively demonstrates socially acceptable and desirable behaviour
- active teaching and use of problem solving techniques in dealing with the offender’s day to day problems
- responding positively to any socially acceptable and desirable behaviour, including any verbal expressions which are positive about such behaviour
- responding positively when the offender uses problem solving techniques
- providing services that effectively address problems the offender has which lead to re-offending (risk factors).

Sherman et.al. (1998) looked at the impact of Intensive Supervision Probation including aftercare. The two studies which found a significant impact on offending were those that included more services for the experimental group than for the comparison. They conclude that Intensive Supervision Probation is not effective in reducing the criminal activities of either adults or young offenders unless combined with appropriate rehabilitation programmes. James Byrne agrees with this assessment, suggesting that ISP is only effective when rehabilitative services are provided (Byrne, Lurigio and Petersilia 1992). In a review of Intensive Supervision Probation programmes the following factors were identified as increasing the likelihood that Intensive Supervision Probation would have an impact on offending:

- combining higher than usual levels of probation contact with both effective services and increased control and surveillance, with priority placed on contact and service rather than control
- giving higher levels of contact to offenders who have a medium to high risk of re-offending
- ensuring intensive contact with probation officers is proactive from the beginning of the sentence, rather than reactive when the offender gets into trouble later in the sentence
- promoting a probation officer style of supervision which involves noting and actively addressing problems experienced by offenders, making concrete recommendations for action to address problems, and actively following up on recommendations
- developing control not only through surveillance and sanctions but through trust and respect between probation officer and client
- carrying out accurate and rigorous assessment of offender risk of re-offending and problems which lead to re-offending (risk factors)
- providing services that target causes of offending
- providing treatment for substance abuse in particular
- matching offenders with probation officers whose supervision style will have the most impact on them
- running quality control checks to make sure the intervention is being well implemented (McLaren 1999).

One important proviso needs to be made here about probation, however, which is that it may not be equally effective with all offenders. Byrne and Pattavina draw attention to the often ignored fact that around 10 percent of all felon offenders in America have a higher risk of re-offending, and this group does not do as well on probation as lower risk cases (in Byrne, Lurigio and Petersilia 1992). It may well be the case that this group would do better under Intensive Supervision Probation, provided that in addition to beefing up surveillance it also actively addressed risk factors through interventions.

DRUG COURTS

Another intervention which combines increased surveillance with treatment is that of drug courts. These involve diverting offenders into drug treatment programmes, monitoring results through urine testing and reporting results to the court (Sherman et.al. 1998). Courts frequently use a system of rewards and graduated sanctions to encourage individual accountability. Few evaluations of these programmes have been carried out, but those that have show a positive trend (Sherman et.al. 1998). One study found a significant reduction in rearrests, but so many of the treatment group failed to appear at court that the possibility of self-selection for motivation to change cannot be ruled out (Goldkamp 1994 cited in Sherman et.al. 1998). Another found insignificant reductions in rearrests, but significant reductions in prison sentences (Deschenes

et.al.1995 cited in Sherman et.al.1998). The final study by Gottredson et.al. (1996 cited in Sherman et.al.1998) showed significant reductions in new arrests for women, but no other significant results for women or men on the programme.

One factor that did not appear to be investigated by Sherman et.al.(1998) in this review was the nature of drug treatment offered. Not all drug treatments are equally effective, and the impact of drug courts would presumably be affected by the quality of service provided. However, this initiative does provide hope that incorporating treatment programmes into criminal justice processing can have a positive impact on outcomes, and so adds weight to earlier findings about Intensive Probation Supervision.

INCAPACITATION

There is no evidence that simply being kept in a custodial situation will reduce future offending, and it may in fact increase it slightly (Gendreau and Little cited in McLean and Grace 1998). However, there is some evidence that this approach results in lower crime overall (Sherman et.al.1998, Greenwood, Model, Rydell and Chiesa 1998). Having said this, a review of research by Goldblatt and Lewis (1998) reported that once reconviction rates in the United Kingdom were adjusted for demographic variables, they were very similar for custodial and community sanctions. That is, around the same percentage of people re-offended after both types of sentence. This is in conflict with the above finding that probation has a modest, positive effect and custody has a nil to slightly negative impact. Given that these latter findings were based on meta-analyses, they probably carry more weight than the United Kingdom finding, and we can conclude that community-based sentences have more potential to reduce re-offending than custodial sentences.

Sherman et.al.(1999) conclude that incapacitation is effective for offenders who continue to commit crimes at high rates, provided one can identify them. This, they conclude, is no easy task. However, they conclude that incapacitation, in the form of locking people up for long periods of time, is having a reduced impact on crime in the United States because it is being used for lower rate offenders. Incapacitation in the form of home confinement also seems ineffective unless combined with rehabilitative programmes. However, this approach does not do any worse than ‘management as usual’ in the community, and is cheaper than incarceration.

WHAT DOES NOT LOOK PROMISING

In a fascinating insight into police practice, Sherman et.al. note that there is modest but consistent evidence that police can increase the risk of crime ‘simply by using bad manners’ (Sherman et.al.1998). This involves police acting less respectfully and fairly, and Sherman sees this as particularly important around high-risk juveniles.

Arresting young people is also not associated with lower rates of re-offending, although this may be because the young people being arrested are more likely to re-offend in the first place (Sherman et.al.1998). Both these suggest that cautioning young offenders in a fair and respectful fashion, rather than arresting them, will have a greater impact than other approaches.

In their landmark 1998 meta-analysis, Lipsey and Wilson turn their attention to reduced caseloads on probation/parole (cited in Loeber and Farrington 1998). They find the results are

weak, although the evidence is inconsistent. When early release on probation or parole is considered, there is consistent evidence that the impact is weak or null. This suggests that it is not probation or parole itself which is effective, but what happens to people while they are on it. Unfortunately, the authors have not analysed in any depth under what conditions probation is more or less effective. However, their meta-analysis does provide a tantalising suggestion that probation and parole are more or less effective depending on what other intervention is combined with them, but doesn't answer the question of whether restitution would be just as successful on its own.

The Sherman 'Preventing Crime' study also looked at Intensive Supervision Probation for young offenders, including aftercare. This involves probation with a high level of contact with probationers, and can include random urinalysis, random phone checks, curfews and electronic surveillance. Most of the studies showed no significant impact on offending (Sherman et.al.1998). The authors conclude that community restraints without programming and services are largely ineffective.

What is Promising in Processing Young Offenders

- Processing may be more effective when done in a way that doesn't shame the young person and/or their family, but encourages the young person to feel remorse for what they have done (Maxwell and Morris 1999c).
- Restitution on probation or parole has a positive but inconsistent impact on offending (Lipsey and Wilson 1998, Palmer 1994).
- Fines have a positive but inconsistent impact on re-offending (Sherman et.al.1998).
- The combination of criminal justice processes and appropriate rehabilitative services appears more effective than criminal justice processes on their own, for probation, Intensive Supervision Probation, and drug courts (Sherman et.al. 1998, Byrne, Lurigio and Petersilia 1992).
- Encouraging meetings and dialogue between victim and offender appears promising, particularly when trained mediators are present (Maxwell and Morris 1999c, Umbreit 1998, Schiff 1998).
- Fair and respectful treatment by police appears promising (Sherman et.al. 1998).

What does not Look Promising

- Reduced caseloads alone on probation or parole are not sufficient to impact on re-offending (Lipsey and Wilson 1998).
- Early release on probation or parole (Lipsey and Wilson 1998).
- Use of 'bad manners' by police, in the form of less respectful and fair behaviour towards young people (Sherman et.al.1998).
- Intensive Probation Supervision (an intensive, 'get tough' version of probation for young offenders) does not appear effective unless combined with appropriate rehabilitative services (Sherman et.al.1998, Byrne, Lurigio and Petersilia 1992).

Conclusion

Not much research has been carried out into the important question of whether processing has any impact on re-offending by young people. What research has been carried out either does not investigate whether different types of processing affect re-offending, or does so in less than reliable ways. The research that does investigate this provides some support for the notion that certain ways of processing offenders can have a positive impact on re-offending, but this support is modest and inconsistent. At best we can say now that certain approaches are promising, and others less so.

For the police, dealing with young people in fair and respectful ways appears to be promising, as does using cautioning in preference to either arrest or court appearances. Cautioning appears particularly positive when used in conjunction with Family Group Conference style processes by police.

With regard to Family Group Conferences, dealing with both young people and parents in ways that do not shame them, or give them the message that they are ‘bad’, appear to be associated with less chance of re-offending. Involving victims in meetings with young offenders, both to talk about their experiences and take part in designing a restitution plan, also appears to be a promising approach and one that can lead to more plans being implemented.

In terms of sentence type, probation on its own appears to have some impact on offending, but seems particularly effective when combined with some other intervention. Use of restitution and fines with probation appear to increase its impact, and use of appropriate rehabilitative services also increases effectiveness. Probation, combined with early release or reduced caseloads, does not appear to have much impact. Intensive Probation Supervision, a high-contact, ‘get tough’ version of probation involving random urinalysis and curfews is not effective unless combined with appropriate rehabilitative services.

Custody on its own has a nil impact on re-offending, and can slightly increase it. This can be offset by provision of appropriate services while in custody, particularly in dedicated units or residences, and this is discussed in more detail in Part IV.

The overall conclusion appears to be that processing can lead to a modest reduction in re-offending, although more research is needed to confirm this. At the police and Family Group Conference level this involves particular ways of relating to and disposing of young offenders. At the sentence level, processing appears to be most effective when combined with appropriate rehabilitative services.

PART IV:

Responding to Offenders with Effective Services

INTRODUCTION

By now a very great deal is known about ‘what works’ to reduce re-offending. The knowledge we have is becoming more and more reliable as higher quality studies emerge with each passing year. Probably the greatest boost that the ‘what works’ research has had in the last decade is the introduction of meta-analysis. This is a statistical technique which allows large numbers of studies to be analysed in a body, and produces information on which particular approaches have the biggest impact on offending across the board.

The combination of more high-quality research and sophisticated techniques for analysing them has resulted in a burst of new knowledge about what is effective. At this stage, we are able to say with some certainty what is most effective in reducing re-offending. Some aspects of effectiveness are still cloudy, such as what approaches work best for indigenous peoples and those from ethnic minorities, not to mention the often overlooked group of female offenders. There is a growing body of information on characteristics of effective staff, although there are still more questions than answers. Probably the most shady area is what works for different types of offenders – by personality, risk level, and other characteristics.

However, a snapshot of the effectiveness scene right now still gives us a fairly clear picture of what works best, particularly with chronic young offenders. Just as importantly, it gives us an equally clear picture of what does not work. Consequently we know in general which ways to take, and which to avoid, in the great maze of reducing re-offending. We’ll still regularly go down some dead ends, but the knowledge we have now means we do this much less often and get back on the right track much more quickly.

This brief review looks first at what works in general. It then becomes more specific, examining issues like staff characteristics and what works for particular groups, such as serious and violent offenders and substance abusers. Lastly, it sets out what doesn’t work – the dark side of the ‘what works’ picture which brings the effective approaches into sharp relief.

DOES ANYTHING WORK?

One of the traps for young players in the effectiveness research is the tendency to focus on specific types of effective approaches at the expense of general characteristics shared by a number of effective approaches. This ‘label’ approach can be dangerous in that it suggests that a work programme, for instance, will always be effective. In fact, a closer examination of the research shows that there are a few wildly successful work programmes, a few moderately successful work programmes, and a lot of work programmes that have not much impact at all.

What seems to be more important is the way the work programme is designed and delivered, and those features could apply equally to a whole range of other programmes.

Given this trap, this review focuses on the shared characteristics of successful approaches, rather than their specific labels.

One of the first questions to answer is ‘does anything work?’ Three recent meta-analyses answer this question, one a review of European research by Redondo et.al. (1997) and the other two reviews of English language research on juveniles by Lipsey (1992) and Lipsey and Wilson (in Loeber and Farrington 1998).

The answer appears to be a resounding yes. Redondo et.al. reported that 87 percent of the studies they looked at found that re-offending was lower for the group that did the intervention than the group who did not. The average reduction in re-offending across all programmes was 15 percent, leading them to conclude that ‘any programme was more effective than no programme’ (Redondo et.al. 1997). They also found that ‘the younger the subjects, the more effective the programme’, with greater reductions in re-offending for adolescents and juveniles compared with mixed groups or adults only.

Lipsey (1992) found that in 64.3 percent of all studies he looked at the group who took part in the intervention did better than the group that did not, with an approximate difference in re-offending of 10 percent. While not indicating what percentage of studies showed a positive outcome, Lipsey and Wilson (cited in Loeber and Farrington 1998) found a mean effect size of 12 across all studies, which indicates a 6 percent reduction in re-offending. They found that effective interventions could reduce re-offending by 6 percent to 40 percent, although some of the approaches they looked at had a nil effect. Losel reported that results in all meta-analyses of treatment effectiveness that computed effect size were positive, although the mean effect was small (around 10 percent reduction) (Losel 1996 cited in Zampese 1998).

While not huge moves in the desired direction, these results indicate a consistent pattern of positive impact. The more effective programmes had a greater impact, reducing re-offending by up to 40 percent (Lipsey and Wilson in Loeber and Farrington 1998). In fact, Lipsey’s 1992 study found that programmes that were structured and focused reduced offending by an average of 30 percent, or around three times as much as the average found by Losel (cited in Zampese 1998).

THE NATURE OF ‘WHAT WORKS’

Perhaps the most comprehensive review of research carried out recently is that of Lawrence Sherman and colleagues, who looked at what works, what is promising and what doesn’t work (1998). They found the following to work reliably:

- for high risk young offenders aged 13 or less, training and support for their parents in such things as parenting skills, and diagnosis and treatment of key risk factors such as drug involvement, school failure, antisocial peers and abuse at home
- maintenance of good discipline and standards of performance by schools, especially schools in high crime areas

- behaviour contracts and behaviour modification methods generally. That is, making clear the desired standards of behaviour, and both the rewards for meeting the standards, and sanctions for not meeting them
- residential drug rehabilitation in prisons
- addressing characteristics of offenders that can be changed and are associated with criminal activities (risk factors) such as poor parental monitoring, mixing with antisocial peers, substance abuse and poor impulse control
- incapacitating offenders who continue to commit crimes at a high rate and are not at the end of their criminal careers as long as they can be effectively identified
- programmes that are structured and focussed, use multiple treatment components, focus on developing skills, and use cognitive-behavioural techniques
- interventions that provide opportunities for substantial, meaningful contact between the treatment personnel and the participant.

Lipsey (1995) reported that programmes offering multiple services or components were more effective (cited in Barwick 1999). This fits with the notable success of Multi-Systemic Therapy (MST), which provides a range of services to meet the key needs of the whole family, and EQUIP, which provides a number of different social skills components.

According to a review by Hema (1999a), Lipsey also found the following effective:

- individual and family counselling, including Multi-Systemic Therapy and therapy that used citizen volunteers in conjunction with regular probationary service
- training in interpersonal skills
- behavioural programmes.

The United States Office of Juvenile Justice and Delinquency Prevention (OJJDP) looked at the research as background for its Comprehensive Strategy for Serious Violent and Chronic Juvenile Offenders. The authors concluded that one of the characteristics of effective programmes was that they address key areas of risk, and seek to strengthen the personal and institutional factors that contribute to healthy adolescent development. This also involves providing adequate support and supervision and offering young people a long-term stake in the community (cited in Scott 1999).

The OJJDP Strategy also emphasises the importance of strengthening bonds between young offenders and people who are involved in more socially desirable lifestyles. These could be family members, adults outside the family such as teachers, coaches and youth leaders, and other young people at school or in the neighbourhood (cited in Scott 1999). Mentoring is indicated as one way of achieving this, by providing a ‘buddy’ who will provide support and guidance to a young person, and encourage involvement in prosocial activities. This is also listed as a ‘promising’ approach by Sherman and his colleagues – that is, one where there is evidence of success, but not enough to raise it to the status of a ‘what works’ approach (Sherman et.al.1998).

Helena Barwick, in her very comprehensive 1999 review, looked at Australian research by Buttrum (1998) on 'what works' for young people. He came up with the following key features for effective approaches:

- assisting young people to accept rather than avoid responsibility for their own behaviour
- focussing on those problems which contribute to the offending behaviour
- assisting in the development of practical alternative ways of coping with stressors
- involving the young person's family in working on family issues related to re-offending
- improving basic educational skills and achievements
- helping in the development of work skills
- helping young people establish relationships with prosocial individuals who are potential role models and mentors
- involving young people in the assessment of their own needs, and the planning and monitoring of their own programmes.

It is interesting that this review focuses on three out of the four settings considered key to youth development – family, school/work and peer group. These, along with the fourth setting of neighbourhood/community, are the environments in which young people grow up, and where they learn the ways which may last them a lifetime.

The British review of meta-analyses by McGuire and Priestly was also included in Barwick's 1999 review. Their conclusions fit very closely with the ground-breaking work that has been coming out of Canada for the last 15 years or more. In particular, it echoes the work of Andrews et.al. on the three principles of risk, need and responsivity. They found that the following are more likely to lead to effective programmes for young offenders:

- providing a more intensive intervention for young people with a predicted higher risk of re-offending
- targeting the key risk factors (referred to here as 'needs') which are causally associated with re-offending
- matching young people with programmes that suit their personality, learning style and other personal factors
- providing programmes that are non-residential
- using programme types that are multi-modal, that is, use a variety of techniques or have a number of components
- actively teaching and rewarding new behaviours, and encouraging new ways of thinking (cognitive-behavioural techniques)
- making sure that programmes are run the way they are designed and intended to be run, including number of hours and specific components (cited in Barwick 1999).

The last study that Barwick reviewed is by psychologist Linda Zampese, carried out for the Department of Corrections in 1998. She concluded that effective interventions for young offenders:

- are based on sound facts and relevant theories about criminal behaviour
- are well structured
- use approaches which aim to encourage certain behaviours and ways of thinking, and discourage others in very direct ways (cognitive-behavioural techniques)
- are multi-modal, that is, use a range of change techniques or components

- target the key risk factors which lead to offending (criminogenic needs)
- are usually of a longer than normal duration
- are non-residential
- are targeted at young people with a higher risk of re-offending
- include family and peers, or at least consider their impact.

Redondo et.al.(1997) also found that the interventions with the greatest number of weekly treatment hours were the most effective. The programmes they looked at ran for a median number of 22.5 hours, delivering a median of 3.75 hours per week over a median total duration of 2.5 months. Interventions that delivered more than these levels of service tended to be more effective.

Perhaps the most rigorous review of the research carried out in New Zealand is that by Anthony McLean and Randy Grace (1998) of the University of Canterbury. They looked at all the meta-analyses carried out to date, as well as conducting one of their own. Those meta-analyses which solely concerned young offenders showed that the following approaches were effective:

- behavioural and cognitive approaches (Garrett 1985, Mayer et.al.1986, Andrews et.al.1990, Antonowicz and Ross 1994)
- life skills approaches (Garrett 1985)
- diversion with younger offenders with a service (programmes) component (Gensheimer et.al.1986)
- higher numbers of contact hours (Gensheimer et.al.1986, Gottschalk et.al. 1987)
- approaches which provide higher contact hours for offenders with a higher risk of re-offending (Andrews et.al.1990)
- approaches that target risk factors which lead to offending (Andrews et.al.1990, Antonowicz and Ross 1994)
- multi-modal approaches (Lipsey 1992)
- behavioural approaches (Lipsey 1992)
- skill-oriented approaches (Lipsey 1992)
- employment programmes (Lipsey 1992 all cited in McLean and Grace 1998).

Lisa Hema (1999a) briefly reviewed the literature in the context of 'wraparound' approaches, and cited Palmer (1992) who found that effective interventions were generally:

- behavioural
- cognitive-behavioural
- skill oriented or life skills
- multi-modal, that is, using a variety of techniques to address a variety of needs
- family interventions.

She also looked at Howell and Wilson's work on chronic, juvenile offenders. They concluded that effective programmes were:

- holistic, comprehensive or multisystemic – that is, dealing with many aspects of youths' lives simultaneously, as needed
- intensive, often involving multiple contacts weekly, or even daily contact with at risk youths
- building on youths' strengths rather than focussing exclusively on their weaknesses
- using a socially grounded approach which takes into account all the environments in which a youth moves, rather than an individual or medical-therapeutic approach

- enhancing the existing culture of the family and young person, rather than imposing a foreign culture onto it (cited in Hema 1999a).

The Effectiveness and Nature of Cognitive-Behavioural Approaches

One of the findings common to almost every review and meta-analysis of the effectiveness literature is that behavioural approaches have a reliably positive impact on offending (Andrews et.al.1990, Garrett 1985, Lipsey 1992, Lipsey and Wilson 1998, McLaren 1992, McLean and Grace 1998, Redondo et.al.1997, Sherman et.al. 1998, and Zampese 1998). They are followed closely by cognitive behavioural interventions.

Lipsey (1992), for instance, found that behaviour contracting resulted in a 25 percent reduction in expected re-offending. This finding is fairly standard across all the reviews and meta-analyses (McLaren 1992) and use of behavioural techniques can be taken as one of the most basic elements of effective practice.

‘Cognitive-behavioural’ is a term much bandied about and little explained. In general terms, it means using approaches that teach certain skills, both new behaviours and thinking skills, then encourage their use by selectively rewarding them, and ignoring or selectively sanctioning other ways of thinking and acting. This broad approach can include:

- modelling, where the desired behaviour or skill is demonstrated by a staff member to the young person
- graduated practice, where students try new skills in steps, building in difficulty with each one
- rehearsal, where offenders get frequent chances to try out the new behaviours or skills and get feedback on how well they are using them
- role-playing, where programme participants play out situations where they use their new skills, either with each other or with the tutor, and get feedback on how well they are doing
- reinforcement, where staff or significant adults reward effort and successful learning with praise and encouragement, or more tangible rewards such as increased privileges or money
- cognitive restructuring, where offenders learn to change the way they think about things in very logical and realistic ways, so they can become more rational in their choices (this includes training in how to solve problems) (McLaren 1999).

‘WHAT WORKS’ GENERALLY

Something of a trend can be discerned amongst all these disparate studies. The summaries of what does and doesn’t work (which can be found at the end of this paper) give an overview of the key trends. But briefly, it is clear that what is most effective is:

- using a multi-faceted approach which targets a number of needs or skill deficits, and uses a variety of techniques. For instance, an intervention could target both education and work skills, use modelling and reinforcement to teach skills and a behavioural contract to specify what actions the young person will take and what consequences they will earn
- using cognitive-behavioural techniques which very actively teach new skills and attitudes, making them clear to young people through modelling them, allowing opportunities to practise skills in the real world, and providing positive

consequences for using them. Cognitive-behavioural techniques also include things like behavioural contracts, identifying and challenging irrational thinking that may lead to crime, and various techniques for learning to stop and think before acting (including time outs)

- targeting the causes of offending (risk factors) that each young person shows, from the list in Section II of this paper
- teaching life skills to higher risk offenders.

EFFECTIVE APPROACHES IN RESIDENTIAL AND NON-RESIDENTIAL SETTINGS

Pioneers in the rigorous study of effective rehabilitation, Canadians Don Andrews, Paul Gendreau and their colleagues found that live-in interventions, whether in the community or a state-run institution, were less effective than non-residential ones (Andrews et.al.1990). However, Lipsey (1992) found that nine institutional programmes and twelve community residential programmes had a significant positive impact on offending.

Sherman et.al. (1998) note that both meta-analyses found there will be greater reductions in re-offending if treatment is provided in community settings instead of institutions. They also conclude that residential programmes have been proven not to work (although the following sections show that there are some exceptions to this rule).

More recently, Lipsey and Wilson carried out perhaps the most thorough meta-analysis of interventions for serious juvenile offenders to date (in Loeber and Farrington 1998). They divided the interventions into those that were not live-in (non-institutionalised) and those that were (institutionalised). Overall, the interventions provided in institutional settings (largely juvenile justice facilities) had a greater average impact (0.14) than those delivered in non-institutional settings (largely probation or parole, mean effect size (0.10). However, this difference was not statistically significant.

In contrast, Redondo et.al. (1997) found greater effect sizes in residential settings – namely juvenile centres and juvenile prisons. They found lower effect sizes for community settings, and concluded that programme type was more important than setting. This may indicate that the type of approach being used in residential settings in Europe is more effective than that used in the United States. Indeed, the highest effect sizes were found in Israel, followed by Spain and Germany. The United Kingdom had the lowest effect size (effect size here indicates positive impact on offending). Germany has developed some very effective therapeutic prisons, as discussed in the section on residential settings below.

These conflicting findings make it hard to draw a firm conclusion about the effectiveness of live-in versus non-residential interventions. It can no longer be said conclusively that residential approaches do not work as well as non-residential. It seems the specific nature of the approach is more important than the setting. However, it appears residential approaches have to work harder to succeed. Live-in interventions need to be better designed and more carefully implemented than non-residential approaches if they are to have a positive impact on offending.

What is Effective in Non-Residential settings

Lipsey and Wilson (in Loeber and Farrington 1998) found that the bulk of the impact of treatment (40 percent) was due to the nature of the offenders included on the programme. When non-institutional interventions included young people who all had prior offences, the effects of programmes were greater. When those young people had a mixture of property and violent/serious offences, effects were also larger. This seems to provide further support for Andrews et al.'s 'risk principle', which states that treatment will be more effective for higher risk cases, as one reliable measure of risk of re-offending is number of prior offences.

This finding also suggests that non-residential programmes were more successful for serious and violent young offenders than for less serious offenders.

The next biggest influence on outcome for non-residential programmes was the type of treatment. The kinds of non-residential approaches that consistently had a positive impact were:

- interpersonal skills training, including how to see oneself from another's perspective, using role plays, videos of role plays, and group demonstrations
- behavioural contracting, including cognitive work on family attitudes, parenting and family skills training, and contingency contracting with monetary rewards
- individual counselling, including using citizen volunteers to counsel offenders on probation, matched by gender, ethnicity, educational background, intellectual level, vocational aspirations and recreational interests; 'reality therapy counselling' with goal setting and action plans, and Multi-Systemic Therapy with attention to cognitive processes, family relations and school performance.

It is somewhat curious that 'individual counselling' included Multi-Systemic Therapy, which is a family therapy approach. As can be seen, most of the interventions included aspects that were not strictly part of their overall label, which makes the labels somewhat misleading. This highlights the danger of referring to generic programme labels, rather than specific programme characteristics.

Lipsey and Wilson also looked at a promising category of approaches where there were positive but inconsistent results. The two services in this category for non-institutional treatment were:

- multiple services, such as offering 24 different treatment techniques with no fewer than 4 (but no more than 12) being applied, including prosocial peer mentoring, group counselling, vocational training, remedial education, job development and placement, cultural education and recreation
- restitution on probation/parole (no further information about this approach was provided).

The amount of treatment showed a significant impact on outcome for non-residential programmes, but interestingly this was in terms of total number of weeks. The longer the programme, the better the outcome. The median number of weeks for effective length was 23 for non-institutionalised interventions. However, where more than five to ten hours of intervention were delivered in a given week, the programme started to lose effectiveness. This

may be due to the effects of greater association with the antisocial peer group, although this is not clear.

General programme characteristics (such as the nature of staff and the way the programme was run) had a significant but slighter impact on outcomes for the non-residential group. This was far from the case with the residential setting, where general characteristics accounted for the bulk of the outcome.

What is Effective in Residential Settings

While interventions in a residential setting are generally less effective than those that are not live-in (at least outside Europe), there are some exceptions to this rule. Conditions exist under which effective live-in interventions can flourish – Lipsey and Wilson have come up with the following:

- general programme characteristics had the greatest impact on positive outcomes – the way the programmes were organised, staffed and administered. This result largely was due to the fact that the most effective programmes were administered by mental health personnel, who are presumably better trained and skilled in use of cognitive-behavioural techniques. This finding also highlights the importance of residential interventions being better designed and implemented than non-residential
- being established for two years or longer also made interventions more effective (in Loeber and Farrington 1998).

Type of treatment had the next greatest impact. The most effective approaches were:

- teaching in family homes
- interpersonal skills training, including training in social skills using modelling, role playing, video feedback, social reinforcement and homework, anger control training, systematic desensitisation and cognitive reappraisal, plus experimenting with new behaviours.

The emphasis on actively teaching skills is important and is enough to offset the normal dampening impact of the residential nature of the intervention. Simply herding young people together, whether in a house or a prison, has not been found to be particularly effective by other researchers. What seems to count more is what happens once they are in the residence, and in particular, what they learn – whether criminal attitudes and skills from their friends, or socially desirable values and skills from staff.

Lipsey and Wilson found that treatment was more effective when more weeks of it were delivered, slightly more so than for non-residential interventions. The median length of effective intervention was 25 weeks in a residence compared with 23 weeks in outside residences. Intervention was largely continuous, meaning that it took place throughout the institutional regime.

Integrity of treatment also had a positive impact. That is, interventions were more effective when young people received the intended treatment, rather than unplanned changes being made

(such as hours being reduced or components missed out). Monitoring treatment delivery was important in ensuring that interventions were well implemented.

Clearly, there is quite an overlap between Lipsey and Wilson's findings on 'what works' in both settings, suggesting that there are some underlying principles of effective change processes at work here.

Alison Gray, a New Zealand researcher, looked beyond specific types of intervention to find out the general characteristics of effective residential approaches for offenders aged 15 to 20. She concluded that effective residential interventions:

- adopt a cognitive-behavioural approach, aiming to teach new attitudes and ways of thinking, as well training people in very active ways with rewards for desired responses
- attend to relapse prevention issues, helping offenders to identify the life circumstances that put them at risk of re-offending, and set up plans of how to cope with these circumstances
- have highly skilled staff
- promote a positive peer culture, where participants remind each other of the rules and desired behaviour and respond positively when they are followed, and a pro-social environment, where crime, violence, dishonesty and drug use are actively discouraged and honesty, non-violence, work and education are modelled and encouraged
- provide intensive community-based supervision and reintegration services once offenders are released (Gray 1998 cited in Barwick 1999).

The highly successful therapeutic communities for drug abusing offenders are prime examples of such effective residential programmes, both in prisons and the wider community. The New Zealand initiative of Kia Mārama, a prison-based sex offender treatment unit is another such example, although this takes a much wider age range. These are in stark contrast to programmes run in non-specialist prison units or residences, where the young person returns to a culture that endorses (and enforces) antisocial values and acts and where staff may be minimally involved in providing any alternative values or experiences.

Antonowicz and Ross concluded that the examples of highly effective residential programmes for both adults and young people had one thing in common:

- they were in an area that was safeguarded from the rest of the institution, and were therefore able to establish an 'alternative community' (cited in McLean and Grace 1998).

However, it is possible to make a whole prison into a therapeutic setting, and this has been done with serious adult offenders in Germany (Losel and Kofler 1989, Losel and Eff 1997 cited in McLean and Grace 1998). This approach uses a fairly relaxed regime, with no uniforms, visitors allowed into cells, light censoring of mail and telephone calls, and small communal living units. Most of the treatment staff are educators, psychologists and social workers. The staff-inmate ratio is around 3:20, although this varies. There is a strong emphasis on psychotherapy, with at least one session of individual therapy per week as well as group therapy each week. Types of treatment used vary from psychotherapeutic to cognitive-behavioural, but employment, education and rehabilitation programmes such as violence prevention and social skills training are also offered. The regime also aims to enhance relationships with family and friends, increase social and self-responsibility, confront offence patterns, offer reparation to victims and settle offender debts.

While not run exclusively for young offenders, this research does show that a therapeutic community can successfully be applied across a whole institution – a finding that is relevant to youth institutions.

Generally, it seems residential programmes need to be dedicated to one part of the institution, as well as having a high quality programme that is carefully implemented, with good staff if they are to be successful (McLaren 1992, 1999).

THE IMPORTANCE OF THE FAMILY IN INTERVENTIONS WITH YOUNG PEOPLE

In their 1998 review, McLean and Grace look at specific types of intervention with young offenders. While this review is more concerned with general principles, their findings are included here. One of their general points is that the same principles of effectiveness appear to underlie programmes for both younger and adult offenders. The major difference they note for young people is the involvement of the family or whānau. They find that the research indicates quite strongly that family therapy is a particularly productive approach with young offenders.

There are quite a few differences between the families of offenders and non-offenders. In particular, families of offenders tend to:

- have more frequent parental disagreements
- give conflicting directions to children
- show little dominance by parents in family decisions, with sometimes an inverted power hierarchy where children have more say in decisions
- be dominated by negative, rather than positive, emotional expression
- show more communication that is misunderstood or misread by other family members
- indicate less willingness to compromise (all in Tolan et.al. cited in McLean and Grace 1998)
- use inconsistent parenting strategies, responding differently to the same behaviour at different times
- show negative parenting patterns, for example harsh discipline and little shared positive activities with children
- inadequately monitor the behaviour and whereabouts of children
- have difficulties with family cohesion and adaptability (all in Borduin and Henggeler 1990).

Therefore, there are some grounds for suspecting that intervening with families to improve positive communication, positive parenting and parental supervision, may have an impact on offending.

Borduin and Henggeler, the originators of Multi-Systemic Therapy (MST), investigated which of these family factors were actually causally related to offending. The two causal modelling studies they looked at showed the following family factors predicted delinquency:

- conventional bonding to family by reducing young people's involvement with delinquent peers (Elliott, Huizinga and Ageton 1985 cited in Borduin and Henggeler 1990)
- parental monitoring of children's activities and who they mix with, in itself, and indirectly by reducing the amount of time spent with delinquent peers (Patterson et.al. 1986, 1985, 1984 cited in Borduin and Henggeler 1990).

Clearly, the way the family operates can lead to offending. These results have one important implication – that building up the strength of the family, particularly how close the young person feels to their family, and how well parents keep an eye on what their children are doing and with whom, will have an impact on offending. Even though mixing with antisocial peers came up in both studies as the most powerful predictor of delinquency, enhancing the family came through as vital to undermining the strength of peer group influence.

It is likely therefore that working with families can have a significant impact on offending by young people, particularly as they are usually still involved with their families when they start offending. McLean and Grace examine three types of approaches which work with the family – generic family therapy, functional family therapy and multi-systemic therapy.

Family Therapy

In a ‘vote counting’ review of treatment effectiveness, Tolan et.al. found that:

- six out of seven indicated future delinquent behaviour decreased after family therapy
- studies that looked at both future delinquency and family functioning reported improvements in both (cited in McLean and Grace 1999).

From the brief review of characteristics of families of delinquents, it would appear that improving communication skills and parenting skills could result in less offending. McLean and Grace report that these do seem to be the major components of family therapy. Not only this, but family therapy with a focus on communication showed an advantage over individual, offender-centred therapy (Tolan et.al.1986, Parsons and Alexander 1973 cited in McLean and Grace 1998).

More recently, Gordon, Graves and Arbutnot reviewed the effectiveness of family therapy with adolescent delinquents (1995 cited in McLean and Grace 1998). The groups were as diverse as serious multiple offenders released from prison through to first-time, minor offenders from middle class Mormon families. Among the more serious offenders, recidivism was reduced by 33 percent, and in other groups by up to 50 percent.

Functional Family Therapy

Functional family therapy is based on a behavioural-systems therapy developed by Alexander and Parsons in the early 1980’s (1982 cited in McLean and Grace 1998). Families of delinquents tended to show dysfunctional communication styles, with more communication that is misinterpreted or misheard by other family members. Changing communication styles in these families appears to have an impact on delinquent behaviour.

In a 1988 single study Gordon et.al. found that functional family therapy reduced offending by 15 year old court-directed, juvenile offenders by 56 percent. It should be noted that both the experimental and comparison groups were small – 27 youths and families in each. A second follow-up, five to seven years after the original intervention, found an effect size of 0.36. In essence, this is a reduction in offending of 36 percent (Gordon et.al.1995 cited in McLean and Grace). This would be remarkable in a one year follow-up, but in a long-term follow-up it is truly unusual, as effects usually fade over time.

The only other evaluation of functional family therapy that could be found was with 44 young offenders who had been incarcerated for an average of 20 serious and repeat offences. The treatment took place with the family in the institution, or the youth’s home if home visits were

permitted. Treatment time averaged 30 hours, and was coupled with other services such as remedial education, job training and placement, and school placement. The comparison group was provided with a variety of services, mainly group homes with treatment programmes based on Achievement Place. Many also received help with placement and activities from ‘trackers’ who provided support after release. Fifteen months after treatment ended, 60 percent of the treatment group had been charged with committing an offence, compared with 93 percent of the comparison group. The annual base rate for re-offending for the facility (the rate one would normally expect for a young person released from there) was 89 percent. Although both groups were essentially equal in frequency and severity of offences prior to the intervention, the experimental group did significantly better than the non-programme group. When those youth who had not offended at all were excluded from the analysis, frequency of offending for the treatment group was still significantly less than for the comparison group.

Don Andrews, the Canadian criminologist commented on a recent trip to New Zealand that he saw functional family therapy and Multi-Systemic Therapy as the two most promising approaches for young offenders. From these preliminary reports it is clear why this is so.

Multi-Systemic Therapy

Multi-systemic therapy (usually called MST) is one of the few interventions that started out by identifying the causes of offending, and then built itself around treating them. It is called ‘multi-systemic’ because it works across the different social systems that the young person moves in – family, school, peer group and neighbourhood.

The distinguishing characteristics of MST are probably these:

- it addresses risk factors that lead to offending
- it works with the whole family as well as the offender, coming to the family’s environment in their time, and asking what the family needs
- it works in the four social environments of the young person – family, school, neighbourhood/community and peer group
- it works in the community with chronic young offenders who are prison-bound.

However, the most distinguishing characteristic of MST is it is one of the most effective interventions currently in existence. Like functional family therapy, MST emphasises working with the whole family, and it also makes a case for some individual therapy where needed. This particularly involves training the young person in seeing things from another person’s point of view (social perspective taking), changing their belief system and increasing motivation.

MST also assesses the young person’s antisocial peer networks and attempts to change them. This is done partly by involving the young person in leisure time pursuits at school, and partly by introducing them to new social groups and activities which don’t involve antisocial behaviour (such as sports).

Parents are also asked to aid these attempts, by improving their monitoring of who their child is mixing with, aiding involvement with new groups and activities through transport and supervision, and providing negative consequences for continued mixing with antisocial peers. As discussed above, improving family functioning is one key way of reducing the influence of antisocial peers.

One early evaluation of MST found the following positive changes:

- a 23 percent lower re-offending rate at one year follow-up, compared with similar hours of a different therapy
- fewer conduct problems
- more mixing and 'bonding' with non-delinquent peers
- improvements in mother-adolescent affection
- improvement in functioning of the young offender's siblings
- overall improvement in the adaptability of the family (Borduin and Henggeler 1990).

A 1997 overview of findings for various MST evaluations came up with these results:

- youths who received MST had significantly fewer arrests, reported fewer criminal offences and spent an average of ten fewer weeks in detention during a year long follow-up
- these results were maintained at a 2.4 year follow-up, with MST essentially doubling the percentage of youth not arrested
- MST was equally effective with youth and families from different backgrounds, irrespective of race, age, social class, gender, arrest and incarceration history, family relations, peer relations, social competence, behaviour problems and parental symptomatology
- the average cost of MST was US\$3,500 per client compared with US\$17,769 per average institutional placement
- MST has proven effective with adolescent sex offenders, with 62.5 percent lower level of sex offending three years after treatment and reduced frequency of arrest (although these findings are tentative due to a small sample size of 16)
- four years after treatment, chronic juvenile offenders who received MST offended 50 percent less than those doing another treatment and 65 percent less than those who completed neither treatment
- MST was more effective than parent training in helping abusive and neglectful parents to control their children's behaviour more effectively and become more responsive to their children's behaviour, as well as restructuring parent-child behaviour patterns that distinguish maltreating families from non-problem families
- MST reduced substance abuse significantly in juvenile offenders at a four year follow-up, as well as reducing drug related arrests by three quarters. In another study, MST reduced rearrests by 26 percent and resulted in a 40 percent reduction in days incarcerated for drug using delinquents, at a one year follow-up
- in this study, 98 percent of families assigned to MST completed a full course of treatment, in comparison with 22 percent of other families who received any treatment during the first five months of the programme

- with violent and chronic juvenile offenders living in rural areas, MST decreased incarceration by almost half (47 percent) at 1.7 year follow-up, but did not decrease criminal activity as much as other recent trials (Henggeler 1997).

Clearly, the research supports Don Andrews. Multi-Systemic Therapy is one of the more promising interventions with young offenders. In fact, the number of high quality replications of this research shift it out of the ‘promising’ and into the ‘what works’ category. Its effectiveness is the result not only of family involvement, but also of targeting risk factors, and of working across the four environments of family, school, neighbourhood and peer group. Being exquisitely tuned to the needs and limitations of the families also means that uptake is high and attrition low. Programme integrity (how faithfully it is implemented) is also carefully nurtured.

Conclusion – Family Interventions

It is clear that the two interventions which target chronic young offenders in their families are doing particularly well in reducing re-offending and other problems. Given the connection of family problems to offending and to the potent risk factor of antisocial peers, it seems very likely that working with the family is part of the reason for their success. A word of caution needs to be sounded here, however. Research on what doesn’t work shows that family interventions which do not address risk factors fail. Therefore simply involving the family in the intervention cannot be seen as a panacea. It is crucial the intervention also addresses risk factors across family, school, neighbourhood and peer group. It is not yet clear whether addressing these risk factors in the four environments makes the intervention any more successful although this seems likely.

SCHOOL-BASED PROGRAMMES

A cluster of risk factors for offending by young people relate to schooling – early and persistent antisocial behaviour at school, academic failure and lack of commitment to school among them (Howell et.al.1995). Others include poor school performance and attendance, truancy and lack of positive involvement in and feelings about school. A meta-analysis by Maguin and Loeber found that academic failure is related to the prevalence and onset of delinquency, as well as the escalation in the frequency and seriousness of offending (in Loeber and Farrington 1998). Given that these problems predict offending, it makes sense to examine interventions that aim to improve school attendance and achievement to see what impact these have on offending behaviour.

As can be seen from the section on interventions with the family elsewhere in this paper, school achievement can be improved through working with the young person and their family, provided it is specifically included as a goal of treatment. This section looks at with interventions that target school-related problems in the school itself.

Howell et.al.l in their 1995 book **Serious, Violent and Chronic Juvenile Offenders: A Sourcebook** look at a number of school based interventions. Unfortunately, very few evaluations actually look at offending behaviour long-term. These authors reviewed the substantial body of work by Robert Slavin and colleagues on how to increase academic achievement. While it cannot count as conclusive evidence of reduced re-offending, increased academic achievement would mean that at least one risk factor had been reduced, with consequent lower risk of re-offending. Slavin

and others found the following increased academic achievement:

- reductions in class size
- grouping students by their level of academic performance, not their ages
- continuous progress programmes, where students proceed through a defined hierarchy of skills and are tested at each level to assess their readiness to advance to the next skill. This was particularly good for students at risk of academic failure, a category which includes most young offenders
- cooperative learning, where teachers provide initial instruction to groups of students, who then work in teams of mixed skill levels to help each other learn, and assess each other's progress in preparing for tests and assessments. Again, this was particularly good for students at risk of academic failure
- one-to-one tutoring of primary school students in reading and maths by older students, adult community volunteers, trained paraprofessional or professional teachers. This was a widely replicated finding. Tutoring younger or less advanced students led to increases in the tutors' achievement levels
- computer assisted instruction.

They found that the following did not increase academic achievement:

- grouping by ability in secondary schools, either between or within classes, across different subjects and ability levels
- not being promoted to the next schooling level at the end of the school year
- developmental/humanistic models such as open classrooms or Piagetian-based programmes
- group-based learning programmes, where instruction is delivered to the whole class rather than small groups at the same skill level.

One evaluation reviewed by Howell et.al. looked at levels of aggressiveness, a precursor of offending in many cases. They found that a behavioural management programme where students won points, prizes and privileges for good behaviour had a significant impact on aggressiveness over a five year period (Kellam et.al. cited in Howell et.al. 1995).

Another intervention designed to reduce delinquency was the Seattle Social Development Model. This involved cooperative learning, proactive classroom management and interactive teaching. Expectations for classroom behaviour were established and frequent praise and encouragement was given for student efforts and progress in meeting these. By the end of the programme, aggressive behaviour by boys and self-destructive behaviour by girls had decreased significantly, although not for African American children. Family management practices and bonding to family and school also increased, across all social and ethnic groups. Most importantly, from our point of view, delinquent behaviour was significantly less likely to occur in the group who had taken part in the programme. This range of positive results makes this a programme worth replicating.

Truancy is a risk factor for offending and, obviously, the less a young person is at school, the less chance they have of achieving academically. One programme that made a significant impact on truancy by high school students used contracts where students pledged not to have unexcused absences. Each had a daily attendance card which they agreed to have their teachers sign, and turned in at the end of each day. One ticket was earned for each teacher signature and each

positive teacher comment, and tickets were used in raffles for prizes of money, movie tickets, record albums and gift certificates. The more tickets a student had, the more chance they had of winning (Brooks 1975 cited in Howell et.al. 1995).

This approach took place over only eight weeks. However, the technique of quite blatantly rewarding attendance also worked over a longer period. The 'Quantum Opportunity Program', also in the United States, offered modest cash (US\$1-\$1.33 per hour) and matching scholarship incentives to provide short-term motivation to disadvantaged youths to graduate from high school and go on to University over a four year period. They also offered:

- education activities: computer-assisted instruction, peer tutoring, homework assistance
- service activities: community service and public event projects
- development activities: curricula focussed on life/family skills, college and job planning.

They reduced felony arrests by age 25 by 71 percent compared with at-risk youth who did not take part in the programme. The intervention also resulted in 42 percent of participants going on to post-secondary school, compared with 16 percent of a similar group who did not take part, and achieved US\$3.68 in benefits for every US\$1 spent on the programme (Greenwood et.al. 1998, Aos et.al. 1998, www.crime-prevention-intl.org 1999).

Another of the few interventions to evaluate impact on delinquency long-term was evaluated by Bry (1992 cited in Howell et.al. 1995). This again used rewards for school attendance, lack of disciplinary referrals, lack of inappropriate behaviour at interviews with teachers and weekly teacher reviews of behaviour at school. The reward was an extra school trip during the year. The intervention lasted two years and also ran fortnightly 'booster' sessions for a year afterward.

The intervention had the following impact:

- significantly better school grades and attendance irrespective of race, sex, socio-economic status and motivation to achieve
- fewer problem behaviours at school in the year after the main intervention (that is, suspensions, academic failure, poor attendance and tardiness)
- less abuse of some illegal drugs and less criminal behaviour in the 18 months after the main programme
- sixty-six percent lower likelihood of having a juvenile record with the country probation office in the five years after the main programme.

Loeber and Farrington (1998) also carried out a comprehensive review of school-based programmes in their book **Serious and Violent Juvenile Offenders**. They reviewed an evaluation of a programme which provided a comprehensive school-based intervention with the following components:

- arts and athletics programmes integrated into the school calendar
- a parent programme to support academic and extracurricular school activities, fostering interaction among parents, teachers and other school staff
- a multidisciplinary mental health team providing consultation for school staff on managing problem behaviour
- a representative governance and management team comprising of school staff and parents to oversee the three programmes.

The results of the intervention were encouraging, with significant improvement in grades, academic achievement score tests and self-perceived social competence. These results are undermined somewhat by a non-equivalent comparison group and small sample size. Given the growing popularity of ‘academies’ in New Zealand schools, even the limited support for this approach provided by the evaluation is encouraging.

The Loeber and Farrington (1998) review also looked at a school-based intervention focussed on reducing bullying rather than increasing academic achievement (Olweus 1991). This Norwegian initiative had five components:

- a booklet for school personnel distributed to all Norwegian comprehensive schools, describing bully/victim problems, suggestions about what teachers could do about the problems and dispelling myths about the nature and causes of bullying
- an information and advice package distributed to all families in Norway with school-age children
- a video showing episodes from the daily lives of two early-adolescent bullying victims (available for purchase or rental at subsidised prices)
- a brief anonymous questionnaire about bullying problems administered to all students in all comprehensive schools, the results of which were used to inform school and family interventions
- a meeting between project staff and school staff in Bergen, Norway, held 15 months after the programme started, to provide feedback on the programme.

The results of the programme were promising. Reported bullying was reduced by around 50 percent at eight and 20 months after the intervention began. Student-reported delinquent behaviour also decreased significantly at the same time points, in the form of vandalism, theft and truancy.

Another intervention which showed positive results was Project CARE, a two year organised intervention for secondary schools. A team of teachers planned and implemented a school improvement programme which included:

- classroom management techniques such as assertive discipline and reality therapy
- cooperative learning.

They also partially implemented a parent volunteer programme, a community support and advocacy programme and others. Over the course of the programme, self-reported delinquency decreased significantly (Effect size = $-.20$) in the experimental school whereas it increased significantly in the control school (Effect size = 0.11). There were also fewer suspensions in the experimental school.

The last evaluation of a school-wide intervention reported in the Loeber and Farrington review is of the Multimodal School-Based Prevention Demonstration. While working with slightly younger children than are directly relevant to this review, it is still of interest in that it increased grade point averages (Effect size = 0.33), and decreased peer drug influence for high-risk students compared with those who did not take part. Specifically, this intervention included cooperative learning techniques, a Career and Educational Decision Skills programme, and one-to-one tutoring. Social bonding was addressed through social support interventions including prosocial adult models who taught appropriate skills and behaviours and a mentoring programme.

Conclusion: School-Based Programmes

From the research evaluated above, it seems clear that school-based interventions can have an impact not only on school attendance and achievement, but other risk factors such as aggressiveness, bullying and drug use. A very few interventions also show a long-term impact on delinquency and offending. Some characteristics of effective school-based approaches appeared recurrently and these are worth mentioning:

- multi-component programmes worked better than single component programmes
- effective academic programmes often seemed to include cooperative learning, one to one tutoring and computer-assisted learning
- the use of prosocial models, whether school staff or other adults, seemed useful (the effectiveness of mentoring is explored in more detail in the next section)
- incorporating arts and athletics programmes into the school curricula also seemed promising, lending some support to the New Zealand development of arts and sports academies in schools
- behavioural approaches for improving school attendance and achievement seemed particularly effective. These essentially involved setting clear expectations for behaviour, monitoring student performance and providing rewards for effort and achievement. The most effective behavioural programmes also included other components, such as one to one tutoring.

MENTORING PROGRAMMES

Mentoring appears to be one of the most talked about and least studied approaches currently available. As Sherman et.al. (1998) note, 'both the empirical evidence and theoretical linkages to community risk factors gives solid reason to support much more research on this strategy'. Unfortunately, those few evaluations of mentoring which have been carried out generally show a depressing lack of impact.

On the surface it seems logical to assume that linking a young person up with a compatible older person, who could encourage them to pursue a constructive way of life and support them in dealing with life problems, would be a promising course of action. This is because research shows that for children growing up in high-risk, multi-problem families, the availability of this type of adult support is a protective factor which makes the development of life problems (including offending) less likely (Bilchik 1998). Mentoring is a way of providing this support in a much more formal and reliable way. According to Sherman et.al. (1998) 'mentoring provides the highest dosage of adult-child interaction of any formal community-based program'.

Mentoring usually involves selecting interested and suitable adult volunteers and training them in how to interact with their 'little buddies'. They will usually meet with the young people three to four times a month or more, with each meeting lasting at least several hours. Mentors see young people in settings such as home, movies, professional sports, plays and concerts. They may talk frequently on the telephone, and be involved in many domains of the child's life (Sherman et.al. 1998).

Sherman et.al. put mentoring programmes in the 'promising' category of interventions, particularly for drug use. This means that they show some indications of success, but not reliably so. In fact, only two studies cited by the Sherman review found reliable evidence that mentoring reduced offending.

Reviews by both Loeber and Farrington (1998) and Howell et.al. (1995) conclude that evidence from ten evaluations of mentoring programmes consistently indicates that noncontingent, supportive mentoring relationships do not have desired effects on outcomes such as academic achievement, school attendance and dropout, misconduct or employment. This is true whether mentors were paid or unpaid, college undergraduates, community volunteers, members of the business committee or school personnel. However, when mentors in an Hawaiian study used behaviour management techniques school attendance improved, and in a longer-term study, delinquency (particularly fighting) was reduced (O'Donnell and Fo cited in Howell et.al. 1995).

The difference between the Hawaiian and other mentoring programmes was that in Hawai'i mentors were trained for over 18 hours to look for specific types of behaviour and reward these. Rewards included social approval in the form of warmth and praise from mentors and material rewards in the form of treats and outings using US\$10 per month. Truancy decreased for the group where the rewards were made contingent on appropriate and desired behaviour, but increased for the group where rewards were not linked to behaviour. This fits with the general finding that interventions which specify the desired behaviours and reward them, that is, behavioural interventions, are overwhelmingly more effective than other approaches. The danger with rewards that are not linked to desired behaviour is that they could inadvertently be given at times when undesired behaviour occurs, thus rewarding this, or give a general message that the whole lifestyle of the delinquent young person is fine with the mentor.

A more recent evaluation of mentoring is that of the Big Brothers (BB)/Big Sisters (BS) programme, which was founded in America in 1904. This was evaluated by Tierney, Grossman and Resch in 1995 (cited in Bilchik 1998, Aos et.al. 1998 and Sherman et.al. 1998). They found a 20 percent reduction in felony arrests (that is, for a serious crime) by age 25 – twice the level of impact needed for the programme to break even financially. The experimental group committed 0.21 offences per participant and the control group 0.27. While these rates do not appear high in comparison with other programmes (0.68 for the control group for MST, for instance) Sherman et.al. note that the group had a significant range of risk factors, including divorced and separated parents, a family history of substance abuse, a history of domestic violence, and a personal history of abuse. These should mean that risk of offending was moderately high.

In addition to the impact on offending, having a BB or BS made youth who had not already initiated drug use 47 percent less likely to do so than their non-mentored peers. They were also 32 percent less likely to report hitting someone and said they skipped half as many days of school as youth on the waiting list. Given that the 'little buddies' spent an average of 12 hours per month with their mentors, this is quite an impressive result. Mentors were also carefully selected and screened, trained and matched with young people, although the nature and length of training is not given in any of the reviews.

Sherman et.al. (1998) note that the BB/BS approach to mentoring does not involve contingent approval or reinforcement from mentors to mentees, thus undermining the conclusions by the Loeber and Farrington and Howell et.al. reviews. As the BB/BS experiment looked at 959 young people in comparison with the 26 young people looked at in the Hawaiian study, its conclusions are more compelling. There may be a possibility however, that introducing behavioural reinforcement techniques to BB/BS might increase its impact, as these techniques have proven successful in so many settings, including residential programmes, school-based programmes, family interventions, and substance abuse programmes.

Conclusion: Mentoring Programmes

At this stage, mentoring can only be described as 'promising'. There do seem to be two strategies that make it more likely to succeed:

- carefully selecting and screening mentors and matching young people with mentors
- training mentors in desirable behaviours and attitudes to model and respond to 'little buddies' and how to respond positively to them with personal and material reinforcement.

SUBSTANCE ABUSE TREATMENT FOR YOUNG PEOPLE

Unlike older offenders, young people do not tend to use the 'heavier' drugs like crack, cocaine, prescription drugs and heroin. Instead, they are more likely to use alcohol and marijuana (McLean and Grace 1998). However, McLean and Grace suggest that given the fact that adult offenders were probably using drugs as teenagers, there is some good basis for offering drug treatment programmes to young people who offend.

The evidence that substance abuse puts young people at risk of offending supports this position. Lipsey and Wilson, among many others, found that early drug use was a risk factor for future offending, even when the drug was something as innocuous as tobacco (cited in Barwick 1999).

As ever, the question here is 'what works'? What type of intervention is most likely to stop young people abusing alcohol and drugs? One review concluded that 'some treatment is better than no treatment', so it appears that there is some point in sending young people to drug programmes (Catalano, Hawkins, Wells, Miller and Brewer 1991 cited in McLean and Grace 1998). This still does not tell us, however, what particular kind of treatment young people need.

Other reviewers have come up with some broad principles for effective substance abuse treatment for young offenders:

- highly structured, multi-modal, cognitive-behavioural treatments (as opposed to psychodynamically oriented treatments) (Amini et.al. 1982 in McLean and Grace 1998)
- interventions that focus on the broader social environments of the young person, such as structured family therapy (Parsons and Alexander 1973, Szapocznik et.al. 1988 all cited in McLean and Grace 1998) and MST (Henggeler 1997).

Most drug treatment programmes for adults are designed for drugs other than alcohol and marijuana. One study found that four such programmes had little impact on alcohol and marijuana use by offenders aged 19 or less who went on them. The four approaches were:

- methadone maintenance
- therapeutic community
- outpatient drug-free
- detoxification (Sells and Simpson 1979 cited in McLean and Grace 1998).

However, a more recent study found that marijuana use by young people declined substantially after residential treatment (Hubbard et.al. 1989 cited in McLean and Grace 1998). Sherman et.al. (1998) also found residential drug treatment using therapeutic communities a reliably effective approach, although they didn't examine its effectiveness with young offenders.

The therapeutic community approach uses a live-in, stand alone unit with its own culture based around norms of not using drugs, working constructively and relating to others with honesty and openness. Both staff and participants model these values to newcomers and respond positively when newcomers demonstrate them. Transgressions from the norms are responded to with open confrontation in the unit meetings that form a major component of the approach. Progress through the hierarchy of increasingly desirable jobs, and greater levels of status and responsibility, is dependent on convincing demonstration that the therapeutic communities norms are being adhered to. Therapeutic communities also provide a ready made group of pro-social peers with whom graduates can keep in touch on release, and often provide a career path for offenders who move into paid staff roles.

There is some indication that the longer a young person stays in a residential treatment programme the better the results will be (Sherman et.al. 1998). It is the reverse for outpatient treatment in the community where longer participation may decrease effectiveness (Hubbard et.al. 1989, Rush 1979 all cited in McLean and Grace 1998).

How much young people perceived that they had a choice of involvement in treatment also seems to affect outcomes. However, young people can potentially see themselves having a choice even when treatment is compulsory (Bastien and Adelman 1984 cited in McLean and Grace 1998). Another study found that the degree to which young people respected and cared about the opinions of staff predicted positive outcomes (Braukmann et.al. 1985 cited in McLean and Grace 1998).

McLean and Grace (1998) also summarised the results of a 1991 review of effective treatment for young offenders who have problems with drugs and/or alcohol.

Effective programmes:

- are highly structured, skills-oriented, multi-modal and cognitive-behavioural – that is, teach new skills in very active ways using a variety of techniques and a defined framework
- focus on the broader social environments in which young people grow up, including family, school, peer group and neighbourhood/community, and preferably involve the offender's family
- should be outpatient in the majority of cases, but can be residential, particularly for the more serious problems and types of drugs
- are of longer duration in residential settings and shorter in non-residential settings
- enhance young peoples' perception that they are making a voluntary choice to take part, even when treatment is compulsory
- use staff whose opinions young people respect and care about, and who are good role models
- target the typical drugs used by young offenders – marijuana and alcohol
- use contingency contracting to reward abstinence, school attendance and other desired outcomes – that is, make a contract with the young person for certain positive consequences to follow abstinence from drugs and alcohol, attending school etc.

The fascinating thing about this list is that it so closely mirrors the list of ‘what works’ generally across all risk factors. It is beginning to seem that certain approaches work best with young people who offend, whatever their problem.

PROGRAMMES FOR VIOLENT AND AGGRESSIVE YOUTH

The excellent and comprehensive McLean and Grace (1998) review also dips into the area of intervention with young people who are aggressive and violent. They review only one intervention – EQUIP. This is a combination of two other approaches – Aggression Replacement Training (ART), developed by Arnold Goldstein, and Positive Peer Culture, developed by Vicki Agee. Both of these people are Americans with a tremendous concern about violent young people, and considerable talents for working with them.

In general, evaluations of Vicki Agee’s Positive Peer Culture approach tend to show it does not have a significant effect on re-offending (see, for instance, the 1993 Greenwood and Turner evaluation of Paint Creek in Sherman et.al. 1998). It has, however, proved to be an excellent approach for gaining control over impulsive and unpredictable violent young offenders, particularly in residences. In general it involves teaching young people a set of basic rules, outlining clear and consistent consequences for breaking them, and enlisting the help of the peer group to report rule breaking. It also involves linking privileges to effort in school work and other programme areas.

Arnold Goldstein’s approach, while using some similar behavioural strategies, focuses more on social skills training. In its original form it involved getting young people to choose from a ‘menu’ of social skills, such as dealing with an insult, or asking for something. Staff would then model the skills needed to do this and the young people would practice the skills in a group. Group members and staff would give both positive and negative feedback on how they were doing in using the new skill.

EQUIP takes ART a bit further. It places more emphasis on social skills training, rather than on violence and aggression. It also tries to create a peer culture in which young people, under the guidance of a trainer, develop and use pro-social values and judgements.

An early evaluation of EQUIP shows an effect size of 0.29 – a reduction in re-offending of almost 30 percent (Leeman et.al. 1993 cited in McLean and Grace 1998). It also shows increases in social skills, which were strongly associated with improved institutional conduct. While this study is somewhat weak because of the low numbers involved (only 20 youth in the experimental group) and lack of replicated findings, it is certainly a promising approach.

Another New Zealand review of effective violence prevention programmes found that most of the effective violence prevention programmes reviewed were for people in their teens. The key characteristics of these effective violence prevention programmes for young people were as follows:

- a comprehensive, multi-component programme which impacts on many aspects of young people’s lives

- working not only with the young person but also with the key people in their lives, such as family members and members of the same gang, helping them all solve problems and learn new skills
- learning skills that will help avoid future violence, such as stopping and thinking before acting (impulse control), seeing things from others' points of view (social perspective taking), identifying and changing the thoughts that lead to violence, learning to respond to anger more constructively by using arousal awareness, anger recognition, and techniques to reduce angry thoughts, learning behaviours that replace violence, such a self talk, role playing, time outs
- relapse prevention – planning how to control thinking and situations that put a young person at high risk for violence before they occur
- having programmes based in the community and working in a number of areas in a young person's life, such as the home, school, peer group and neighbourhood, improving performance and relationships in these areas (McLaren, 1997).

In sum, what is important in reducing violence is to have an impact on a number of key areas, skills and people in a young person's life, and to teach skills specifically designed to reduce violence. This is clearly similar to other specific programme areas.

SUPPORT FOR YOUNG OFFENDERS AFTER INTERVENTIONS (AFTER-CARE)

Maxwell and Morris (1999c) investigated a number of factors that predicted whether or not a young person would become a persistent offender or stop offending. Among the factors that suggested a person would persist in offending were a number of life events that did or did not happen after a Family Group Conference. These included:

- not gaining employment after the Family Group Conference
- not having a job or close friends since the Family Group Conference
- not having had some training since the Family Group Conference.

These suggest that even when an intervention is effective, follow-up will enhance the likelihood of a young person ceasing offending. It also suggests that follow-up which helps young offenders find pathways into a more conventional lifestyle, particularly paid work, is essential.

The Sherman et.al. review carried out for the United States Congress found that after-care of young offenders was a 'promising' approach – that is, one where a few isolated studies had shown a good result, but had not yet been widely replicated (Sherman et.al. 1998).

Altschuler (in Loeber and Farrington 1998) concluded that positive impacts on re-offending could be stronger and longer lasting if effective institutional programmes were followed up by quality non-residential after-care programmes. He suggests this on the basis of the overlap between 'what works' in both institutional and non-institutional settings (social skills training, multi-modal approaches and cognitive-behavioural approaches). His views are also influenced by Lipsey and Wilson's 1998 finding that several of the more successful programmes they reviewed focussed 'to varying degrees' on community re-entry. He acknowledges, however, that more research is needed to prove this is actually the case. In an earlier piece of research, he in fact

refers to “an almost total lack of published information about juvenile aftercare, especially with regard to high-risk offenders” (cited in Howell et.al. 1995).

Research by Greenwood, Deschenes and Adams (1993) on experimental after-care programmes found no difference between youths randomly assigned to six months of intensive after-care or no after-care (cited in Howell et.al. 1995).

At this stage it seems fair to say that no convincing evidence exists for the positive impact of after-care on re-offending. It remains an area of promise and potential that desperately needs more extensive and rigorous research before it can be welcomed into the ‘what works’ camp.

SERIOUS AND VIOLENT JUVENILE OFFENDING

Loeber and Farrington, in their 1998 work on serious and violent juvenile offenders, echo other research on the importance of changing the causes of offending. They note that these offenders tend to carry many risk factors and effective interventions with them take action against those risk factors open to change. They also note the following effective approaches:

- behaviour contracts with rewards and sanctions
- interpersonal skill training and cognitive-behavioural programmes
- after-care, following on from effective programmes that might lose their impact without it
- alternatives to secure containment (cited in Scott 1999).

CHARACTERISTICS OF EFFECTIVE STAFF

Alison Gray and Vicki Wilde (1999) recently investigated views on effective programmes in the greater Wellington area. Their respondents, who included the judiciary, police, academics, programme providers and public sector staff, indicated that they saw the following as characteristics of effective staff:

- adequate training
- a sense of humour
- being positive role models to whom young people can relate well
- credibility, being both respectful of young people, and respected by them
- being committed and non-judgmental
- cultural skills and knowledge, particularly when working with Maori.
- commitment and genuine caring.

While this list is not based on rigorous analysis, it accords quite closely with other, more rigorous, research looked at throughout this review.

William Jenkins (1999) recently carried out a limited review of international research on characteristics of staff associated with effective outcomes. As most of the studies he reviewed were on juveniles, his review is particularly relevant here. Jenkins looked both at characteristics of staff that were seen as generally positive by offenders and other staff, and those that were found to be associated with lower levels of offending. One of the main conclusions of his review was that:

- re-offending is reduced more when offenders are matched with staff to whom they relate best and who are best suited to their particular personality and offending history.

Unfortunately, the research is not very forthcoming on exactly how to match offenders with staff. What research there is on the subject indicates that specific qualities associated with better outcomes, based on the more recent and rigorous studies, include:

- showing positive regard for offenders (Jesness 1975) and being in return liked by the offenders they work with (cited in Palmer 1994)
- modelling attitudes that are opposed to criminal and antisocial behaviour, such as theft, violence and dishonesty and responding positively to offenders when they express these attitudes themselves (Andrews and Kiessling 1980, Trotter 1993)
- using problem solving strategies (Andrews and Kiessling 1980).

One other factor relevant to a positive impact by staff came out in a review of research on prevention by Dryfoos (cited in Barwick 1999) and is supported by other work on effective interventions (McLaren 1999). That is, that staff are well trained, both on starting work and throughout their time in the job. This seems to maximise the chances of programmes making a difference to young people. Gray (1998 cited in Barwick 1999) concurs with this, particularly for young offenders aged 15 to 20 in residential settings.

In their massive 1998 review of ‘what works’ McLean and Grace touched in passing on the characteristics of effective staff. They looked only at a seminal study by Andrews and Kiessling (1980), which Jenkins (1999) also looked at above. This study concludes that effective staff:

- are interpersonally warm
- are tolerant and flexible, yet sensitive to conventional rules
- use firm but fair exhibitions of authority, that is, ensure that rules are consistently enforced without abusing offenders or using favouritism
- demonstrate their own pro-social attitudes, values and beliefs (in things such as honesty, education, employment, non-violence, positive recreation)
- enthusiastically engage the offender in the process of change
- actively expose and make attractive concrete alternatives to antisocial attitudes and behaviour.

McLean and Grace also reviewed a study of drug treatment for young offenders which found that outcomes were better when young people respected and valued the opinions of staff.

Lipsey and Wilson looked indirectly at characteristics of effective staff in their 1998 meta-analysis (in Loeber and Farrington 1998). One of the most effective non-residential approaches they identified was a programme that used citizen volunteers to work with juvenile probationers in conjunction with regular probation supervision, providing one-to-one counselling. What is most relevant to this section, is that they were matched with probationers on the basis of:

- gender
- ethnicity
- educational background
- intellectual level
- vocational aspirations
- recreational interests.

This provides some support for the Andrews et.al. principle of ‘responsivity’, which states in part that programmes are more effective when staff are matched with offenders by personality and interests.

Paul Gendreau, the Canadian researcher, notes that anxious offenders do better with staff who show high levels of interaction with people, as they find this reassuring (Gendreau 1996). He also suggests that programmes are more effective when staff are matched with the programmes that suit their personal styles – for instance, staff who have highly concrete approaches to situations and problem solving do best in structured programmes, where the rules and ways of running the programme are very clear and spelt out.

There is still surprisingly little research on this important subject. What there is tells us that effective staff are able to balance a firm authority with warmth and the ability to form a rapport with offenders. They show the kinds of behaviours and values they want to see, and respond positively when offenders imitate them. They help offenders solve their day to day problems and teach problem solving techniques that will allow offenders to solve problems on their own. In addition, they are people who like the young offenders they work with and are in turn liked and respected by them.

What Does Not Work

The other side of the ‘what works’ coin is ‘what doesn’t work’. Identifying those interventions which have no impact on crime, or even worse, actually increase crime, means we can make sure these interventions do not receive further funding.

Mark Lipsey, in his 1992 meta-analysis, found that the common characteristic of programmes that didn’t work was an emphasis on punishment alone, with no attempts to solve life problems. He showed that deterrent sentencing tends to result in a 25 percent increase in offending. This may include approaches such as ‘scared straight’, where young offenders are introduced to older, ‘hardened’ criminals, who tell them harrowing tales of prison and warn them not to end up there, and sometimes spend a short time in prison themselves. While this approach is intuitively appealing to a great many people who deal with young offenders, its track record is very poor indeed.

While a sharp shock may have the desired effect with a child who has been well socialised and only needs a reminder to behave properly, it clearly fails to make the grade with persistent offenders. This is probably because not only does their general failure in conventional arenas such as school and work mean they have little motivation to ‘go straight’, but their vastly disordered families may have failed to teach them the basic skills needed to do so.

Sherman et.al.’s 1998 review supports this conclusion. Their conclusion is that military training programmes such as boot camp were not effective, as well as the scared straight and shock parole supervision approaches. Boot camp involves young offenders going early to bed and rising early, working hard, doing huge amounts of physical training and walking round carrying logs or self-derogatory signs when they break the rules. What Sherman et.al. called ‘shock tactics’ also included shock parole supervision, involving tough, random visits by a parole officer.

To be fair, the best evaluations of boot camps have found that it is no more effective than probation, so it does not do as badly as some of the other ‘shock’ interventions (McKenzie 1990, 1991). But this does not change the common finding across the major reviews that approaches which focus on deterrence, rather than teaching skills and reducing risk factors, tend to be less effective than other approaches.

Another review of punitive approaches to youth justice, carried out by Walters (1997 cited in Barwick 1999), found that not only were they largely unsuccessful in reducing offending, but they sometimes increased reconviction rates. He looked in particular at boot camps, ‘scared straight’ and electronic curfews. Walters also found that such approaches could subject young offenders to intimidation and abuse.

Buttrum (1998) and White (1998), two Australian researchers, report that coercive responses to youth crime have rarely proved effective. These include:

- ongoing surveillance
- use of ‘move on’ powers and name checks by police

- closed circuit television monitoring of public places
- parental responsibility legislation
- shaming legislation (cited in Barwick 1999).

The latter point would fit with Maxwell and Morris' (1999c) finding that Family Group Conferences that shamed either parents or young people appeared to increase the likelihood of re-offending.

Lipsey (1992) also found that family counselling of any kind tended to result in no change in re-offending. This result should be treated with caution, however, as some of the most effective interventions around involve family therapy (Multi-Systemic Therapy, functional family therapy). What counts here is the type of family therapy used, and Lipsey is not specific about this. Family therapy that does not focus on risk factors for offending, or use effective techniques for changing them, is unlikely to have an impact. But it is not safe to conclude through that any approach that works with the family will be ineffective – quite the contrary.

This point is supported by the work of Sherman et.al. (cited in Scott 1999) who found that when counselling and family therapy were directed at anything other than the key risk factors they reliably did not work.

Sherman et.al. (1998) identified a number of approaches that do not work. In the criminal justice arena the following were found to be ineffective:

- specific deterrence, such as shock probation and scared straight
- vague, non-directive, unstructured counselling
- use of incarceration with lower rate offenders
- community restraints on their own, when not combined with rehabilitation.

Community restraints included intensive supervision, probation or, parole, home confinement, community residential programmes and urine testing.

In a rigorous 1998 New Zealand review of international research, Anthony McLean and Randy Grace reported that the following was less likely to be effective:

- low contact hours for offenders with a higher risk of re-offending
- high contact hours for offenders with a low risk of re-offending
- interventions which did not address risk factors directly related to offending
- non-directive counselling or therapy (Andrews et.al. 1990)
- deterrent interventions including shock incarceration, boot camps, home confinement and electronic monitoring, intensive supervision, drug testing, and intermediate sanctions – all of what is known as 'punishing smarter'.

Lisa Hema (1999a), in her unpublished paper on 'wraparound' services, noted that Lipsey updated his 1992 review in 1995. At this point he concluded that the following do not work:

- wilderness/challenge programmes
- deterrence programmes
- vocational programmes.

Lipsey and Wilson's 1998 meta-analysis again finds much the same categories ineffective (possibly because they are reviewing some of the same programmes). These are:

- wilderness/challenge
- early release, probation/parole
- deterrence programmes
- vocational programmes (in Loeber and Farrington 1998).

Once again, we should be cautious in completely dismissing entire categories of programmes. However, as there appear to be no major reviews or meta-analyses that find in favour of deterrent programmes, it seems safe to assume that they reliably do not work.

Wilderness/challenge programmes seem to have a neutral to slightly positive impact according to most reviews (see McLaren 1992), but seem to lack the 'oomph' to make real in-roads on offending. While in themselves they are probably not a highly desirable approach, they are very attractive to risk-taking and high energy young people and can be a valuable component of a comprehensive approach.

This is especially true when they are used as an incentive for taking part in less attractive programme components, or as an opportunity to practice skills learnt in other components. They can also provide a valuable opportunity to build rapport between youth and the staff or mentors who will later be working with them in the community on an ongoing basis (Allan MacRae, pers. comm.). Lastly, they can serve as a valuable introduction to recreational activities that can later be taken up as prosocial hobbies.

The key to harnessing the potential of wilderness/challenge interventions seems to be not to treat them as a stand-alone programme, but incorporate them into a multi-component intervention which uses them as a jumping off point from which staff can then build.

With regard to vocational programmes, again the evidence is mixed (see McLaren 1992). Some seem to work, some seem completely useless. It is most likely that when key risk factors are addressed in the context of a vocational programme it will be more effective, particularly if it targets mixing with prosocial peers, taking on prosocial values and improving social and cognitive skills relevant to the workplace (such as problem solving, social perspective taking and impulse control).

McLean and Grace (1999) note that vocational approaches appear to work best when they combine vocational training with education, and McLaren (1992) notes that including support for job seeking also seemed to be associated with effectiveness. Dowden and Andrews (1999) found that programmes which addressed both lack of vocational skills and lack of work were among the most effective.

Given the mixed reviews and the outstanding success of some vocational approaches (see Lipsey 1992), not to mention the centrality of work to a pro-social lifestyle, it seems too early to give up on them completely. What is needed is an analysis of these interventions that teases out the characteristics of the ones that work best.

CONCLUSION – WHAT DOES NOT WORK

The most certain finding about what does not work is that approaches that focus on deterrence through a harsh, punitive experience are largely ineffective. It seems that punishment on its own is not enough to reduce offending, particularly by chronic young offenders, whose offending is caused by a complex network of circumstances. There is also some evidence that shaming both offenders and parents is not effective, although this is a ‘promising’ rather than a certain trend.

The second certain conclusion is that interventions which fail to focus on the characteristics of young offenders that predict offending are less effective. Even approaches which are normally extremely successful, such as family therapy, perform poorly when they fail to address risk factors. This makes intuitive sense – an intervention that does not address the actual causes of offending is clearly less likely to succeed. A related point is that non-directive, unstructured interventions are less successful than those that are clear about what behaviours and values they are seeking to encourage and how they will go about doing so.

Wilderness and challenge programmes also come out looking less than successful, although this may be more to do with the components included in any particular programme of this nature, rather than the category overall. That is, it may be possible to run an effective outdoor programme provided it addresses risk factors and includes other aspects of effective practice. The setting itself is unlikely to be the problem, although it seems clear that simply getting fit and spending time in the outdoors does not have a great impact on re-offending.

Some reviewers conclude that vocational approaches are ineffective, but there are some examples of very effective interventions in this category. Once again, it is probably a case of including the characteristics of effective interventions in the programme design. In addition, vocational programmes appear to work best when they address both vocational training with other components, such as education or help with job seeking. Indeed, the recent Dowden and Andrews (1999) meta-analysis identifies the combination of a lack of vocational skills and work as one of the top ten risk factors.

Residential interventions appear to be less successful than non-residential approaches, although they can be successful under the right conditions. In general, residential interventions have to try harder than non-residential ones to do what any effective programme does and do it very well.

Reduced caseloads on probation or parole are not sufficient to reduce offending, and neither is early release on probation, or parole on its own. Use of ‘bad manners’ by police dealing with young people is not as effective as respect and fairness. Intensive probation supervision, a ‘get tough’ version of probation, has so far proved ineffective, although there are some indications it could work when combined with appropriate services.

Summary of ‘What Works’

IN GENERAL

- Identifying and reducing key risk factors which cause offending (for example antisocial peers, substance abuse, family functioning, school failure).
- The greater the number of risk factors addressed by an intervention, the greater its impact.
- Targeting young people with a higher predicted risk of future offending, particularly those with prior offences and both property and serious/violent priors.
- Providing more intensive interventions (more weeks/components/frequency of contact with staff), particularly for young offenders with a higher risk of re-offending. This means a longer total duration in weeks/months (23-25), but limited hours per week in non-residential interventions (5-10 hours), a median total of 22.5 hours, median 3.75 hours per week, median total duration of 2.5 months, with multiple weekly, or even daily, contacts with staff.
- Working across multiple environments or systems within which the young person moves and develops – family, school/work, peer group and neighbourhood/community, and enhancing the existing family culture, rather than imposing a foreign culture onto it.
- Using behavioural approaches which train people in new skills, make it clear what behaviour is un/desirable, respond positively to desirable behaviour and negatively or not at all to undesirable behaviour, including behaviour contracts.
- Cognitive techniques which teach both new attitudes/values and new thinking skills, such as problem solving and identifying and changing the beliefs and thoughts that lead to crime.
- Training in skills, particularly interpersonal skills, such as assertive communication and social perspective taking.
- Approaches that offer multiple services, change techniques or components.
- Assisting young people to take responsibility for their own behaviour.
- Assisting in the development of new ways of coping with stressors (such as practical problems and relationships).
- The younger the offender, the more effective programmes are.
- Involving the family or whanau in working on family issues related to re-offending, particularly building strengths in parental monitoring and supervision (i.e. knowing where young people are, what they are doing and with whom, and setting

boundaries on activities, time away from home and which friends are acceptable), involving parents and children in positive interactions, and improving clear communication.

- Increasing educational skills and achievements, work skills and experience, and general life skills, and offering young people a long-term stake in the community.
- Helping young people build new relationships with prosocial individuals, including family members, teachers, coaches, youth leaders, or mentors, and particularly with other young people involved in constructive activities.
- Substantial and meaningful amounts of contact between programme personnel and participants, including using citizen volunteers in conjunction with the regular probation service, and setting up prosocial adult mentors for young people.
- Matching young people with programmes that suit their personality, learning style and other personal factors.
- Involving young people in assessing their own needs and planning and monitoring their own programmes.
- Providing less intensive interventions for low risk offenders, such as warnings and diversion.
- Making interventions well-structured and focussed.
- Making sure programmes are run the way they are designed and intended to be run, including keeping to the specified hours and components.
- Operating mainly outside the formal juvenile justice system.

FOR YOUNGER OFFENDERS

- Cognitive-behavioural training of parents in problem solving and parenting skills, and support of parents.
- Diagnosis and treatment of key risk factors.
- Diversion with a services (programmes) component rather than simply directing young people out of the justice system.
- Reducing parental conflict.
- Increasing positive family relationships.
- Increasing parental monitoring and supervision.
- Decreasing contact with antisocial peers.
- Improving school attendance and achievement, particularly with behavioural interventions in the classroom, cooperative learning and individual tutoring.

FOR OLDER OFFENDERS AND THOSE WHO START LATER

- Receiving help with both vocational training and finding a job.
- Reducing contact with antisocial peers and substance abuse.
- Increasing parental monitoring and supervision.
- Increasing positive parent-child relationships.
- Improving school attendance, particularly with behavioural contracts and incentives.

IN RESIDENTIAL SETTINGS

- Live-in interventions need to work a lot harder to succeed, with well designed and very well implemented regimes, where the treatment is delivered as intended and monitored for integrity.
- Interpersonal skills training, including social skills such as assertive communication, and seeing things through others' eyes.
- Cognitive-behavioural approaches, including role modelling by staff, role plays, video feedback, social reinforcement, homework, systematic desensitisation and cognitive reappraisal.
- Teaching family homes, where trained staff use behavioural techniques to teach skills during weekday residence.
- Residential drug treatment using a Therapeutic Community approach.
- Relapse prevention planning, including identifying life circumstances that put young people at risk of re-offending, and planning how to deal with them.
- Highly skilled staff, particularly with mental health training.
- A positive peer culture and prosocial environment where staff and participants model and reward socially desirable behaviour and values.
- Intensive supervision in the community, and reintegrative services after release.
- A separate, dedicated unit or residence which is able to build up an 'alternative culture'.
- More weeks in the intervention, a median of 25 weeks continuous treatment.
- Intensive community-based supervision and reintegration services after release.

IN NON-RESIDENTIAL SETTINGS

- Interpersonal skills training, including social skills such as assertiveness, communication, how to see oneself from another's perspective.
- Behavioural techniques, including behaviour contracts, role plays, and videos of role plays.
- Cognitive work on family attitudes, parenting and family skills training.
- Individual and family counselling, including Multi-Systemic Therapy, directed at key risk factors, using cognitive-behavioural and reality therapy techniques.
- Matching young offenders with citizen volunteers on the basis of gender, ethnicity, educational background, intellectual level, vocational aspirations and recreation interests.
- Involving the family in interventions which address key risk factors.
- Providing intervention in the four areas of family, school/work, neighbourhood, and peer group.
- Interventions of longer duration in total weeks (median of 23) involving no more than five to ten hours per week.
- Forty percent of the impact of treatment is due to the nature of young offenders on the programme. Including only serious and violent young is more effective than having only less serious offenders or a mixture.
- Addressing practical barriers to treatment by coming to the offender's family in their own home and being available on a 24 hour, seven day a week basis, results in high take-up and low attrition rates.

FOR CHRONIC OFFENDERS

- Working with the whole family in their home to change risk factors which lead to offending (such as poor parental monitoring and supervision, cold, harsh parent-child relationships, accommodation difficulties).
- Addressing key areas of risk and seeking to strengthen the personal and institutional factors that contribute to healthy adolescent development.
- Strengthening bonds with prosocial people, including family members, adults outside the family and peers.
- Behaviour contracts with rewards and sanctions.
- Interpersonal skill training and cognitive-behavioural programmes.
- Alternatives to secure confinement.
- Intervening in the four environments where young people grow up – family, school/work, neighbourhood and peer group.

PROCESSING YOUNG OFFENDERS

- Processing may be more effective when done in a way that doesn't shame the young person and/or their family, but encourages the young person to feel remorse for what they have done.
- Restitution on probation or parole has a positive but inconsistent impact on offending.
- Fines have a positive but inconsistent impact on re-offending.
- The combination of criminal justice processes and appropriate rehabilitative services appears more effective than criminal justice processes on their own, for probation, Intensive Supervision Probation, and drug courts.
- Encouraging meetings and dialogue between victim and offender appears promising, particularly when trained mediators are present.
- Fair and respectful treatment by police appears promising.
- Incapacitating offenders who show a continued risk of offending at a high rate, where they can be identified.

IN SCHOOLS AND EDUCATION

- Maintenance of good discipline and standards of performance by schools, especially schools in high crime areas.
- Behavioural management programmes, where students win points, praise, encouragement, prizes and privileges for clearly specified behaviours, enter into behavioural contracts, and reduce aggressiveness, truancy and delinquency.
- Cooperative learning, proactive classroom management, one to one tutoring, mentoring and interactive teaching, combined with behavioural management programmes.
- Using incentives of prizes, money and scholarships for further study to encourage young people to attend school, and increase specific behaviours, reduces truancy and felony arrests by age 25.
- Multi-component programmes work better than single component programmes, particularly those that combine a behavioural approach to improve attendance and behaviour, such as contracting or incentives, with other components designed to improve learning.
- Effective academic programmes often include cooperative learning, one to one tutoring and computer assisted learning.

FOR DRUG ABUSING YOUNG PEOPLE

- Residential drug rehabilitation using a therapeutic community approach, where a group of drug users live together with staff who are often ex-drug users themselves and may have been through the programme, receiving positive attention and greater status for learning the values and behaviours associated with abstaining from drugs, as well as relationship, work and educational skills.
- Coercion into treatment does not reduce effectiveness, so treatment can be court ordered rather than voluntary, although effective treatment enhances young peoples' perceptions that it is voluntary.
- Highly structured, skills-oriented, cognitive-behavioural treatments are more effective than psychodynamic treatments, using contingency contracting to reward abstinence and other desired outcomes. That is, effective drug treatments have clear rules, goals and activities, teach new skills in active ways, and respond positively to desirable behaviours.
- Interventions that focus on the broader social environments of the young person (family, school, peer group and neighbourhood) such as functional family therapy and multi-systemic therapy.
- Longer stays in effective residential treatment improve outcomes, but longer participation in outpatient treatment may decrease effectiveness.
- Use staff whose opinions young people respect and care about, and who are good role models.
- Target the typical drugs of use of young offenders – marijuana and alcohol.

Summary of ‘what doesn’t work’

- Shock tactics, punitive, deterrent and ‘punishing smarter’ approaches, including scared straight, boot camps, corrective training and shock parole probation. These are interventions where the primary focus is on punishment, inducing fear of prison, and harsher treatment, with little or no emphasis on teaching new skills or reducing risk factors. Criminal sanctions also appear largely ineffective.
- Individual and family counselling, or any other approach that doesn’t address the key risk factors that lead to offending. See the conclusion of Part II for a summary of these risk factors.
- Approaches which provide low numbers of contact hours for higher risk offenders or high numbers of contact hours for low risk offenders.
- Non-directive counselling or therapy (as opposed to highly structured, cognitive-behavioural interventions) where there is little attempt to teach new skills, or to respond positively to desirable behaviour and negatively to undesired behaviour.
- Arrests of juveniles as the sole intervention.
- Reduced caseloads alone on probation or parole are not sufficient to impact on re-offending.
- Early release on probation or parole.
- Use of ‘bad manners’ by police, in the form of less respectful and fair behaviour towards young people.
- Intensive Probation Supervision (an intensive, ‘get tough’ version of probation for young offenders) does not appear effective unless combined with appropriate rehabilitative services.

Effective Ways to Address Specific Offending Risk Factors

1. Limited social ties (low popularity and few social activities)

- find out the interests and strengths of the young person
- identify groups and activities in the community that match these interests
- provide assistance to the young person to get involved by accompanying them, providing transport, and/or financial assistance
- praise and encourage the young person and provide extra privileges and 'treats' to reward involvement in these activities (**contingency management**)
- write a contract with the young person stating what they will do and when, with positive and negative consequences for following through or failing to do so (**behavioural contracting**)
- teach assertiveness, how to see things from another's perspective, conversation skills (**social skills training**).

2. Mixing with anti-social peers (friends who truant from school, sell/use drugs, steal, fight/assault)

- talk to young people about the negative consequences of continuing to mix with these peers (educational failure, drug addiction, court appearances, sentences, prison, unemployment, alienate family) (**motivational interviewing**)
- talk to young people about the positive consequences of making new friends
- identify possible new friends, groups and activities which the young person is interested in and can get involved in (particularly school related activities)
- arrange for the young person to meet and mix with more young people who go to school regularly, do not steal, fight or take drugs
- encourage the young person to get involved in these groups by transporting them to and from them, and praising and rewarding (with money, outings, privileges) their involvement (**contingency management**)
- if the young person resists making new friends, and/or the peer group is not extremely anti-social and has a lot in common with the young person, then attempt to involve the whole peer group in more positive activities with adult supervision
- teach the young person social skills like assertiveness, seeing things from others' points of view, expressing anger appropriately etc. (**social skills training**)
- write a contract with the young person setting out what they will and will not do and the rewards/costs associated with each (**behavioural contracting**).

3. Parent-child relations, including poor monitoring and supervision (parents don't know where the child is or who s/he is with, may show little interest) and poor relationship with parents (parents show little warmth and caring, may focus more on punishment, little time spent together in positive activities)

- work with parents to increase motivation to monitor young person by explaining why it is important
- work out plan with parent for how to keep track of young person (e.g. asking them where they're going, curfews, arranging for them to ring in or be home by a certain time, insisting on meeting their friends and approving which ones they can mix with, accompanying them or transporting them to and from activities, reasonable rules and sanctions for breaking them, praise and privileges for keeping to rules)
- make a written contract with young person specifying what they will do, and what rewards/sanctions they will earn for non/compliance (**behavioural contracting**)
- identify another adult (preferably a family member) who can fill this role if parents are not interested
- work with parents to identify positive activities they can do with their kids (at home, in the community, cultural activities, crafts and hobbies, sports)
- work with parents to set reasonable rules (writing them down if necessary)
- identify reasonable rewards and punishments parents will use and how to apply them fairly and consistently
- encourage parents to look for positive behaviours in kids and praise and encourage them (**behavioural intervention – reinforcement**).

4. Barriers to treatment (practical, low motivation)

- motivate the young person to take part in interventions and change by providing incentives (privileges, outings, pocket money), using praise and encouragement, and looking at the positive consequences of change (do well at school, get a job) (**motivational interviewing**)
- provide transport or finance transport to appointments
- schedule appointments at home, in hours that suit the young person and their family.

5. Poor self management (impulsive, doesn't think before acting, doesn't use problem solving techniques)

- teach the young person to stop and think before acting and to think of the consequences before acting (**impulse control**)
- teach **problem solving** techniques (how you know you have a problem, defining the problem, brainstorm solutions, pros and cons of each solution, choose best solution, step by step plan to put it into action).

6. Aggressiveness (fighting, bullying, assault)

- teach the young person to stop and think before hitting out (**impulse control**)
- teach the young person to leave the situation when they feel violent (**time out**)
- teach the young person to recognise the kinds of situations and feelings that lead to violence for them and plan how to deal with them (**relapse prevention planning**)
- teach the young person to recognise 'hot' violent thoughts and replace them with 'cooling' non-violent thoughts (**cognitive restructuring**)
- teach the young person to be aware of thoughts that other people are insulting, challenging, laughing at them and think of other explanations for their behaviour (**social perspective taking**)
- write a contract with the young person setting out what they will and will not do and the rewards/costs associated with each (**behavioural contracting**).

7. School attitude/performance including academic failure (failing exams or failing to move forward a year), low commitment to school, truancy and dropping out of school

- assess for learning difficulties (**Specialist Education Services**) and arrange services where needed and possible
- write a contract with the young person setting out what they will and will not do (e.g. homework, school attendance) and the rewards/costs associated with each (**behavioural contracting**)
- provide financial and other incentives to attend school (**contingency management**)
- involve parents in school activities
- help the young person to get involved in extra-curricular activities at school such as sport, kapa haka and other cultural activities, drama, hobbies etc by encouragement, praise, transport, and/or accompanying to activities.

8. Lacking vocational skills and a job

- teach skills such as being on time, assertive communication and problem solving to help adjustment at work (**self management**)
- if possible find out what the young person is interested in and/or good at
- find paid or unpaid work experience in these areas
- address problems such as violence and drug use that could cause problems at work
- enrol in courses that relate to areas of interest and strength.

9. Antisocial attitudes (supportive of crime, violence, drug use, gangs etc)

- arrange for the young person to spend more time in activities with people who do not support crime and believe in the value of education, caring relationships with others, respect for property, law-abiding work and positive recreation activities (**mentoring**)
- get staff and mentors to talk about their values and respond positively (with praise, outings, warmth, money) when the young person expresses the same values in words or actions
- ask staff and mentors to ignore small incidents of antisocial values and respond negatively (with disapproval, coldness, cancelling outings etc.) to major expressions of antisocial values such as violence and theft
- give out four to twelve times more positive responses than negative (**prosocial modelling and reinforcement**).

10. Substance abuse (alcohol, marijuana, any other drugs)

- find a counsellor who will provide active interventions which increase motivation to change
- discuss with the young person about the negative results of substance abuse and the positive results of stopping (**motivational interviewing**)
- teach assertiveness to resist peer pressure
- teach the young person to stop and think of the negative consequences of using drugs before taking them (**impulse control**)
- identify times and places where young person is likely to use drugs (under stress, sad, with friends, celebrating, all the time, only certain situations) and plan how to deal with them more constructively (**relapse prevention**)
- introduce the young person to new friends and activities where drug taking does not take place (e.g. recreational activities at school, sport, other hobby activities)
- make sure the young person attends new activities by providing transport and support
- refer to residential treatment in **'therapeutic communities'** for young offenders with more chronic or severe problems, or those using 'harder' drugs such as heroin, cocaine, crack and prescription drugs
- write a contract with young person setting out what they will and will not do and consequences for each (**behavioural contracting**).

11. Lack of cultural pride and positive cultural identity

- encourage involvement with adults, peers and groups from relevant cultural background who are positive with regard to cultural identity and model pride in the positive aspects of their culture
- teach models of cultural identity that are positive (a warrior protects women and children) rather than negative (a warrior is violent).

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