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Young People and Staff Perspectives on Offender Rehabilitation

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A thesis submitted in partial fulfillment of the requirements of the degree
of Doctor of Clinical Psychology, The University of Auckland, 2016.

Abstract

It is important that evidence-based interventions that address the dynamic risk factors of offending are implemented to reduce youth offending. Equally important, is the ability of service providers to engage young people to attend and participate in interventions that elicit positive change. The current study used qualitative methods to explore treatment and facilitator factors that increase engagement, improve the therapeutic relationship and facilitate pro-social change. The Genesis Youth Programme (GYP) in South Auckland provides multiple coordinated services for young people who offend. Fifteen Māori and Pacific young people who have been involved in the GYP were interviewed. A focus group with five of the GYP facilitators was also completed. Realist, Māori and Pacific epistemologies informed the separate thematic analyses performed on the two sets of data. The two sets of data were categorised under the three main topics of facilitator characteristics, intervention characteristics and youth characteristics.

Overall the young people evaluated the GYP favourably and described the facilitators as being non-directive, available and honest. Most of the young people reported ethnic matching was not essential and instead reported the qualities of being non-judgmental and respectful as more important. The young people made reference to personal reasons for change and reported a strong sense of ethnic pride. GYP was described favourably as a place that promotes change, where they received services that were helpful. The facilitators reported being available and honest with the young people was necessary for engagement. In addition, expressing unconditional positive regard and humour helped to build a positive relationship. The facilitators reported the intervention characteristics contributing to intervention success were the GYP's values, their tendency to respond to need, and their shared approach to caring for the young people. In contrast, resource and system restraints were seen as negatively impacting on the services offered. Social issues and teenage parenting were also extracted from the focus group data. These findings are discussed in relation to existing literature and implications for service improvements are presented.

Dedication

*This thesis is dedicated to my father Luitaua Matuisa Mati, who has instilled in me,
my sense of compassion for others.*

Acknowledgements

To begin I would like to thank the GYP staff for their ongoing support throughout this project. The generosity and kindness afforded me has provided me the opportunity to complete this piece of work and has indeed mirrored the warm descriptions the young people have provided. In particular, I would like to thank General Manager Rob Woodley, who had the vision to give voice to the young people and GYP staff to improve the service. I would also like to thank the individual keyworkers who organised all appointments and transported the young people to the service for their interviews. Your help is truly appreciated.

I would also like to acknowledge my clinical psychology classmates who through this process have become treasured and life-long friends. It has been inspiring spending time with you all and I have learnt so much from all of you. Also, I would like to thank my Vaka Toa family. Your supportive words of encouragement have helped me get through to the end.

To my supervisors Ian Lambie and Fred Seymour. Thank you for everything you have done for me. Ian, your sense of humour and directness are qualities I admire in you, while your knowledge and expertise have guided me to develop my own. Fred your warmth, encouragement and belief in me has ultimately helped me get over the line in the end. I will forever be grateful. Thank you also to Dr Max Maiava, Dr Erana Cooper and Dr Pikihiua Pomare who have provided me valuable cultural support and guidance in this process.

I cannot say thank you enough to my family. I love you all. Thank you to my mother Diane McAllister who has provided me and my children tremendous practical and emotional support throughout this journey. Without your support none of this would have been possible. To my father who has believed in me and pushed me from the beginning, thank you. Thank you also to my stepmother Taa Ropati who has also supported me along the way. Thank you to all of my siblings for your supportive words of encouragement.

Thank you to my partner Tino Tevaga for everything. It has been a long journey for our little family unit and you have tirelessly cared for our girls and our home to allow me the time and headspace to get this done. Your ongoing belief in me and push has motivated me to see this through. I also want to acknowledge my two daughters, Isabelle and Hope, who I am sure, will be happy to have their mother back. I can only hope I have paved the way for the both of you to pursue your own dreams. I love you.

Last but not least I would like to express my heartfelt gratitude and thanks to all of the participants who gave up their time to share their experiences with me. I have gained so much knowledge and inspiration from the experience. I hope through this research you have all felt heard.

Table of Contents

Abstract.....	ii
Dedication	iii
Acknowledgments	iv
Table of Contents	v
List of Tables	x
 CHAPTER ONE: INTRODUCTION.....	 1
Youth Offenders	2
Statistics.....	2
Characteristics	4
Mental Health	5
Summary	6
Theories of Offending	6
Classical School Theories	7
Positive School Theories	8
<i>Sociological Theories</i>	<i>8</i>
<i>Biological Theories.....</i>	<i>9</i>
<i>Psychological Theories.....</i>	<i>10</i>
<i>Developmental Theories</i>	<i>12</i>
Summary	13
Risk and Protective Factors	13
Individual Factors.....	14
Family Factors	14
Social Factors	15
Recidivism.....	16
Young People Perspectives on Risk Factors	16
Summary	17
Youth Offender Treatment	17
Principles of Effective Interventions	17
<i>Therapeutic</i>	<i>17</i>
<i>Risk/Need/Responsivity.....</i>	<i>18</i>
<i>Addressing Multiple Domains</i>	<i>18</i>

<i>Community based</i>	19
<i>Strengths based</i>	19
<i>Māori</i>	20
<i>Pacific</i>	21
Intervention Types.....	22
<i>Wraparound services</i>	22
<i>Multisystemic Therapy</i>	22
<i>Wraparound versus Multisystemic</i>	23
<i>Boot camps</i>	23
Summary	23
Engagement	24
Therapeutic Relationship.....	24
Motivational Interviewing.....	27
Summary	27
Youth Justice System in New Zealand	28
Alternative Action	28
Family Group Conference	28
Youth Court.....	29
Efficacy of Diversionary Response	29
Summary	29
Genesis Youth Programme	30
Concurrent Study: GYP Outcome Evaluation	31
Current Study	31
CHAPTER TWO: METHOD	33
Overview	33
Methodological Framework	33
Qualitative Analysis	34
Subjectivity and Reflexivity	35
Study One: Young People Interviews	37
Participants	37
Interview Schedule	38
Procedure	39
<i>Study Development</i>	39

<i>Ethics Approval</i>	40
<i>Participant Selection</i>	40
<i>Interview Setting</i>	40
Data Analysis	41
Study Two: Facilitator Focus Group	43
Participants	43
Focus Group Schedule.....	43
Procedure	44
<i>Participant Selection</i>	44
<i>Focus Group Setting</i>	44
Data Analysis	44
CHAPTER THREE: ANALYSIS OF YOUNG PEOPLE INTERVIEWS	44
Facilitator Characteristics	45
All Good, Kickback.....	46
There For me	48
Straight Up	50
Cultural Matching Matters For Some But Not Others	51
Relationships Matter.....	54
Summary	56
Youth Characteristics	56
Some People Listen, Some People Don't.....	57
Ethnic Identity is Not Strong.....	58
Summary	60
Intervention Characteristics	60
A Place that Promotes Change	60
Services that Help.....	62
Improvements are Possible.....	66
Summary	66
CHAPTER FOUR: ANALYSIS OF FACILITATOR FOCUS GROUP	67
Facilitator Characteristics	67
Being There	68
Not Faking It	69
Unconditional Positive Regard.....	69

Humour.....	71
Personality	72
Relationship.....	72
Summary	74
Youth Characteristics	74
Social Issues	74
Parenting.....	76
Summary	76
Intervention Characteristics.....	77
Everyone's Young Person	77
Values.....	78
Responding to Need	78
Commitment to Ongoing Learning	79
Restraints	80
Summary	83
CHAPTER FIVE:	84
Overview	84
Participant Views in Comparison to the Literature.....	86
Facilitator Characteristics and Behaviours	86
Facilitators Provide Support Missing in Natural Environment	89
Cultural Matching.....	90
Strong Connections Created	92
Young People Making Changes	93
GYP Services and Restraints to Service Provision	93
Implications for Practice.....	95
Continue to Build Relationships.....	95
Complete Thorough Needs Assessment.	96
Increase Opportunities for Staff Development	96
Make Greater Use of Motivational Interviewing Methods.	97
Implement Psychometric Measures.....	97
GYP In-service Evaluation.	97

Strengths and Limitations	97
Future Research	99
Conclusion.....	99
APPENDICES	101
Appendix A	101
Appendix B.....	104
Appendix C.....	109
Appendix D	112
Appendix E.....	115
Appendix F	120
Appendix G	123
Appendix H	125
Appendix I.....	129
REFERENCES	132

List of Tables

Table 1: Risk and Protective Factors Categorised by Domain.....	15
Table 2: Young People Themes Categorised by Topic.....	46
Table 3: Facilitator Themes Categorised by Topic.....	67

CHAPTER ONE

INTRODUCTION

Youth offending has been studied extensively both internationally and here in New Zealand (NZ). It has been a long standing topic of concern amongst government officials, policy makers, scholars, service providers, parents and society in general. This is not surprising, given youth offending causes an array of psychological, social and financial problems. It has been estimated that 193 million dollars was spent, by the NZ government alone, in the years 2009/2010 on youth justice, not including the work of Police (Stevens et al., 2011). But, although the youth offending literature is plentiful and ever expanding the perspectives of youth offenders¹ are often overlooked. This is especially true for Māori² and Pacific³ youth offenders.

The current study aims to add to this under-representation in the literature through the use of qualitative research methods. Interviews were completed with Māori and Pacific youth offenders who attended the Genesis Youth Programme (GYP), and a focus group was completed with GYP staff. The GYP is a Non-Government Organisation (NGO), based in South Auckland, which provides a range of services for youth offenders, their families and youth at risk. The GYP provides the context for the current research, which explores engagement and treatment factors from the perspectives of Māori and Pacific youth offenders and GYP staff.

It is generally agreed that to address youth offending evidence-based interventions that target primary, secondary and tertiary levels must exist (Manuel & Jorgensen, 2013; Walker & Shinn, 2002). At the primary level, interventions that target the rehabilitative needs (defined as the dynamic risk factors associated with offending) of the youth offender should be delivered (Lipsey, 2009). However, in order for this to occur, services must first engage youth offenders in the intervention. In addition, interventions should match the context and the idiosyncratic characteristics of the population (Andrews et al., 1990). Given many of the evidence-based interventions are developed and evaluated with Western populations in mind, it is important to also investigate how they fare amongst ethnic minority groups.

¹ It is acknowledged the negative impact labelling a young person as a youth offender may have. However, as this is the term commonly used in the literature, it has been adopted in the Introduction section of this thesis.

² Māori are the indigenous people of NZ and are tangata whenua (people of the land).

³ Pacific is an umbrella term for people of Samoan, Tongan, Cook Islands, Fijian, Niue, Tokelauan, or Tuvaluan descent (Medical Council of New Zealand, 2010)

To lay the foundations of the current study, the following literature review will begin by describing characteristics of the youth offender population. Significant Western theories of offending are then presented which inform the current Youth Justice system and the treatment section that follows. Māori and Pacific principles relevant to treatment have also been described. In addition, engagement and the therapeutic relationship are also discussed as they are important considerations and are of particular interest in the current study. The NZ Youth Justice system and the GYP are presented to provide further context for the current research. The Introduction continues with a summary of a parallel quantitative outcome study, completed by a fellow clinical psychology student. Finally, an outline of the current study is given.

Youth Offenders

The following section presents rates of youth offending in NZ, and psychosocial characteristics and mental health problems found in this population. Explanations for the decline in youth offending and higher rates amongst Māori and Pacific are also presented.

Statistics

The Ministry of Justice (MOJ) separate young people into child (ages 10-13) and youth (14-16) categories. The combined number of young people (aged 10-16) entering court each year, has been on a steady decline since 2007 while in 2014 charge rates of young people was at its lowest in over 20 years (MOJ, 2014). Police apprehension rates have also been on the decline for both children and youth in the 2001-2010 period (MOJ, 2012). The MOJ reports 81% of young people (aged 10-16) charges were laid against males with the majority being laid against 15 and 16 year olds. Property offending continues to be the largest offence category of young people (MOJ, 2012).

The decline in youth offending rates has been attributed in part to the introduction of The Children, Young Persons and Their Families Act (1989) which has provided the option of Family Group Conferences (FGC) as an alternative to official court proceedings. In a FGC, the opportunity exists to develop plans to address the underlying causes of offending (see Becroft, 2009). In addition, the Act established greater accountability for youth offenders. They are now expected to take more responsibility for their offending through restorative measures such as community service. It has also allowed family members to play a bigger role in the process. Since the introduction of the Act, the Youth Justice system has shifted from a model that was predominantly

welfare based to incorporate more justice principles (Watt, 2003). These principles include: free will where the youth offender is viewed as being in control of their own behaviours, equal treatment where similar penalties are imposed for similar crimes and formal sanctions that outline mandatory sentence conditions. Sentences can include punitive, restorative and/or rehabilitative components.

On the other hand, although the statistics indicate overall youth offending rates have decreased, research has indicated the rate of violent offending amongst NZ youth is disproportionate to other age groups, and is increasing at a greater rate. For example, Crawford and Kennedy (2008) found that youth aged 14 to 16 years comprised 10% of apprehensions for violence, however, only made up 5% of the population. Furthermore, Chong (2007) found that in the period 2005 to 2006 apprehensions for violent offences amongst youth increased 39% whereas the increase was 22% for adults.

In regards to ethnicity, Māori are over represented in offending statistics. In the period 1996-2008 Māori youth aged 10-13 years of age had five times the apprehension rate of Pākehā and Pacific youth, while Māori aged 14-16 years of age had three times the apprehension rate (MOJ, 2010). This illustrates Māori are offending at a greater rate, and engage in offending from an earlier age compared to other ethnicities. Furthermore, while overall charges against Māori are on the decline, the proportion of Māori youth (14-16) in court, in relation to total number of youth in court, has increased from 44% in 2005 to 57% in 2014 (MOJ, 2014) whereas Māori youth make up only 20% of the NZ youth population (MOJ, 2013). The smaller reductions in Māori youth offending, over time, compared to other ethnicities suggest the current policies and interventions in place to reduce youth offending are less effective for Māori.

While it is clear Māori are over represented in offending statistics this can be understood within the current and historical context which has led to the social construction of such statistics (Webb, 2009). Socially constructed statistics refers to the role discriminatory structures, policies and practices play in these numbers. It has been proposed that there is an inherent bias in all levels of the justice system which results in higher rates of Māori apprehensions, charges and convictions (Department of Corrections [DOC], 2007). An example of said discriminatory practices may be the over-policing of a specific ethnicity (Coleman & Norris, 2002). If Māori are more likely to be questioned than non-Māori, this will lead to greater number of apprehensions amongst Māori compared to other ethnicities.

In addition, Māori have been identified as experiencing a greater number of known risk factors for offending compared to non-Māori. The greater representation in

risk factors can be seen as the effects of colonisation and assimilation processes (O'Malley, 1973; Webb, 2009). Colonisation has led to the loss of land amongst Māori and subsequently higher rates of poverty (Fergusson, Donnell, & Slater, 1974). Furthermore, the forced assimilation process has resulted in Māori needing to adopt Western practises to function in a colonised society where policies are biased towards the dominant Pākehā group (Owen & Kokiri, 2001). Assimilation has also caused a weakening of cultural identity amongst Māori (Marie, 2010).

Mixed statistics have been reported for Pacific youth offending. Overall Pacific youth do not appear to be over represented in youth offending statistics, except for violent offending (Ioane, Lambie, & Percival, 2013). On the other hand, prosecutions of Pacific youth were 2.2 times that of Pākehā in 2008 (MOJ, 2010) while a review of Child Youth and Family (CYF) files demonstrated similar results, reporting Pacific youth offended at twice the rate of Pākehā (Maxwell et al., 2004). Court appearances for Pacific youth are also reducing at a slower rate compared to overall decline (MOJ, 2014). There appears to be similar biases operating in the justice system process for Pacific youth as there is Māori youth, as Pacific youth have more court appearances compared to Pākehā for similar offences (Maxwell et al., 2004). Another explanation for the higher rates may be that Pacific youth, like Māori youth, possess a greater number of risk factors associated with offending.

Characteristics

Statistics tend to focus on frequency counts of offences and do not describe how individual characteristics contribute to the overall offending data. NZ's Chief Youth Court Judge Andrew Becroft (2009), however, has claimed that there a small group of youth offenders (20%) who are committing most (80%) of the crime. The large majority of this small group are male (83%) and Māori (50%). Moreover, Judge Becroft notes that approximately 70-80% of these youth have substance abuse problems and approximately 70% are not attending school. Other characteristics of these chronic youth offenders include adverse histories involving abuse and neglect, CYF's involvement, family dysfunction, poverty and an absence of a positive male role model. In addition, Judge Becroft states that youth offenders in this small group are more likely to have a learning disability and lack empathy.

Mental Health

Considering the difficulties youth offenders experience it is of little surprise their rates of mental health problems are greater than the general youth population.

International research has consistently demonstrated significantly higher rates of mental health problems in the youth offender population with percentages of youth offenders qualifying for a Diagnostic and Statistical Manual of Mental Disorders, 4th Edition (DSM-IV) diagnosis ranging from 50 to 70% (Shufelt & Coccozza, 2006; Teplin, Abram, McClelland, Dulcan, & Mericle, 2002; Wasserman, McReynolds, Schwalbe, Keating, & Jones, 2010) compared to rates in the general youth population of 9-21% (Merikangas et al., 2010; Otto, Greenstein, Johnson, & Friedman, 1992). Similarly, a literature review conducted by The Werry Centre (2009) in NZ estimated mental health rates amongst the youth offending population to be between 40 and 60%.

Unsurprisingly, Conduct Disorder (CD), which is characterised by antisocial behaviours and a general lack of respect for others and society, is the most common diagnosis amongst youth offenders (Colins et al., 2010; Fazel, Doll, & Långström, 2009). Overall, disruptive disorders (including CD, Oppositional Defiant Disorder [ODD] and Attention-Deficit/Hyperactivity Disorder[ADHD]) are the most common mental health problems diagnosed in youth offenders, followed by substance use disorders, anxiety disorders and mood disorders (Shufelt & Coccozza, 2006).

A comprehensive study in the United States of America completed collaboratively by the mental health and justice sectors revealed that 70.4% of youth had a mental health problem as defined by the DSM-IV (Shufelt & Coccozza, 2006). When youth diagnosed with CD and substance use disorders were removed from the analysis, the rate of other mental health problems in the remaining population was 45.5%. This indicates the higher rates of mental health problems could not be fully explained by the presence of CD and substance use disorders alone (Shufelt & Coccozza, 2006). These results indicate a significant number of youth offenders experience complex and severe issues.

If mental health problems within this group are not addressed they may lead to an array of negative outcomes and may potentially exacerbate antisocial behaviours (Ryan & Redding, 2004). Furthermore, unaddressed mental health problems may compromise the effectiveness of interventions targeting offending rehabilitative needs (The Werry Centre, 2009). On the other hand, it is worth noting that not all mental health problems have been associated with offending. For example Schubert, Mulvey, and Glasheen

(2011) note that while substance abuse is a risk factor for offending, mental health problems such as depression and post-traumatic stress disorder are not risk factors for offending. This indicates that while it is important for mental health problems to be addressed, they are not necessarily an offending rehabilitative need. Rehabilitative needs will be discussed in a later section.

Summary

Although the overall rates of youth offending appear to be decreasing, Māori and Pacific youth offending rates are decreasing at a slower rate than for other ethnic groups. Subsequently, there is a continuation of the over representation of Māori and Pacific youth in offending statistics. This has been attributed to biases in the Youth Justice system and exposure to a greater number of risk factors. Chronic youth offenders have experienced a greater number of adverse life experiences and tend to commit most of the offending. Numerous studies have demonstrated the higher rates of mental health problems amongst youth offenders compared to the general youth population. Addressing mental health problems may improve the effectiveness of treatments targeting rehabilitative needs.

Theories of Offending

There is no shortage of Western theories attempting to explain antisocial and offending behaviours. A brief review of the major offending theories is regarded important as it provides further context for the current study. Furthermore, each of these theoretical positions makes an important contribution to our understanding of offending behaviours. Theories of offending inform Justice System policy and rehabilitative interventions.

Criminology literature has classified these theories as belonging to either the classical or positive school of offending theories (Cullen & Agnew, 2011). Classical theories of offending were developed in the late 18th century and had a considerable influence on justice system principles and how society viewed and responded to offenders. Classical theories are centred on the concepts of free will and rational decision making. They are also associated with punitive and deterrent responses to crime. Classical school theories will be outlined briefly here as the focus is on rehabilitative treatment, which has arisen from positive schools of thought.

Positive school theories consider the biopsychosocial factors that contribute to the offending phenomena. In particular, they describe the relationship between risk factors and offending behaviours as the explanation for offending. Positive school theories are associated

with non-punitive responses to offending, and rehabilitative interventions that seek to address the causes of youth offending.

The current review has divided positive school theories into sociological, biological, psychological and developmental categories, however, it is acknowledged many of the theories incorporate principles that belong to more than one category. It has become increasingly recognised that youth offending is a complex phenomenon and as a result theories have expanded to include other considerations.

Classical School Theories

The assumptions made in classical school theories of offending continue to be reflected in the current NZ Youth Justice system through principles such as accountability and free will. The main classical school theories include deterrence theory, rational choice theory of crime and routine activity perspective.

The deterrence theory postulates that individuals avoid committing crimes due to fearing the perceived consequences (Akers, 1990). Furthermore, individuals are described as making cost-benefit judgements regarding the severity, probability and immediacy of consequences compared to potential pay offs. If the perceived benefits of the crime outweigh the perceived repercussions an individual will offend.

Similarly, rational choice theory of crime depicts the offender as an individual whose choices are made according to the perceived maximal benefits gained (Cornish & Clarke, 1987). Individuals are hedonistic and act according to self-interest. The decision to offend is shaped by the individual's cognitive ability and the time and information available.

The routine activity perspective, which can be viewed as a subsidiary of the rational choice theory, emphasises the importance of opportunity in an individual's decision to offend (Cohen & Felson, 1979). The decision is based on three conditions that are said to be necessary for an offence to be committed. These include offender characteristics, suitability of targets and lack of a guardian. Offender characteristics include the individual's motivation to offend and their ability to do so. Suitability of targets refers to a potential victim's vulnerability and/or their attractiveness (defined by the crime and situation). Lastly, a guardian refers to an absence of an individual who is able to prevent the crime from occurring.

While classical school theories have been described as possessing practical common sense principles, critics note it fails to explain all instances of crime (Achen & Snidal, 1989; Dölling, Entorf, Hermann, & Rupp, 2009). Such instances include crime that arises from

impulse or emotions, rather than logical decision making processes (Taylor, Walton, & Young, 2013). Furthermore, classical school theories of crime do not adequately consider the effect of social causes on crime, such as inequality and poverty (Taylor et al., 2013).

Positive School Theories

Sociological theories. Sociological theories of offending describe how societal structures, processes and conflict influence offending behaviours. They include social disorganisation theory, strain theory, differential association, social control theory of crime, labelling theory and general theory of crime.

Social disorganization theory has the main hypothesis that community disharmony leads to an increase of offending behaviours (Sampson & Groves, 1989; Shaw & McKay, 1942). Characteristics of a disorganized community include low socioeconomic status, cultural diversity, family dysfunction, and instability of residents.

Merton's (1938) strain theory proposes that less fortunate individuals offend due to being unable to succeed financially in a legal manner. Furthermore, potential offenders perceive ill treatment by others, become angry, and engage in behaviours to balance out the rejection. In the process individuals may distance themselves, attack others and/or engage in substance use as a coping method.

Sutherland's (1947) differential association theory has strong behavioural components and describes offending behaviours as resulting from relationships with peers, where antisocial behaviours are modelled and reinforced. Behaviours and attitudes are hypothesised as being adopted when the individual values the relationship and views their antisocial peers favourably. This results in an individual learning to justify and rationalise their offending behaviours.

Labelling theory describes the impact being labelled an offender has on subsequent offending behaviours (Lofland, 1969). It is suggested the label becomes internalised for an individual thus, becoming part of their identity. This in turn makes it more likely they will engage in future offending behaviours. Furthermore, the theory acknowledges the additional challenges an offender must face when attempting to live a pro-social life: for example, the additional barriers to employment due to criminal conviction.

Gottfredson and Hirschi's (1990) general theory of crime is based on the notion that individuals offend due a combination of impaired self-control and the reinforcement instant gratification provides. Poor self-control drives offending behaviours when an opportunity arises. The lack of self-control is deemed as a stable trait that is due to an absence of adequate

parental discipline and monitoring.

Biological theories. Offending behaviours, in particular violence, are described as being caused by physiological abnormalities under a biological approach. A wealth of scientific evidence exists that demonstrates the roles of genes in the development of antisocial behaviours (Moffitt, 2005; Moffitt & Beckley, 2015; Raine, 2008). One genetic theory postulates that particular genes lead to changes in the brain which influence antisocial behaviours (Raine, 2008). In particular, abnormalities in the monoamine oxidase A (MAOA) gene have been linked to a reduced size of the amygdala and orbitofrontal cortex which results in impaired moral development, poor emotional control and decision making (Raine, 2008). In fact, studies have claimed that genetics account for approximately 50% of the variation in antisocial behaviours (e.g., Burt, 2009; Fergusson, Boden, Horwood, Miller, & Kennedy, 2011; Moffitt, 2005; Tuvblad, Narusyte, Grann, Sarnecki, & Lichtenstein, 2011). More recent research suggests that it is an amalgamation of numerous genes that leads to an increased risk of antisocial behaviours (Glenn & Raine, 2014).

Evidence to support the influence of genes on antisocial behaviours has been provided by twin studies (Moffitt, 2005). Twin studies have demonstrated that identical twins raised separately are both more likely to engage in antisocial behaviours compared to fraternal twins and non-twin siblings raised separately. However, biological research is becoming increasingly interested in the interaction between genes and the environment and how this leads to antisocial behaviours (Ellis, 2005; Moffitt & Beckley, 2015; Raine, 2008). It has become increasingly recognised and accepted that the environment plays at least an equal role in the development of antisocial behaviours (Glenn & Raine, 2014).

Hormonal imbalances have also been studied extensively as a potential cause of aggressive behaviour (Montoya, Terburg, Bos, & Van Honk, 2012). In particular, it has been theorised the imbalance between the steroid hormones cortisol and testosterone increases an individual's tendency to act aggressively (Glenn & Raine, 2014). The imbalance is said to result from disruptions in the body's stress response system that regulate cortisol levels. In particular, low levels of cortisol and increased levels of testosterone are associated with aggressive behaviours (Glenn & Raine, 2014). Low levels of the neurotransmitter serotonin have also been linked to higher rates of aggression (Moore, Scarpa, & Raine, 2002).

Research has also linked prenatal and perinatal complications to higher rates of antisocial behaviours; especially when environmental stressors are also present (Glenn & Raine, 2014). These include birth complications (Raine, 2013), foetal maldevelopment

(Arseneault, Tremblay, Boulerice, & Sè, 2000; Raine, Lee, Yang, & Colletti, 2010), nicotine and alcohol use (Brennan, Grekin, & Mednick, 1999; Maughan, Taylor, Caspi, & Moffitt, 2004) and infant malnutrition (Galler et al., 2012).

Psychological theories. Other theories of offending focus on psychological factors. The psychological theories discussed here include attachment theory, personality theory, psychodynamic theory, social learning theory and moral reasoning theory. Bowlby (1969) emphasised the importance of the attachment relationship between a child and their primary caregiver. Without a strong and positive relationship with a caregiver individuals develop an insecure attachment style making them more likely to engage in problematic behaviours. Studies have demonstrated higher rates of offending amongst children in living situations where attachment was potentially compromised: one parent families (Henry, Caspi, Moffitt, & Silva, 1996), absence of caregiver affection (McCord, 1982) and frequent changes in carers (Krohn, Hall, & Lizotte, 2009).

Another psychological theory of offending is Eysenck's (1996) influential personality theory. Eysenck postulated that offending behaviours result from an interaction between personality traits and a lack of conditioning (conscience development). In particular Eysenck linked offending behaviours to three personality dimensions: neuroticism, psychoticism and extraversion. Eysenck hypothesised that individuals with high levels of neuroticism, extraversion and psychoticism (cold, lack of empathy, hostile and inhumane) were more prone to antisocial behaviours. Many researchers have tested Eysenck's theory and have obtained confirmatory results (Boduszek, Adamson, Shevlin, & Hyland, 2012; Carrasco, Barker, Tremblay, & Vitaro, 2006). Other studies have also linked personality traits of psychopathy (Vaughn, Howard, & DeLisi, 2008) narcissism, Machiavellian, sadism (Chabrol, Van Leeuwen, Rodgers, & Séjourné, 2009) and impulsivity/disinhibition (Cale, 2006) to higher levels of offending behaviour.

Similarly, psychodynamic theories of offending link offending behaviours to personality. More specifically, it is proposed that antisocial behaviours result from an imbalance of the three parts of self which include the id, ego and super ego (Siegel, Welsh, & Senna, 2006). It is postulated that an individual who offends is primarily influenced by their id which is primitive, impulsive and pleasure seeking. This occurs due to an underdevelopment in the ego and superego which normally moderate the id (Siegel et al., 2006). It has been hypothesised that adverse events in a child's early years lead to an impaired ego and superego, and a subsequent inability to function in society. This places an

individual at increased risk of vulnerability to antisocial others and antisocial behaviours (Andrews & Bonta, 1994). Under-developed egos may also cause severe psychological problems that impair an individual's ability to empathise with others (Seigel & McCormick, 2006). Another psychodynamic explanation proposes internal conflicts, that are emotionally painful, lead to the development of problematic defence mechanisms and subsequently offending behaviours (Shoemaker, 2005).

On the other hand, social learning theory emphasises the role of consequences and modelling in the development of behaviours. The well-documented and researched social learning theory developed by Albert Bandura (1969) and later labelled the social cognitive theory (Bandura, 1986), proposed that behaviours are learned through the observation of others. Individuals learn behaviours through observing others and engage in the behaviours based on the consequences of such behaviours (vicarious reinforcement) and their identification with the model. Identification refers to the individual's perceived connection between themselves and the model. If an individual feels a strong connection, it is more likely they will imitate the other person's behaviours (Bandura, 1989). Furthermore, the occurrence of present behaviours is seen as predicting those same behaviours in the future. In other words, each time a particular behaviour is performed it further increases the likelihood that the same behaviour will be performed again (Bandura, 1969). This process may be likened to the process of forming a habit. Offending behaviour is also explained as being developed through operant conditioning processes where behaviours are performed due to their reinforcement history. Burgess and Akers (1966, p. 146) stated that "The strength of criminal behaviour is a direct function of the amount, frequency, and probability of its reinforcement".

Another theory of crime is linked to Kohlberg's theory of Moral reasoning (Siegel et al., 2006). According to this model, the development of moral reasoning involves six linear phases that an individual progresses through (Kohlberg & Hersh, 1977). In the first stage, named punishment and obedience, individuals behave to avoid punishment. In the second stage of instrumental relative orientation individuals behaviours are mostly influenced by their own self-interests, while in the next stage of interpersonal concordance, meeting others' expectations and conformity become important. In the fourth stage of law and order individuals follow authority and exhibit positive behaviours to maintain social order. The social contract orientation stage continues to emphasise laws as directing behaviours, however, individuals also gain an understanding of their own ability to influence those laws. The final stage of universal ethical principle orientation describes individuals' behaviours as

being influenced by their conscience, which is comprised of both personal values and universal principles that do not necessarily correspond with law (Kohlberg & Hersh, 1977).

Developmental. Two of the main developmental theories of offending include adolescent-limited versus life-course persistent theory and age graded theory. Moffitt (1993) proposed the dual taxonomy of adolescent-limited versus life-course persistent offenders based on a developmental framework. She described differentiating features of the two types of youth offenders, and noted the majority of youth offenders only offend during adolescence (adolescent-limited). Youth belonging to the adolescent-limited group are reported as engaging temporarily in antisocial behaviours during adolescence as part of a relatively normal boundary testing developmental process. Offending behaviours peak during this time period and naturally subside as the adolescent transitions into adulthood. The antisocial behaviours are largely dependent on context while there tends to be an absence of problematic behaviours in the youth offender's history. In contrast, life-course persistent offenders are described as having underlying antisocial traits that manifest across situations and across an individual's lifetime including from a young age. Loeber (1990) describes the stages of disruptive behavioural manifestations, in a life-course persistent offender, from preschool to adolescence. The author notes that it commences with a difficult temperament leading to poor peer relationships and academic performance, and includes a transformation of overt to covert conduct problems, resulting in delinquency with recidivism.

In line with biological explanations, Moffitt (1993) states that life-course persistent offending can result from neuropsychological deficits resulting from birth complications and impaired foetal brain development due to maternal drug use, poor nutrition and toxic agent exposure. Moffitt also describes how problematic parent child interactions can cause disruptive behaviours while early behavioural manifestations of neuropsychological deficits are maintained throughout the life-course through a number of different negative interactions with the environment.

Also taking a developmental approach are Sampson and Laub (2005) with their age graded theory of offending. Contrary to Moffitt's (1993) theory that early experiences set a pathway for future offending, Sampson and Laub emphasise human agency and the individual's decision to offend. Sampson and Laub describe how an individual's bond to others and institutions influences offending behaviour and described the factors within life stages that impact on the likelihood of offending behaviours. In childhood, these factors include sporadic and harsh discipline, parental rejection and lack of monitoring. In

adolescence the informal social controls include antisocial peers, school withdrawal, and involvement in the justice system. In young adulthood, factors that influence an individual's decision to offend include the labour market, marriage, prison and the military (Sampson & Laub, 2005).

Summary

Traditional classical theories of offending are no longer prominent in the current offending literature, however, its principles of free will and accountability are still evident in the current Youth Justice system. On the other hand, positive school theories continue to flourish in the literature with its principles informing interventions aimed at reducing reoffending. This section has presented an array of positive school theories that seek to explain the relationship between psychological, social and biological factors, and the onset of offending. Many of these theories have expanded over time to include other considerations. This reflects the increased recognition that the offending phenomenon is complex. In fact, there is an increasing consensus in the literature that offending occurs due to a complex interaction of many factors. Furthermore, the contributions of these factors are likely to differ between individuals and across an individual's lifespan. These factors will be described in the following section.

Risk and Protective Factors

While the previously described theories attempt to explain the processes involved in the development of offending behaviours, risk factor research focusses on the establishment of factors that predict offending. It is likely that all of the offending theories presented take account of, or attempt to explain, factors that have been studied and documented as risk factors for offending. A risk factor is defined as increasing the likelihood of offending behaviours (Farrington, Loeber, & Ttofi, 2012) and is classified as either stable or dynamic (Ward & Beech, 2014). Stable risk factors refer to static variables that cannot be changed, and include factors such as gender, offence history and age at first offence. On the other hand, dynamic risk factors, also referred to as rehabilitative needs, are amenable to change and include factors such as the presence of antisocial peers. It is noteworthy, that while there is an abundance of identified risk factors no one risk factor has been identified as deterministic (Grigorenko, 2012).

Dynamic risk factors can be understood within an ecological framework where factors across and within various parts of the system (individual, family, social) interact and

ultimately influence an individual's behaviour (Bronfenbrenner, 1979; Gorman-Smith, Tolan, & Henry, 2000). With regard to offending, there are risk factors in multiple parts of the system that interact to increase the likelihood of offending. In addition, protective factors exist, that have an ameliorating effect on risk factors (Loeber, Farrington, Stouthamer-Loeber, & White, 2008). Although in its infancy, research and interest in protective factors continues to grow (Farrington et al., 2012). Effective interventions aim to minimise risk factors, and maximise protective factors. Examples of said rehabilitative interventions will be presented later.

Table 1 displays an overview of risk and protective factors, for youth, based on two reviews: Murray and Farrington (2010) and Farrington et al. (2012). These have been categorised into individual, family and social domains.

Individual Factors

Three main risk factors in the individual category include low intelligence, poor school achievement and impulsivity (Farrington et al., 2012; Murray & Farrington, 2010). Low intelligence has been suggested to lead to youth offending through poor school achievement and subsequent drop out (Murray & Farrington, 2010). Furthermore, those with low intelligence may be unable to consider consequences (Farrington et al., 2012). Impulsivity, however, may lead to offending through poor decision making skills, a tendency to act on emotions, lack of consideration of consequences and a tendency towards gratification seeking. Some of the identified individual protective factors include an easy temperament, good self-control and high intelligence (Farrington et al., 2012).

Family Factors

Risk factors within the family level are extensive and indicate the significant role family play in the development of youth offending. A lack of monitoring has been suggested to be the strongest predictor of youth offending (Smith & Stern, 1997). On the other hand the protective factor of adequate monitoring may help to regulate the behaviours of youth, who are still developing their own internal restraints. Furthermore, youth are less likely to engage with antisocial others and antisocial activities when they are being supervised. Another significant risk factor includes harsh and punitive parenting (Murray & Farrington, 2010). The relationship between this risk factor and offending may be explained through the attachment theory (Bowlby, 1969) and social cognitive theory (Bandura, 1986) previously described.

Table 1

Risk and Protective Factors Categorised by Domain

	Risk factors	Protective factors
Individual	<ul style="list-style-type: none"> • Impulsiveness/ hyperactivity • Low IQ • Poor school achievement • School drop out • Difficult temperament • Low self esteem • Early onset disruptive behaviours 	<ul style="list-style-type: none"> • Low ADHD • High IQ • Good self-control
Family	<ul style="list-style-type: none"> • Lack of parental monitoring • Punitive parenting • Inconsistent parenting • Cruel and rejecting parenting style • Parental Conflict • Young mother • Large family size • Low socioeconomic status • Antisocial family member • Poor parental education • Parental disruption • Frequent caregiver changes • Abuse 	<ul style="list-style-type: none"> • High parental supervision • Older mother
Social	<ul style="list-style-type: none"> • Antisocial peers • Lack of pro-social peers • Gang membership • High crime neighbourhood • High delinquency rate school • Urban area • Poor housing • Poverty 	<ul style="list-style-type: none"> • Exposure to pro-social others • Low crime neighbourhood • Cohesive community

Social Factors

At the peer level, involvement with antisocial others has been described as a key risk factor contributing to the risk of offending (Murray & Farrington, 2010). Offending theories previously described including the social cognitive theory (Bandura, 1986) and differential association theory (Sutherland, 1947) may explain the mechanisms through which exposure to antisocial views and behaviours leads to subsequent internalisation of these views and

antisocial behaviours. On the other hand, the presence of pro-social others can play a protective role due to similar underlying processes (Farrington et al., 2012). The experience of poverty is another risk factor associated with offending (Farrington et al., 2012). It is likely poverty adds additional stress on the whole system and creates and exacerbates many of the risk factors.

Recidivism

A wide range of risk factors for recidivism (reoffending) amongst adolescents have also been identified and include offending history, presence of conduct disorder, family related difficulties, antisocial associates and ineffective treatments (Mulder, Brand, Bullens, & Van Marle, 2010). Similarly, NZ research has linked family violence and gang involvement with recidivism (Ioane, Lambie, & Percival, 2014).

Young People Perspectives on Risk Factors

While risk factor research has been predominantly quantitative in nature, Barnert et al. (2014) sought to investigate the views of youth offenders in regard to what they considered protective and risk factors. The authors interviewed 20 incarcerated youth made up of 13 Latinos and seven African Americans. Youth described needing “love and attention, discipline and control, role models and perspective” (p. 1366). Homes were described as disorganised and abusive where feelings of neglect were common. Parents were characterised as absent for multiple reasons including work commitments, drug use and/or incarceration. Poverty was also described as a reason for offending as youth reported offending for material gain. Schools were seen as risky due to the presence of bullying and the subsequent need to join gangs for protection. Poor grades and educational achievement were described as setting the pathway for truancy and eventual drop out. The influence of antisocial others was also cited as a reason for engaging in antisocial behaviours. Neighbourhoods characterised by crime and poverty were described as providing the setting for crime while imprisonment was seen as an inevitable destination that for some was an “extension of the neighbourhood”. It would seem that the interviewed youth had good insight into the causes of their crime.

More recently, Heath and Priest (2015) completed four in-depth interviews with youth offenders, aged 14-17 years of age, who had comorbid mental health problems. Results highlighted the youth’s experiences of difficult environments, unstable family life and caregivers, educational disengagement and a lack of support. The interviews also revealed that most of the participants had negative perceptions of services.

Summary

A number of risk factors have been established across individual, family and social domains. Many of these risk factors are evident in offending theory which attempt to explain the processes between risk factors and offending. Protective factors are increasingly becoming researched and are regarded as buffering the impact of risk factors. The experiences described by youth offenders are consistent with current risk factor research. Both risk and protective factors are targets in effective treatments for youth offending.

Youth Offender Treatment

Ashkar and Kenny (2008) report that Western society responds to offending through a combination of “retribution, deterrence, incapacitation, and rehabilitation” (p. 1) strategies that are often dependent on opposing social and political views of the time period. Retribution refers to sentencing based on gaining a sense of justice while deterrence strategies attempt to prevent the offender from reoffending through imposing punitive sanctions. Incapacitation sentencing removes the offender from society effectively disabling their opportunity to offend. Lastly, rehabilitative sentences acknowledge the biopsychosocial determinants of offending and aim to reduce the likelihood of reoffending by addressing rehabilitative needs through therapeutic intervention (Ashkar & Kenny, 2008).

The validity of rehabilitative strategies as an effective means of reducing recidivism has been a subject of much debate for many decades (Manchak & Cullen, 2015). There was a significant period of time where rehabilitative techniques were seen as not working due to an influential study by Martinson in 1974. Subsequent research, however, has clearly shown not only that rehabilitative interventions work (Manchak & Cullen, 2015) but that punitive programmes do not work (Cullen, 2005; McGuire & Priestley, 1995). The current section will describe evidence-based treatments for youth offenders. It will begin by describing the principles and practices of an effective rehabilitative intervention. Examples of current efficacious and inadequate treatment programmes will then be presented.

Principles of Effective Interventions

Therapeutic. Lipsey (2009) completed a meta-analysis of 548 studies evaluating interventions that aimed to reduce recidivism in an effort to summarise the key factors that contributed to effective interventions. The studies were explored and broad intervention philosophies were developed. Studies were classified under the intervention philosophies and regression analyses were performed to reveal the effect of these intervention categories on

recidivism. Identified intervention philosophies included surveillance, deterrence, discipline, restorative, counselling and variants, skill building (including Cognitive behavioural therapy [CBT] and social skills training), and multiple coordinated services. Lipsey found that interventions with a counselling component followed by those which included multiple coordinated services were the most effective. Those based on a discipline approach were the least effective. Overall philosophies which promoted a positive therapeutic relationship were superior to those which were controlling in nature (surveillance, deterrence, discipline).

Risk/Need/Responsivity. Andrews et al. (1990) postulated that there are three main principles of Risk, Need and Responsivity (RNR) that interventions must address to see the most improvements in recidivism rates. The risk principle states the interventions are most effective with those who are at a high risk of reoffending. In other words, those who are at greater risk receive the most gain from treatment. This has been confirmed in multiple studies (Lipsey, 2009). Secondly, interventions need to address the criminogenic needs of the youth offender. Criminogenic needs are referred to as rehabilitative needs in the current study and include dynamic risk factors. A comprehensive review has indicated the most important rehabilitative needs for youth offenders are “impulsiveness, school achievement, child rearing methods, young mothers, child abuse, parental conflict, disrupted families, poverty, delinquent peers, and deprived neighbourhoods” (Farrington et al., 2012, p. 48). Thirdly, intervention design and delivery needs to be responsive to the offenders’ needs. This involves a consideration of the culture, learning style and motivation of the offender. Specific treatment approaches should comprise CBT and Social learning principles. Interventions following the RNR principles have consistently demonstrated positive results (Koehler, Lösel, Akoensi, & Humphreys, 2013).

Addressing multiple domains. It is a commonly shared belief amongst researchers who study youth offending that interventions which address multiple domains of a young person’s life are most effective (Henggeler, 1989; McLaren, 2000). This makes sense as rehabilitative needs occur at the individual, family and social level. Addressing the rehabilitative needs that occur across domains (or systems) increases the likelihood of positive outcomes (Hoge, Guerra, & Boxer, 2008). Similarly, addressing fewer rehabilitative needs in youth offenders has been linked to higher recidivism rates (Vieira, Skilling, & Peterson-Badali, 2009).

Community based. Another increasingly accepted notion is that youth need to be treated within their community to gain the most improvement in antisocial behaviours. It has been argued that by placing youth into institutions the multiple factors maintaining the offending behaviour are often not addressed (Lambie & Randell, 2013). Hence, when youth are placed back into their community, environmental factors which have not been addressed will continue to perpetuate antisocial behaviours. Much research has also demonstrated how incarceration can lead to poor mental health outcomes and actually increase antisocial behaviours (Lambie & Randell, 2013). The peer contagion theory postulates that when youth are placed amongst other antisocial youth, antisocial behaviours are increased due to exposure and reinforcement from other group members (Dodge, Dishion, & Lansford, 2006; Warr, 2002). Community approaches are also more cost effective option compared to residential treatment (Lambie & Randell, 2013). However, it is not always in the best interest of public safety, especially when risk to others is high, to place youth in community treatment, and decisions involve weighing up public safety and the benefits of rehabilitation in the natural environment.

Interviews with 16 youth offenders who had experienced imprisonment at a maximum security facility in Australia, explored the youth's experiences of imprisonment (Ashkar & Kenny, 2008). Results indicated the unpleasant prison environment led to negative emotional states in the youth. Although the youth expressed their readiness to change, barriers to making pro social changes once released were identified and included lack of access to interventions addressing rehabilitative needs, a loss of autonomy, disconnection from significant others and exposure to antisocial behaviours in prison.

On the other hand, a meta-analysis completed by Lipsey (2009), reported no difference in recidivism between those treated in community versus those incarcerated. Lipsey concluded that with all other things being equal (i.e., treatment approach, offender characteristics such as risk) the context in which treatment is given does not impact on the effectiveness of the treatment. It would however, be an arduous task to undergo a multifaceted approach to treatment whilst the youth is imprisoned. Overall, it appears community interventions targeting multiple domains are the most effective option and where realistic, in terms of public safety, should be considered.

Strengths based. It has become increasingly acknowledged that interventions with offenders should be strengths based. One way this can be achieved is through the delivery of interventions that promote and reinforce protective factors, such as focusing on connections

with pro-social peers and activities (Farrington et al., 2012). Furthermore, focussing on strengths will likely increase engagement as the intervention is likely to be more accepted by offenders and communities (Pollard, Hawkins, & Arthur, 1999).

An increasingly utilised and strengths based model developed by Ward and Stewart (2003) is the Good Lives Model (GLM). The GLM proposes that offenders are meeting basic human needs through their offending behaviours. These human needs are defined as primary goods, and examples include knowledge, excellence in work, relatedness, pleasure and inner peace (Ward & Brown, 2004). Interventions utilising the GLM focus on supporting offenders to gain these primary goods through pro-social methods. It is hypothesised that when individuals are able to fulfil these basic human needs through pro-social means, risk factors for reoffending will also improve. Proponents of the GLM model purport that while it retains the essential elements of the RNR model its strength based emphasis increases its acceptability by the offender (Willis & Ward, 2013).

Māori. Traditional Māori frameworks of health are holistic and emphasise the important role of spirituality. Durie's (1994) well-known te whare tapa wha model explains wellbeing as comprising four dimensions taha hinengaro (mental), taha whānau (family), taha tinana (physical) and taha wairua (spirituality). These dimensions of health are interconnected with weakness in one category causing difficulties in the others. Te whare tapa wha model is commonly considered within NZ forensic settings where a balance in all dimensions is sought (DOC, 2014).

Durie (1999) described strategies to promote the mental wellbeing of Māori. These include facilitating the development of a sound cultural identity; where ancestral links are uncovered and connections with the Māori world culturally, socially and economically are achieved. Furthermore, participation in society, politics and the economy, in an active and meaningful way can avoid marginalisation and promote well-being while improvements to services need to occur so that they are in line with Māori health perspectives. Māori should also be given a sense of autonomy and control so they are empowered (Durie, 1999).

National guidelines for effective treatment with Māori youth offenders have emphasised the use of a holistic approach that incorporates Māori practices, fosters relationship, and supports the youth to connect with their cultural identity (Oliver & Spee, 2000; Singh & White, 2000). For example, Owen and Kokiri (2001) investigated the experiences of Māori youth offenders and their whanau, under a government directed research project named the Whanake Rangatahi Programme. Māori youth and their whanau

were interviewed in relation to their offending and their experience with interventions. It was found that the youth offenders had a low participation rate with interventions, partly due to them believing interventions were inappropriate and as a result, of little benefit to them. Furthermore, participants reported the quality of interventions were inconsistent, often too brief, and did not follow up on progress.

Owen and Kokiri (2001) recommend that interventions need to be holistic, individualised and include the family. In addition, education training, life skills and cultural identity programmes should also be included in the services offered. Owen and Kokiri found that while some participants preferred ethnicity matching, others preferred to work with people who were relatable and who cared for them. Interventions should also be developed in consultation of Māori and their effectiveness evaluated.

Pacific. Similar to Māori frameworks of health Pacific frameworks are holistic and incorporate cultural concepts and values. The Samoan fonofale model (Crawley, Pulotu-Endemann, & Stanley-Findlay, 1995), the Tongan kakala model (Thaman, 2002) and the Cook Islands tivaevae model (Maua-Hodges, 2000) are all examples of Pacific frameworks which emphasise the importance of pacific concepts and values in service delivery. Values evident across Pacific models include: respect of others, relationship reciprocity, family obligations and responsibilities, collective interests more important than individual gain, gerontocracy, servitude and humility. Another significant theme across models includes the important contribution spirituality makes to an individual's health and wellbeing. Cultural identity is also considered to play a significant role in the resiliency of Pacific youth (Sanders & Munford, 2015).

As there is an absence of research illustrating the perspectives of Pacific people within a forensic setting, perspectives of Pacific people who have been involved in mental health services have been presented. Tiatia-Seath (2014) found that Samoan people involved in a mental health service appreciated family inclusion, additional time to establish rapport, and treatment that considered Pacific worldviews. Agnew et al. (2004) also discussed the importance of establishing rapport with Pacific through the use of a 'roundabout' approach that includes exploring potential barriers to the relationship. Worth noting is that some Pacific youth have reported that Pacific health models can favour island born Pacific individuals which does not necessarily match NZ born Pacific youth (Agnew et al., 2004). This indicates that the traditional models developed for Pacific people may not be as appropriate for the NZ born Pacific population. Practice guidelines for working with Pacific youth have indicated

that engagement with the whole family and the use of Pacific mentors is needed (CYF, 2010).

Intervention Types

Wraparound services. A wraparound service is a multiple coordinated service based on environmental ecological principles (Burns, Schoenwald, Burchard, Faw, & Santos, 2000). The community based treatment aims to decrease fragmentation amongst several community resources through coordinating multiple services across life domains. For example, a case manager in a wraparound service might support the educational needs of the youth, as well as arrange for individual and family counselling. Characteristics of wraparound include: use of natural supports, emphasis on strengths, inclusion of family, collaboration, flexibility and cultural appropriateness. Wraparound services are individualised, include follow up procedures and make attempts to match interventions directly to treatment goals. Given its multifaceted and individualised nature, the package of services provided can often vary, however, can often include after school activities, mentoring, counselling, parent training and respite care for family (Burns et al., 2000). Such interventions may also depend on what is available within the community. Walter and Petr (2011) note wraparound philosophy exists within a social justice framework and hence services should encourage positive social and system changes. Research has found reductions in reoffending rates due to wraparound services (Matthews, Krivelyova, Stephens, & Bilchik, 2013; Suter & Bruns, 2009).

Multisystemic Therapy (MST). Another community based intervention based on social ecological and systems principles is MST which also takes a holistic approach to treatment. A core practice of MST is the systematic targeting of known risk factors in the home, academic and social settings to reduce the risk of reoffending (Henggeler, 1989; Henggeler, Schoenwald, Borduin, Rowland, & Cunningham, 1998; Schaeffer & Borduin, 2005). Other core principles include: emphasising systemic strengths to facilitate change, encouraging responsible behaviour within the family, focussing on present well-defined problems, making use of developmentally appropriate treatments, regular effort on a daily or weekly basis from family members, evaluations from multiple perspectives and service provider accountability for outcomes and generalisation of skills learnt by youth and family members across life domains. MST has a considerable evidence base providing support for its efficacy (e.g., Sawyer & Borduin, 2011; van der Stouwe, Asscher, Stams, Deković, & van der Laan, 2014).

Wraparound versus MST. MST has many similarities to the wraparound model. Both models are holistic, community based treatments that value the involvement of the family and other key people in the youth offender's life. The main differences between the models include that MST is usually a short term and more intensive treatment where clinicians have small caseloads, whilst wraparound services are long term and involve higher caseloads (Burns et al., 2000). Given the difference in intensity, positive changes tend to be more rapid in services offering MST. In addition, MST is a clinician led programme where the facilitator is likely to be more qualified. Specific interventions within each model also differ with MST emphasising in-house treatments such as CBT and family therapy compared to wraparound services that tend to utilise available community resources. There is also a contrast in the development of the treatments. MST has been primarily theory driven while the wraparound service mostly developed from natural settings due to demand for multiple services to be coordinated (Burns et al., 2000). The GYP, described later, appears to comprise many of the wraparound model's principles.

Boot camps. While MST and wraparound services have shown promising results, other treatments such as correctional boot camps, have been shown to be much less effective. Boot camps were initially introduced as a cost effective means of responding to youth offending (Coventry & Swanson, 2011; MacKenzie, Wilson, & Kider, 2001). Boot camps are purported to improve the individual responsibility and decision making process of the youth offender, within a context that induces fear. Participants of the military style programme are often pushed to their emotional and physical limits. In a meta-analysis of 29 studies, MacKenzie and colleagues found no significant difference in recidivism between boot camp participants and non-participants. It has been argued that the reasons boot camps are ineffective are their punitive nature and failure to address the individual rehabilitative needs of the youth (Coventry & Swanson, 2011; MacKenzie et al., 2001).

Summary

To be effective primary interventions with youth offenders should be therapeutic and based within the community. Interventions should improve identified rehabilitative needs and protective factors across individual, family and social domains. The RNR risk principle should also be adhered to where the intensity of the intervention matches the risk of reoffending. The responsivity principle emphasises the provision of treatments that are culturally appropriate. Furthermore, the use of evidence-based treatments such as those based

on cognitive and social learning principles should be applied. Interventions with a sound evidence base incorporate ecological principles and include wraparound services and MST. In these interventions a key worker or clinician initially completes an individualised assessment of rehabilitative needs, with the youth offender, to determine the targets of intervention. However, although the principles outlined are important considerations in any youth offender programme, another equally important factor is the youth offender's engagement in the intervention. As such engagement will be described in the next section.

Engagement

Youth offenders must first engage in an intervention to receive any benefits the intervention may provide (McMurran & Ward, 2010; Scott & King, 2007). Meta-analyses have established overall psychotherapy drop-out rates approximating 50% (Wierzbicki & Pekarik, 1993), while similar drop outs have also been identified in community offender populations (McMurran & Theodosi, 2007). Given non completion of rehabilitative interventions has been associated with higher rates of recidivism (Olver, Stockdale, & Wormith, 2011) it is essential that effort is made to engage youth offenders. Furthermore, the engagement of youth has been theorised to be more difficult compared to adults, as it is often not the youth's choice to attend therapy (Bickman et al., 2004).

While a consensus on what qualifies as engagement has not been established in the literature, Holdsworth, Bowen, Brown, and Howat (2014) have categorised engagement into the following: attendance, participation, homework completion, self-disclosure and formal engagement measures. Although engagement according to any definition is better than no engagement, engagement that effects positive change is most desirable. Furthermore, it is worth noting that mere attendance does not transform directly into positive change behaviours (Holdsworth et al., 2014).

Therapeutic Relationship

The therapeutic relationship has been theorised to influence engagement through increasing an individual's acceptance of the intervention content and through the support the relationship provides to the individual in the change process (Holdsworth et al., 2014). In psychotherapy research the therapeutic relationship has been reported to be a factor that accounts for 30% of treatment outcomes, where the actual treatment type only accounts for 15% (Lambert & Barley, 2001). It follows that by using techniques that foster a positive therapeutic relationship, oppositional youth are more likely to have better treatment outcomes

(Karver & Caporino, 2010).

Much research has demonstrated the positive impacts the therapeutic relationship has on treatment outcomes with youth offenders. A positive therapeutic relationship is associated with improvements in treatment targets and reoffending rates (Florsheim, Shotorbani, Guest-Warnick, Barratt, & Hwang, 2000). Treatment compliance (Langer, 1999) and completion rates (Richards & Sullivan, 1996) have also been associated with a positive therapeutic relationship. A strong therapeutic relationship has also been shown to positively influence treatment retention and outcome in youth with substance abuse problems (Diamond et al., 2006).

A commonly used model amongst adult psychotherapy populations, developed by Bordin (1979) hypothesised that the therapeutic relationship is comprised of three parts. These include goal agreement, task agreement and the bond. Karver, Handelsman, Fields, and Bickman (2005) utilised Bordin's framework to develop a model for youth. The authors postulated that the therapeutic relationship consists of an affective (bond), cognitive (goal agreement, optimism) and a behavioural (client centred and collaborative) component. Karver et al. described how the therapeutic relationship is formed through interactions that occur early on between the client and therapist. These interactions are influenced by pre-treatment characteristics of the client and the facilitator. Pre-treatment characteristics of the client determine their willingness and acceptance of the therapist and subsequent treatment, while characteristics of the therapist influence how they perceive and act towards their client. The client's reaction to the therapist's behaviours contains affective, cognitive and behavioural components that set the foundation for treatment. The relationship formed then influences how receptive the client is to the advice and treatment the therapist offers. Karver et al. noted there was an absence of research identifying pre-treatment characteristics of therapists that contribute to successful outcomes.

Research has demonstrated that a client's ambivalence regarding treatment and change is a pre-treatment characteristic that can hinder the formation of the therapeutic alliance (Orlando, Chan, & Morral, 2003). Those working with youth offenders may be inclined to perceive the client as resistant which can lead to the development of plans that are not collaborative in turn further causing the youth to appear resistant (Wood, Wood, & Taylor, 2012). The engagement of youth within a justice setting is likely to be challenging due to higher levels of resistance and the mandatory nature of interventions.

There are a number of therapist behaviours that have been suggested to be effective in the establishment of the therapeutic relationship with youth. Within the mental health setting

such characteristics have included validating the youths' experience (Russell, Shirk, & Jungbluth, 2008). Other therapist behaviours that have been found to be important for strengthening the therapeutic relationship amongst children and youth displaying disruptive behaviours include: empathising with frustrated and angry emotions (Diamond, Liddle, Hogue, & Dakof, 1999), allowing clients to benefit from treatment early on, ensuring the therapist is seen as credible and regularly evaluating the client-therapist relationship (Cunningham & Henggeler, 1999).

Research has demonstrated that the therapist's evaluation of the therapeutic relationship can often contradict the youth's evaluation with the latter being associated with better treatment outcomes (Bickman et al., 2004). Subsequently, it would appear important that the young person's evaluation of the relationship is used as the indicator of the relationship status. Furthermore, exploring the factors youth consider when making judgements regarding the relationship will provide further insight and potential areas for improvement. It has been noted that those working with oppositional youth can improve treatment outcomes through increasing their knowledge of behaviours that improve the relationship (Karver & Caporino, 2010).

There has been a gradual increase in qualitative research that explores therapeutic factors from the perspectives of youth offenders. Such a study was completed by Ryals (2011) who conducted interviews with eight youth offenders (four Caucasian, three African-American and one Hispanic) who had undergone a therapeutic intervention to address their offending. Three central themes identified including "participants' experiences, therapists' traits and the process of the therapeutic relationship" (Ryals, 2011, p. 1). Therapist traits valued by the participants included the therapist's communication style where they spoke to the youth with respect and more like a friend. Being non-judgmental, empathic and humorous were other traits that were seen as creating a positive relationship. Therapist self-disclosure and allowing time for the youth to open up gradually were also viewed favourably by the youth.

In the United Kingdom Tighe, Pistrang, Casdagli, Baruch, and Butler (2012) completed 37 (21 parent interviews and 16 youth offenders) interviews exploring participants' experiences of MST. They identified two central themes: "engagement in MST and initial processes of change" and "outcomes are complex" (Tighe et al., 2012, p. 1). The former theme emphasised the importance of the therapeutic relationship while the latter theme recognises the multiple areas where positive outcomes are achieved. Implications for practice included the need for additional focus on the influence of antisocial others, and

follow up care for those families who required further reinforcement of the skills learnt.

Motivational Interviewing

While not directly about the therapeutic relationship Motivational interviewing (MI) can inform programme providers about how to improve engagement. MI was developed by Miller and Rollnick (2002) and is a short term therapy that combines Carl Roger's (1957) principles, with active strategies that are personalised to the readiness of the client. A principal aim of MI is to work alongside the client to help them resolve their ambivalence regarding change (Miller & Rollnick, 2002). MI aims to increase client engagement and motivation, through therapeutic means, with the intention to elicit positive behavioural change (Flynn, 2011). A systematic review of MI has shown the efficacy of MI at increasing motivation levels, engagement in rehabilitative programmes and reductions in offending (McMurran, 2009).

MI initially originated for use in substance abuse treatment programmes and is now used across mental health, primary health, addiction and forensic settings. The skills used in MI comprise primary counselling skills of empathy, reflection and unconditional positive regard for the client (Miller & Rollnick, 2002). If the client displays ambivalence (indicating low readiness to change) the therapist responds by "rolling with resistance" where the therapist refrains from directly challenging the client. Instead, the therapist guides the client to change through eliciting and reflecting "change talk" statements to increase the client's readiness to change. The spirit of MI includes partnership, client autonomy and responsibility, supportiveness and exploration. Other MI skills include acceptance, goal identification, and empowering the client.

Summary

Engaging youth is an essential component in an effective intervention. Preferably the type of engagement that leads to positive change should be sought. The therapeutic relationship can impact on engagement and ultimately treatment outcome. Therapist and youth characteristics can impact the forming of a therapeutic relationship and engagement. Interviews with youth can provide valuable information on the characteristics of therapists and interventions that increase engagement and foster a positive relationship. MI is a useful technique that can be used to establish a positive therapeutic relationship, improve engagement and facilitate a youth offender's readiness to change.

Youth Justice System in New Zealand

As previously mentioned the introduction of the Children, Young Persons and Their Families Act 1989 initiated changes in how youth offenders are managed in the NZ Youth Justice system. Currently, emphasis is on the principles of accountability, restorative justice, rehabilitation and family involvement. The Police, who are often the first contact youth offenders have with the Youth Justice system, can respond in number of ways (Stevens et al., 2011). These include taking no action, issuing a warning, referring to Police youth aid and arresting without a warrant. Referrals to Police youth aid may result in Alternative Action (AA) or a referral to a family group conference (FGC). Diversion from the justice system and rehabilitation, rather than punitive measures are preferable and used when possible. Diversionary measures can occur at multiple points in the NZ Youth Justice system ranging from first contact where police may issue a warning, to the FGC where the youth offender may not be prosecuted.

Alternative Action

One of the principles of the Youth Justice system states that youth offenders should not be formally charged if alternative action is an appropriate option (MOJ, n.d.). Alternative actions are informal and diversionary in nature and tend to be the selected option for cases involving lower levels of offending. In these instances, the police youth aid officer can issue a warning, caution or direct that an AA plan is created. An AA plan involves a collaborative process between the Police youth aid officer, victim, the youth offender and their family. The contents of an AA plan can vary, however, often comprise restorative and rehabilitative components. In particular, AA plans may include conditions such as community work, apology letters, reparation and counselling.

Family Group Conference

The FGC is another example of diverting youth from traditional justice system proceedings. The FGC is a formal process where, like AA, a plan is developed that comprises both restorative and rehabilitative components. In contrast to AA, the FGC has a greater focus on accountability while at the same time attempts to address the causes of offending (MOJ, n.d.). Care and protection issues and the family's contribution to the offending are also considered. The content of an FGC plan is similar to that of an AA plan, however, may also include other conditions such as a prosecution and a curfew condition. Furthermore, FGC plans tend to comprise more conditions over a longer period of time compared to AA plans.

Youth Court

While youth who are arrested may be warned and referred to Youth Aid, the more serious are referred to the Youth Court. Orders imposed by the Youth Court can range from discharging the case, fines, supervision orders, parenting orders, rehabilitative programmes and residential. Separate Māori and Pasifika Youth Courts have been established in Auckland that addresses youth offending within a culturally safe environment.

Efficacy of Diversionary Responses

In a meta-analysis of 45 studies, Wilson and Hoge (2013) found that diversionary programmes were more effective in reducing reoffending compared to traditional justice system interventions. The authors also noted a positive association between the amount of time youth were processed in the justice system and reoffending rates. This indicated the sooner the youth were diverted from the justice system the better. Wilson and Hoge proposed the labelling theory and differential association theory of offending as possible explanations for the effectiveness of diversionary responses to offending. It is worth noting, however, that these diversionary programmes also included restorative and rehabilitation interventions. Hence, it is unclear whether the positive effects were due to the diversion or the restorative and/or rehabilitative components.

In contrast, another metaanalysis completed by Schwalbe, Gearing, MacKenzie, Brewer, and Ibrahim (2012) found no significant effect on reoffending rates for diversionary programmes. Other intervention qualities investigated included family treatment, case management, youth court and restorative justice. Of the intervention types, family treatment was the only type that had a significant effect on reoffending rates.

Others have explicitly defined diversionary measures as encompassing rehabilitative and restorative components, and note that while diversion from the justice system is preferable to formal justice system involvement, it needs to include an appropriate rehabilitative intervention to be effective (van der Merwe & Dawes, 2013).

Summary

The NZ Youth Justice system attempts to balance accountability and rehabilitation when responding to youth offending. Diversionary measures are used where possible which involves diverting youth from formal criminal proceedings. AA and FGC plans which involve restorative and rehabilitative conditions attempt to hold the youth offender accountable while addressing the causes of offending. Research investigating the

effectiveness of diversionary measures has demonstrated mixed results. What appears most important, however, is that responses to offending include interventions that identify and address the rehabilitative needs of the youth offender.

Genesis Youth Programme

The GYP is a restorative and rehabilitative programme, established in 2002 to address youth offending within the South Auckland areas of Otahuhu, Mangere, Papatoetoe and Papakura. Youth offenders are referred to the GYP to complete conditions set out in their AA or FGC plan and to complete orders directed by the Youth Court. As previously described these conditions may include an apology letter, community service, substance use counselling, parenting programme and/or mentoring. Usually once the conditions are completed the youth offender is discharged from the GYP.

The services of the GYP fall under three main umbrellas: prevention, intervention and restoration. Prevention strategies include connecting with community groups such as schools, churches, sporting clubs and cultural groups. In particular, these include annual family fun days, school presentations and sports days. These events are designed to provide the community with education on a range of topics including gangs, substances use and peer pressure. The restoration component involves attempts to “make it right” with the victim. Interventions include rehabilitative programmes are provided for youth offenders and their families such as counselling, parenting and mentoring. The youth are assigned a GYP staff member to support them through their community sentence. Care coordination, education advice and placement are also provided. GYP staff consists of youth workers, social workers and counsellors. A reported key strength and point of difference of the GYP is the high quality of its staff members who are selected for their integrity and strength of character. The GYP philosophy is summed up in their mission statement:

We are committed to service excellence and impacting youth and their families to a positive future. We aim to improve education, employment, community, culture, peers and family outcomes.

In addition the GYP is based on the following principles: youth have the ability to change for the better, holistic interventions are most effective, collaboration with other services and family crucial to success, and youth flourish within a nurturing family environment. Specific objectives of the GYP include: identification of youth at risk within the community, delivery of a holistic intervention, development and attainment of goals, coordination of services and

supporting youth across life domains.

Concurrent Study: GYP Outcome Evaluation

A quantitative outcome evaluation was completed in parallel to the current research by a fellow Doctoral student (Price, 2015). Price compared the reoffending rates of 95 youth offenders who had been involved in the GYP to 95 youth offenders who had not attended the GYP. The sample was matched on offence history and demographic variables while reoffending rates were defined by apprehension data. Reoffending was followed up for a period for six years. The results of the study demonstrated no significant differences on the overall reoffending rates between the two groups. There was, however, a small difference between the two groups on survival rates with those who had attended the GYP offending at a lower rate in the first year post programme. There was also a difference seen within the GYP group with those completing the programme having a lower overall rate of offending and better survival rates compared to those who started but failed to complete the GYP.

Current Study

There is a paucity of research investigating the perspectives of youth offenders and those who work alongside them. This is especially true for Māori and Pacific youth offenders. The current study seeks to explore the perspectives of youth offenders and facilitators involved in the GYP. Individual interviews with Māori and Pacific youth and a focus group with the facilitators have been used to achieve this. Within the context of the GYP, the study explored factors the youth and facilitators believed improved and impeded engagement, the therapeutic relationship and positive change.

The 2002 National Youth Offending Strategy, still in effect, emphasises the need for youth interventions to be investigated (MOJ, 2002). Investigating the appropriateness of programmes used with Māori and Pacific youth offenders are of special importance (Crawford & Kennedy, 2008). It is important for youth with antisocial behaviours to have access to high quality interventions that are evidence-based, to prevent a lifetime of maladjustment and criminal activity, while engagement in rehabilitative programmes is a crucial determinant in treatment success.

Several research aims were identified with the researcher's supervisor and the GYP manager. These include:

1. To explore factors that assist/impede engagement in the GYP from perspective of youth offenders and GYP facilitators.

2. To explore factors that assist/impede the therapeutic relationship from the perspective of youth offenders and GYP facilitators.
3. To explore factors that assist/impede positive change from the perspective of youth offenders and facilitators involved in GYP.

CHAPTER TWO

METHOD

Overview

The current study sought to investigate and explore the experiences of the GYP facilitators and young people who had attended the GYP. Interviews were conducted with the young people and a focus group was completed with the facilitators. The study has been informed by realist, Māori and Pacific epistemologies. A summary of the overall methodological framework and qualitative analysis is presented. Qualitative research paradigms highlight the significance of researcher perspectives in the research process and therefore a section on reflexivity is also included.

The young people interviews and the facilitator focus group have been separated into study one and study two respectively. The decision was made to not merge the two sets of data to give priority to the distinct voice of each group. Instead, comparisons between the two sets of data are presented in the Discussion.

Methodological Framework

Qualitative methods were deemed appropriate in the current study as an in-depth method to explore and understand the views of the participants (Tolich & Davidson, 1999). Qualitative methods are particularly useful for exploring areas that are under-researched such as the area of focus in the current study. Qualitative research can also be seen as culturally sensitive as it is not limited by pre-defined measures that have been created in predominantly Western frameworks which may not be suitable for all cultures. Furthermore, much of the existing research on young people who commit crime is quantitative and hence does not give voice to the experiences of the young person. A qualitative design allows a deeper exploration of the offending phenomena amongst Māori and Pacific young people. This will give rise to further understandings that will add to the literature and inform services.

The epistemological framework utilised in the current study is a realist framework (Collier, 1994). The framework assumes the existence of a reality and acknowledges the value of an individual's perception of reality; however, it also postulates that an individual's understanding of reality is fundamentally subjective. Moreover, realist perspectives emphasise the subjectivity of the investigator in the research process. This will be discussed in detail later.

Many of the participants identified as Pacific while approximately half of the young

people identified as Māori. A mixed-ethnic approach was utilised in the current study due to the difficulty associated with obtaining sufficient clients from one ethnic group. While it is acknowledged there are differences between Pacific ethnic groups, Pacific people also share some common core values and beliefs (Anae, Coxon, Mara, Wendt-Samu, & Finau, 2001). As such the analysis described the young people as a whole group and did not seek to separate out ethnicities when developing themes.

Principles of Māori and Pacific epistemologies and methods also shaped the current research. In particular, the talanoa process, as described by (Vaiolleti, 2006), has informed the current study. The talanoa method emphasises the importance of reciprocity in the relationship between the researcher and participants. In addition, the use of the talanoa method encourages the flow of empathic understandings (Farrelly & Nabobo-Baba, 2014). Māori tikanga (practises) such as karakia (prayer) and sharing of kai (food) were also incorporated into the interview and focus group process (Carpenter & McMurchy-Pilkington, 2008). Consultation regarding the research process and results occurred throughout the study with a Māori clinical psychologist and a Samoan clinical psychologist.

As noted, a focus group was conducted with the facilitators while individual interviews were conducted with the young people. A focus group was used with the facilitators to gather information regarding participants' views in a naturalistic setting that allowed discussion, debate and the discovery of a common set of underlying themes (Bloor, Frankland, Thomas, & Robson, 2001). A focus group was considered more appropriate than individual interviews as it allowed for greater exploration of consensus and disagreement on topics. The current study was especially interested in the shared understandings amongst facilitators of the services the GYP offered. It was also assumed that the facilitators would be comfortable sharing in a group setting due to their prior familiarity with each other. In contrast, individual interviews were conducted with the young people as it was hypothesised a focus group would be anxiety provoking and as a result the young people may be less forthcoming (Lewis, 1992). In addition, it was anticipated additional rapport building would be required with the young people and that this would be better achieved within a one on one setting.

Qualitative Analysis

Thematic analysis, as outlined by Braun and Clarke (2006), was selected as

the data analysis method as it is highly flexible and can be used across epistemological frameworks. In particular, the data analysis process included a combination of deductive and inductive techniques in the development of themes. A deductive analysis involves extracting themes from the data that relate to the research questions and pre-existing literature. In contrast, the themes in an inductive analysis purely reflect the data and are not necessarily related to the research questions (Braun & Clarke, 2006).

The research analysis is partially deductive as the topics of enquiry were preordained and reflect the specific research aims. The schedule of questions was developed to elicit youth, facilitator and intervention characteristics that influenced the therapeutic relationship, engagement and positive change. Consequently, these topics guided the themes extracted from the data. Another deductive element of the analysis included the researcher's exposure to the extant literature prior to the analysis which will have further influenced the extraction and analysis of themes (Braun & Clarke, 2006). The analysis also incorporated an inductive component as the data determined the factors that influenced the relationship, engagement and positive change.

Braun and Clarke (2006) also described levels of thematic data analysis as being at a semantic and/or latent level. In a semantic analysis participants' views are simply described and paraphrased with only surface level meanings being inferred. In contrast, a thematic analysis at the latent level involves further interpretation of the data where underlying assumptions are also presented. The current analysis makes use of both forms of analysis where descriptions are provided followed by possible interpretations.

Subjectivity and Reflexivity

As noted the realist perspective stresses the role of researcher subjectivity in the research process (Collier, 1994). It is postulated that researcher factors influence the entire research process from conceptualisation to write up. Hence it is important for researchers to reflect throughout the process and to share these factors to allow the research to be put into context; as doing such will provide a fuller understanding of the research results. The following is a personal account of the key factors that are likely to have influenced me in the current research process.

I believe a number of my life experiences have afforded me some insight into the perspectives of these young people. I am a 31 year old NZ born woman of Samoan and Pākehā descent and have spent many of my formative years attempting to navigate my way in and between Samoan and Western realms. This has been resilience-building and resulted in a

personal understanding of the experiences Pacific people face in a dominant Western culture. I have also experienced challenges finding my place within Pacific realms.

Furthermore, I have experienced some of the common social issues faced by these young people, including poverty. Experiencing poverty and its various impacts allows me a greater appreciation of the impact it has on many of these young people. Similarly, I spent my adolescent years in a neighbourhood that was notorious for its troubled teens, substance use and crime. Many of these troubled teens were my next door neighbours and some I considered friends. Upon reflection, I believe these experiences have increased my empathy for these young people.

What inspired my interest in the current research was a combination of my passion for helping Māori and Pacific people and my interest in youth offending. My own exposure to a 'disorganised' community as an adolescent sparked my interest in helping at risk young people. My connection to my Pacific culture, and the challenges faced by myself and other family members, has contributed to my passion for helping Pacific people. I also empathise with the challenges Māori as a people have needed to face and overcome as a result of colonisation.

My father holds strong traditional Samoan values which I have mostly adopted. The Pacific values of most importance to me are those of compassion and relationships. I believe this has influenced my decision to focus on the therapeutic relationship in the current research. As I have matured I have gained an enhanced sense of my ethnic identity and have become increasingly proud of my afa kasi (half Samoan, half Pākehā) heritage. It has motivated me to become particularly interested in the fusion of Western therapies and Pacific values to better service Pacific people. This has influenced my interpretation of data as I have drawn on knowledge from both Western and Pacific frameworks in this process.

Other influences include my role as mentor/tutor for Māori and Pacific undergraduate Psychology students at the University of Auckland. While this exposed me to some of the common struggles faced by Māori and Pacific within a tertiary education setting, it also enhanced my understandings of the protective factors for Māori and Pacific young people. Although anecdotal, it appeared the difference between young people who offend and young people who go to university were stronger cultural connections, family cohesiveness, and an expectation from parents that the young person would go on to achieve better things. Amongst other things, this has signalled to me the importance of further exploring cultural identity as a

protective factor for negative outcomes amongst Māori and Pacific people.

In addition, I completed a year long, 1500 hour internship at the Department of Corrections, at the same time of data collection, where I gained experience working with mostly Māori and Pacific adult offenders in the community and in prison. The adult rehabilitative system is arguably more structured in comparison to the Youth Justice system where one of the psychologists' roles is to provide therapy with offenders that systematically targets rehabilitative needs. This process has added to my knowledge base of offending theory and treatment which has also guided me in this research project.

In the same year I was burgled twice. While it certainly made me question my chosen research topic, it also allowed me some insight into the impact of offending on victims. I believe this has helped to balance out my passion to help young people who offend with the understanding that we also need to protect the community.

Like many others completing research, I experienced this process as stressful at times, however, at the same time it has resulted in my own resilience being channelled. For example, there were many times I made my way to the premises of the GYP, expecting an interview, and the young person was not there. As time passed there was an increased pressure to complete the interviews. On occasion I did notice myself experiencing feelings of frustration when answers were not forthcoming in interviews. I was so determined to gather detailed and rich information that I noticed myself feeling disappointed when interviews did not go as deep as I had hoped. To increase rapport, and overcome frustration, I made attempts to explore other areas that I thought would be easier for the young people to talk about.

I am currently employed as an alcohol and drug clinician/intern clinical psychologist at a child and adolescent mental health service in South Auckland where I have been employed for the last 16 months. I work within the Pacific team with mostly Pacific children (aged 4-18 years) and their families. I also see Pacific children who are Māori. I believe this has allowed me further insights into the challenges Māori and Pacific young people face. Lastly, I am inclined to positive school theories of offending that suggest an array of factors (biological, psychological, social, cultural, and historical) lead to the offending by Māori and Pacific young people. Given resources, direction, skills and something better to hope for, young people who offend can change for the better and create an alternative path.

Study One: Young People Interviews

Participants

Interviews were completed with 15 young people aged 14 to 18 years. The

participants included three females and twelve males. The ethnic makeup of the participants, who identified with one ethnicity, included four Māori, two Tongan, two Samoan, one Niuean and one Cook Island Māori. Five of the participants identified with two ethnicities; four participants identified as both Māori and Cook Island Māori while one participant identified as African and Cook Island. All of the young people bar one were born in NZ while six of the participants were bilingual, reporting fluency in at least of their ethnic languages as well as English.

The time period of the participants' involvement in the programme ranged from three months to approximately one year. In addition there was variation in regards to the GYP services they were mandated to complete. Thirteen of the participants attended alcohol and drug counselling, seven attended mentoring and eight attended parenting. Six participants attended one programme, five attended two programmes and four attended all three. Two of the participants had been referred to the GYP on two occasions while a third of the participants breached their sentence conditions and/or reoffended during their period of involvement with the GYP. Seven of the young people described living with only one of their parents, while four of the participants were parents themselves. All of the participants had siblings with the average number of siblings per participant being exactly five. Educational achievement was diverse with approximately half having dropped out of the mainstream school system.

Interview Schedule

The interviews conducted were semi structured and utilised a mixture of a "formal conversation interview" and an "interview guide approach" (Patton, 2002, p. 347). The majority of the questions were open ended while follow up questions were used for clarification and elaboration. Advantages of using an interview guide include efficiency, adequate coverage of the predetermined topics and consistency between interviews. On the other hand a conversational approach gives flexibility to explore comments and ideas of interest (Patton, 2002).

The semi structured interviews aimed to explore engagement and treatment factors. The interview schedule included 13 main questions and was developed during the completion of the literature review and in consultation with my supervisor (see Appendix A). Repeating and rephrasing of questions occurred throughout interviews to improve understanding amongst participants.

To develop rapport the young people were initially asked about the structure of their family. Discussion of participant topics of interest also occurred throughout the interviews to maintain rapport. Participants were requested to share the different parts of the GYP they attended and were asked follow up questions for each component as listed below:

- a. *What programmes of Genesis did you use? For each programme used:*
 - a. *How useful did you find the Genesis Programme?*
 - b. *What made them useful? What parts were not so useful?*
 - c. *How much did you enjoy the programme?*
 - d. *What made them enjoyable? What parts were not enjoyable?*

While the participants were mostly asked questions related directly to the GYP a couple of questions required the participants to think about youth offending programmes in general. Furthermore on occasion closed questions were used where the answer determined the next question:

- a. *What do you think is the most important thing a programme like Genesis should offer its young people?*
 - a. *Do you think the Genesis Programme offers this?*
 - b. *How did they/might they offer this?*

A significant part of the interview was used to explore the participants' views of their assigned key workers and other GYP facilitators. Participants were asked to evaluate aspects of their relationships and give examples. A prompting question, asked throughout the interviews, requested the participants to provide possible improvements to the GYP. This proved a challenging question for the participants to answer. In fact, many of the participants found it challenging providing answers to many of the questions posed and would report not knowing at times. In general responses would be brief despite further prompts.

Procedure

Study development. The current study developed out of the GYP General Manager's intent to have the GYP evaluated. Initial meetings occurred between the researcher, general manager and the researcher's supervisor to discuss the parameters of the project. It was decided it would include both a quantitative and qualitative components with the latter being the current study. The quantitative component, as outlined in Chapter One, investigated reoffending rates and was completed by a fellow Doctorate of Clinical Psychology student.

Ethics approval. Ethics approval was obtained for the current study, including interviews and the focus group, from the University of Auckland Human Participants Ethics Committee (Ref. 2010/502). Approval was also gained from the NZ Police Research and Evaluation Steering Committee which required the researcher to obtain a Police Check and sign a confidentiality agreement.

Participant selection. Purposeful selection of the young people occurred in the current study. Firstly, only those who had completed the GYP in the previous year were contacted to ensure the young people were able to recall relevant information in the interviews. The facilitators were also advised to select young people who they perceived would be willing to complete the interviews. This decision was made due to the expected difficulties of engaging a youth offender population and wanting to reduce the strain on GYP facilitators, who identified all potential participants and organised all interviews including transport to the GYP premises. I was aware of the bias this selection approach may have created. As such efforts were made to ensure inclusion of young people who had either breached their sentence conditions and/or reoffended during their time with the GYP. All GYP facilitators were provided with Youth Participant Information Sheets (see Appendix B) and were briefed on the study to enable them to inform participants of the scope of the study.

Interview setting. Interviews lasted between 45-60 minutes and were conducted in private office space at the GYP headquarters in Mangere, South Auckland. The participants were transported to and from the headquarters by their past key workers. The Participant Information Sheet was presented and the study explained again prior to seeking consent (for Assent and Consent Forms, see Appendix C-D). For those participants less than 16 years of age, parental consent was obtained by the relevant key worker (see Appendix E-F). All young people transported to the GYP premises, for the purpose of the interview, consented to participate. A karakia (prayer) was offered to all participants to open and close the interviews. Food and drink was shared with participants as a means of building the relationship and as recognition of the value of the participant's time. The participants were presented with a Grocery voucher as a koha/mealofa for their contribution. An audio recorder was used to record the interviews while a pen and paper were used to note down comments of interest and to ensure all questions were covered. The audio

recordings were transferred to my laptop, password protected, and uploaded to a secure online storage system. The audio recordings were then forwarded securely to a third party for transcription.

Data Analysis

The thematic data analysis was shaped by the six step method outlined in Braun and Clarke (2006). Transcripts were completed by an experienced transcriber. I listened to the audio recordings for familiarisation and to check the transcribed data. The transcribed material was read in its entirety several times and initial thoughts and comments were noted. This allowed for the data to be viewed in context where concepts could be seen in relation to others (Bradley, Curry, & Devers, 2007).

The next step consisted of manually generating the initial codes where chunks of data were organised according to their most basic meanings. To achieve this, I made use of an excel spreadsheet where rows represented different codes. Only those instances of codes that related to the overall research questions were extracted from the data. In total there were 42 codes.

The following phase involved categorising the codes into the predetermined topics of facilitator characteristics, youth characteristics and intervention characteristics. Generation of preliminary themes, based on both prevalence of the theme and relevance to the research question, were then completed for each topic. This was achieved through copying and pasting related codes into individual Microsoft word documents. The word documents were then read through and compared to ensure coherence of themes. Brief definitions and/or keywords were used to describe the themes that were amended throughout the analysis.

I then used three sets of Mind-maps to represent each topic and placed the corresponding preliminary themes definitions and/or keywords around each topic. The visual representation assisted me to make connections amongst themes. Themes that were combined were then transferred on to new Mind-maps that illustrated the joined preliminary themes. Preliminary themes were joined and separated several times until they appeared to form a coherent picture. The Microsoft word documents that contained the codes of each theme were referred to throughout this process. Particular care was taken to ensure all important material was represented. Initially some of the themes were separated into subthemes to improve comprehensibility, however, ongoing discussions with supervisors led to the decision to collapse all subthemes into one theme.

The next two steps included refining and naming the themes. Themes were checked

for both internal consistency and divisions from other themes. Some codes were examples of more than one theme and hence were utilised accordingly. For example, the following code was placed under the themes of *Cultural preference* and *Relationships*.

Oh, like she was my mum and I was the boy... of course she's got way more experience, than me, so of course she'll be the one that's best to talk to. She'll know more stuff than me.

Themes were still regarded as distinct, as codes used more than once had multiple meanings related to different themes. When creating theme names attempts were made to use the terminology used by participants. For example, the label of *Straight up* was used to describe facilitator characteristics of honesty. On a few occasions this could not be achieved as the participant language used did not appropriately describe the themes. Refining the description of themes also occurred at this stage. The examples of themes selected in the write up were chosen for their ability to effectively represent the breadth and depth of a theme and to ensure all participant voices were represented. To preserve the confidentiality of the participants, reference to ethnicity was used sparingly and only when it was deemed necessary (appeared to have significant cultural relevance). Conversational fillers such as “um” and “you know” that did not add to meaning to the analysis were removed. The themes extracted from the data have been capitalised and are presented in italics.

Qualitative research avoids precisely quantifying themes as this can make it appear that some aspects of the data are more important than others. Braun and Clarke (2006) emphasise that a theme's significance is not solely based on prevalence. Nevertheless, a general indication of the prevalence of participant themes is commonly presented which is the case here. The following descriptions have been used to represent the frequency of participants who discussed a theme: “most participants” ($n \geq 12$); “many participants” ($n = 6-11$), “some participants” ($n = 2-5$). When only one participant discussed an opinion, considered noteworthy, the exact quantity was stated.

Coding of the data was a dynamic and reflexive process where the perspective of the researcher will have certainly had an impact on the codes and themes developed. Nevertheless, it was considered important to share coding and preliminary themes in the initial stages of data analysis with a fellow clinical psychology student. Discussions were had regarding the derivation of themes in an attempt to improve the trustworthiness of the data. Furthermore, consultation with my supervisors also

occurred during the analysis which helped to guide the themes presented. The themes were also shared and discussed with cultural advisors in the write up process to garner potential explanations for culturally relevant findings and to review the interpretations made of the data. The final themes are considered to accurately reflect the data related to the research aims of the study.

Study Two: Facilitator Focus Group

Participants

The participants included five employees, aged 22-36, of the GYP who work in case management roles with the young people, and participate in the mentoring and parenting programme. Of the five participants, three were female and two were male. The ethnic make-up included three Samoans, one Tongan and one Pākehā. Three of the participants held Bachelor of Social Work Degrees; with two of these participants also completing a post graduate qualification in Social Work. One participant held a degree majoring in Criminology while the last participant was nearing completion of a degree in Youth Work. The participants' time employed at the GYP ranged from three months to nine years. All of the participants had experience in previous helping roles which included mentoring, care and protection, youth development and church roles.

Focus Group Schedule

The focus group schedule included six main questions that were developed during the completion of the literature review and in consultation with my supervisors (see Appendix G). Like the interview schedule, the focus group mostly elicited factors that influenced the therapeutic relationship, engagement and treatment outcome. The focus group discussion started with the researcher asking the facilitators to discuss the key components of the GYP and the subsequent benefits to users. Specific questions relating to engagement were then proposed. For example,

What aspects of a programme make it more likely that it will be accepted and used by adolescent offenders and their families?

I allowed the participants flexibility in their discussions, and requested clarifications, further explanations and examples throughout. When an appropriate opportunity presented itself I led the group onto the next question. Given the relatedness of the material there appeared to be a natural progression between most of the questions.

Procedure

Participant selection. All employees of the Mangere GYP, bar the general manager and administration staff, were invited to participate in the focus group by the GYP Manager. It was made clear that participation or non-participation in the study would not impact on the employment status of the employee. Employees were also emailed the Facilitator Participant Information Sheet (see Appendix H) by the GYP manager. They were also advised I was available to answer questions.

Focus group setting. A time was set for the focus group within work hours. The focus group was conducted in a meeting room at the GYP headquarters in Mangere and lasted approximately 120 minutes. I explained the study again and consent was obtained prior to proceeding (for consent form, see Appendix I). A karakia (prayer) was performed at the beginning to bless the food and the process. A karakia was also performed at the end to close the focus group. Food and drink was shared throughout the focus group process. An audio recorder was used to record the focus group while a pen and paper were used to note down comments of interest and follow up questions. The audio recordings were transferred to my laptop, password protected, and uploaded to a secure online storage system. The audio recordings were then forwarded securely to a third party for transcription.

Data Analysis

The thematic analysis of the focus group data parallels the process used for the young peoples' interviews and was informed by the six step method outlined in Braun and Clarke (2006). Repeating the same information is not deemed necessary; instead specific examples will be briefly presented.

In total there were 28 codes extracted from the data. These were eventually categorised into 13 themes. Subthemes were initially created, however, like the interview analysis these subthemes were collapsed into the central themes as they were seen as further examples of the central theme. Similar to the interviews, attempts were made to use the language of the focus group participants to label the themes. For example the phrase *Everyone's young person* was used to describe the topic of intervention characteristics, where all facilitators would care for a young person rather than just the assigned key worker.

CHAPTER THREE

ANALYSIS OF YOUNG PEOPLE INTERVIEWS

Fifteen young people who completed components of the GYP participated in the interviews. The interviews explored the young people's perception of the GYP. In particular the interviews sought to elicit responses relating to aspects of the GYP (including GYP employees) that influenced engagement, the therapeutic relationship and positive change. As described in the previous chapter a realist epistemology was used as the backdrop to the thematic analysis methodology outlined by Braun and Clark (2006).

Table 2 displays the themes classified by the predetermined topics covered in the interview schedule. Facilitator characteristics comprised five themes. Youth characteristics included two themes and intervention characteristics three themes. Where possible and appropriate, the participant's language has been used in the labelling of themes.

Many of the participants found it challenging providing answers to all of the questions posed and would respond with "I don't know" at times. Most of these participants were apologetic for not being able to answer the questions with some referencing their lack of understanding, schooling and inability to think as reasons they did not know. Similarly the answers that were provided tended to be brief. In many cases prompts such as "can you tell me more" were used in an attempt to elicit further information about concepts. The additional information these prompts elicited was also often brief. Discussions around participant topics of interest were also weaved throughout the interviews to develop and maintain rapport.

Facilitator Characteristics

The topic of facilitator characteristics comprised statements relating to the traits and behaviours of the facilitators and the subsequent impact on engagement, relationship and positive change. The questions in the interview that elicited these themes included, "Can you tell me about your keyworker?" and, "What did you like about the people at the GYP?" As mentioned these questions were followed up with prompts to further explore answers. All of the participants expressed positive statements regarding their key worker and other Genesis staff members. This was reflected through the participants' favourable descriptions of the staff members' personal qualities and behaviours, and the paucity of negative feedback. Three of the themes, reflecting positive evaluations of the GYP employee's traits and behaviours included *All good kickback*, *There for me* and *Straight up*. A theme of *Cultural matching matters for some but not others* was also extracted from the data. Statements

relating to the *Relationship* formed with the facilitator comprised another theme.

Table 2.

Young People Themes Categorised by Topic

Topics	Themes
Facilitator characteristics	All good, kickback
	There for me
	Straight up
	Cultural matching matters for some but not others
	Relationships matter
Youth characteristics	Some people listen, some people don't
	Ethnic identity is not strong
Intervention characteristics	A place that promotes change
	Services that help
	Improvements are possible

All Good, Kickback

Many of the participants described the Genesis facilitators as being relaxed and not strict while some used the colloquial term “kickback” to describe this quality. Some of the participants noted their appreciation of their key worker’s non-direct methods which allowed the young people to retain a sense of autonomy. The slang term the participants used to describe the facilitators appeared to represent the staff’s propensity to roll with resistance. Given many of the facilitators had not had motivational interviewing training it would seem this way of being with the young people was a natural quality of the facilitators.

She was all good, kick back, not on my back.

I: What’s he like when he talks to you?

P: He’s normal, he’s like normal. Kick back.

Some of the participants also referred to the *kickback* nature of their keyworker as being consistent across meetings.

I seen at the first week of counselling, oh first week of mentoring, that he wasn’t a strict person. And then the next week I thought, oh no, he probably was just happy the first time but this week, no but he just stayed the same personality every week.

Some of the participants made reference to how their key worker could be “kickback” and

strict at the same time which appeared to reflect an authoritative way of being with the young people.

He's cool... he's kick back but then strict at the same time. He doesn't command you to do stuff. It's like your own rule... He won't force you.

But what was cool about him is that when he found out that I got into trouble he didn't take it like a cop, he made it in a joke and a serious thing together.

A quality central to kick back that was described in most interviews was the facilitators' sense of humour. The participants described how the use of humour assisted them to feel comfortable and relaxed. While some of the participants referred to their key worker's attempts at being funny as "dry" (not actually funny) it was suggested that it was the facilitator's attempts and ability to laugh at themselves that made them have a good sense of humour rather than the joke itself. For many of the participants, their key worker's sense of humour increased their engagement through creating a fun environment that was enjoyable and where they felt comfortable. Some of the participants reported that they would most likely not attend if their key worker was too serious.

He's just crack up, always made me laugh (things I liked about him).

Just joking around, laughing (helps me to relax)... I'd probably just go for a walk, go home (if they were too serious).

Some of the participants mentioned how they liked the humour of the facilitators that involved good-intentioned teasing. One participant made the distinction between this type of teasing from a more detrimental type of "mocking" that was more abusive.

Kind of like they always joke around, usually when we play games and that on Xbox and the TV thing. But like you crashed and that, you're useless (they say), but just joking. Or they used to laugh at you but its fun, it's not like mocking, like being verbal abusing, it's like happy.

On the other hand one participant reported that good-intentioned teasing may be misinterpreted and lead to the other person becoming upset and violent. It would seem that while light hearted teasing may appear harmless, it may leave some young people feeling hurt which could result in a rupture to the therapeutic relationship.

Coz some people do take it to the heart. Like if you joke around next minute you don't know they're angry and they might just turn around and punch you.

Another quality associated with kick back that many of the participants interviewed described was exhibiting a positive attitude that was constant across meetings. For many of the participants, their key worker's positive manner made it easier for them to engage with the service. Some participants reported it helped with rapport building while some reported it made them look forward to upcoming engagements with Genesis. Some of the participants commented on how the positivity and encouragement at Genesis contrasted other environments the participants had been exposed to at home, school and amongst peers. The negativity in the other environments appeared to make one of the participants prefer to be at the premises of the GYP.

They encourage you to be good, do this, do that, and they complement you, 'oh you look nice today', and all that stuff. It's like oh, no-one talks to me like that.

That was the stuff I needed to hear (positivity), instead of hanging out with my mates, all you hear is... Swearing and, so I'd rather hear positive stuff than negative stuff. And over here was positive as.

There For Me

Another theme under facilitator characteristics included accounts where the young people felt the facilitators were *there for me*. Many of the participants made favourable comments regarding the availability of their key workers. The participants described the facilitators as being there for them in a variety of ways, including in an emotional sense for support, guidance and advice, and in another way of being there in a practical sense, such as through providing transport. An example of statements about being there was given by this participant:

But he always said if we needed help just pop around the office. Yeah, said just drop a text or call them when we need help.

One young person described how their key worker being there for them facilitated his self-disclosure.

I just knew he was there for me so I told him everything.

Many of the participants reported that they had received emotional support from their keyworker that helped them cope with current and past difficulties. The participants reported having regular “talks” with their key workers and other GYP facilitators that often included check-ins of how they had been and how they were feeling. Many of the participants noted receiving some form of advice from the facilitators that helped them to overcome and/or solve a problem.

I talked to her like when I'm feeling down or, I wanted someone to talk to, she was there.

With all my past history and what I've been through she is like a counsellor sort of.

Most of the participants reported some reliance on their keyworker's provision of practical support to enable them to complete their sentence conditions. This included being transported to various appointments, community work, court appearances and GYP activities. Some of the participants reported that their parents did not have transport.

... every time I needed her to pick me up, she'll pick me up, and then she'll just ask me question me how's my family, or what I've been up to... Pick me up for training days (rugby) if I had no ride, and pick me for the mentoring.

One of the participants described their key worker as being there for them and made a comparison to the absence of support they received from significant others in their lives. The support offered by the GYP key worker appeared to be more valued by the participant due to their lack of natural supports.

She picked me up from course when I had no ride... Not even my parents would do that.

Another participant described their key worker's practical support as a demonstration of them caring.

I like all the things they did, I just thank God someone cares, like to pick me up and help me do all my work.

Similarly another participant reported not knowing if they would have completed their sentence conditions without the support of their key worker.

I don't know how I would have done it without her... I'm very thankful...

The persistence of staff in supporting the young people to fulfil the requirements of their sentence was described by some of the participants. While one participant acknowledged minor irritations at the time, later reflection made the participant appreciate their key worker's persistence in helping them get through their sentence. It appeared the facilitators were able to push the young people to complete the requirements in a manner that was accepted.

She just made me attend (community service). Like I will text and say I got a headache and she will come [laughs] helped me get off my ass. She made me keep going.

Some of the participants acknowledged that the GYP facilitators were there for them over and above what was required in their job descriptions. One participant described how his key worker was there for him outside of business hours and had introduced him to his family and church. The participant noted how spending additional time with him allowed him to gain a deeper understanding of his key workers values which increased his confidence and belief in his key worker.

I found him very supportive towards me... he was kind of like a dad to me... And it was not until he started introducing me to his family and I met his children and he started introducing me to church. Then I found out what his vision was like and then I started realising what these workers do.

Most of the participants made reference to how the facilitators were respectful and non-judgmental despite the young person's past. This appeared to be a form of being there for the young people as the facilitators treated them as human beings rather than offenders. Some of the participants implied they held the expectation they would not be respected due to their offending history.

When they respected us (things I liked about my keyworker)... all the bad things we did, she kept it to herself and did heaps of things for us. When we needed things she'll be there for us.

Straight Up

Being straight up was another theme extracted from the data. Most of the participants referred to their key worker and other GYP facilitators in ways that suggested they saw them as being honest. Many of the young people discussed their keyworker's openness as a positive characteristic that aided the formation of a positive relationship. Furthermore many

of the participants described their key worker's honesty as constructive. Some of the participants defined honesty as a true expression of inner thoughts and feelings. Such expressions made the facilitators appear genuine and relatable while some of the participants reported that their key worker's transparency facilitated their own self disclosure. One participant in particular noted it was also important for facilitators to also share negative thoughts.

He just, he was just straight up... If he didn't like anything he'll just tell us. It'd be hard for me to be honest with him (if he wasn't being honest) 'cos he's not being straight up how I would be straight up.

Being straight up extended to the facilitators' sharing of personal experiences, where lessons had been learned, as a means of imparting wisdom on to the young people. Furthermore, some of the participants described the facilitators' sharing as a form of reciprocity that strengthened the relationship bond and facilitated their own self disclosure. While some of the participants also made reference to their counsellor doing more of the talking it was described as a positive process that helped them to overcome feelings of being alone and critical self-judgements while it also influenced their decisions to make positive changes.

I reckon it is (important for staff to share their own experiences). If you made a mistake, don't feel that you're the only one that's made a mistake because there's other people that's made mistakes before, but then they've learned from their mistakes. So I have to learn from my mistakes as well... those are the kind of stuff you need to hear.

One participant described how his counsellor shed a "couple of tears" in session when expressing her story. He reported experiencing sympathy for her and wanting to change because of it.

She told me about her family and that, yeah, like saying it was hard for her when she was a child at her place in the islands I think, in Samoa. I kind of listened to that and felt sorry for her and didn't want to be bad no more.

Cultural Matching Matters For Some But Not Others

Another theme under the umbrella of facilitator characteristics was related to cultural preference. Overall the young people's opinions in regards to matching facilitators by gender

and ethnicity were mixed. There were varying views identified in the data related to gender matching facilitators to the young people. Some of the participants described how it was difficult sharing gender related issues with individuals of the opposite sex. One male participant who had a female counsellor noted he disengaged from counselling due to being uncomfortable sharing.

It was pretty awkward... because I was talking to a female telling her all my life stuff... I didn't want to talk to her (reason for not attending all counselling sessions)... I just talked to youth worker (male).

In contrast another male participant described his sessions with a female counsellor as positive and described how he valued her experience as an older female who he perceived as a mother figure. This indicates allowing the young people the choice of genders may enhance engagement.

Oh, like she was my mum and I was the boy... of course she's got way more experience, than me, so of course she'll be the one that's best to talk to. She'll know more stuff than me.

Most of the participants reported that it was not essential for their youth worker to be of the same ethnicity. Instead many of the participants described other qualities that were more important for the relationship which included being caring, respectful and non-judgemental. However, many of the participants who reported it was not essential provided potential benefits for ethnic matching. For example, some of the young people noted having a key-worker of the same ethnicity may be needed when the young person cannot speak English. Some participants reported that while cultural matching may lead to a better understanding with cultural stuff they were open to all ethnic cultures with the condition that they would not get judged.

They will probably be more understanding with cultural stuff (when matched on ethnicity) apart from that I'm all good with anyone as long as I don't get judged.

A couple of participants reported it would be racist to have a preference for having a keyworker that was the same ethnicity.

I wouldn't say that (important for them to be same ethnicity), coz it might sound a bit racist [laugh] but everyone's like, if you show respect to everyone they'll show respect to you. And that's important to care for each other.

I think they should just stick to whoever jumps on board with you. It sounds like they're being a bit racist.

Some of the participants did describe their preference for a youth worker that was of the same ethnicity due to a greater shared understanding. The shared understanding led to greater levels of relatability and better interpersonal interactions.

Yep, yep it is important (cultural matching) 'cos, especially if he's got a bit of the same culture as me, then he'll know how to talk to you and how to, like, 'cos he knows your background and he knows how the culture is. So he'll know what to say and he'll know what to do, only because you have the same culture.

One participant reported a lack of familiarity and experience with Pākehā as the reason for their preference.

Cause I was brought up in Mangere and there was like no Pākehā... it's just that awkward moment when talking to a Pākehā I was talking to... But I do try and get along with them.

Another participant who reported a preference for cultural matching indicated a perception that Palagi⁴ were racist. Such a perception is likely to have an impact on the relationship if he were to be paired with a Palagi facilitator regardless of whether the facilitator is racist.

The difference between us and the palagis, some of them are racist.

The same participant reported his preference for being matched to a Pacific facilitator. This indicated that he viewed his own individual Pacific ethnicity as being a part of an overall Pacific cultural group that was connected.

No, no like (facilitator) is Tongan and (facilitator) is Samoan and they're all different cultures. But the only thing to me, they're all important because we're all Islanders. Whether it's Samoan, Fiji, Tonga, Vanuatu, Solomon Island, like we're all brothers and sisters.

On the other hand some of the participants mentioned positives of being paired with a key

⁴ Palagi is a common term used across Pacific ethnicities to describe individuals who are of NZ European descent.

worker that was not the same ethnicity. These included having the opportunity to learn about other cultures.

That it was good (being paired with non-matching culture), coz I learnt lots about her culture.

Not really (need to match), we could share stories with each-others about our cultures so give to each other more. (P1)

Relationships Matter

Another theme comprised statements related to the relationship formed between the facilitators and the young people. While arguably the notion of relationship is evident across themes the present grouping relates to occurrences in the data where the relationship and its components were made more explicit and appeared to be the most prominent theme in the data chunk. The complementary descriptions expressed by all of the participants of their facilitators suggested positive relationships had been formed.

Some of the young people made statements reflecting the value they placed on their relationship with their youth worker. The youth people described not wanting to rupture the relationship they had developed by behaving in an antisocial manner.

He taught me how to be honest to him... I didn't want to lie to him... I didn't want to break our bond.

Many spoke of the trust they had for their key worker and other Genesis facilitators. The concept of trust was described as an essential component in the relationship. It made the participants feel safe to disclose while some of the young people reported trust as a reason for their continued engagement.

I found it alright, they ask you personal questions but it stays in the room, just them. Unless it's something that's harm... It doesn't go anywhere else, but just her...

It was about being trustworthy; she was someone you could trust.

He was that type I could trust and I knew he was there... Was like how my dad used to talk to me when he was around...

Yeah, I do (trust them) I think that's why I keep coming back.

Reciprocity was another quality mentioned. While most of the participants made reference to a belief that the youth workers genuinely cared about them some of the participants shared how it was important to be considerate back. This included also showing care, respect, effort and a commitment.

Cause they care for you. Cause if they didn't care they wouldn't come and pick you up and that. They appreciate respect and that, and if they care for you, you should care for them because they're the ones that pick you up to do all your work.

Like they're committed to changing, changing your life. So with me and (facilitator), I could tell that he was, like, he was committed to changing my life. So I thought I'd put a little bit of effort in as well and that effort, like, made me want to change.

It was mentioned by some that the relationship took time to develop. The participants spoke of how they felt shy and were apprehensive in the beginning. As time passed they became more familiar with the GYP facilitators, they were able to feel more comfortable and were able to share and be themselves more. This highlights the need for interventions to have enough time to allow for the relationship building phase.

At first I was shy, and then when I got to know her I was confident being around her.

When you first meet them, you have to be a bit cautious. But then it's not until you know people, and, oh yeah, I know what you're like, then you can just sort of be comfortable around them... So you express yourself more.

When I first came I thought this is boring, then after that we were starting to get along. And like oh yeah, just because how we first come through you don't know anyone, yeah. I felt stink, but then when I got to know (facilitator) and (facilitator) then I said yeah, all goods.

Some of the participants likened the relationship they had with their key workers to those they had with a close friend or family member. Such a description indicated the strength of the relationships formed.

So yeah, he was kind of like a dad to me... I still see him every week now because he picks me up for church now. So yeah, kind of like family now.

Oh my relationship with (facilitator) was like we knew each other way back, coz like we actually talked to each other like we're best mates and stuff. What is it called when you build a relation, oh yeah like built a relationship of talking to each other.

Summary

It was evident across all interviews that the participants held positive interpretations of the GYP facilitators. Youth described the facilitators as consistently positive and relaxed and described this as increasing their engagement. The theme of *being there* was discussed by all participants in one form or another with the young people grateful for the emotional and practical support provided. Facilitator persistence also helped some of the young people complete their sentence conditions while many of the young people mentioned feeling respected and not judged. Going the extra mile for the participants was also evident in the data.

The young people appreciated their facilitator's honesty and were open to the learnings the facilitators had gained from their own experiences. While some young people reported a preference for ethnic matching the majority reported other characteristics, such as being cared for and respected, as being more important. Similarly there were mixed opinions regarding gender matching with only some participants reporting feeling more comfortable sharing with someone of the same gender. Nevertheless, it appears important to have choices as one participant attributed his disengagement from counselling to the therapist being of the opposite gender. It was evident in most of the interviews that the young people had developed strong relationships with their key workers and other GYP staff with many reporting wanting to preserve the bond and reciprocate in the relationship.

Youth Characteristics

The topic of youth characteristics was another predetermined topic in the interview schedule. Originally this category was limited to the exploration of cultural factors in the core interview schedule with questions such as, "What do you think about your culture?" and prompts such as, "How important is your culture to you?" This topic expanded when the young people spontaneously answered other questions by describing characteristics of themselves. It became apparent towards the end of the data collection and more so in the data analyses stage that youth characteristics was another predetermined topic in the interviews. The topic of youth characteristics comprises expressions of the participant's attitudes, values,

behaviours and environments. These were divided into two themes of *Some people listen, some people don't* and *Ethnic identity is not strong*. Many of the participants described characteristics of themselves, families and friends that influenced their readiness to change. The analysis also illustrated that most of the participants were proud of their ethnic culture, however, were disconnected from their culture in other ways.

Some People Listen, Some People Don't

While overall it appeared that the participants saw the change process as being influenced more by internal rather than external forces, some of the participants also made reference to how their family and peers influenced their actions. Many of the participants made explicit references to a personal decision to change. They indicated it was their own readiness that influenced their decision and process of change rather than the influence of a particular service provided by the GYP.

Oh it was more like in myself (reason for change).

Another participant mentioned how some young people do not listen to advice and was unsure what might help them to be more pro-social. Instead, the participant indicated that for some young people it is a stable internal disposition which prevents them from changing.

The guys that don't keep out of trouble got no ears... I don't know (how Genesis can help to keep friends out of trouble), some people listen, some people don't.

Another participant accepted sole responsibility for reoffending and was very clear it was not a failing of the GYP service. It was apparent the participant thought highly of the GYP, was grateful for the service and did not want to be seen as discussing it in a negative light. Interestingly, although the participant felt highly about the GYP it did not prevent her from reoffending.

It's not Genesis' fault (for my reoffending), it's my fault... I don't know (what they could have provided to support me not to reoffend) they've done enough for me.

This was supported by another participant who noted that enjoying the GYP did not directly translate to a reduction in antisocial behaviours.

Nearly every single mate I know came here... They reckon it was solid too... only some of them are keeping out of trouble, not all of them...

Some of the participants referred to making prosocial changes for their family. They noted wanting parents to be proud of them and feeling a sense of guilt for their offending behaviours. One participant referred to his own decision to change as influenced by his desire to do better for his family. The participant reported he did not want his family to view him in a negative light. It appeared the participant held some shame about his antisocial behaviours and valued the opinions of his family members.

I knew that the situation I was when, when I was always getting in trouble, like it impacted my family, mum and dad, nana, my mum's sisters, my aunties and my uncles. I would rather them look at me in a different way than, it was that part inside of me, like, oh I want to change. I hate this attitude because my family are getting affected by my attitude because my aunties and uncle or my nana were all getting affected. I didn't want them to know what I was like.

Another participant spoke of his decision to change more as resulting from a reflection or re-evaluation of his life and his future and his responsibility to care for his aging parents

I just think I'm still young, a lot of years ahead of me and I need to change. Looking at my parents, they're getting older and that, I need to help them out.

Many of the participants partially attributed the causes of their offending to association with antisocial others; peer influence. Some participants expressed their attempts to separate themselves from antisocial peer groups.

My cousins used to come pick me up and just go for a little walk around. First we were playing, next minute we were riding in a cop car.

One participant described his relationship with antisocial others as a way of gaining support. Upon reflection the participant reported needing the support that the GYP offered rather than the unhelpful support provided by his friends.

The boys I used to hang out with, they'd talk to you and stuff like that, they'd put stuff in your head, but really you're just trying to find that support. But you don't know what kind of support you're looking for so you go for it and if you meet the wrong friends and they're supporting you the wrong way you just sort of take it. But I don't really know what kind of support I was looking for, until I came here.

Ethnic Identity is Not Strong

Another theme under the topic of youth characteristics was *Ethnic identity is not strong*. Statements relating to the participants' description and evaluation of their ethnic identity comprised this theme. Overall the interviews indicated that participants experienced difficulty describing what their ethnic identity meant to them and their cultural beliefs and practises. This may have been due to their developmental stage as well as their lack of cultural knowledge. Most of the participants reported feeling a sense of pride about their ethnicity. Although all of them were unable to articulate why they were proud they appeared unwavering in their ethnic pride.

I'm just happy that I'm Māori.

I'm proud as to be Tongan.

A lack of cultural knowledge and understanding was demonstrated by most of the participants with some participants noting they would be interested in learning more about their ethnic culture. Given the unstable home environments many of the participants experience it may be that many do not have access to the cultural capital that would afford them the opportunity to develop their knowledge of their ethnic culture.

I don't know much about my culture but I'm proud to be Māori. But that's the only stink thing I don't know, like most of the background and where I came from.

An interesting point was made by one participant who appeared to have more cultural knowledge compared to the other participants. He commented that not all young people are interested in finding out more about their culture and that learning more about your culture only benefits those who are interested. He also noted that older individuals may be more interested.

Could be of benefit if the teenagers want to do it. Because you have those people who want to, who will want to learn and then those people who won't do it.

Two of the older participants were able to discuss some of the activities/protocols belonging to their culture however there was still the sense that their knowledge was limited.

We respect all our sisters and brothers, whatever they tell you. If you're the youngest whatever they tell you, do what they say.

Oh reading the bible, doing the chores and, like, the rules, about respecting the

girls... Oh and helping out the family... I don't know, sometimes I get lost, sometimes. I understand a little bit of the culture, just slowly learning, like at funerals and where you actually use the fa'a Samoan stuff.

Summary

Overall the theme *some people listen, some people don't* points to reasons outside of the GYP that influences pro-social change. These included a personal decision, and the influence of family and peers. The participants showed an understanding of the importance of their own readiness to change in their decision to stop offending. In particular, the theme highlights how the stage of motivation the young person is in impacts on the effectiveness of the intervention provided; young people who are pre-contemplative and do not see themselves as needing to change will not be receptive to intervention content that encourages positive change. None of the participants suggested it was the responsibility of the GYP to ensure the young people did not offend. All of the participants expressed favourable feelings regarding their ethnic group membership; however, it was apparent that most of the young people lacked cultural knowledge.

Intervention Characteristics

The expression of ideas relating to the intervention including its principles, modalities and treatment outcomes were grouped together under the topic of intervention characteristics. Questions that elicited these themes involved general questions like, "Tell me about the GYP" and, "What did you do at the GYP" and more specific questions regarding the different components such as "What did you like/dislike about the parenting programme?" Overall the analysis of the data suggested that the participants found it easier to recall and describe the qualities of the facilitators compared to programme content. This may reflect the strength of the relationship the participants developed with their key workers. It could also be due to a lack of reinforcement of programme content and skills. Central themes under intervention characteristics included *A place that promotes change* and *Services*.

A Place that Promotes Change

Most of the participants referred to Genesis as a place that encouraged change. They noted that it equipped themselves and their parents with the knowledge, skills and the space to make positive changes. One participant described it as a place where he was able to increase his self-awareness.

A place where you go... It's like a mirror a place where you go and look at yourself.

Another participant compared himself to his peers who had not been able to get on track.

I'm the only one out of my boys who is doing something with my life... Managed to try and hang in there.

Some of the participants shared their belief that they would not have changed if they had not been involved in Genesis.

I think that I would still be on the streets (if I hadn't attended Genesis)... that was my daily routine everyday get blazed with the boys.

Some of the participants also mentioned how their behaviours toward their parents changed due to the GYP. One participant reported how the increased respect he showed to his parents made him experience positive feelings and made him reconsider the label of being “naughty.”

I never used to listen to my parents properly but then after that, once we done this programme I started to respect them more, started to listen, not answer back and yeah, and just being a proper son instead of a naughty son... it feels cool (being respectful). Like I wasn't supposed to be naughty in the first place. I feel like this is just the way of how to treat your parents, because they brought you in this world and without them you wouldn't be here.

Oh yeah we're (dad and I) communicating a lot now (since completing parenting programme). We never use to communicate, not at all.

One participant described positive changes they had made after attending the parenting programme which included listening to their parents more.

I never used to listen to my parents properly but then after that, once we done this programme I started to respect them more, started to listen, not answer back and yeah, and just being a proper son instead of a naughty son.

Some of the participants made reference to change not occurring immediately. In particular one participant who described his journey towards positive change attributed his progress to his continued engagement with the programme and meeting new people.

When I first came in there I was acting all gangster and thinking what am I doing

here? Can't wait till I go home after this has finished. But then I carried on doing the programme, I met heaps of people on this programme and then, and I just started changing.

Some of the participant's described changes in family members that they attributed to the programme. In particular one participant reported how the parenting programme led to changes in his parents alcohol use.

Then they were going deeper and deeper and saying how alcohol can affect your parenting and stuff like that. Then my parents just start to discuss it more... Yep (they changed their drinking)... some parents need to hear that kind of stuff that the programme was about.

One participant reported that having the support of their family was the main thing that would have helped him to not reoffend rather than GYP support. This indicated the importance of helping families to support the young people.

I: What would it have taken for you to not reoffend again?

P: Family support... Yeah, that's all I can think of, family support.

Services that Help

The specific services and content that addressed offending and/or other needs was another theme identified in the data. Many of the participants described the content of their counselling as addressing offending and non-offending needs. Many of the participants reported discussing content with their keyworkers and GYP facilitators that covered a range of topics relevant to their offending needs. In particular topics covered in counselling included a check in, alcohol and drug use, peer relationships, and schooling. Some of the young people made reference to the facilitators giving advice to stay out of trouble.

We talked about problems at school, out of school. My drinking and drugs and smoking. Gang affiliated stuff.

Trouble, like keeping away from trouble (what we covered in counselling) yeah that helped me get through trouble, coz I was going through trouble (stolen cars, robberies).

Some participants described how they learned about problem solving techniques and the

consequences of their actions.

The programme (mentoring) takes you through a lot of activities where you need to work as a team and need to know each other's weaknesses and their strengths in order to achieve whatever goal they had planned for us.

One participant reported how they were able to use their learnings at home where they considered the consequences of their actions.

We learned to plan your next step, coz you need to think before you do something... One day I was going to go out, and I was thinking um coz every time I go in there my mum will get worried, or she'll stay up every night just waiting for me, and I was thinking of that I just stayed home. Just to make her feel better.

Learning how to communicate was another skill that was described by some of the participants which they reported learning in the mentoring and parenting programme.

Oh, just like communicating with people and if there's a problem that there's always a solution.

How to communicate with your children and how do you talk to them properly. And, like, if they get in trouble then how do you handle it, stuff like that.

One participant reported how the discussion of rehabilitative content, more specifically alcohol was uncomfortable for his parents. However although they were uncomfortable at the time it appeared to trigger further conversation that led them to reduce their drinking. Furthermore the participant thought it was important that his parents were advised of such things. The participant also spoke about how his mother spent more time caring for her grandchildren while his father got a job.

And, oh, 'cos my mum and my dad, they're drinkers, they're allowed to drink alcohol, so that was a bit awkward when they bring up the question, oh does anybody here drink?... they just kept it to themselves, but they knew that they were getting put on the spot, but, yeah. And then they were like, talking about how alcohol affects and they were like, yeah, yea, yeah, we know this, we know that, enough of that. Then they were going deeper and deeper and saying how alcohol can affect, like, your family structure and your parenting and stuff like that. Then my parents just start to discuss it more than, like, saying oh yeah, yeah, I drink, I drink. And then after that they're

open ears, my parents, open ears.

On the other hand some of the participants were unable to provide examples of content in counselling and mentoring that addressed offending needs. One participant clearly stated not covering rehabilitative needs in their counselling sessions as the death of his friend was prioritised as more important.

It (counselling) wasn't for any criminal stuff it was just for one on one.... Cause my mate just passed away and they thought I needed counselling for something.

While one of the younger participants described Genesis as a place where he would just come to have fun, it was also suggested by some of the participants that just being at the GYP premises prevented him from engaging in antisocial activities. This indicates that providing a pro-social place for the young people to hang out was addressing offending needs as he was engaging in pro- social activities.

Just come here and play, talk. Just bringing me here to play keeps me out of trouble... To me it's just like a playground, just come and play.

It kept me off the streets...

Many of the participants also made statements that described the non-offending needs that were addressed at the genesis programme. These needs could be summarised as mental health, developmental and spiritual needs. One participant reported feeling suicidal while in the programme and reported that his key worker was able to help him through it.

Like, coz I was suicidal ages ago... She just talked me through it.

Many of the male participants made reference to the life skills they would learn in the mentoring programme which they enjoyed. These included hygiene, shaving, taking pride in their appearance, respect for women and sex education. It appeared for many of the young people, that these areas had not been addressed in their own families.

They teach you about hygiene, how to shave and that, nice clothes to wear. Class, they taught us about class.

Oh and we'll learn, we'll learn stuff on the programme too, like we'll learn how to be a better man, learn how to talk to ladies properly. They'll teach you how to dress up... use a condom when you have intercourse or something like that, or when you

shave, like use a, for men, use a cloth.

Some of the participants also mentioned becoming involved in church through the GYP. The young people who went to church described it as a positive experience that increased their self-awareness and confidence. They also gave favourable descriptions of other church members who made them feel welcomed. Some of the young people reported being asked to go but declining. These young people did not appear to mind being asked.

I: how do you feel about that church?

P: Good. I feel, more confident and more self-aware of situations that go down. It's made me more peaceful.

I felt really comfortable with her, she invited me to church and I went to church with her. I really liked it because the people were nice to me and I felt welcomed.

Many of the participants referred to enjoying food with their key worker and during the programmes. It was described as a way to break the ice and something that was done during conversations with the facilitators. The participants described this favourably with one participant reporting that it was the main thing they enjoyed about the parenting programme. Furthermore, some of the participants who completed the community service at the Salvation Army food bank reported enjoying it due to being able to eat the food. Overall it appeared the provision of food increased engagement.

He always used to take me out for feeds and we would just talk (things cool about my case worker).

The food that you can just eat and the games and activities that you can play here (things I enjoyed).

It was pretty fun (community service). Like as soon as the holidays started it was straight community service the whole week... it was the food bank so they had heaps of food. So when lunch time comes you can grab a packet of chips or a drink in the freezer.

Well to be honest I mainly just liked the feed at the end, coz we always had pizza.

Improvements are Possible

Most of the participants were unable to suggest possible improvements to the Genesis Programme. Prompting questions were utilised in all interviews in an attempt to draw out suggestions for developments the GYP could put in place. Most of the young people reported that either the GYP did not need to change or that they did not know how they could be improved to better serve young people. Nevertheless some of the participants did offer improvements which related to having more activities and more time.

Pull out more activities for youth... Touch, tag...

I think it's just time, more time (for the mentoring programme)... because it was like two, I think two hours or an hour.... Yeah, extend the time. Especially if you're doing things like amazing race and all that sort of stuff. You need more time for that.

Another participant reported having more facilitators would lead to greater changes in more young people's lives.

Just more workers that have the same passion as these guys over here, because the more workers there are the more you can change people's lives...

Summary

The participants gave positive evaluations of the GYP as an intervention. GYP was described as a place that fosters and inspires change and gives them the opportunity to re-evaluate some of their decisions. They noted that change can take time and that they also witnessed changes in their family members. It was revealed that the GYP targets both criminogenic and non criminogenic needs which at times are possibly based on assessments of what is most important for the young person at the time. The participants described GYP as fun and as a place that keeps them busy and away from trouble. Participants were not forthcoming when asked about possible improvements, however, those who did offer suggestions reported GYP would be better by having more fun activities and more facilitators to help others.

CHAPTER FOUR

ANALYSIS OF FACILITATOR FOCUS GROUP

Five GYP facilitators participated in the current focus group. The focus group explored the facilitators' perception of the GYP and its services. In particular the focus group sought to elicit responses relating to aspects of the GYP (including GYP employees) that influenced engagement, the therapeutic relationship and positive change. As described in the Methods chapter a realist epistemology was used as the backdrop to the thematic analysis methodology outlined by Braun and Clark (2006).

Table 3 displays the themes classified by the predetermined topics covered in the interview schedule.

Table 3.

Facilitator Themes Categorised by Topic.

Topics	Themes
Facilitator characteristics	Being there
	Not faking it
	Unconditional positive regard
	Humour
	Personality
	Relationship
Youth characteristics	Social issues
	Parenting
Intervention characteristics	Everyone's young person
	Values
	Responding to need
	Commitment to ongoing learning
	Restraints

Facilitator characteristics

One of the predetermined topics in the dataset related to the facilitator characteristics. The questions that initiated this discussion included, "What are the qualities that a youth worker needs to have to work effectively with young people?" This theme included the traits and behaviours of facilitators that were understood as important factors that either improved or impeded engagement, the relationship, and/or treatment outcome. The thematic analysis

categorised the topic of facilitator characteristics into the following themes: *Being there, Not faking it, Unconditional positive regard, Humour and Personality.*

Being There

A central theme evident in the data was the importance the facilitators placed on being available for the young people. The facilitators stated their commitment to keeping pre-arranged appointments with the young people. One participant noted that the young people have had bad experiences with other helping professionals not following through. The participant reported that if appointments are unable to be kept, then communicating and being apologetic is important to maintaining the relationship.

If we say we're going to be there, we'll be there... I know a lot of young people I've worked with, they get frustrated at their past social workers because they fluffed them around. Oh yeah, they said they were going to come get me, I haven't seen them in two weeks. You know, so it's just like giving them a call, how are you, sorry I can't make it today but definitely we'll reschedule.

One facilitator reported that “being there” meant supporting them in a practical sense through attending various meetings consistently.

I think on a practical level it's just being there. So we try and attend every court meeting, every FGC, every school meeting, every meeting there is that involves that young person so we keep that consistency.

While being there was important, most of the facilitators agreed it was important to set boundaries in relation to their availability and making this clear to the young people in the beginning. One facilitator reported that some young people do attempt contact outside of these hours as they have developed a good relationship, but at the same time it is because of the relationship that they accept not being contacted back. The facilitator also reported having boundaries was necessary for his own wellbeing.

We all have work phones but we just say to our kids if you need to get hold of me it's between 9 and 5. Some kids you build really good relationships with, they text you on the weekends... You just don't respond. And the next time you see them you say oh I got your text but you know I can't text you during the weekend... you've got the relationship but you have to keep that boundary. It's just for your own sake. Like for me, I turn my phone off in the weekends... That keeps me sane, otherwise I'm

always looking.

In contrast to the discussion on setting boundaries there was discussion around going over and above to what was expected in their job descriptions. In particular, one facilitator reported a personal decision to invite the young people to after-hours activities, most often church related, which he believed made a difference. It appeared that while all of the participants agreed a willingness to go the extra mile was an important quality to possess, the definition of what it meant to go over and above varied across participants.

For me, we invite them to outside of work stuff, the over and above stuff that really helps them.

Not Faking It

The facilitators also discussed how being honest with the young people was an important quality to display to be effective. It was generally agreed amongst the facilitators that the young people were adept at identifying when they were not being genuine. One facilitator reported that being honest is about taking responsibility for mistakes as well.

Just being honest like if you let them down you let them down, but you're honest about it and not faking it. Coz they can read fake, they're not stupid, they can see right through you kind of thing.

Another facilitator reported that being authentic is when their behaviours reflected inner qualities or when they were being themselves.

We're authentic, what you see is what you get. You know, being real...

Being honest through the expression of less desirable emotions, such as expressing disappointment when young people reoffend, was also indicated as a necessary aspect of being genuine.

We have to tell them when we are not happy too as they will know if we are pretending... So yeah, so we let the kids know we're disappointed when they reoffend.

Unconditional Positive Regard

All of the facilitators gave examples that represented the *unconditional positive regard* they held and displayed towards the young people which was another central theme extracted from the data. The qualities that contributed to having unconditional positive

regard included being non-judgmental, loving, consistent and displaying a point of difference.

One facilitator described how the young people might anticipate negative judgements from the GYP facilitators due to their offending. The facilitator emphasised that the team saw them simply as children rather than as offenders to which the group agreed. This appeared to be an example of the facilitators' empathic and compassionate qualities as demonstrated through the understanding demonstrated of the young people's experience and the importance placed on needing to ensure they did not feel judged.

They might think 'I'm coming to a place and I know I've got in trouble with the Police and they think I'm a bad kid'. Whereas we just say oh you're just a kid, we don't see you as that boy. What we see is the 12 year old, the 13 year old, the 16 year old.

The term love was used throughout the interview as a programme value and also as a feeling the participants experienced for the young people. Demonstrating "unconditional love" as one facilitator coined it was described as a way of overcoming potential feelings of anger towards the young people. Such practises may be related to a common therapist goal of remaining empathic and self-aware and not reacting to possible countertransference feelings. The facilitator reported the importance of showing them they were cared for in their journey to change.

I can either choose to get angry at that young person and say what are you doing back here, but you've just got to practice that unconditional love and being patient. Showing that you care about them enough to be there to help them change.

The facilitators reported how it was important to remain consistent in the positivity displayed towards the young people regardless of their actions, which reflected the unconditional component of unconditional positive regard.

So we just keep being that same person even though they still keep getting in trouble. They still come back and it's just the same message we're feeding, we don't change it. I mean the intervention might change but the person and the people delivering are the same.

Some of the facilitators also discussed how the young people often experienced criticism in other areas of their life from the Police, CYF social workers, parents and teachers. One facilitator noted that being critical was not effective and described how Genesis actively

seeks to be different from the norm.

What's the point of growling them when Police do that, CYFS do that, parents are doing that, the teacher's doing that. Yeah, so it's just how we go back to what's the difference here and that's the uniqueness of it... that's already been done and realise we don't want to repeat it.

Humour

Another theme was the use of both verbal and non-verbal *humour*. Humour was reported by most of the facilitators as an essential ingredient in developing the relationship with the young person. It was described as contagious and discussed as an effective means of breaking the ice which created a relaxed atmosphere.

Not always having to be so serious about it, just relax. And that'll be seen just in your muscles in your face. If you relax and you just laugh and smile at these kids or with them, that body language speaks volumes as well as the echoing laughs that go down the corridors of this place.

I think humour's a great way that we use to break that awkwardness when we first see them.

The use of humour was also described as potentially prompting positive memories the young people experienced with their own families. It was suggested that humour added to the sense of family at Genesis as it mirrored the light hearted and playful banter that tends to occur in families.

Also the other type of humour is the humour round here creates the family feel you get at home. And a lot of our kids it might remind them of a time when mum and dad were both there and all those happy times. And it's just like a family, they just muck around, joke with each other, tease each other. Yeah, it's a spirit, a nice warm spirit about families that builds around here.

The participants also discussed how there were different types of humour that were appropriate in the different relationships (colleagues, young people and their families). The use of humour in these different relationships appeared to be based on implicit and shared understandings. Incorporating cultural nuances into humour was also discussed as an effective means of connecting with young people and families.

So there's staff humour, young person humour, the family stuff when we're visiting homes. You know, your culture and your language, you'll pop something in that they click and go ah and cracking up laughing. You know, just so that they're at ease, hey we are genuine, we're here to help.

Personality

All of the participants agreed that a person's ability to effectively engage and work with young people was influenced by their personality and attitude. One of the facilitators reported that while it was relatively easy to obtain a degree in the social field a person's personality would be the determining factor that influences the effectiveness of the intervention.

You also have here in terms of the yes you can kind of attitude, the positive stuff... every social worker can be qualified, every social worker can have whatever degree, but the person in itself, the personality would always be the difference.

The participants agreed that the characteristics needed to engage young people were natural, signifying a belief that some individuals are naturally better equipped with the qualities required to successfully engage with young people. Furthermore it was indicated that these qualities could not be obtained through educational institutions. It appeared the facilitators were referring to the internal innate qualities of facilitators that are associated with an enhanced ability to form relationships with others.

It's just something natural (how you learn to engage youth), you can't really learn it.

Because a lot of the extra stuff that I feel like we do, it's not stuff we really learn from anywhere, from school or from uni. It's like how we act towards the kid...

Relationship

The theme of *Relationship* that was extracted from the data was included under the facilitator characteristic topic as it was seen as dependant on the qualities of the facilitator. The relationship theme included expressions that described the relationship between the facilitators and the young people. All of the Genesis facilitators described the importance of building a positive relationship with the young people. The male participants tended to describe their relationships as a brotherhood that was based on trust and remained regardless

of antisocial activity and gang involvement.

It's very strong, brotherhood, trust and the attitude. Like they may go back to their old ways and be heavily involved. I know some youth are like heavily involved but as soon as they see their social worker, you know, the colours drop and the Genesis family thing comes out.

Discussion around the importance of the relationship revealed it was considered more important than the completion of administrative work which often involved a tick the box approach. There also appeared to be a belief amongst the participants that their relationships with the young people were better in comparison to other professionals.

They'll mention our names and stuff, smile, and then he'll look back at the judge and the judge will go (speak) and the other people, probably from other agencies (will speak). Even though they've written a fantastic report, it just goes to show what's more important, the value of the relationship in terms of the young person or what they've ticked the box and said that they've done.

Some of the participants described the enduring nature of the relationships they created with the young people. It was believed that some of the young people did not have other significant role models in their life that cared for them.

I've seen boys that I've worked with and that I've still got a relationship with, they've realised that there's someone that cares about them, and someone that cares if they do wrong or do bad or whatever because most of them don't have someone that cares.

Participants shared how their relationship with the young people helped to reduce their antisocial behaviour as they did not want to disappoint staff. It was also noted that many of the young people did not have others in their life that cared if they reoffended.

If they reoffend no one's going to care. But now they've got me in their life they're like man I don't want to let [facilitator] down, all of them that love me over there I don't want to let them down.

All of the participants agreed with the notion that it takes time to develop the relationships. They noted the investment of time and effort was needed to see results.

Sometimes you'll get a hello on your first visit, the second time you'll have a

conversation, you know, and so on. So the quality and the time that you invest in your young people and their families the results will come back tenfold.

Summary

The topic of facilitator characteristics comprised facilitator qualities and behaviours that were deemed important in the engagement of the young people referred to the GYP. Discussion regarding the relationship between the participants and the young people was also included under the umbrella of facilitator characteristics. Overall the participants described positive experiences of their interactions. They described how being consistent and going the extra mile fostered a positive relationship. At the same time boundaries for availability were needed to protect the staff members' wellbeing. Being honest about feelings and owning up to mistakes was deemed vital as youth can sense when someone is not being genuine. Demonstrating unconditional positive regard through being compassionate and non-judgmental in a consistent manner was described as one of GYP's points of difference. The use of humour created a relaxed and warm atmosphere where young people felt comfortable while different types of humour were appropriate in different relationships. The participants described the development of a strong relationship as crucial. They noted it takes time to develop and described the relationships as positive and enduring. The young people were described as also valuing the relationship and that this relationship had an impact on antisocial behaviours to avoid disappointing their facilitator.

Youth Characteristics

Another topic predetermined in the data was youth characteristics which included themes of *social issues* the young people faced and the theme of *parenting* which described characteristics of those young people who had entered parenthood.

Social Issues

The *social issues* theme included factors that often left the young people at a disadvantage. It appeared to be an expectation that those being referred to the GYP had experienced some form of social stressor or disadvantage. All of the participants expressed empathy and compassion for the young people from disadvantaged and impoverished backgrounds. Of particular concern were the lack of male role models and poverty.

The participants discussed that for most of the young people there was an absence of male role models in their lives which was regarded as having a negative impact on the young

people. The participants also discussed how a strong point of the GYP was the high number of male employees as it provided examples of positive male role models for the young people.

So even though it's dominated by males (youth offending) the stats show that eighty percent may not have a male role model or figure in their family. And it's prevalent not only in research but also in courts. You only have to turn up to court and you'll realise its ninety percent grandmothers, mothers, or grandfathers if you're lucky.

Other agencies women are quite prominent whereas in Genesis here we've got quite prominent, strong males. Which is a good contrast because a lot of our PI and Māori families at home the mother figures are usually the one that rules the nest. So it's a nice chance when they come to our programmes and they see strong male role models... There are good male men in the world.

Poverty was discussed as impacting most of the young people who presented to the GYP. One participant described his encounter with young people in the community who enquired about how to get food parcels. The participant implied that they wanted to attend Genesis to receive a food parcel. Reference was also made to the receiving of better care at the GYP compared to what was provided at home.

It was funny and kind of sad as well, but one of the kids I was working with, I'd finished working with him and then I met one of his little peers on the side of the road. And he was like oh did you used to work with so and so, and I was like yeah. And he was like 'if we come there does that mean we get a box of food at Christmas?' And I'm like yes [laugh]. But that's so sad... It's obviously better than what they've got at home, what lifestyle they live is not half as good as what they get at Genesis.

However, some young people appeared to have good family and living situations. One participant described how it was more disappointing to see young people, who they perceived as not experiencing social problems, enter the GYP. This participant felt more empathy for those who had unstable family situations or who had parents who were not accustomed to western society.

Cause each kid that comes through has a different history. And sometimes the most disappointing ones are the ones that come from good families, are involved in youth

groups, are well off... I get a bit more disappointed because everything's on a platter for them and yet they still decide either through peer pressure or whatever. Whereas others who have no food, can't get a school uniform, and have a bit more pressure than other kids I kind of feel for. But then I get a bit picky because I know some of them who are well off should know better, if they're third generation and so forth. Because they can't come back and say oh my mum and dad couldn't speak English, or there's something missing in how their family life is.

Parenting

Another theme under youth characteristics included parenting. The participants discussed how becoming a parent led to positive changes. They reported witnessing young parents display warmth to their children that they likely never received from their own parents. It was also suggested this parenting may help to stop the intergenerational cycle of antisocial behaviours.

We've seen when our past ones come in and they have kids, but they're a totally different young person, like a different person from when we knew them a couple of years ago. I mean they're attentive to the child, they're loving towards their child. And for us who know some of our kids quite well, their childhood, they probably never got that from their own dad.

It's the generational cycle; they try and stop it (children following same footsteps of parents). It's the beginning of stopping that.

Facilitators also discussed the negative view society has about teenage pregnancy. It was agreed that although society may see teenage parenting negatively it can have protective properties as they have more reason to make prosocial changes.

Often sometimes, teen parenting is seen in a negative light because they are so young. Sometimes it is a good chance for them to now actually step up their game, oh I'm a dad now, I can't muck around, this is my child, this is my son, this is my daughter.

Summary

There was a general view amongst the participants that the young people who entered the GYP had experienced some form of social disadvantage. The participants described their

compassion for the young people who experienced poverty and the lack of a male role model. Facilitators felt reduced empathy for young people who did not appear to come from disadvantaged backgrounds. Entering parenthood was described as triggering positive changes for some of the young people. It was also suggested that parenthood can be a protective factor for future generations.

Intervention Characteristics

The topic of intervention characteristics refers to both formal and informal structures, processes and values of the GYP and the Youth Justice system. While the question that prompted the discussion was, “What are the key components of the Genesis Programme”, the dialogue was ultimately steered by what the participants deemed important. This subsequently led to a lengthy discussion of the systemic structures and processes that impacted on the delivery of their services. Intervention characteristics were categorised into five themes: *Everyone’s young person*, *Values*, *Responding to need*, *Commitment to ongoing learning* and *Restraints*.

Everyone’s Young Person

A central theme that was a view shared by all of the participants was that the young people were *everyone’s young person*. The participants agreed that the young person was a client of the team rather than an individual facilitator and reported that they all made the effort to connect with the client as they believed the approach was most effective. This approach may reflect the traditional Māori and Pacific belief that it “takes a village to raise a child”.

It’s everyone’s young person... and everyone works for that young person. Here it’s our client, you know.

Because it works (reason for looking after each other’s clients). Pastor says something; teamwork makes the dream work kind of thing.

One participant also mentioned that even those in senior roles would offer support to clients to which the other participants agreed.

The leadership titles, that’s all it is, just a title really. But when it comes down to doing the hard yards, even our boss gets his hands dirty as well. Oh yeah, we’ll come and he shows.

One participant described how the young people attending Genesis often possessed complex needs. Having all facilitators contribute to the care of the young people allowed them to use their unique perspective and skillset to further support that individual. As a result the young person's complex needs were better addressed.

I've seen some of our really difficult kids. The word wraparound is often used, but we really do wrap around this young person. Not just because of the different services we offer but like our whole team, every person will involve that young person whoever he is or she is, in basically everything we do... every time they come in we each try and talk to them, just input something different from each and every one of us.

Values

While the theme of values is arguably reflected across other themes, specific codes were also extracted that appeared more directly related to GYP values. The participants discussed how all the GYP employees were religious and demonstrated the values of GYP at a personal level. Furthermore fundamental values that were described as missing in other programmes were that of love, care and spirituality. It was emphasised in the discussions that personal values should match the GYP values.

So Genesis here, the environment's different. The values that we have, have to come through the workers. Servant hood, integrity, excellence, unconditional love. And if you look at the social models, one thing that's always missing or is not highlighted or emphasised enough is love, care and if not the spiritual side.

One participant commented on how the personal values of the team members influenced the team activities the facilitators would engage in after work which often included family based activities rather than activities involving alcohol. The upholding of virtuous values appeared to be described as positive attribute of the team that set them apart from other teams.

I think one good thing is that a lot of teams may go out for drinks after and all that kind of carry on. But here it's different; it's more like the family stuff.

Responding to Need

All of the participants reported they did work with young people that did not directly relate to their offending needs. There was a general discussion amongst participants regarding

the provision of services matching needs rather than their prescribed plan. The consensus was that the delivery of additional support and services, which addressed other areas of the young people's physical and emotional needs, was also required to achieve positive change. There was also agreement that the care they provided needed to be delivered in a manner that matched the young person's readiness.

So Genesis looks at other ways of working with families and young people, so like what may be missing at home they'll get here... it's at their pace and what they're comfortable with. So basically you're treating them like a human being.

Some of the facilitators commented on how Genesis were welcoming and inclusive of the families in their interventions despite this not being a part of the prescribed plan or part of the work they were being funded to complete.

Here you're welcomed with open arms, male, female, mothers, fathers. Cause at the end of the day the plans state young person, not the mother, not the dad. If you're in YJ it doesn't say to do family therapy with mum or dad or with brother and sister, or take them to Rainbows End or find them something to do, or give them boxes of food at Christmas, give them Easter eggs at Easter, joking around with them during Valentine's Day and all that kind of stuff.

Participants gave examples of the needs young people had which included areas related to psychological, behavioural and social needs.

We would work on self-realisation, confidence, self-esteem, basic needs, shelter, family, love, social connection all those things.

Furthermore, all of the participants agreed it was important to validate and affirm the young people to improve their poor self-image. It was suggested that this could be achieved through rewriting of the young person's narrative to replace the label of "youth offender".

Constant affirmation building their positive image of themselves... Creating a new narrative of themselves.

Commitment to Ongoing Learning

Another theme extracted from the data included commitment to ongoing learning. Overall, upskilling and expanding knowledge through in-house training was reported as an important means of improving the services provided.

I'd like more in-house training as well to develop our skills, so our practitioners don't go to a uni but they could come here and work around work. It would add to our own practice in terms of screening, risk assessment, and need assessment.

One participant noted additional training would improve their contribution in settings amongst other professionals and indicated a perception of being judged for not possessing certain formal qualifications.

It would add value to our practice in terms of, compared to other agencies when you go to those professional meetings you can talk on that level as well. Like you can say yeah but this, this, this rather than just say on a level that makes you look beneath them because we don't have the piece of paper or we don't have that registration.

Furthermore, one participant reported that a one size fits all training approach was not suitable as completing training that covered existing knowledge was tedious. It was noted that they were often unable to complete the training they wanted and instead had to fund their own personal development which was expensive.

It's hard when you go to a workshop and the group is too diverse in terms of qualifications... but we do it anyway because it's compulsory. And so it becomes boring, and the ones we do want to do we have to pay for them and it's a no because it's too expensive... So it's almost individual self-development, it almost has to be slightly more tailored.

Some reservations regarding training were also noted as there was concern amongst the participants that the time used for trainings would result in less time to work with the young people. Offering training outside working hours was a proposed solution.

When caseload gets big there's probably less time. It would have to be after hours stuff.

All of the participants agreed that learning about mental health would be valuable.

Mental health stuff would be good to know. So knowing more about suicide. Maybe just being able to be more aware or seeing the signs of that kind of thing.

Restraints

Another theme under the umbrella of intervention characteristics included instances where GYP facilitators believed they were unable to perform their job effectively due to restraints: matters outside of their control. Such restraints included those imposed by structures, processes and a lack of access to resources. The discussion regarding restraints took up a significant portion of the focus group time which may be due to the shared experience of frustration amongst participants. All of the participants made comments related to a lack of resources negatively impacting on their ability to deliver an effective intervention.

The inadequate time period that was set by outside agencies to complete plans was a salient example of a restraint that prevented facilitators from effectively addressing the young people's often complex needs. One participant expressed frustration with referrers' unrealistic expectations and reported that young people were reoffending because of the short time period of engagement with Genesis.

The referrers expect us to work magic in three months. It usually takes longer than that so eventually they'll end up, like some of them end up coming back

Another participant described how the time required engaging and building rapport used up a significant amount of the time period. The participant noted he would continue working beyond the time period as they had promised to help.

One of the difficulties of a three month plan is that the first month you're chasing around for them, still building rapport. Second month they're finally attending appointments, finally got a schedule. And then third month you're exiting. So that's when the contract ends, but then we're still working because we said we're going to help.

While on some occasions facilitators would continue to see clients outside of their designated timeframes in an attempt to deliver an effective intervention, cases would ultimately have to be closed due to limited resources.

And you start building this relationship... but I've actually got to close you now because I've got these cases coming in... So it becomes unfinished business and sometimes it's like oh yeah, he's coming back, or she's going to come back.

Moreover the challenge of continuing to support the young people beyond their sentence period as they were not mandated to continue attending was also discussed. It is likely that

the group of young people that choose to stop attending after their sentence end date is the group that would benefit most from further support.

But then the flipside of that is that we have no teeth to continue on. Teeth in terms of they have to do it, because you see them.

Having longer plans was described as allowing more time to complete the necessary work resulting in better outcomes. One participant noted that having short time frames created a “tick the box” attitude.

It's different when you do a year one, you can see the change that does because it's long term and you have more time to do things. You were able to fail and miss appointments because you could reschedule. With three months no, we've got to do it now, do it now, tick the box.

Furthermore, all agreed that developing plans according to offences often failed to address other significant needs. It was noted that these plans were developed through systems that did not include individualised assessments of need or consider the history of young people in any depth.

Something funny I've realised is that the plan is always about the type of offence that they've done. So the worse the offence the more they need mentoring, that's the way they think about it... But it's not, sometimes it's just the on the top stuff, they just do a little crime but there's a massive backlog of what they deal with... So it's behind the story, we read that story but they don't.

Participants noted the need for professionals who assign plans to spend further time with the young person prior to making decisions. Furthermore, one participant reported CYFs and the Police do not recognise the value of the work the GYP does with the young people.

If lawyers and CYFs social workers and Police were able to come out to mentoring groups and see the value that we do in terms of the young person, because the more time we spend with them the more we see the person, who they really are. I don't think they see that.

One participant made reference to the approach of providing services or increasing the provision of services only after an offence which they implied was less effective than intervening earlier.

Sometimes I question why do we wait for something (reoffending) to happen and then act, when you've got people at the ground who know what is needed and yet we're always pushed to the side.

As demonstrated in the above quote participants found it challenging not having their views heard. There appeared to be a sense of helplessness as the participants did not believe they had control over the situation or that expressing their views would influence decisions.

And you know it's going to fail but it's hard for you to say anything because they (courts) have the statutory powers to make that call. And then you just go it's kind of like why waste our time. It's not a waste of time but in terms of the system, yeah.

Participants also reported the challenges of not having the resources to address social needs and expressed frustration at bureaucratic and inhumane processes that prevented young people and their families receiving help for basic needs such as food.

It just makes it harder when systems restrict what you can get. Some of our families need a food parcel, just to help on this day. Our food banks will say have they gone to WINZ, have they asked for the da da da, we need to do a form. And I go they just need food for today. But nah, sorry can't help you.

Summary

Participants reported it was GYP practice for young people to be the client of all facilitators. This caused the young people to feel more comfortable whilst allowed the participants to make use of the different team member skill sets to support the young people. The values of the GYP that were considered important were religion, love and family values. Responding to need was seen as necessary in promoting positive change. The participants also spent a significant amount of time discussing the various restraints that limited the services they could provide. It appeared that they would prefer to have more autonomy and input in the intervention plans which they would base on additional information. Overall staff upskilling was described as necessary to reduce negative judgement from outside professionals and to improve their services.

CHAPTER FIVE

DISCUSSION

Overview

A wealth of existing literature suggests, to reduce rates of reoffending, evidence-based interventions addressing rehabilitative needs must be provided. To maximise effectiveness interventions should be therapeutic, culturally appropriate, community based, inclusive of family and address needs across multiple life domains. Equally important is the ability of service providers to engage young people who offend in interventions seeking to elicit positive change. To date there is a paucity of research investigating the perspectives of Māori and Pacific young people who offend and go on to complete rehabilitative interventions.

The current study aimed to contribute to the gap in research through the use of qualitative methods as they are particularly useful for investigating topics underrepresented in the literature. Interviews were conducted with 15 Māori and Pacific GYP participants, and a focus group was conducted with five GYP staff members. The GYP is based in South Auckland, NZ and is a NGO that delivers multiple services, predetermined by AA and FGC plans, to young people who have committed an offence. The interviews and focus group explored factors that influenced the therapeutic relationship, engagement and pro-social change. Realist, Māori and Pacific epistemologies informed the separate thematic analyses performed on the two sets of data. Themes for the two different sets of data were categorised under the three main topics of facilitator characteristics, intervention characteristics and youth characteristics.

Overall the young people gave positive descriptions of the GYP services and facilitators. The young people described positive qualities of the GYP facilitators as being *All good*, *Kickback*, *There for me* and *Straight up*. Being *All good*, *kickback* was described as being non directive, relaxed, positive and having a sense of humour. The young people reported that the facilitators were there for them consistently and attended to their emotional and practical needs. Furthermore, many of the young people described the facilitators as going above and beyond and persisting in their efforts. Another theme included the facilitators' propensity to be *Straight up* which included being honest, and the sharing of personal experiences. The interviews also highlighted the theme of *Cultural matching matters for some but not others* indicating variation in opinions amongst the young people with

regards to cultural preference. The theme of *Relationships matter* was also evident in the data with references being made to the relationship qualities of reciprocity and the bond between young people and staff. Some of the young people discussed not wanting to engage in antisocial behaviours to protect the bond.

The topic of youth characteristics included central themes of *Some people listen, some people don't* and *Ethnic identity is not strong*. The young people described how change was related to personal, family and peer factors. Most noted a sense of ethnic pride, however were somewhat disconnected from their culture. The young people described the GYP favourably as *A place that promotes change*, and where they can receive *Services that help* address multiple needs. Changes were described as occurring at the individual and family level. The provision of food was appreciated by all of the young people and appeared to facilitate engagement. While most of the young people were unable to propose suggestions for improvements, some of the participants suggested *Improvements are possible*.

Facilitators reported *Being there* for the young people, demonstrating *Unconditional positive regard*, having a sense of *Humour* and *Not faking it* contributed to the development of a strong positive relationship. *Being there* included practical support and going the extra mile. *Unconditional positive regard* was seen as a point of difference for the team, compared to others that the young people had dealt with, and comprised being non-judgemental, unconditional and expressing love. *Not faking it* through the honest expression of inner thoughts and feelings was also seen as important. Personal qualities necessary to work with the young people were described as innate *Personality* factors while time was considered necessary to develop an enduring and strong *Relationship* that could motivate change.

Moreover, the facilitators credited treatment success to the intervention characteristics of *Responding to need*, the GYP *Values* and the young people being treated as *Everyone's young person*. A *Commitment to ongoing learning* was viewed as a way to better service the young people. In contrast, resource and system *Restrictions* were described as adversely impacting the services provided. Themes of *Social issues* and *Teenage parenting* were also extracted from the focus group data.

The current chapter follows by comparing the two sets of data, young people and GYP facilitators, and relating the major findings to relevant theory and research. Practical implications will be discussed in light of the current study's findings and the results of the complementary quantitative outcome study completed by Price (2015). Strengths and limitations of the current study will then be provided followed by suggestions for future research.

Participant Views in Comparison to the Literature

It is obvious there are features of the GYP that have allowed it to be accepted by a difficult-to-engage population. The current study has identified that the young people and facilitators share some common understandings concerning the factors involved in the staff-client relationship, engagement of young people in treatment and promotion of positive change. Many of the positive qualities and behaviours the young people described of the facilitators matched the characteristics deemed important by the facilitators. In particular the behaviours that were equivalent or similar included being non-directive, encouraging, having a sense of humour, being genuine, showing unconditional positive regard, being there and going the extra mile. Overall these results are in line with similar research investigating therapist behaviours associated with a positive therapeutic relationship (see Ryals, 2011; Tighe, Pistrang, Casdagli, Baruch, & Butler, 2012).

In contrast, there was less in common between the facilitators and the young people with regard to intervention characteristics. The young people discussed positive changes they made and the changes they witnessed in family members due to the GYP. In comparison, GYP facilitators discussed system and resource restraints that were perceived as factors impacting on their ability to do their job. Both groups, however, did describe addressing both rehabilitative and non-rehabilitative needs. Rehabilitative needs included such things as AOD counselling, parenting, interpersonal skills and problem solving. Non rehabilitative needs included various life skills such as hygiene and cooking, and managing emotional distress.

Similarly, differences existed between facilitators and young people with regard to youth characteristics. The facilitators discussed social factors of poverty and lack of resources that contribute to the offending phenomena. On the other hand, the young people discussed factors that influenced their decision to make pro-social changes including factors at the individual, peer and family level. These inconsistencies, between the young people and facilitators, may be partly due to the differences in questions posed in the young people interviews compared to the facilitator focus group. It may also reflect the different perspectives and the difference in what was deemed important by the young people compared to the GYP facilitators

Facilitator Characteristics and Behaviours

As noted there were many overlaps in the topic of facilitator characteristics. This implies the facilitators have a good grasp of what qualities are required to build a positive

therapeutic relationship with these young people. Moreover the overlap suggests that the facilitators possess the necessary skills to exhibit these qualities. Possessing both the knowledge and skills needed to relate to others have been described as two separate competencies that are required in the forming of an effective therapeutic relationship (Rogers, 1957).

Being non-directive and encouraging was viewed as better for engagement than directive and punitive methods. This is consistent with previous research demonstrating the harmful impact confrontational and punitive interventions have on the relationship and treatment success amongst offending populations (Cullen, 2005; Lipsey, 2009; McGuire & Priestley, 1995). More specifically, the facilitators' tendency to use Motivational Interviewing (MI) techniques of supporting *self-efficacy* and *rolling with resistance* (Miller & Rollnick, 2012) was apparently experienced by the young people as empowering. Research has demonstrated that MI techniques improve readiness to change and treatment outcomes across mental health (Westra, Aviram, & Doell, 2011), substance use (Barnett, Sussman, Smith, Rohrbach, & Spruijt-Metz, 2012), primary health (Lundahl et al., 2013) and forensic settings (Austin, Williams, & Kilgour, 2011). The MI technique of *discrepancy building*, however, was not described or referred to in the data. Discrepancy building involves techniques that make the client aware of the incongruity between their goals and current behaviours and is essential in creating the momentum for change within clients (Miller & Rollnick, 2012).

Both groups of participants made reference to facilitator qualities equivalent to unconditional positive regard and genuineness, which was first described by Carl Rogers (1957) as central therapist qualities required in the development of a positive therapeutic relationship. Rogers' defined unconditional positive regard as "a warm acceptance of each aspect of the client's experience" (p. 98). His definition appears to reflect the facilitators' descriptions of love and consistency in the relationship. The concept of love is also one of the core values or principles in Pacific culture (Agnew et al., 2004; Tamasese, Peteru, Waldegrave, & Bush, 2005). Rogers' description of genuineness indeed parallels the current studies themes of being *Straight up* and *Not faking it*:

It means that within the relationship he is freely and deeply himself, with his actual experience accurately represented by his awareness of himself. It is the opposite of presenting a facade... It should be clear that this includes being himself even in ways which are not regarded as ideal for psychotherapy. (p. 97)

The young people appreciated someone who expressed their true thoughts and feelings even when they were negative as it made the relationship seem less contrived. As Rogers notes, however, there needs to be a balance between the expressions of internal experiences with an awareness of possible countertransference experiences that if acted out may damage the relationship.

The young people also described the facilitators' genuineness as including the disclosure of personal information about the self. This is line with previous research where youth offenders have also described the use of self-disclosures by counsellors as something positive (Ryals, 2011). Furthermore, sharing aspects of the self, which may include cultural heritage and information about whanau (family), has been described as an important element in the formation of relationships for Māori (Te Pou, 2010a) and Pacific people (Te Pou, 2010b). For Māori this is part of the *whakawhānau* (making a connection) process that lays the foundation of the relationship (Brannelly, Boulton, & te Hiini, 2013) while for Pacific people it can be seen as an element of the *talanoa* process where both sides share aspects of themselves in a reciprocal manner (Te Pou, 2010b). For both Māori and Pacific people, mutual sharing creates genuine connections that strengthen the relationship. Furthermore, the disclosure of past experiences, to bestow learnings, may be likened to Māori learning and mentoring practices where wisdom is passed down from *tuakana* to *teina* in a process where experienced elders support and guide the younger generation (Winiata, 2012).

But while self-disclosure has mostly positive connotations within Māori and Pacific realms it continues to be a controversial topic amongst Western clinical models of therapy with proponents emphasising benefits and critics concerned with the negative consequences (Gibson, 2012). However, despite the controversy, over 90% of practitioners have noted sharing personal information with their clients on occasion (Henretty & Levitt, 2010). It is recommended that self-disclosures should be used sparingly and in a manner that is helpful to the client (Henretty & Levitt, 2010). Norcross and Hill (2002) have noted that self-disclosures are helpful when used to validate and normalise clients' experiences, strengthen the bond, or when it offers a different perspective. On the other hand, self-disclosure is seen as potentially damaging when it is used to satisfy the therapist's own needs, moves the focus from the client to the therapist and/or when boundaries become blurred (Norcross & Hill, 2002). It appears in the GYP self-disclosures have been used appropriately as they have strengthened the bond with the young people, made them feel more comfortable and have provided the young person with alternative ways of looking at their actions.

The young people and the GYP facilitators described humour as creating an atmosphere that was relaxed and familiar. The use of humour is indeed known to be a valid and effective method of building rapport with both Māori (Mooney, 2012) and Pacific people (Te Pou, 2010b). Previous interviews with youth offenders have also demonstrated the positive impact a sense of humour has on engagement (Geary, Lambie, & Seymour, 2010; Ryals, 2011). In the current study the use of humour resolved the initial feelings of unease and awkwardness associated with being at an offending rehabilitative programme. The use of humour is undoubtedly an effective means of building the relationship, however, care must be taken to ensure it is not used in a manner that reinforces and/or minimises the young persons' offending behaviours.

Facilitators Provide Support Missing in Natural Environment

Other facilitator characteristics deemed important by both facilitators and young people included 'being there' for the young people. One way the young people described the facilitators as being there was through practical support such as transport. It was apparent the young people would have struggled to complete the sentence conditions in their plans without transport to prescribed programmes and community service. A lack of transport to health services is a well-known barrier for Māori and Pacific that reduces their access rates (Jatrana & Crampton, 2009; Ludeke et al., 2012). This indicates the provision of transport is an important part of service delivery that increased engagement. Presence at meetings and court appearances was another way the facilitators were there for the young people. In addition, being non-judgmental, respectful and attending to emotional needs, were further examples of the facilitators being there for the young people.

The above examples of being there for the young people appeared to contrast with the lack of support available to the young people in their natural environments. The lack of pro-social support from family members and friends is a rehabilitative need for the young people (Farrington, Loeber, & Ttofi, 2012). This rehabilitative need appears to be filled by the facilitators when the young people are attending the GYP. It is likely the support from the facilitators act as a buffer for the lack of positive supports the young people receive in other areas of their life. However, this protective effect will end when the young person exits the GYP. Consequently, unless natural pro-social supports are developed and/or strengthened, the lack of support will continue to be a risk factor for the young person. A couple of the facilitators appeared to create these natural supports in their own personal lives by inviting the young people to church and other related activities. While the current study indicates this

was valued by some of the young people, it may result in burnout amongst employees who are attending to the needs of these young people around the clock. Furthermore, some young people may not want this.

Cultural Matching

Most of the young people reported not having a preference for being matched with a facilitator of the same ethnicity and instead reported other behaviours such as being non-judgmental and respectful as being more important. Similarly, being non-judgemental was also noted as an important behaviour by the facilitators. Unfortunately, ethnic matching was not discussed in the focus group so the views of the facilitators on the subject are unknown. The young people, however, emphasised that their lack of preference was conditional on not being judged. Given research demonstrates implicit and explicit forms of racism continue to exist towards minority groups, it may be that these young people are more vulnerable to negative judgements by dominant ethnic groups (Barnes et al., 2012; Came, 2014; Harris et al., 2012). This is line with one of the participants concerns who noted his perception that “palagis” were racist. In contrast, some participants noted having a preference to be paired with your own ethnicity would be racist suggesting these young people did not want appear to racist. It is not known if this was a form of impression management or if the young people actually had no preference. It did, however, imply that some of the young people were more concerned the effect a preference may have on others (keyworkers of a different ethnicity) compared to the potential benefits ethnic matching may have for them. Nevertheless, what the current research has highlighted is that most of these young people are open to facilitators of any ethnicity working with them as long as they feel cared for.

Some of the young people who denied a preference, however, acknowledged that ethnic matching may result in a greater understanding of each-other’s world view. In other words there is a greater likelihood that young people will experience more empathic behaviours from a facilitator who is of the same ethnicity. Rogers’ (1957, p. 99) definition of empathy includes the ability to “voice *meanings* in the client's experience of which the client is scarcely aware” suggesting that to be empathic facilitators must be able to express understandings of the client’s experience that the client is uncertain of. Given the shared beliefs, values and worldviews that characterise ethnic groups, it is likely individuals within the same ethnic group have a greater ability to understand and express these subtle and implicit “meanings”. The young people who did cite a preference reported reasons comparable to these shared understandings.

Although there are a number of potential explanations for these findings only those deemed most relevant will be listed here. Firstly, the young people may not have had previous experiences with non-Pacific and/or non-Māori service providers and therefore do not know what it would be like to be paired with a non-Pacific/non-Māori. Hence, they may have presumed that being paired with someone who is not Māori or Pacific would be the same. Another explanation, suggested by some of the participants, may be that the young people thought it would be racist to have a preference and hence denied a preference to avoid being and/or appearing racist. In contrast, it may be that the young people have no preference due to the multi-ethnic community and society they live in which has caused them to become acculturated. As a result of acculturation, the young people have developed worldviews that are influenced by ethnicities other than their own. In addition, the young people may be in a developmental stage where ethnicity does not play a key role in their identity and world view. As a result ethnic matching seems less significant. This lack of connection to their culture is further explained later.

Past research that has explored ethnic matching from the perspectives of Māori and Pacific people is limited and has found mixed benefits. In interviews with Pacific adults and young people, Agnew et al. (2004) found that ethnicity matching was not considered necessary or appropriate for all cases. Instead, the ability to build rapport was regarded as more important. This result was especially true for the young people interviewed who may have a set of values and beliefs that are more integrated with Western value systems, in comparison to their Island born counterparts. In contrast, Tiatia-Seath (2014) explored the mental health experiences of Samoan adults and noted one participant's perception that their lack of improvement in suicidal behaviours was due to being matched to a non-Pacific health professional. Similarly, Geary et al. (2010), who investigated the experiences of sexually abusive adolescents, found that while Māori adolescents tended to value the same facilitator characteristics as non-Māori there was a preference amongst Māori adolescents and caregivers for the ethnic matching of facilitators. The Māori participants reported better engagement with Māori facilitators due to a greater shared understanding and the use of Māori tikanga (practices). In relation to the current study, the lack of consensus regarding ethnic matching indicates there is a difference in opinions amongst the Māori and Pacific young people interviewed. Given ethnic matching has the potential to impact on engagement, the therapeutic relationship and ultimately treatment outcome, the young person should ideally be offered the choice.

Most of the young people described a sense of ethnic pride despite no clear preference for ethnic matching. However, the interviews also revealed it was difficult for the young people to describe the values, beliefs and behaviours associated with their ethnic culture. This inability to articulate their cultural identity could be due to their developmental stage of adolescence where identity is said to be more explorative, fluid, under developed and dependent on peers (Phinney, 1993). In any case it appeared evident that the young people experienced some disconnection from their cultural identity. This is unfortunate as research typically indicates that, a strong sense of ethnic identity is associated with higher levels of wellbeing amongst Māori (Houkamau & Sibley, 2011) and Pacific people (Manuela & Sibley, 2013). Including cultural components in programmes may increase wellbeing and as a result address individual needs more holistically. It may also improve offending outcomes (Nathan, 2009). It is worth noting, however, that programmes focussing solely on culture do not sufficiently address rehabilitative needs (Wehipeihana, Porima, & Spier, 2003). Overall, this suggests that Māori and Pacific young people would benefit from improving their cultural identity. However, while incorporating cultural components can increase wellbeing, it needs to be in conjunction with other interventions that systematically target rehabilitative needs.

Strong Connections Created

The relationship between staff and young people in the current study was likened by both the facilitators and young people to familial and friendship relationships. This comparison appeared to reflect the strength of the relationships developed. Youth offenders have been found to liken the positive relationship with therapists as mirroring the type of relationship amongst friends (Ryals, 2011). The therapeutic relationship with young people has been theorised as comprising three components (Karver, Handelsman, Fields, & Bickman, 2005). These include an affective (bond), cognitive (goal agreement, optimism) and behavioural (client centred and collaborative) component. The data from the two different groups suggest the relationships developed with the young people contained all of these components. There was a strong affective bond as evidenced by the likening to familial relationships, a strong behavioural component as shown by the person centeredness of the facilitator approach and likely an appropriate cognitive component as the young people and the GYP facilitators appeared to share the same goal of sentence completion. One wonders however, if there would be a negative impact on the therapeutic relationship if a greater emphasis was placed on the direct targeting of multiple rehabilitative needs. If the goals

shared do not reflect treatment outcome variables, then although a positive therapeutic relationship is established, it is unlikely to result in treatment goals being achieved. As a result the cognitive component of goals must match the desired treatment outcomes.

Young People Making Changes

The young people also referred to characteristics of themselves that influenced whether they made pro-social changes. In particular, the decision to change was viewed as a personal decision which could be fostered by the presence of family support, and hindered by the presence of antisocial peers. As discussed earlier, family are a natural support that can help to reduce risk of reoffending. If the young people are unable to receive support from families and caregivers, they are more vulnerable and attracted to antisocial peer groups who provide them a sense of belonging and reinforce antisocial behaviours. As such, both areas need to be targeted in an intervention. A considerable amount of research supports the young people's descriptions of how family support and antisocial peers influence the continuation of antisocial behaviour (Farrington et al., 2012; McGee, Wickes, Corcoran, Bor, & Najman, 2011). On the other hand, the young people's reference to a personal decision to change can be theorised using the transtheoretical model of change which emphasises the importance of the client's readiness to change in the behavioural change process (DiClemente & Prochaska, 1998). When clients are ambivalent regarding pro-social change MI techniques, as described earlier, can be employed by the facilitator to resolve this ambivalence. Once the young person has made the decision to change, they will be better positioned to make use of the intervention content noted below.

GYP Services and Restraints to Service Provision

The services provided by the GYP were described by both the facilitators and young people as addressing both rehabilitative and non-rehabilitative needs. Expressions regarding the targeting of rehabilitative needs were less prominent in the two sets of data compared to therapeutic factors. This may be due to a combination of factors. The young people may not have possessed the language required to describe rehabilitative concepts while facilitator and relationship qualities may be more easily retained and recalled. In regards to the focus group, the discussion appeared to naturally progress from intervention content to systemic issues. Another possible reason there was an absence of expressions regarding rehabilitative needs, could be an actual deficiency in the GYP's targeting of rehabilitative needs. This would be

problematic as rehabilitative needs should be the primary focus of services where the aim is to reduce reoffending (Andrews et al., 1990).

The concept of time was discussed by both groups of participants with regard to the time it takes to build relationships and the time it takes to make positive behavioural changes. Given the short time frames available for interventions there may not be sufficient time to adequately address rehabilitative needs across multiple domains. The young people reported rapport developed over the first few encounters while positive change also developed over an extended period of time. Facilitator discussion was in line with this yet emphasis was on the lack of time available to deliver interventions that supported change. The facilitators highlighted the need to extend the time frame of plans to allow time for engagement and the addressing of multiple rehabilitative needs. This is a valid point given this population is arguably one of the most difficult client groups to engage and produce change. It is important to note that, although, a time period of three months may be sufficient to engage a young person and support them to complete restorative responsibilities, such as apology letters and community service, it is unlikely to be sufficient time to adequately address rehabilitative needs across multiple domains.

The lack of time was only one of the restraints extracted from the data. The facilitators also discussed the lack of individualised assessments and subsequent plans that adequately addressed the young people's needs. Individualised plans that address the young people's rehabilitative needs are considered crucial to reduce the risk of reoffending (McLaren, 2000). Ideally these plans should result from a comprehensive assessment that covers the young persons' psychosocial history. As previously described, the development of plans is not within the GYP facilitators control and instead arises from the AA or FGC process. This signals the need for individuals who are involved in the process of developing the plans, to complete more comprehensive rehabilitative need assessments.

Addressing rehabilitative needs is a core principle of the RNR model of offender rehabilitation (Andrews & Bonta, 1994). In addition, the RNR model suggests rehabilitation should be in accordance with the risk principle that states the intensity of the intervention should match the risk level of the offender. This is not the case for at least some of the young people who have been referred to the GYP. It appears the RNR principles of risk and need are not being consistently adhered to in the Youth Justice system and the GYP. As a result, the services delivered will be less effective at reducing reoffending (Andrews & Bonta, 2010).

Another restraint included a lack of resources as the GYP facilitators believed bureaucratic processes prevented families in need from accessing support for their basic needs. It would be problematic and possibly unethical to provide a therapeutic intervention to young people and families, and expect them to undertake considerable behavioural changes, when their basic needs such as food are not being met. Social disorganisation theory (Shaw & McKay, 1942) and strain theory (Merton, 1938) provide an explanation for the negative association between poverty and offending rates. Furthermore, much research and statistics have demonstrated the higher rates of offending amongst poorer communities (Patterson, 1991; Zhao, Feng, & Castillo-Chavez, 2014). This indicates the need for social policy and systemic changes to better address the rates of poverty, as a preventative intervention for youth offending targeted at the community level (Webster & Kingston, 2014).

Implications for Practice

As previously described, a concurrent study completed by Price (2015) found no significant difference in offending rates between those who completed the GYP and a group of youth offenders who did not attend the GYP. There was a delay, however, in the offending of those young people who completed the GYP of approximately one year post-programme. The combination of the current study and Price's outcome study has provided evidence to indicate that although the facilitators possessed notable skills to develop strong therapeutic relationships with the young people this was not enough to produce long term positive impacts on reoffending rates. Moreover, while the therapeutic relationship is an important factor influencing the success of an intervention other principles of rehabilitation frameworks must also be adhered to. The following practice implications have been informed by the outcome study results (Price) and the current study's findings.

Continue to Build Relationships

As previously described in detail the current study has demonstrated the GYP facilitators possess traits and behaviours that allow them to connect with the young people in a manner that is culturally and clinically appropriate. The first practice implication includes the recommendation that the facilitators continue to use the relationship building skills identified in the current study to continue the effective engagement with young people attending the GYP. It is hypothesised that the lack of difference in overall reoffending data was not due to any deficiencies in the relationships formed with the young people. The GYP is in an ideal position to use their proven ability to engage these young people to elicit long

lasting positive changes. The therapeutic relationship is regarded as a necessary component that provides the platform for the additional recommendations listed below.

Complete Thorough Needs Assessment and Plan

It is recommended that needs assessments are completed prior to the development of plans for young people. These should include an assessment of both psycho-social and rehabilitative needs that inform the mandatory AA or FGC plan. It is understood that these plans are not developed by the GYP staff. Ideally improved collaboration between service providers, CYFs and the Police would allow all agencies to combine their expertise to develop the most appropriate plan for a young person. Alternatively plans could include a clause that allows for the further assessment of rehabilitative needs to further inform mandatory treatment plans. This is a practice commonly used in the adult correction system. This would allow the GYP to formally provide additional support for identified rehabilitative needs that become apparent during the GYP assessment process. Assessments should also consider the risk principle of the RNR model to ensure the intensity of the intervention matches the risk level of the young person. If required, plans should be extended to allow for the delivery of an intervention that addresses the rehabilitative needs, in a manner that permits the consolidation of skills. If the assessment of psycho-social needs reveals other concerns, such as mental health needs, referrals to other agencies should also be considered to allow the GYP facilitators to focus primarily on addressing offending related needs.

Increase Opportunities for Staff Development.

This leads on to the fourth recommendation which includes ongoing professional development for all GYP employees to increase capacity to identify and systematically target rehabilitative needs across multiple domains. Given forensic theory is not covered in any detail in many of the qualifications held by GYP employees, the employees would benefit from further specialised training in evidence-based youth offender assessment and treatments. Some organisations provide a training allowance per person where the individual chooses their own training and provides a rationale to management for attendance. Such a strategy would allow trainings to be individualised. This is likely to increase buy-in from staff while at the same time it would afford GYP facilitators the opportunity to take ownership of their professional development.

The GYP may also benefit from greater collaboration with other organisations offering similar services. Such services could include Youth Horizons Trust and the

Department of Corrections. A partnership with these agencies could result in additional opportunities for the sharing of knowledge and skills that will enhance services.

Make Greater use of Motivational Interviewing Methods.

Particular training that will be of benefit to the GYP staff includes MI. This would allow facilitators to incorporate advanced MI skills into their practice that can help shift ambivalent young people into planning and action stages of change. While it is clear the facilitators hold strong relationship building skills which are core skills of MI, advanced MI skills are a valuable skill set. Furthermore, possessing the skills necessary to motivate people to make the decision to change is a necessary skillset for any individual attempting to elicit behavioural change. This skillset becomes even more important in a population that is well known for its lack of engagement.

Implement Psychometric Measures

It is also recommended that the GYP makes greater use of psychometric measures, especially when young people enter and exit the programme. While psychometric measures at the beginning of the programme can inform treatment they can also be used as a baseline to measure a young person's progress. One potentially useful measure is the Strengths and Difficulties questionnaire which assesses emotional, conduct, hyperactive, relationship and pro social domains (Goodman, 1997). This measure is freely available, can be completed by parents and the young person, and assesses a number of the young person's rehabilitative needs.

GYP In-Service Evaluation

The final recommendation includes ongoing evaluation by the GYP of their services. In particular, evaluations should measure pro-social changes made by the young people and their families. The use of pre and post psychometric measures previously described could provide the data for this evaluation. Furthermore, the use of brief questionnaires completed by the young people and their families will provide ongoing information regarding how the GYP is being received.

Strengths and Limitations

As mentioned there is a paucity of research on the perspectives of Māori and Pacific young people who commit crime. A major strength of the current study is the contribution it

will make to the gap in the research describing Māori and Pacific young people who have offended. The second strength of the study is linked to the first and refers to the voice the study has given to this population. Often young people who offend are the subject of studies and are rarely given a voice to share their own perspectives. Giving these young people a voice allows us to gain a richness of detail regarding their perspectives which improves our own understandings and consequently our ability to support them. The last major strength of the study is the potential insights it has provided the GYP that can be used to inform their services. The GYP wanted their services to be evaluated and although this was not a comprehensive evaluation it has given rise to some useful results that the GYP can consider in their service development and delivery.

The first notable limitation of the current relates to the sample. As only Pacific and Māori participants were included, it may not be an accurate representation of all the young people who have attended the GYP. Although Māori and Pacific young people make up a large majority of the young people who attend GYP, there are other young people of other ethnicities who attend the GYP. This study, however, sought to focus of the perspectives of Māori and Pacific young people due to their under representation in the literature. Furthermore, it is probable a response bias existed as the young people who consented to participate in the current study are more likely to have formed positive relationships with the facilitators. Exploring the perspectives of young people who had completely disengaged from the GYP would have added significantly to the understanding of the engagement issues for Māori and Pacific young people who offend. Similarly, the perspectives of the young people's families were not included in the current study. Given family play a central role in the interventions provided to these young people, having their perspectives on what influences engagement and treatment success would offer further valuable insights.

Another possible limitation is the pan Pacific approach that was used in the current study. Although Māori and Pacific share some common values, there are differences between Māori and Pacific, and within the different Pacific ethnicities. Investigating Māori and Pacific as a group may not adequately explore these differences. In contrast, completing research on ethnic specific groups can help to identify particular cultural nuances specific to that ethnic group, while at the same time legitimises the distinctions between these ethnic groups. For example research has indicated individuals of Tongan and Samoan ethnic decent tend to be more religious compared to other Pacific groups (Manuela & Sibley, 2015). There is also an increased demand within the Pacific research community to complete ethnic specific research due to these differences (Anae, 2010; Peteru, 2012; Samu & Suaalii-Sauni, 2009).

Future Research

To address the limitations of the current study, and for the reasons cited earlier, similar research in the future could focus on specific ethnic groups, engage a larger sample, and include young people who have disengaged from the GYP. Including family members would also provide further insights. While the current study has sought to provide a general overview of the perspectives of Māori and Pacific young people who offend, further research regarding specific ethnic groups would add further depth to the literature.

To date there does not appear to be any research that specifically investigates the link between cultural matching and treatment outcome amongst Māori and Pacific young people who offend. Subsequently, future research could focus more specifically on the topic of cultural matching keyworkers to young people who offend, and the impact this has on outcomes. Although it would be challenging to provide cultural matching for all young people, given the limited resources, if it is associated with improved treatment outcomes then it would be a service delivery practice worth striving towards.

To gain a more detailed analysis of the components of GYP and their impact on outcomes it is recommended that a process evaluation is completed. In particular, the evaluation could investigate the implementation of offender plans and how well these plans match the young people's rehabilitative needs. As the GYP are open to recommendations it is suggested that this occurs once GYP is satisfied that the implementation of the current recommendations has occurred. Completing a further quantitative outcome study at a future date will provide information as to the effectiveness of these changes. Including other psycho-social outcome measures (such as school engagement, mental health status etc.) will provide a more complete picture of treatment outcomes.

Conclusion

The current study sought to investigate factors that influenced positive change from the perspective of Māori and Pacific young people who offend and those who work alongside them. Overall the therapeutic factors valued by the young people in the current study appeared to be universal qualities valued by people of diverse ethnicities. The facilitators' compassion for their young people was obvious; however, while it was clear strong bonds were formed between the young people and the facilitators, a complementary study completed, indicated this was not enough to elicit long-lasting behavioural change. These young people require individualised plans that adequately address their rehabilitative needs

within a time frame that allows for engagement to occur and for enduring behavioural changes to be made. System and process restraints must be addressed to allow for this to occur.

Appendix A
Young Person Interview Schedule

Young Person Interview Schedule

1. Can you tell me a bit about yourself and your family?
 - a. Prompts: What ethnicity are you? Where were you born? What languages can you speak?
2. What programmes of the GYP did you use?
 - a. For each programme used:
 - i. What did you do in the programme?
 - ii. How useful did you find the programme? What made them useful?
What parts were not so useful?
 - iii. How much did you enjoy the programme? What made them enjoyable?
What parts were not enjoyable?
3. How did the GYP suit your Culture?
 - a. Prompts: How does your culture influence your home life, school life etc.?
How could the programme suit your culture more? What do you think about ethnic matching?
4. How did your first meeting with GYP go?
 - a. Prompts: What were the good parts? How could they make it better?
5. At the time you were attending the GYP what might have stopped you going?
6. At the time you were attending the GYP what made it more likely you would attend?
7. What do you think is the most important thing GYP provided you?
8. What do you think is the most important thing a programme like Genesis should offer its young people?
 - a. Do you think the Genesis Programme offers this?
 - b. How did they/might they offer this?
9. What did you think about your key worker?
 - a. Prompts: What did you like about your key worker? What didn't you like?
What could they improve? What kinds of things would you do?
10. What would make a person who worked at GYP awesome at their job?
 - a. Prompts: Do you think the GYP workers had this quality?
11. What happened at the end of the GYP?
 - a. Prompts: How did you feel? What things made it go well or not so well? How could they make it better?
12. What would you say to a friend about the project?

- a. Prompts: Would you recommend it to a friend?
13. Is there anything else you would like to say about the GYP?

Appendix B
Youth Participant Information Sheet

Evaluation of the Genesis Project Youth Participant Information Sheet



Thank you for taking time to think about taking part in my study. My name is Elizabeth Mati and I am a Samoan/Pākehā student studying Psychology at the University of Auckland. I am inviting you to take part in my research study evaluating the Genesis Project. It is important that such programmes are evaluated to find out what is working well and what needs to be improved.

Please take time to think about it and decide whether you wish to take part. Taking part is your choice. If you decide you do not wish to take part, it will not affect any services from the Genesis project or related agencies you may be involved with in the future.

Why are you being asked? / What is it all about?

- ❖ I want to find out about your experiences with the Genesis Project so that I know what has helped you and also what you think could be different or improved.
- ❖ I am inviting past users of the Genesis Project (who have completed the programme in past year) to take part in an interview which will involve me asking you questions about your experiences with the Genesis Project.

What happens during the study?

- ❖ If you decide to take part I will meet with you at Genesis or at your home or at the Genesis headquarters (you decide) at a time that is good for you. I will ask you questions about the Genesis Project. Transport can be arranged so that a youth worker from the Genesis Programme will pick you up and drop you off.
- ❖ My questions will only be about the Genesis Project and your experiences with it and will not be about your offending.
- ❖ The interview will be up to an hour and a half, which will include time to get to know each other in the beginning.
- ❖ The interviews will be audio recorded and these recordings will be kept for up to 6 years. After that they will be destroyed. I am recording the interviews so that I do not miss out any information. You can choose to not have the interviews recorded.

- ❖ The recordings will be kept in a secure, locked cabinet within the University of Auckland Psychology department and only I will have access to it.
- ❖ If you like, you can have a friend or family member present at the interviews.
- ❖ The interviews are being done to provide information that we hope will be used to improve the Genesis Project.

Token of appreciation

- ❖ For your time you will be given a double pass to the movies or a twenty dollar mobile top-up (you decide).

Risks and Benefits

- ❖ There are no obvious risks to taking part in this study.
- ❖ If you need to talk to someone I can put you in contact with a counsellor from the Genesis Project who will be able to discuss any concerns you may have.
- ❖ Benefits of taking part in the study include you being able to have your say about the Genesis Project. Your experiences will then be used to improve the services Genesis offers in the future.

Participation

- ❖ Your participation is your choice. You do not have to take part in this study, and your decision will not affect any services you may have in the future.
- ❖ If you do agree to take part, you can withdraw from the study at any time up until 2 weeks after you have completed the interview by contacting me or Robin Woodley. You do not have to give a reason. During the interview you can stop at any time and you do not have to answer all of the questions.

General Information

- ❖ If you need an interpreter one can be provided. Please let me know if this is the case.
- ❖ Before taking part a youth worker from the Genesis Project will go over the study again. You can also have a friend or family member present at this time.

Confidentiality

- ❖ No information which could identify you will be used in any reports on this study.
- ❖ The only time I will need to tell other people, including the police, about what is said in the interview is if anyone's safety is at risk. In this situation I would talk to you and your caregivers first. But in times of emergency this may not be possible.

Results

- ❖ If you want the results of the study, these will be made available to you in a simple form.
- ❖ The results will be used to guide improvements of the Genesis Programme, for my doctoral thesis and may also be published in an academic journal in the future.

Who should I contact if I have further questions?

- ❖ A youth worker will be contact over the next week to talk more about the study with you and your family.
- ❖ You can contact me if you have any questions about the study. If you send me a text I can call you back. Contacting me does not in any way mean that you have agreed to take part. If you want, I could meet with you at a time that suits you to talk about the study before you decide if you want to take part.
- ❖ You can also contact Rob Woodley (Genesis Project Manager) or any of the other people under the listed contacts to find out more about my research.

Lastly, I have included the consent form for you to have a look at.

Thank you for taking the time to read this information sheet

Yours Sincerely,

Elizabeth Mati

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Robin Woodley

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(09) 250-0503

“For any queries regarding ethical concerns you may contact the Chair, The University of Auckland Human Participants Ethics Committee, The University of Auckland, Office of the Vice Chancellor, Private Bag 92019, Auckland 1142. Telephone 09 373-7599 extn. 83711.”

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ETHICS COMMITTEE ON 17 NOVEMBER 2010 for (3) years, Reference Number
2010/502”

Appendix C
Youth Assent Form
(For youth 15 years or younger)

Youth Assent Form
(For youth 15 years or younger)

Elizabeth Mati

This form will be held for six years

Evaluation on the Genesis Project

Please tick the boxes after you have read the Information Sheet and have had any questions you might have answered.

I agree to take part in the research.

YES ☐ NO ☐

I have read and understand the Youth Information sheet for the Evaluation of the Genesis Project. I understand what is being asked of me. I have had the chance to talk about the study. I am happy with the answers I have been given.

YES ☐ NO ☐

I understand that taking part is mine and my caregiver's choice, and that one of my caregivers or I may decide not to be a part of the study at any time up to two weeks after the interview has taken place.

YES ☐ NO ☐

I understand that my participation in the study is confidential and that no information that would identify me will be used in any reports on this study.

YES ☐ NO ☐

I understand that if the researcher is made aware that there is risk to anyone's safety the researcher will take steps to keep the person safe.

YES ☐ NO ☐

I understand that the results will be used to evaluate the Genesis Project and that a summary of the report will be given to Genesis Project employees. I understand it will be used as part of Elizabeth Mati's doctoral research and may also be published in an academic journal in the future.

YES ☐ NO ☐

I know who to contact if I have any worries when taking part in this study or if I have any questions.

YES ☐ NO ☐

I understand the interviews will last up to an hour and a half.

YES ☐ NO ☐

I give my permission for the interviews to be audio recorded.

YES ☐ NO ☐

I understand that if my interview is audio recorded or if notes are taken, then it will be stored securely in the University of Auckland's Psychology Department for up to six years and will then be destroyed.

YES ☐ NO ☐

I would like a summary of the results to be sent to me.

YES ☐ NO ☐

I (full name).....

hereby give my assent to take part in this study.

Signature: Date:

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ETHICS COMMITTEE ON 17 NOVEMBER 2010 for (3) years, Reference Number
2010/502”

Appendix D
Youth Consent Form
(For youth 16 years or over)

**Youth Consent Form
(For youth 16 years or over)**

Elizabeth Mati

This form will be held for six years

Evaluation on the Genesis Project

Please tick the boxes after you have read the Information Sheet and have had any questions you might have answered.

I agree to take part in the research.

YES ☐ NO ☐

I have read and understand the Youth Information sheet for the Evaluation of the Genesis Project. I understand what is being asked of me. I have had the opportunity to discuss this study. I am happy with the answers I have been given.

YES ☐ NO ☐

I understand that giving consent is my choice and that I may withdraw from the study at any time up to two weeks after the interview has taken place.

YES ☐ NO ☐

I understand that my participation in the study is confidential and that no material that could identify me will be used in any reports on this study.

YES ☐ NO ☐

I understand that if the researcher is made aware that there is risk to anyone's safety the researcher is obliged to take steps to keep the person safe.

YES ☐ NO ☐

I understand that the results will be used to evaluate the Genesis Project and that a summary of the report will be given to Genesis Project employees. I understand it will be used as part of Elizabeth Mati's doctoral research and may also be published in an academic journal in the future.

YES ☐ **NO** ☐

I know who to contact if any problems arise in this study or if I have any questions.

YES ☐ **NO** ☐

I understand the interviews will last up to an hour and a half.

YES ☐ **NO** ☐

I give my permission for the interviews to be audio recorded.

YES ☐ **NO** ☐

I understand that if my interview is audio recorded, then it will be stored securely in the University of Auckland's Psychology Department for up to six years and will then be destroyed.

YES ☐ **NO** ☐

I would like a summary of the results to be sent to me.

YES ☐ **NO** ☐

I (full
name).....

hereby give my consent to take part in this study.

Signature: Date:

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ETHICS COMMITTEE ON 17 NOVEMBER 2010 for (3) years, Reference Number
2010/502”

Appendix E
Caregiver Participant Information Sheet

Evaluation of the Genesis Project Caregiver Participant Information Sheet



Thank you for taking time to read about my study. My name is Elizabeth Mati and I am a Samoan/European student currently studying Psychology at the University of Auckland Psychology department. I am inviting your child to take part in my research study evaluating the Genesis Project. It is important that such programmes are evaluated to find out what is working well and what needs to be improved.

Please take time to think about it and decide whether you would like your child to take part. Allowing your child to take part is also your choice. If you decide you not want your child to take part, it will not affect any services from the Genesis project or related agencies you or your child may be involved with in the future.

Why is your child being asked? / What is it all about?

- ❖ I want to find out about your child's experiences with the Genesis Project so that I know what has helped your child and also what they think could be different or improved.
- ❖ I am inviting past youth of the Genesis Project (who have completed the programme in past year) to take part in an interview which will involve me asking them questions about their experiences with the Genesis Project.

What happens during the study?

- ❖ If you decide that your child can take part I will meet with your child at Genesis or at your home (you and your child can decide) at a time that suits you and your child. I will ask your child questions about the Genesis Project. Transport can be arranged so that a youth worker from the Genesis Programme can pick your child up and drop them off.
- ❖ The questions will be for your child to answer, but you are more than welcome to come to the interview to support your child.
- ❖ My questions for your child will only be about the Genesis Project and will not be about their offending.

- ❖ The interview will be up to an hour and a half, which will include time for me to get to know your child in the beginning
- ❖ The interviews will be audio recorded and these recordings will be kept for up to 6 years. After that they will be destroyed. I am recording the interviews so that I do not miss out any information. You or your child can choose to not have the interviews recorded.
- ❖ The recordings will be kept in a secure, locked cabinet within the University of Auckland Psychology department. Only I will have access to these recordings
- ❖ The interviews are being done to provide information that we hope will be used to improve the Genesis Project

Token of appreciation

- ❖ For your child's time they will be given a double pass to the movies or a twenty dollar mobile top-up (their choice).

Risks and Benefits

- ❖ There are no obvious risks to your child taking part in this study.
- ❖ If your child needs to talk to someone I can put you in contact with a counsellor from the Genesis Programme who will be able to discuss any issues you may have.
- ❖ Benefits of taking part in the study include your child being able to have their say about the Genesis Project. Their experiences will then be used to guide improvements to the services Genesis offers in the future.

Participation

- ❖ Your child's participation is their choice and yours.
- ❖ If you do agree to your child taking part, you can withdraw them from the study at any time up until 2 weeks after they have completed the interview. You can do this by contacting me or Robin Woodley. You do not have to give a reason. During the interview they can stop at any time and they do not have to answer all of the questions.

General Information

- ❖ If you or your child needs an interpreter one can be provided. Please let me know if this is the case.

Confidentiality

- ❖ No material which could identify your child will be used in any reports on this study.
- ❖ The only time I might need to tell other people, including the police, about what is said in the interview is if anyone's safety is at risk. In this situation I would talk to you and your child first. But in times of emergency this may not be possible.

Results

- ❖ If you want the results of the study, these will be made available to you in a pamphlet.

- ❖ The results will be used to guide improvements to the Genesis Programme, for my doctoral thesis and may also be published in an academic journal in the future.
- ❖ The information your child gives will be completely confidential and no one other than me will know that the information they have shared belongs to them.

Who should I contact if I have further questions?

- ❖ A youth worker will contact you and your child in about a week to discuss the study more.
- ❖ You can contact me if you have any questions about the study. If you send me a text I can call you back. Contacting me does not in any way mean that you have agreed for your child to take part. If you want, I could meet with you at a time that suits you to talk about the study before you decide if you want to take part.
- ❖ You can also contact Rob Woodley (Genesis Project Manager) or any of the other people under the listed contacts to find out more about my research.

Lastly, I have included the consent form for you to have a look at.

Thank you for taking the time to read this information sheet.

Yours Sincerely,

Elizabeth Mati

Contact Details

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Genesis Project Manager
Robin Woodley
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(09) 250-0503

“For any queries regarding ethical concerns you may contact the Chair, The University of Auckland Human Participants Ethics Committee, The University of Auckland, Office of the Vice Chancellor, Private Bag 92019, Auckland 1142. Telephone 09 373-7599 extn. 83711.”

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2010/502”

Appendix F
Caregiver Consent Form
(For parents with child 15 years or younger)

Caregiver Consent Form
(For parents with child 15 years or younger)

Elizabeth Mati

This form will be held for six years

Evaluation on the Genesis Project

Please tick the boxes after you have read the Information Sheet and have had any questions you might have answered.

I agree for my child to take part in the research.

YES ☐ NO ☐

I have read and understand the Caregiver Information sheet for the Evaluation of the Genesis Project. I understand what is being asked of my child. I have had the opportunity to discuss this study. I am happy with the answers I have been given.

YES ☐ NO ☐

I understand that giving consent for my child to take part is my choice and my child's choice and that I may withdraw my child from the study at any time up to two weeks after the interview has taken place.

YES ☐ NO ☐

I understand that my child's participation in the study is confidential and that no material that could identify me or my child will be used in any reports on this study.

YES ☐ NO ☐

I understand that if the researcher is made aware that there is risk to anyone's safety the researcher is obliged to take steps to keep the person safe.

YES ☐ NO ☐

I understand that the results will be used to evaluate the Genesis Project and that a summary of the report will be given to Genesis Project employees. I understand it will be used as part of Elizabeth Mati's doctoral research and may also be published in an academic journal in the future.

YES ☐ NO ☐

I know who to contact if any problems arise in this study or if I have any questions.

YES ☐ NO ☐

I understand that it is my child's choice if the interview is audio recorded. I understand that the interview will last up to an hour and a half.

YES ☐ NO ☐

I understand that if the interview is audio recorded or if notes are taken, then it will be stored securely in the University of Auckland's Psychology Department for 6 years and then will be destroyed.

YES ☐ NO ☐

I would like a summary of the results to be sent to me.

YES ☐ NO ☐

I (full name).....

hereby give my consent for my child.....

to take part in this study.

Signature: Date:.....

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2010/502”

Appendix G
Facilitator Focus Group Schedule

Facilitator Focus Group Schedule

1. What are the key components of the Genesis Programme
2. How do the different services Genesis offers benefit users?
3. What aspects of a programme make it more likely that it will be accepted and used by adolescent offenders and their families?
4. What are some possible barriers that might prevent the young people and their families from using the GYP?
5. How could the GYP be improved to be more effective with young people and their families?
6. What are the qualities that are necessary for an individual to possess if they are to work with these young people?
7. What are the ways you could address the cultures of the young people and their families?

Appendix H
Facilitator Participant Information Sheet

Evaluation of the Genesis Project Facilitator Participant Information Sheet



My name is Elizabeth Mati and I am a Samoan/European student currently studying a Doctorate of Clinical Psychology at the University of Auckland. I am inviting you to take part in my research study evaluating the Genesis Project

Please take time to think about it and decide whether you wish to take part. Taking part is completely voluntary. If you decide you do not wish to take part, Sergeant Robin Woodley wants you to be assured that it will not affect your employment at the Genesis Project now or in the future.

Why are you being asked? / What is it all about?

- ❖ I want to find out about your experiences with the Genesis Project so that I know what you think works with youth offenders and also what you think could be different or improved in the programme.
- ❖ I am interested in finding out how the Genesis project can be run to increase acceptance and attendance by users and also what obstacles might prevent users from becoming involved with the programme.
- ❖ I am inviting facilitators of the Genesis Project to take part in a focus group which will involve me asking questions to facilitate discussion within your team.
- ❖ The focus group will cover areas such as programme acceptance and barriers, therapeutic relationships and cultural factors.

What happens during the study?

- ❖ If you decide to take part I will meet with you and your team in work hours at a time that suits your whole team where I will facilitate a discussion about the Genesis Project.
- ❖ The focus group will be up to two hours long with a break in the middle for food and refreshments.

- ❖ The focus group will be recorded and these recordings will be kept for 6 years. I am recording the focus group so that I do not miss out any information.
- ❖ The recordings will be kept in a secure, locked cabinet within the University of Auckland Psychology department.
- ❖ The information I get from the focus group will be used to guide and inform the services Genesis offers in the future.

Compensation

- ❖ There will be no compensation given except for the food that will be provided during the focus group.

Risks and Benefits

- ❖ There are no obvious risks to taking part in this study.
- ❖ Benefits of taking part in the study include you being able to have your say about the Genesis Project. Your experiences and insight will then be used to improve the services Genesis offers in the future.

Participation

- ❖ Your participation is entirely voluntary. You do not have to take part in this study, and your decision will not affect your employment.
- ❖ Due to the difficulty in removing your specific contribution to the focus group discussion it will not be possible to do this after it has been made. However up until the focus group takes place you can withdrawal your consent at any time. Also during the focus group you can leave at any time. Furthermore you do not need to discuss all of the topics raised.

Confidentiality

- ❖ The ideas expressed in the focus group will be known to belong to members of the Genesis team.
- ❖ The researcher will take all care not to include material in reports which could personally identify you.
- ❖ The only instance where confidentiality may need to be broken is if someone's safety is at risk. This however will be discussed with the team.
- ❖ Due to the group nature of the focus group there will no confidentiality amongst colleagues.
- ❖ We would ask you that any sensitive and/or personal information revealed is kept confidential within the team.

Results

- ❖ The results of the study will be presented to the team at the end of the study. A summary report will also be made available.
- ❖ The results will be used to inform and guide improvements to the Genesis Programme, for my doctoral thesis and may also be published in an academic journal in the future.

Who should I contact if I have further questions?

- ❖ You can contact me if you have any further questions about the study. Contacting me does not in any way mean that you have agreed to take part. If you want, I could meet with you at a time that suits you to further discuss the study before you decide if you want to take part.
- ❖ You can also contact Robin Woodley or any of the other people under the listed contacts to find out more about my research.

Thank you for taking the time to read this information sheet.

Yours Sincerely,

Elizabeth Mati

Contact Details

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“For any queries regarding ethical concerns you may contact the Chair, The University of Auckland Human Participants Ethics Committee, The University of Auckland, Office of the Vice Chancellor, Private Bag 92019, Auckland 1142. Telephone 09 373-7599 extn. 83711.”

“APPROVED BY THE UNIVERSITY OF AUCKLAND HUMAN PARTICIPANTS
ETHICS COMMITTEE ON 17 NOVEMBER 2010 for (3) years, Reference Number
2010/502”

Appendix I
Facilitator Consent Form

Facilitator Consent Form

Evaluation on the Genesis Project

Elizabeth Mati

This form will be held for six years

Please tick the boxes after you have read the Information Sheet and have had any questions you might have answered.

I have read and understand the Facilitator Information sheet for the Evaluation of the Genesis Project. I understand what is being asked of me. I have had the opportunity to discuss this study with the researcher. I am happy with the answers I have been given.

YES ☐ NO ☐

I understand that giving consent is voluntary and that I may withdraw from the study at any time up until the focus group has taken place.

YES ☐ NO ☐

I understand that my participation in the study is confidential and all care will be taken so that no material that could identify me personally will be used in any reports on this study. However I understand that the views expressed will be known to belong to Genesis employees.

YES ☐ NO ☐

I know who to contact if any problems arise in this study or if I have any questions.

YES ☐ NO ☐

I understand the focus group will be audio recorded, and will last up to two hours.

YES ☐ NO ☐

I understand that the audio recorded focus group will be stored securely in the University of Auckland's Psychology Department for up to 6 years and will then be destroyed.

YES ☐ NO ☐

I understand that I can withdrawal my consent at any time prior to the focus group taking place and I can leave at any time during the focus group and that I do not need to discuss all of the topics raised.

YES ☐ NO ☐

I understand that once I have contributed to the focus group that this contribution cannot be removed.

YES ☐ NO ☐

I understand that the information obtained will be used for the researcher's doctoral thesis, and will also be used in a report summary that will be made available to all employees of the Genesis Project. Results may also be published in an academic journal in the future.

I (full
name).....

consent to taking part in this study

Signature: Date:

“APPROVED BY THE UNIVERSITY OF AUCKLAND HUMAN PARTICIPANTS
ETHICS COMMITTEE ON 17 NOVEMBER 2010 for (3) years, Reference Number
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