RESTORATIVE PRACTICE IN YOUTH JUSTICE RESIDENCES

A Review of Principles, Practices and Evidence

Heike Seel Mitchell

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Introduction

Community exists on many levels, in public and private spheres, in organisational settings and in families and whānau. What principles these communities should rest on and how to best address conflict and transgressions within them is a matter of continual debate. Oranga Tamariki (OT) is interested in exploring the role of restorative practice (RP) in shaping the community culture and practices in its youth justice residences, beginning with one pilot site.

The demographics of youth in justice residences is quite distinct. Most of the young people in youth justice residences are male, between 14 and 16 years old and over 70% identify as Māori (State of Care, 2017). A large proportion had been truant from school before and 70% had dropped out completely. This is of particular relevance since justice residences are providing schooling on site. The majority of young people are admitted due to violence and/or property offences (Lambie, Krynen & Best, 2016).

"Oranga Tamariki is exploring the role of restorative practice in shaping the culture of its youth in justice residences."

The following document presents RP as a relational approach to working with youth in justice residences by including theory and research from fields of criminology, psychology, education and others. More specifically, it will:

a) Survey the current use of restorative justice and RP in working with young people in youth justice Family Group Conferences (FGCs) and schools
b) Clarify the alignment of RP with the larger goals of OT
c) Review literature relating to the use of RP in youth justice facilities elsewhere in the world
d) Identify key lessons for achieving "whole institution" culture change

What is Restorative Practice?

1. Restorative Justice (RJ) in its current form emerged in the 1970s throughout various parts of the world. It was initially focused on bringing victims and offenders of a crime together in a facilitated dialogue to discuss the harm that occurred, hold the offender accountable and determine potential ways for repairing the harm.

2. Over time and across different countries, efforts to respond to offences by young people have varied (Sellers, 2015). Responses can range from neglecting or ignoring the behaviour, punishing harshly, to being permissive and infantilising. Attempts at social discipline can be categorised based on their levels of control and support as outlined by the Social Discipline Window (McCold & Wachtel, 2002). The Social Discipline Window consists of two axes representing different levels of control and support, which result in the combination of four approaches to discipline: neglectful (low support and control), punitive (low support and high control), permissive (high support and low control) and restorative (high control and support).

"The fact of the matter is that punishment hardly ever seems to reform anyone."

3. Now retired, New Zealand Judge Fred McElrea argued that punishment alone is not successful in deterring individuals from transgressing, "The fact of the matter is that punishment hardly ever seems to reform (in the sense of reshape) anyone" (McElrea, 2013, p. 124). Indeed, the following concerns about the use of punishment have been raised: punishment quickly becomes excessive and self-justifying, it does little or nothing to develop social or emotional skills in young people, it can have unintended harmful impacts on children, it is highly individualistic and deficit-focused, and it falls most heavily on disadvantaged communities (Victoria University, 2018).

4. Discussions about implementing RP often lack details about the exact mechanisms which would underpin such an approach. Framing RP in terms of the Social Discipline Window (see McCold & Wachtel, 2002) clarifies RP as providing high levels of support to people while also having a strong sense of control over what is (un)acceptable behaviour. When a transgression occurs, people are supported to be accountable and repair

"Discussions about implementing restorative justice often lack details about the exact mechanisms which would underpin an approach."

the harm, so that the transgression is disapproved of while the responsible person remains a valued member of the community, as described by Australian criminologist John Braithwaite (1989). Achieving accountability is more likely to happen through an inclusive process of engagement rather than an exclusionary one.

5.   In addition to these guiding principles, there is a set of common values, skills and processes that represent RP (Zehr, 2015). Restorative values are rooted in interconnectedness, preventing future harm and respecting everybody's diversity. These values are put into practice by using specific skills. Restorative skills focus on the impact that behaviour has on people instead of the violation of rules/laws, recognise needs and obligations, and include everybody affected in a dialogue about how accountability and repair can occur.

6.   The United Kingdon (UK)-based Restorative Justice Council (2011) (p.3.) defines Restorative processes as those that "bring those harmed by crime or conflict and those responsible for the harm into communication, enabling everyone affected by a particular incident to play a part in repairing the harm and finding a positive way forward" . A significant difference to a punitive approach is that "restorative justice recalls the fundamental *raison d'être* of the criminal justice system. Instead of the abstract legal order, the quality of social relations and social life is (re)positioned as the fundamental reason for criminalising certain behaviour" (Pleysier, Vanfraechem & Walgrave, 2017, p.128, italics in original). This description would sound familiar to anybody who has a basic knowledge of FGCs or RJ in general.

7.   RP can be used as an umbrella term for the use of a variety of restorative processes within communities. The range of RP includes the most formal types of conferences, FGCs, victim offender dialogues and restorative or peace circles, as well as more informal but no less comprehensive application in schools, neighborhoods or workplaces (Zehr, 2015).

8.   The scope of RP is much wider when applied to relationship building and not only legally defined cases of criminal behaviour. Expanding from

"Bring those harmed by crime or conflict and those responsible for the harm into communication, enabling everyone affected by a particular incident to play a part in repairing the harm and finding a positive way forward."

RJ to a whole range of contexts for RPs means moving the focus from single incidents to a restorative way of community building, maintaining and repairing. It also expands beyond RJ programmes that are time-limited to infusing RP into the culture of every interaction, sometimes called the restorative ethos. Therefore, RP is a shift from simply *reacting* to transgressions after they occurred to being *proactive* about building community in which transgressions are less likely to occur in the first place (Hopkins, 2009). To situate restorative justice and restorative practice alongside each other, Professor Chris Marshall, the Diana Unwin Chair in Restorative Justice at Victoria University Wellington, provides the following definitions for clarification:

9. **RJ** is a way of responding to a wrongdoing and conflict that seeks, above all else, to repair the harm suffered, and to do so by actively involving the affected parties in mutual dialogue and decision-making. The process brings victims, offenders and their supporters together, in a safe and controlled environment with trained facilitators to talk truthfully about what has happened, the impact it has had on their lives, and what is needed to put things right again and prevent recurrence.

10. **RP** uses the RJ principles of participation, empathy, problem solving and respectful dialogue to build healthy and equitable relationships between people and to repair relationships when conflict occurs. The term is commonly used in schools (and some workplaces) to describe efforts to create calm, supportive and cooperative institutional culture where the quality of the relationships between people enables everyone to thrive and succeed together.

"A variety of restorative processes provide a menu for building, strengthening and repairing relationships."

11. A variety of restorative processes provide a menu for building, strengthening and repairing relationships. The range of RP that can be applied in a setting are part of a restorative continuum (Wachtel & McCold, 2001). At one end sit the formal well prepared interventions of conferences that address a specific harm. From there, it continues to regularly held circles, and more impromptu meetings that occur spontaneously as conflicts arise in everyday situations. At the informal end of the continuum, basic restorative questions and statements are infused throughout conversations (Wachtel & McCold, 2001).
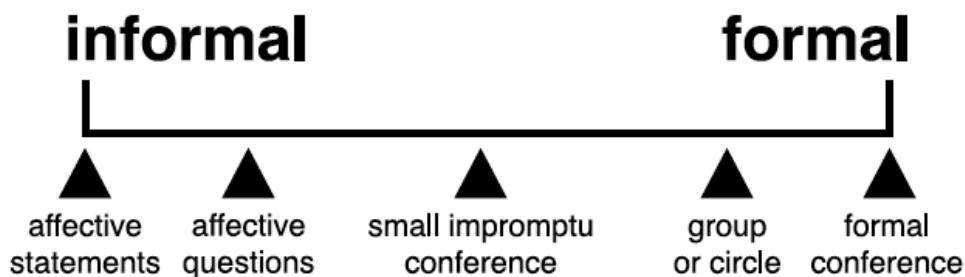
Figure 1: Restorative Practice Continuum [Source: Wachtel & McCold, 2001]

12.   How RP works as a whole systems approach is outlined by the following elements that apply particularly well to working with young people (Restorative Justice Council, 2011, p.25):

- Informal restorative processes are used proactively to prevent harm, as well as in response to an incident of harm.
- They are used by practitioners integrated into their daily work, rather than as a discrete, separate process.
- Restorative skills are used on the spot to deal with conflict as it occurs, rather than after the event and following a time of preparation.
- Informal restorative processes can involve work with just one individual, with two people, or as a group process.
- They can involve training children and young people to use the skills themselves, for example as peer mediators, rather than bringing in an adult or outside professional

13.   Informal RP can be applied to virtually any kind of setting or organisation, including youth residences. The result will be a RP community in which relationships are prioritised and disagreements or infractions dealt with in a way to prevent further harm. Within such a RP community, the need for oversight and interventions for many conflicts are likely be reduced as over time members of the community will be able to better self-regulate (Braithwaite, 2002; Hopkins, 2009). Strong positive relationships promote the development of an intrinsic motivation to act prosocially.

14.   Judge McElrea likened restorative processes to the manner in which families often deal with conflict and peacemaking. He further states that the "value of restorative process in building a sense of community is

"Informal restorative processes can involve training children and young people to use the skills themselves, rather than bringing in an adult or outside professional."

especially important in a multicultural society" and that it "can in fact be a form of participatory democracy" (McElrea, 2013, 131).

15.   Some countries where residences have implemented RP into their institutions are in the US and the Netherlands, but the UK provides the most information and evaluations. One of the first books on the topic was published in 2009 by Dr. Belinda Hopkins titled "Just Care: Restorative Justice Approaches to Working with Children in Public Care" (London: Kingsley). Since then, several evaluations of RP in residences have been published, which report generally positive results (e.g. Littlechild & Sender, 2010; Knight, Hine, Patel & Wilson, 2011; Hayden & Gough, 2010; see appendix for a more detailed description of which institutions have reported on implementing RP).

16.   As an innovative approach for youth justice, RP represents a comprehensive public health approach because it operates on all three levels of prevention; primary prevention in schools and through the use of restorative essentials, secondary prevention through FGCs, and tertiary prevention through the use of RP in residences in order to prevent further harm. So far, RP in Aotearoa/New Zealand has gained traction within recent decades in the youth justice system and schools.

RP in Aotearoa/New Zealand

17.   Almost 30 years ago, Aotearoa/NZ became a pioneer in establishing the FGCs model in the youth justice system. Even though FGCs were not specifically modelled on RJ principles, they are nowadays considered a form of RJ. More recently, application of RP in schools has become more widespread. The current use of RP in youth justice and schools in Aotearoa/NZ is being reviewed.

"Restorative practice in New Zealand has gained traction within recent decades in the youth justice system and schools."

18.   **Application in Youth Justice.** The origins of RP in Aotearoa/NZ have been non-linear and are often traced to the passing of the Children, Young Persons, and Their Families Act in 1989, which laid the foundation for the use of FGCs in the youth justice system (McElrea, 2013). FGCs are an option for addressing a young person's criminal behaviour. The evidence for its effectiveness is promising. Large scale reviews have

concluded that RJ as a therapeutic intervention was found to significantly reduce recidivism, more so than punitive ones (Lipsey, 2009). In Aotearoa/NZ, this effect is reflected in a 12% reduction in overall reoffending and a 23% reduction of the total number of offences after a young person participated in a FGC (Barretto et al., 2018). Public opinion in Aotearoa/NZ also favors such rehabilitative approaches to youth crime (Barretto, Miers & Lambie, 2018). FGCs represent just a fraction of restorative practices, since they are a reactive tool for dealing with harm that has already occurred. An integration with the entire spectrum of the restorative continuum as pictured above is currently taking shape in schools.

19.   **Application in Schools.** RP has been introduced in schools in Aotearoa/NZ by Jansen and Matla's (2009) Restorative Schools initiative and as part of the Positive Behaviour for Learning (PB4L) programme. PB4L is supposed to improve the culture of schools around learning and address disruptive behaviour in a supportive way (Ministry of Education, 2018). An additional component to PB4L centers around the use of RP as "a relational approach to school life grounded in beliefs about equality, dignity, mana and the potential of all people" (Ministry of Education/Te Kete Ipurangi, 2017). Materials about PB4L state that around 173 schools nationwide have implemented the RP module of PB4L. Three books are available as support materials on the PB4L website, in addition to a presentation about the benefits of RP in schools by Professor Chris Marshall.

"Restorative practice has been introduced in schools in New Zealand to improve the culture of schools around learning and addressing disruptive behaviour in a supportive way."

20.   The implementation of RP in the school setting is guided by three components (Ministry of Education/Te Kete Ipurangi, 2017):

- Restorative Essentials: the everyday, informal actions that place emphasis on relationships, respect, empathy, social responsibility and self-regulation
- Restorative Circles: a range of processes to build relationships with and between all people in a school community, maintain those relationships, and enhance positive communication
- Restorative Conference: a process that provides schools with ways to repair harm and restore relationships

21.   These three elements as part of the use of RP in schools map directly onto the restorative continuum by Wachtel & McCold (2001) as discussed above. The frequency of using these three components decrease from RP essentials as part of all interactions, circles scheduled for daily check-ins, and conferences as needed based on the occurrence of serious conflicts. The following PB4L diagram illustrates the connection of these three elements and how they flow together as RP.
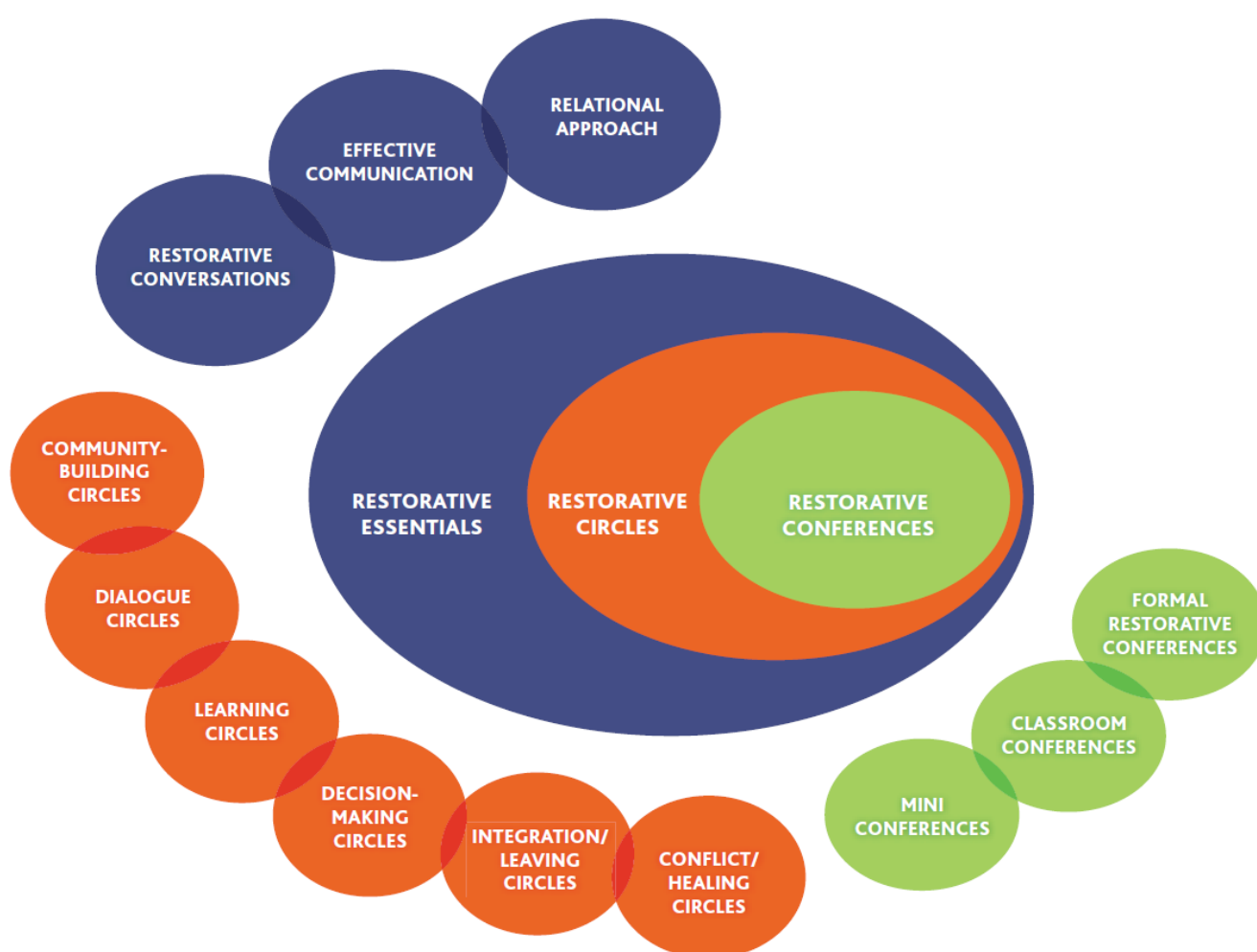

Figure 2: The PB4L Restorative Practice Model [Source: Ministry of Education/Te Kete Ipurangi (2017)]

22.   As PB4L is being rolled out nationwide, it has also been introduced to Kingslea School in a youth justice residence (Lambie et al., 2016). No evaluation or reports have been published and it is unclear how the RP component is used within this setting when the residence itself is not based on a culture of RP. To achieve a whole institution culture change, RP would

"To achieve a culture change, restorative practice needs to be anchored as the culture of care, both in the school as well as the residential setting."

need to be anchored as the culture of care both in the school as well as the residential setting.

23. Based on the PB4L initiative, a group of scholars at the University of Canterbury developed a programme called *Huakina Mai: A whole school strength based behavioural intervention for Māori* (Savage, Macfarlane, Macfarlane, Fickel & Te Hēmi, 2012). The Huakina Mai programme integrates restorative practice with a Māori cultural framework by structuring relationship building and dealing with conflicts around prominent Māori values such as whanaungatanga (building strong relationships), kotahitanga (unity/collaboration) and manaakitanga (culture of care).

24. For example, the process of holding a restorative circle is named *He wā porohita* (circle time) and can include such elements as karakia (prayer/blessing), himene (singing) and whakamutunga (closing). A more formal conference can be structured according to pōwhiri (welcoming ceremony). The authors draw the following parallels (p.85):

> Pōwhiri, as a conceptual framework, is founded on, and champions, relationships as the foundation for the work of searching for and developing new and shared understandings (Smith, 2008). The pōwhiri process is therefore a legitimate conceptual framework during restorative contexts of encounter. Guided by notions of space, boundaries and time, as well as by roles and responsibilities [...].

"After the successful implementation of restorative practice in schools, interest increased for the same to be applied to residential environments for children and young people."

25. RP within Huakina Mai are grouped into three levels of preventative, moderative and responsive aspects, similar to the PB4L diagram depicted in the previous section (restorative essentials, circles and conferences). As such, Huakina Mai builds on PB4L RP by incorporating important Māori cultural principles and moving RP from its western centrism and making it culturally relevant for Māori.

26. Ultimately, the purpose of Huakina Mai is to foster positive identity development and self-esteem. Self-esteem is said to consist of a sense of identity, belonging, security and purpose. However, it is noted that "what leads to self-esteem in one culture may be different in another" (p.74). In

regards to youth justice, it appears that the current set up of residences does little to contribute to the development of self-esteem through a sense of identity, belonging, security and purpose. Māori youth are especially affected in this regard.

27.   Due to their primarily involuntary arrangement and the shared space as living/learning communities, both schools and residences share their setup as intentional institutions (Bazemore & Schiff, 2010). Consequently, after the successful implementation of RP in schools, interest increased to apply RP to residential environments for children and young people (Hopkins, 2009). It has been observed that for persistent young offenders, a single FGC might not be enough to induce lasting behaviour change. These youth will likely benefit more from the reparation plan and the required engagement with social services than from the meeting alone (Lauwaert & Aertsen, 2015). Consequently, immersing them in an environment based on RP could amplify the desired effects of a FGC over a longer term. The next sections review the alignment of RP with the aims of improving care for young people in Aotearoa/NZ.

"Research with youth living in secure residences in the Netherlands has found evidence that the climate of the residence has a direct impact on a young person's level of empathy."

Alignment of RP with Aims of Improving Care

28.   This section outlines how implementing RPs into residences will achieve several of the recommended changes outlined by the Expert Panel (2015) and the most recent State of Care report (2017); to provide a consistent system wide practice framework (Expert Panel Report, 2015, p.11), make residence environments more child centered, youth friendly, family like and therapeutic (State of Care, 2017, p.38), support trauma informed practice (State of Care, 2017, p.18) and provided the young people "with a solid platform for enduring change to enable them to grow into flourishing adults" (State of Care, 2017, p.38).

RP as an organizational vision and clear framework

29.   The most recent State of Care report (2017) noted the need of a national vision of care, and without a cohesive organisational framework delivery of care risks becoming inconsistent. The delivery of OT services based on RP could provide an overarching vision from which every

provider at OT operates (Williams & Segrott, 2017). RP as a vision shapes the culture of a community and provides a blueprint not only for everyday interactions, but also for dealing with normal conflict and serious transgressions. RP moves the focus from behaviour management to relationship management, from demanding compliance to valuing connection. Working from a broad spectrum of informal RP requires practise and it is not a programme that would be attended by a select few for a limited amount of time. The application of RP to youth justice residences is based on a "restorative community justice model for residential care" as outlined by Bazemore (2005, p.54) and Hopkins (2009).

30.   **Impact of climate.** The climate of an organisation is evident in its expectations for behaviours and interactions and it is sometimes also referred to as the culture of an environment. Research with youth living in secure residences in the Netherlands has found evidence that the residence climate has a direct impact on a young person's level of empathy (Van der Helm, Stams, Van der Stel, Van Langen & Van der Laan, 2012), prosocial behaviour (Eltink, van der Helm, Wissink & Stams, 2015) and youth's internal locus of control (Van der Helm, 2011). All of these capacities are necessary for successfully dealing with adversities.

31.   An organisation's climate impacts everybody involved. The overall climate in a living and working environment not only affects relationships between staff and residents, but also between residents and between staff themselves. For example, an organisation that tolerates or endorses a culture based on coercion and fear can also exhibit those characteristics on an organisational and management level (De Valk, Kuiper, Van der Helm, Maas & Stams, 2016). When organising a community based on RP, it is essential to have leadership buy in and a constant modeling of RP by key personnel in order to ensure credibility and permeate RP into organisational culture (Pranis, 2006).

"An organisation's climate affects everyone. A repressive climate can create a downward spiral of coercion, mistrust and aggressive incidents."

32.   Even though closed or repressive environments may intuitively make sense to 'toughen up' delinquent youth, doubts have been raised about their usefulness (Van der Helm, 2011). A repressive climate can create a

downward spiral of coercion, mistrust and aggressive incidents (De Valk et al., 2016).

33.   It appears that, "when juvenile correctional facilities only focus on custody, control, and order maintenance, the only behaviour modification that may occur is the enhancement of favorable attitudes toward crime and violence as juveniles adapt to delinquent subcultures within these facilities to survive and avoid exploitation or victimisation" (Sellers, 2015, p.63). Research has shown that bringing at risk youth together in a residence bears the risk of breeding a negative peer culture (Lambie & Randell, 2013). It is in the hands of frontline staff to promote a positive culture instead, by being actively involved with young people during free time to promote prosocial interactions (Ahonen & Degner, 2012).

34.   A more open climate creates an environment where growth and development can occur, for both the residents and staff. Pranis (2006) reported on the implementation of RP in an adult prison in Minnesota (USA). The shift in organisational climate had a direct impact on residents and staff, one of whom observed "The more we didn't care about them (inmates), the more we didn't care about each other" (p.16). This statement is a clear reflection of the principle of interconnectedness.

35.   A similar influence has been observed in a youth justice facility based on trauma informed care; "although [trauma informed care] is often focused on improving staff-to-client interactions, the success of [trauma informed care] is directly related to improvement in staff-to-staff and supervisor-to-staff interactions" (Baker, Brown, Wilcox, Verlenden, Black & Grant, 2017).

"An open climate creates an environment where growth and development can occur for residents and staff."

36.   A local example of a substantial change in the climate of a prison was reported by Workman (2007), who was part of the team that started a faith based unit at Rimutaka Prison in 2003 (He Korowai Whakapono). In addition to the Christian value system, a peacemaking approach similar to RP was implemented that was based on RP values. While this faith and relationship based unit screened potential residents before admission (which is not realistic in youth justice), it recorded an impressive drop of incidents within the unit as well as lower recidivism rates. The experiences recorded at He Korowai Whakapono show how a clear vision and

framework for community living can have a substantial impact on a unit and benefit all people, residents as well as staff.

37.   **RP as an ethical framework.** Not only does RP improve the organisational culture, it could also directly benefits the ethical mandate of OT. Victoria University of Wellington psychology professor Tony Ward and colleagues have pointed out how staff within correctional settings can struggle with balancing their responsibility for care with that of ensuring safety (Ward, Gannon & Fortune, 2015). Staff are required to consider the (security) needs of themselves, the offender/resident, as well as the community. Ethical dilemmas are therefore commonplace and require a framework to guide decision making.

38.   RP is suggested as one of the ethical guidelines based on the premise "[...] that all criminal justice practices (e.g., sanctioning and rehabilitation) should directly contribute to the repair of damaged social relationships [...]" (p.55). As such, RP can serve to provide a cohesive framework of care and connect various services that sit on the continuum of OT's mission.

39. =   Ward et al. (2014) also recommend a crime intervention model that consists of the following three levels (pp.39, italics in original):

> [W]e suggest that it is helpful to view *RJ* as an overarching ethical umbrella (i.e. the focus on moral repair specifies how crime should be responded to and what kinds of responses should be expected from offenders, victims and the community), *offender rehabilitation* as a means of creating offender capabilities within this umbrella (i.e. offender programmes have a strong value base that is strongly constrained by the concept of moral repair - and RJ - which is evident in the construction of positive, mutually respectful, pro-social intervention programmes), and *desistance* processes as ways of cementing initial behavioural and psychological changes into fulfilling and sustainable lifestyles (i.e. rehabilitation programmes are scaffolds that assist the process of re-entry and reintegration. Once adaptive social networks are consolidated, typically they are no longer needed).

"Restorative practice could improve the climate in youth justice residences as well as the organisation."

40.   Embedding RP into all areas of youth justice would integrate OT in a number of ways. RP would allow for clear ethical standards, provide a connection to the practice of FGCs and potentially extend them for reintegration purposes in order to foster desistance from crime (as discussed in a later section). Finally, RP could improve the climate in youth justice residences as well as the organisation as a whole.

RP in a child centered system of care

41.   The philosophy of a child centered system aligns well with that of a restorative community in supporting the young person towards becoming their best possible self. It is likely that long term negative impacts of childhood conduct problems on a young person's life result in part from excluding children from communities that foster more prosocial behaviour (Wertz, Agnew-Blais, Caspi, Danese, Fisher, Goldman-Mellor, … & Arseneault, 2018). This includes schools, neighborhoods and spiritual communities. Hence, the individualistic focus of punishment by excluding people from exactly those prosocial communities has been criticised for its detriment to social relationships, thereby reinforcing lack of prosocial ties (Morrison, 2001). Integrating children into a supportive community is thus necessary to support a healthy growth and development.

42.   The Children's and Young People's Well-being Act (CYPF Act; 1989) states its purpose to be the following:
- ensuring that where children or young people commit offences […] they are dealt with in a way that acknowledges their needs and that will give them the opportunity to develop in responsible, beneficial, and socially acceptable ways (p.36, section 4(f)ii),
- that a child or young person who commits an offence should be kept in the community so far as that is practicable and consonant with the need to ensure the safety of the public (p.187, section 208(d))
- that any sanctions imposed on a child or young person who commits an offence should take the form most likely to maintain and promote the development of the child or young person within their family, whānau, hapu, and family group (pp.187, section 208 (f)).

"Integrating children into a supportive community is necessary in aiding a healthy growth and development."

43. Based on the principles of the CYPF Act, if the need for public safety supersedes that of keeping the young person within the community, placing them in a residence should be responsive to their needs and not unnecessarily strain ties with their community. This is especially important in light of the accumulating evidence on the negative consequences of confinement and housing people with a history of criminal behaviour together (Lambie & Randell, 2013).

44. In 2016, Lambie et al. compiled a comprehensive report for the Ministry of Social Development titled "Youth Justice Secure Residences: A report on the international evidence to guide best practice and service delivery". Unfortunately, the authors did not include any evidence from the literature of how RP have positively changed youth justice residence communities in various parts of the world (e.g. McCarney, 2010; Littlechild & Sender, 2010; Knight et al., Hayden & Gough, 2010; 2011; Davidson, Dumigan, Ferguson & Nugent, 2011). The following section reviews how RP could be applied specifically in Aotearoa/NZ youth justice residences.

45. There could be a beneficial connection between using RP in both schools and youth justice through early diversion (Du Rose & Skinns, 2013). Because the vast majority of young people in youth justice residences had previously left school (70%; Lambie et al., 2016), a reduction in suspensions/expulsions through the use of RP could potentially keep more young people connected to their schools and communities, and preventing them from ending up in the youth justice system. A comprehensive implementation of RP could thus potentially disrupt school-to-prison pipeline and be regarded as appropriate for both *prevention* (in schools) a well as *intervention* (in residences).

"Young people need to be treated as developing beings and not deficient adults."

46. A system that is focused on the child or young person needs to take a developmental perspective. For example, when working with young people during adolescence, the youth will be in the process of exploring their identity and it is to be expected that there will be high emotions and increased risk-taking. During this developmental stage, trying to ensure order and safety is challenging in a regular home-setting, let alone working with a group of young people in a residence. Limiting the number of youth

in a living group will thus allow for a better living environment and facilitate the use of RP to build relationships and resolve conflict.

47.   Young people need to be treated as developing beings, not deficient adults. With the help of RP, they are guided in developing relationships and how to deal with making mistakes and repairing harm as they grow up and live in the community. Every interaction presents as an opportunity for growth.

48.   A child centered system is one based on relationships. Children do not learn and develop in isolation, on the contrary, prosocial behaviour needs to be learned in prosocial environments. According to social cognitive learning theory by Bandura (2001), various social and psychological factors interact to produce behaviour. The characteristics of an environment a child or young person is immersed in will have a substantial impact on their behaviour. This applies to the community they grow up in as much as it does to living in a residence.

49.   Care staff in residences play a crucial role for providing young people with a sense of community necessary for their well-being. It is recommended to enable care staff to support treatment instead of merely managing behaviour (Peacock & Daniels, 2006). Supporting a young person in dealing with conflict constructively in a restorative environment would impact the culture within a residence and increase their capacity for prosocial relationships in the future. It is not surprising that "many studies on recidivism among institutionalised delinquents find that a lack of appropriately tailored treatment programming and trained, high quality staff will yield no better recidivism rates than merely warehousing the youths as they pass the time" (Sellers, 2015, p.63).

"Staff in residences play a crucial role in providing young people with a sense of community necessary for their wellbeing."

50.   In addition, an emphasis should be put on improving the working alliance of all care staff with the youth (Ross, Polaschek & Ward, 2008), not just those who are deemed 'practitioners' (e.g. social workers, psychologists etc.). Developing strong relationship with young people is the basis for any successful intervention. In particular, the skills of warmth, genuineness, empathy and effective communication have been identified as central to building and sustaining relationships. Without these relationships with staff, young people are unlikely to show the engagement

necessary for change to occur (Prior & Mason, 2010). Explicitly building engagement based on RP would provide staff with a consistent way of providing this support and fostering positive ties in residence.

51. To allow the child or young person to imagine a successful future for themselves, the focus should lie on their resilience: "[A] child comes from an impoverished neighborhood, experienced chronic physical and emotional abuse, lost a parent to incarceration, survived 11 foster care placements, and still is able to wake up each morning and go to school - that is resiliency" (Peacock & Daniels, 2006, p.151).

52. Even though RJ in the form of FGCs and RP in schools have been successfully implemented in Aotearoa/NZ, a comprehensive application to other areas of child and youth care have not been attempted as of yet. In light of a resilience and strength based perspective to working with young people, the implementation of RP in residences would add another important dimension to the current use of restorative approaches in schools and FGCs. It would expand the currently isolated practices of FGCs through the courts and RP within schools, by supporting more breadth of its application across the child and youth sector and inform a coherent vision about the critical role of relationships for young people.

RP and culturally responsive services for Māori

53. More than 70% of young people in youth justice residences identify as Māori (State of Care, 2017) and the Expert Panel report (2015) clearly stated the need to "build a high degree of cultural competency and confidence to support the needs of all children" (p.11). Gray (2009) argues that current patterns of individualisation of risk and responsibilisation of offenders in government responses to youth offences reproduce precisely the systemic inequalities that create the conditions for offending in the first place.

"More than 70% of young people in youth justice residences identify as Māori."

54. The removal of Māori young people from their whānau, hapū, and iwi, be it for the sake of safety for themselves and others, can thus be considered a form of contemporary colonisation based on western individualism, as described by the research team at Te Kotahi Research Institute, University

of Waikato (Pihama, Smith, Te Nana, Cameron, Mataki, Skipper & Southey, 2017). In their upcoming publications, this research project on 'Investigating Māori approaches to trauma informed care' will provide invaluable information for working with Māori youth in residences. More information specifically on trauma informed care is provided in a subsequent section of this document.

55.   Being confined to a residence whose rules are dictated by predominantly pākehā clinicians and administrators can be an example of how oppression operates in society. Even while attending to security concerns, democratic structures can be put in place to minimise the negative effects of living in residence. By interpreting behaviour as connecting to past experiences instead of a reflection of a bad character, discrimination of marginalised youth can be reduced.

56.   In addition, putting an emphasis on valuing the knowledge and contributions of Māori staff members and actively reinforce their professional development will inadvertently have a positive effect on how youth see care staff being treated as valued members of the team and not only as enforcers of rules and behaviour management (Peacock & Daniels, 2006).

57.   The Treaty of Waitangi rests on the three principles of partnership, protection and participation (Savage, Macfarlane, Macfarlane, Fickel & Te Hēmi, 2012). Additionally, OT identifies "Whakapapa - the connection between significant people, places and Māori values, Manaakitanga - caring for and giving service to enhance the potential of others, and Rangatiratanga - enabling whānau self determination" and as part of their guiding principles for wellbeing (Oranga Tamariki, 2016). A RP framework would honor these principles and allow for a more collaborative relationship based on respect for the RP process, not pre-determined outcomes.

"Several programmes exist in NZ that have included Māori principles and practices in order to be more culturally relevant when working with young people"

58.   Several programmes exist in Aotearoa/NZ that have included Māori principles and practices in order to be more culturally relevant when working with young people. In schools, *Huakina Mai: A whole school strength based behavioural intervention for Māori* adapts RP from a

Māori cultural framework, as discussed in an earlier section (Savage, et al., 2012).

59.   In the justice system, one example was developed by the Department of Corrections for high-risk youth in Young Offender Units, called *Mauri Tu, Mauri Ora* (Kilgour & Borg, 2016). The programme rests on two cultural models. For one, it utilises a tuakana-teina strategy in which youth who have been in residence longer mentor those who just arrived.

60.   The other is the te whare tapa whā model, described as providing a "Strengths-based focus for lifestyle change" (Kilgour & Borg, 2016, p.3). It is based on "the four cornerstones (or sides) of Māori health": Taha tinana (physical health), taha wairua (spiritual health), taha whānau (family health) and taha hinengaro (mental health) (Ministry of Health, 2017, p.1). No formal evaluation of *Mauri Tu, Mauri Ora* has been published yet. Nonetheless, both of these cultural components would integrate well into a residence with a RP approach and together they could provide a strong culture of care in residences inclusive of tikanga Māori.

61.   Another example was Te Hurihanga, a "therapeutic, residential programme [that] is bicultural and community-focused" (Centre for Research, Evaluation and Social Assessment [CRESA], 2009, p.11). Te Hurihanga operated as "a 9 to 18 month therapeutic programme for young males (and their whaanau) aged 14 to 16 years who have appeared before the courts and who live within the Hamilton/Waikato region" (p.25).

62.   The cultural sensitivity of the programme was reported as one of its major strengths and was well received by whānau. The pilot evaluation showed a good potential of the programme; even though based on a very small sample of only four young people, there were no recorded offenses for youth who completed the programme (timespan 1-7 months) (CRESA, 2009). Unfortunately, the programme was discontinued in 2010 due to its high cost (Ministry of Justice, 2010).

"In order to develop culturally appropriate RP, Māori adults and youth have to be consulted about their needs and preferences."

63.   A challenge for Te Hurihanga was how to deal with disruptive behaviours within the residence. The contingency management (points) system proved cumbersome and did not provide satisfactory outcomes (CRESA, 2009). Instead of utilising a rigid behaviour rewards system, the

integration of RP as a tool for building community and guiding communal living would add an effective component to Te Hurihanga. Combining the two would capitalise on the success of the pilot project and combine it with the strengths of a relational approach of RP. Restorative Te Hurihanga could be a promising model for youth justice residences that is culturally informed with the potential for significant reduction in reoffending.

64.   In order to develop culturally appropriate RP, Māori adults and youth themselves have to be consulted about their needs and preferences about how to implement RP in a residence (Peacock & Daniels, 2006). To be culturally proactive, it is essential that communities themselves define what wellbeing means (Smith, 2012). The success of an implementation also needs to be considered by measuring outcomes defined by Māori (Durie, 2012). Finally, it needs to be acknowledged that this report was written by non-Māori and it therefore does not necessarily reflect relevant issues adequately and comprehensively.

Integrating RP with evidence based programmes

65.   A central recommendation of the report by the Expert Panel (2015) was to increase the use of evidence-based programmes. Employing an evidence based paradigm for service delivery seems like a straight forward agenda, but quick fix interventions unfortunately reappear on a regular basis.

66.   For example, 'get tough' military style activity camps remain popular despite extensive evidence of their ineffectiveness (Moth & Evans, 2011; Sellers, 2015). Contrary to the opinion in Aotearoa/NZ and claims that these camps "look promising" (Lambie et al., 2016, p.47), there is no evidence that they deliver improved results over standard practice. In fact, there is a high risk of exacerbating mental health and attachment difficulties for participants.

"Get tough military style activity camps remain popular as a quick fix intervention, despite extensive evidence of their ineffectiveness."

67.   When evaluating the numbers provided by the Ministry of Social Development, these camps have also not shown significant improvements in recidivism compared to Supervision with Residence Orders (MSD, 2015). Other outcomes of interest have not even been assessed or reported

on, for example the impact on mental health/substance abuse and social functioning back in the community. At the same time and unsurprisingly, military style activity camps present an enormous logistical challenge and cost significantly more than regular residences (MSD, 2016). Such punitive and discipline oriented programmes have thus not been able to deliver the results they promised and cannot be considered better than care as usual (Lipsey & Cullen, 2007; Sellers, 2015).

68. In contrast, a number of meta-analyses showed a distinct advantage of youth justice programmes that were based on therapeutic principles (Lipsey & Cullen, 2007). Particularly for young people, the following interventions have compiled a strong evidence base: Risk Need Responsivity Model, Good Lives Model (both incorporated into Mauri Tu, Mauri Ora), Multi-systemic Therapy and Functional Family Therapy (both incorporated into Te Hurihanga) (California Evidence-Based Clearinghouse for Child Welfare, 2018; Lipsey & Cullen, 2007).

69. No matter what programme is employed, the bedrock of successful therapeutic interventions is a solid working relationship (Moth & Evans, 2011). Relationships are the basis on which engagement rests. Research has repeatedly shown that relationship factors are one of the most influential element of successful interventions. Without solid relationships, young people especially will not engage and not benefit from programmes (Prior & Mason, 2010).

70. Researchers have indeed found an impact of relationships in residence on the ability of youth to deal with challenging social situations (Eltink et al., 2015). In residences built on a therapeutic model of care, which includes high support, adequate structure and a focus on growth for young people, youth were able to handle social problems significantly better. On the other hand, more aggression was observed in residences with repressive cultures based on the use of power, control and harsh punishment.

71. In addition to a therapeutic approach, two other significant factors for success were to specifically target offenders with the highest risk, as well as ensuring the fidelity and quality of service delivery (Lipsey, 2009). These

"Using restorative practice to guide the culture and climate in a residence would be a stepping stone for improving engagement of youth with interventions and therefore increasing the potential for successful reentry."

points justify the use of RP with the most serious young offenders and remind us of the importance of adequately training staff.

72.   The use of RP to guide the culture and climate in a residence would be a stepping stone for improving engagement of youth with interventions and therefore increasing the potential for successful reentry. Internationally some residences have already shifted to using RP in residences. Experiences of implementing RP by itself as well as integrated with therapeutic models can be found in appendix 1.

RP as trauma informed care

73.   Trauma informed care needs to be a priority in all aspects of youth justice. We know that maltreated children make up the majority of youth in youth justice residences (Lambie et al., 2016) and this pattern is particularly true for seriously violent youth (Fox, Perez, Cass, Baglivio & Epps, 2015). For serious and persistent young offenders followed by the Dunedin Longitudinal Study, an interaction has been observed between neuropsychological problems starting early in childhood and environmental stressors such as poverty and trauma/abuse. Over time, these deficits can compound into aggression and offending behaviours (Moffitt, 2018). These experiences of trauma need to be taken into account when dealing with children and youth in the justice system.

"We know that maltreated children make up the majority of youth in justice residences, particularly for seriously violent youth."

74.   In a survey of 204 young people admitted to Aotearoa/NZ youth justice residences in 2014, boys reported an average of 1.75 out of 5 traumatic experiences presented, and girls even reported an average of 2.5 out of 5. It was not reported what particular events were most often endorsed. In addition to trauma, around 80% of these young people also reported significant mental health problems, particularly Alcohol/Drug use, followed by anger/irritability (McArdle & Lambie, 2017). The pattern of young people in residences presenting with a significant trauma history should guide any and all policy decisions, as there will be an impact on behaviour and response to interventions.

75.   In research studies, traumatic experiences during childhood and adolescence are recorded as so called adverse childhood experiences

(ACE). ACE are a collection of events that significantly impact development, including abuse, neglect, violence, substance abuse or mental illness in the home, caregiver separation/divorce, and having a household member incarcerated (Fox et al., 2015). Many of these ACE disrupt healthy attachment, which is necessary for developing and maintaining appropriate relationships throughout life. A disruption in attachment impacts the views about oneself "as being not worthy of love" and others as not trustworthy or responsive to one's needs (Heynen et al., 2018, p.1415).

76. During childhood, a disruption of healthy attachment between the child and the primary caretaker(s), as well as antisocial ties with peers starting in adolescence can push a young person into a cycle of social isolation and offending (Moffitt, 2018; Wright et al., 2001). Trauma and its consequences are therefore potential underlying reasons/contributors to offending, especially for serious and violent offenders (Fox et al., 2015).

77. Typically, the negative effects of a traumatic event on mental health are represented by the diagnosis of post-traumatic stress disorder (PTSD). Due to its conceptual origins of treating veterans of war, PTSD is usually anchored to one specific and life threatening traumatic experience, with which symptoms are associated. PTSD therefore does not apply to most of the adverse childhood experiences listed above, even though they may severely impact a child's development.

78. The differences between this so called developmental trauma and PTSD have been extensively studied. Not surprisingly, if children are exposed to developmental types of trauma long-term (e.g. neglect, abuse, witnessing violence), their symptoms will reflect the disruption in attachment through helplessness in developing healthy relationships, by being either overly compliant/withdrawn or (more likely in youth justice) defiant (Van der Kolk, 2005).

79. A leading researcher and therapist in this area describes the following "symptoms of chronically traumatised children and adults: pervasive biological and emotional dysregulation, failed or disrupted attachment, problems staying focused and on track, and a hugely deficient sense of

coherent personal identity and competence" (Van der Kolk, 2014, p.166). He continues by stating that "social support is a biological necessity, not an option, and this reality should be the backbone of all prevention and treatment" (p.167).

80. By definition, attachment difficulties continue to interfere with successfully dealing with social problems, which includes those that will arise when living in a residence (Heynen et al., 2018). It follows that "a primary task for the [residence] manager and staff is to ensure that systems that are stressed do not respond in the same way as the young people who are being looked after" (Davidson et al., 2011). A lack of trauma informed care has been specifically criticised by the Expert Panel for Modernising Child, Youth and Family (2015) and there is concern about its consequences on discipline in residences (De Valk et al., 2016).

81. The negative impact of trauma or mental health/addiction problems are not remedied by increased punishment and discipline because "rewards and punishments increase motivation, and motivation is not the primary problem for these youth. The problem is their attachment difficulties, sensitised nervous system and lack of emotional skills" (Wilcox, 2008). Instead, primary needs of safety, trust and support need to be established in order to achieve a better outcome for the young person. Before targeted interventions can be attempted, a resident fist needs to feel safe and any trauma history and attachment difficulties require attention (Lambie et al., 2016).

"The negative impact of trauma or mental health or addiction problems are not remedied by increased punishment and stricter discipline."

82. A repressive environment will reinforce attachment difficulties and further diminish the youth's ability to form successful relationships (Heynen et al., 2018). RP provides a framework for working from a relational approach that is sensitive to the youth's history of trauma and disrupted relationships with caregivers.

83. It is advisable to embed RP as a relational strategy for engaging, preventing and dealing with conflict, within a trauma informed therapeutic approach. A few institutions have incorporated RP with trauma-informed programmes such as Risking Connection (Saakvitne, Gamble, Pearlman, & Lev, 2000), or the Sanctuary Model (Bloom, 2013). For example, the

Sanctuary Model (Bloom, 2013) is based on daily meetings that take place in circle to address the current state of every resident, their goals and challenges. Without using restorative terminology, these processes rest heavily on RP and would benefit from being explicit in the use of the theory and practice of restorative interventions.

84.   We know that many if not most young offenders have been seriously victimised themselves (Fox et al., 2015; McArdle & Lambie, 2017). A common factor that has been repeatedly identified in research studies is the role of attachment and healthy relationships for children and young people who experienced developmental trauma. RP is a responsive approach to working with young people in a caring and respectful way, by not retraumatising them through a repressive residential climate or the use of restraint. There is thus a congruence between trauma informed approaches and the use of RP.

85.   At the same time, RP provides a caring and supportive environment for *all children*, irrespective of their trauma history. Not unlike the RP component within the wider PB4L pedagogical strategy, a RP approach in residences can fit seamlessly within a wider therapeutic and trauma informed approach, such as reported from residences in Northern Ireland (see McCarney, 2010), Canada (see Baker et al., 2017), and the United States (see Park, Carlson, Weinstein & Lee, 2008; Wilcox, 2008). Please refer to the appendix for more details on these programmes. The following section introduces evidence from the international literature on the effects of RP within youth residences.

"Restorative practice provides a caring and supportive environment for all children, irrespective of their trauma history."

Use of Restorative Practice in Residences Internationally

86.   Internationally, RP has also been implemented for working with young people in settings other than in schools and during the trial and sentencing phase in youth justice (FGCs). In this section, experiences with and benefits of implementing RP within a residential context for young people are reviewed. As introduced above, the application of RP to youth justice residences rests on a set of values, which translate into skills that are then applied to interactions.

Values

87.   Using RP in residences is based on the belief that "Social life draws its strength not from threat, coercion and fear, but from persuasion and motivation, based on trust, participations and mutual support" (Walgrave, 2008, p.88). If we disregard the role of social bonds within the justice system, it may result in "the infliction of forms of punishment that tend to induce anger rather than remorse in those punished" (Johnstone & Ward, 2010, p.73).

88.   The successful implementation of RP depends on a clear set of values, which have been referred to as the *restorative mindset* (Hopkins, 2009). A restorative mindset is characterised by "the commitment to building, nurturing and, when they go wrong, repairing relationships. This does not mean avoiding conflict for the sake of peace, but being competent and confident to address issues as they arise […]" (p.33).

"The successful implementation of restorative practice is dependent on the commitment to building, nurturing and repairing relationships."

89.   The paradox in the current system lies the lack of a clear value system and the inconsistent treatment of young people at different points within the youth justice system. While community based approaches and FGCs are the standard when youth first come in contact with the system, the more they reoffend and recycle through the standard process the less of a relational and community focused approach is taken. Eventually, youth get sent to residences oftentimes far from their home community. Removing somebody from their community will does not result in them miraculously adapting more prosocial behaviours.

90.   An alternative approach would be to *increase* community and relationship based interventions based on RP, if FGCs alone has not proven successful for keeping the young person out of the justice system. Indeed, the quality and intensity of therapeutic interventions for high risk youth have been identified as key factors in reducing recidivism (Lipsey, 2009). The so called risk dosage principle suggests young people who reoffend should receive more support, not less (Sperber et al., 2013).

91.   Applying RP to youth justice residences is also based on the premise that sentencing a young person to live at a residence can be considered sufficient punishment and their stay in the facility should provide the appropriate support and interventions to facilitate the young person's growth, development and later reintegration into their community (Staines, 2013).

92.   Creating an environment that will promote residents' growth is also referred to as a therapeutic community. Therapeutic communities are not designed as programmes that are attended through sessions. Instead, the whole environment of the residence is based on certain principles to benefit the outcome for residents. The main principle is the focus on community living instead of treating each person as if they were living independently of the group dynamics. Every interaction between staff and residents is seen as an opportunity for positive engagement and the same is encouraged between residents as well.

93.   Even though the model originated for inpatient psychiatric patients, it has since been applied to other kinds of residential settings, such as the Missouri Model for juvenile justice (see Annie E. Casey Foundation, 2010). Evaluations of the Missouri Model attests to the positive impact of a therapeutic approach by reducing assaults in residences, less use of restraints and isolation, as well as lower recidivism (Lambie et al., 2016).

"Overall care will be improved if front line care staff are given an active part in the treatment of youth."

94.   Team-based therapeutic environments improve long-term outcomes and contributes to the youth's successful growth and development (Peacock & Daniels, 2006). Overall care will be improved if front-line care staff are given an active part in the treatment of youth. This approach

would require more education and training for frontline staff to use their skills in every interaction to effectively engage with the young people based on a clear set of values, as well as training in a restorative skills set, as described in the following section.

Skills

95.   The previously mentioned Restorative Essentials in the PB4L restorative curriculum can be a foundation for RP in other settings as well. Staff members model the use of respectful language, affective statements and questions, inquire about needs and generally present with a non-judgmental and supportive attitude. Wachtel and McCold (2001, pp.127) identified six principles of restorative practice:

a.   Foster awareness of how others have been affected

b.   Avoid scolding or lecturing

c.   Involve offenders actively

d.   Accept ambiguity about who is at fault

e.   Separate the deed from the doer

f.   See every instance of wrong-doing and conflict as an opportunity for learning

96.   A particularly relevant skill for staff in residences is the ability to remain calm and focused when dealing with a stressful situation. In order not to escalate a conflict, "it is important that staff do not become reactive, overly controlling, fragmented, rigid, hyper-vigilant and/or helpless" (Davidson et al., 2011, p.24). Many of the skills described for RP are in fact representative of a social work approach (Davidson et al., 2011) and most are also directly related to working from a trauma informed care model, which is further described in a subsequent section. Once the restorative values and skills are clearly established, there are certain process that facilitate a restorative relationship. The most prominent ones of circles and conferences are introduced in the following section.

"It is important for staff in residences to remain calm and focused when dealing with a stressful situation."

Processes

97. Hopkins (2009) provides a useful diagram about how RP is infused into every level of community, which is an integration of the restorative continuum by Wachtel and McCold (2001) and the PB4L Restorative

Practice diagram for schools. It extends from the bottom of the pyramid of everyday restorative interaction through the center of informal restorative conflict management to the tip where formal and well-prepared restorative conferences or circles take place. The dice represent the approximate number of people involved in the interaction.

Figure 3: Restorative responses – who by and who for? [Source: Hopkins, 2009]

98.   A number of circle processes that are used in schools can be adapted to the residence setting. Some examples of circles are integration/leaving circles, decision making circles, and community building circles. An example of potential participation in decision making by the youth could apply to the physical spaces of residences. What are the young people's perception of how a residence could become a restorative space that facilitates positive connections without sacrificing safety? An example of such collaborative project is provided by the architectural firm Designing Justice + Designing Spaces, which has developed a toolkit and a booklet.

"Some of the circle processes used in schools can be adapted to the residence setting."

99.   The reason for allowing for greater decision making input from the youth is the subsequent increase in commitment to the community, its values and the decisions that were made together (Bandura, 2001). This in turn, can lead to a decrease in property damage (Boulton & Mirsky, 2006).

100.   The much acclaimed Missouri Model (Lambie et al., 2016) does not explicitly refer to RP as part of their approach, but the philosophy of *minimising fear, maximising trust, fostering respect* incorporates restorative essentials and circles aptly, as described in the following excerpt (Annie E. Casey Foundation, 2010, p.29):

    Ultimately, DYS [Division of Youth Services] has learned, the safety of any group is directly correlated with the interpersonal atmosphere that exists among the young people and between the youth and their dedicated staff team. As a result, DYS youth specialists are trained extensively in conflict management and employ a number of techniques designed to defuse potential trouble and foster a safe

environment. At least five times per day the youth check in with one another, telling their peers and the staff how they feel physically and emotionally. And at any time, youth are free to call a circle—in which all team members sit or stand facing one another—to raise concerns or voice complaints about the behavior of other group members (or to share good news). Thus, at any moment the focus can shift from the activity at hand—education, exercise, clean up, a bathroom break—to a lengthy discussion of behaviors and attitudes. Staff members also call circles frequently to communicate and enforce expectations regarding safety, courtesy, and respect, and also to recognise positive behaviors. Youth specialists are especially mindful to protect the emotional safety of youth—refraining from language that might be perceived as disrespectful, and stepping in to protect young people from any unkind actions by others in the peer group.

101.　　It is often discussed how children and young people need structure in order to grow and develop successfully. Nevertheless, in an attempt to provide structure there is also a risk of becoming rigid and controlling. RP provides a structure to the process of community building and conflict transformation, while leaving all participants room to adapt it to the needs of people and also the setting. For example, while the structure of circle process remains fairly similar, different circumstances will include different scope of participants, different people could take turns in facilitating, and different opening/closing rituals can be utilised, therefore making each circle relevant for the respective participants.

"One type of circle that would be specific to RP in residences concerns the young person's end of stay and reentry into the community."

102.　　**Reintegration.** One type of circle that would be specific to RP in residences concerns the young person's end of stay and reentry into the community. The RJ practice has been criticised for placing an unbalanced focus on the part of taking responsibility, while neglecting the goal of reintegration (Gray, 2005). Moving from the structured setting of a secure residence back into community life oftentimes presents a particularly vulnerable time (Bazemore & Maruna, 2009). Reintegration circles would proactively prepare the young person for their return, right from the start of their stay in the residence. When approaching the date of reentry into the community, it is appropriate move the focus from the young person

taking responsibility for the past, to start taking responsibility for the future (Walker, 2009).

103. These regular circles would include a facilitator, the young person, their support network as well as social service providers, thereby specifically focusing on the needs to address social exclusion faced when returning/entering a community (Gray, 2005). Including members of local communities and the young person's home community into the circles held while still in residence represents the cornerstone of successful reintegration (Bazemore, Zaslaw & Riester, 2005). In their setup they resemble FGCs, but without the participation of victims, and they are often referred to as Reintegration Circles or Circles of Support and Accountability (CoSA). A robust set of literature exists on the use of this type of RP for successful reintegration.

104. The theory behind CoSA and similar programmes is based on the literature on desistance. Research studies continually provide evidence for the need to (re)construct an identity in line with the goals of desistance. At the same time, this process is not only based on individual factors but just as much on factors related to social identity (Petrich, 2017). Addressing individual factors for desistance alone will thus not lead to the most impact, social and structural barriers also need to be addressed, especially for youth (Gray, 2005). Research on young delinquent men as part of the Dunedin Study found that fostering prosocial ties make a successful reentry and desistance from crime more likely (Wright, Caspi, Moffitt & Silva, 2001).

"The support and accountability from within the residence needs to extend into the community the youth will live in afterwards."

105. CoSA were originally developed for reintegrating one of the most feared groups of prisoners, namely sex offenders. The application of CoSA to reintegrating sex offenders into a community outside of prison was based on the findings that social isolation increased their risk of reoffending substantially (Bazemore & Maruna, 2009). Framing CoSA within RP is a coherent application of the social reintegration needs of the offenders as well as the need of the community to hold them accountable should transgressions occur (Ward et al., 2014). The support and accountability thus extends from within the residence into the community that the youth will live in afterwards (Bazemore & Maruna, 2009). Detailed

research evidence of implementing RP in residences for young people is presented in the following section.

Research evidence

106.   Most research on the effectiveness of using RP in residences comes from the UK. Unfortunately, no randomised controlled trials have been published yet but several evaluations have included more than one site and substantial follow-up periods of at least one year. The California Evidence-Based Clearinghouse for Child Welfare (2015) lists a particular commercially available RP training programme called The Restorative Approach™ as not yet able to be rated on its evidence base.

107.   An evaluation of four residential units in the UK consisted of children and young people who are in care mostly due to abuse/neglect. These units are thus more comparable to care and protection residences than youth justice facilities, but the authors note that there is "a concentration in residential care of the most difficult to provide for, who often have significant and severe problems arising from their experiences before coming into care" (Littlechild & Sender, 2010, p.49).

"Most research on the effectiveness of using restorative practice in residences comes from the United Kingdom."

108.   The researchers evaluated records on the most severe form of conflict management, namely calling to police into the residence. Thirty-three staff members and eight young people were also interviewed. Three of the residences had less calls, whereas one residence had marginally more. Across all four residences, there was a 23% decrease in calls due to conflicts over the three-year period after RP was introduced, compared to before. The feedback of staff, managers and residents identified a number of benefits of RP (Littlechild, 2011, pp.53):
- Learning to manage their anger
- Developing empathy with other people and building relationships
- Developing mutual respect
- Giving a sense of responsibility and appropriate levels of guilt/remorse
- Learning to be able to behave in a more mature and adult way
- Short and long-term positive impact on young people's behaviour
- Acknowledging the feelings of victims and giving them a voice

- Making young people- victims and perpetrators feel they are cared about, and part of the process of resolving conflicts
- Developing young people's understanding of the consequences of their behaviour, and learning more positive ways of resolving difficulties, conflicts, and problems
- Talk about and understand their feelings
- Opportunity to understand the perspective of others their behaviour affected
- For most young people, for the majority of situations, the young people believed that a mix of formal and informal restorative justice meetings was helpful in resolving difficulties

109. Residents and staff also provided insight on the more challenging parts of using RP for situations of bullying, where the victim will be in a very vulnerable position of being intimidated. In addition, staff noticed that some young people had difficulty engaging effectively in the conversation, possibly due to a communication disorder. The researchers thus concluded that RP can be a successful tool for conflict resolution in a residences, while attention needs to be paid to instances of bullying and youth with communication difficulties (Littlechild & Sender, 2010).

"In the evaluation of ten children's homes in the UK, it was found that there was a decrease in recorded incidents and police call outs within the year after introducing restorative practice."

110. Managers at the Glenmona Resource Centre in Northern Ireland conceptualised RP as part of an "effective therapeutic approach" rooted in social work values (Davidson et al., 2011, p.17). The units evaluated in their study are somewhat similar to youth justice residences and the introduction of RP was part of a wider restructuring of the care and protection system. This included the adoption of "a trauma sensitive and child centred approach, enhancing resilience, restorative practices, therapeutic crisis intervention, diversionary activities, multidisciplinary approach, staff support practices" (p.23). As such any benefits observed cannot be attributed to RP alone. Nonetheless, the results proof promising. Over a six year period, the number of assaults, admissions to youth custody and use of physical restraint decreased significantly.

111. In line with these evaluations, there are several other reports on the benefits of changing the culture of care in residences and adopting RP. In the evaluation of 10 children's homes in the UK, most of which were care

and protection residences, it was found that there was a decrease in recorded incidents and police call outs within the year after introducing RP (Hayden & Gough, 2010). Similarly, an article on the introduction of RP in a UK care and protection residence reported an 87% drop of the use of restraint over five years, as well as reduced use of isolation (Puffett, 2013).

112.   Another evaluation studied a UK residence, in which the composition of young people consisted of those more comparable to a youth justice residence. In the data collected on the use of sanctions, separations and restraints, again a decrease was observed in the year after implementing RP. The most notable finding of this evaluation was differences within staff members' understanding and implementation of RP, and the resulting challenge for a consistent change in the residence's culture (Staines, 2013). This challenge will be further discussed in a subsequent section on training.

113.   In a set of seven care and protection homes in Leicestershire (UK), the number of offences committed dropped by 50% and police call outs reduced as well over the three years after introducing RP. A particular asset seemed to be the employment of a restorative project officer, who trained and supported staff in all residences in case of questions or challenging situations (Knight et al., 2011).

"In a set of seven care and protection homes in the UK, the number of offences committed dropped by 50% over three years following the introduction of RP."

114.   Supporting the previously mentioned theory of a dose response relationship, the evaluation of several RP schools for at risk and delinquent youth, McCold (2008) found a relationship between the longer length of stay and reduced recidivism up to 2 years after completion. The positive impact of the RP setting was recorded independent of general recidivism risk factors and thus made a unique contribution (McCold, 2008). In an earlier evaluation of the same programme, it was found that youth with the highest risk exhibited the most reduction in reoffending (McCold, 2002). These findings support the case for offering more intensive interventions based on RP if a single FGC was not enough in achieving deterrence.

115.   The findings of these evaluations point towards the strong potential for RP to reduce incidents, the use of restraint, and call outs to police. Nonetheless, most of the children in the evaluations from the UK were of

white British descent, which may limit the generalizability to the youth justice residence context in Aotearoa/NZ.

116.   **Reintegration Circles/CoSA.** A particular component of RP in justice settings is the application to reentry and reintegration through Circles of Support and Accountability (CoSA). The evaluation of a CoSA programme for young offenders in Northern Ireland showed that youth who participated in CoSA felt supported and better equipped to desist from crime (Chapman & Murray, 2015). Albeit based on a small sample of 20 young people, the results justify a further assessment of the potential for CoSA to successfully reintegrate youth into the community. Such promising results have also been reported from other countries. For example, a Canadian study of 88 adult sexual offenders found a reduction of 71% for all types of recidivism, within an average follow-up period of 35 months (Wilson, Cortoni & McWhinnie, 2009).

117. In Hawai'i, two initiatives have successfully incorporated CoSA principles. One is for adult prisoners for reentry (Restorative Reentry Planning Circles), the other for foster youth who are about to age out of the care system (E Makua Ana Youth Circle Program). Both of these programmes operate from an intentional strength based and solution focused approach to formulate a transition plan for the young person. Any prisoner in Hawai'i is allowed to apply for a Reentry Planning Circle. It includes a facilitator, the imprisoned person's loved ones, a prison representative, and any other person of support, in addition to the individual themselves. The programme has been evaluated as a positive experience by participants and a reduced rate of recidivism was observed (Walker, 2017).

"Several research studies have provided evidence for the positive impact of adopting RP in residences and their benefit for reintegration into the community."

118.   The Youth Circle Program is available to young people aged 16-26 and it is run by a non-profit organisation in collaboration with Child Welfare Services. Similarly, the youth invites people of support to attend the circle and contribute to the plan of independent living (EPIC 'Ohana, Inc., 2018). No research data has been reported for the Youth Circle Program.

119.   Overall, several research studies have provided evidence for the positive impact of adopting RP in residences and their benefit for reintegration into the community. There are two especially important

elements for the effectiveness of RP; training and follow up. As noted in one of the studies, RP is not sustainable without adequate training of staff and a holistic approach. The success of RP culture change depends on the quality training of committed staff and the provision of ongoing support. With those structures for RP in place, a significant reduction in the use of restraints, isolation and call-outs to police is achievable.

Key Principles of Implementation

120.   There are several components that require particular attention when implementing RP in youth justice residences. These include how to provide adequate training to staff and deal with potential value conflicts, how to respect the principle of voluntarism and ensure confidentiality, as well as how to best accommodate youth with communication difficulties.

Training

121.   A pattern of inconsistent adoption of RP was described in an evaluation of a secure child care center in the UK by Staines (2015). After the completion of training, almost half of the staff still believed that certain types of behaviours could not be dealt with restoratively and about 10% stated that RP was never effective. It appears that providing existing staff with only a 1-2 day training might have resulted in a lack of understanding of restorative principles, the usefulness of RP instead of punishment-based behaviour management, and how to apply RP at all levels of interaction. Such a short training bears the risk that some staff members might not grasp the principles of RP, which can severely undermine the delivery of services. Indeed, Workman (2007) recommended that training for staff should occur on a regular basis and include regular supervision time of difficult events. This could be achieved with the help of a dedicated restorative project officer, who trains and supports staff in all residences in case of questions or challenging situations (Knight et al., 2011).

"A high-quality workforce is essential for the success of implementing restorative practice."

Staffing

122.   A high-quality workforce is essential for the success of implementing RP and that is a point repeatedly stressed in the literature (e.g. de Valk et al., 2016; Williams & Segrott, 2017). Lambie et al. (2016) also emphasized that "front line staff are the catalyst for change in young people in residence" (p.133). When changing the culture of an institution, some organization decide to hire new staff altogether in order to start from a common ground. This was the case when opening the faith-based unit He Korowai Whakapono (Workman, 2007). Most of the time, existing staff can engage in re-training in order to shift their approach to align with RP, as discussed in the section on training above.

123.   One of the biggest concerns from staff appears to be the fear of losing power and control when engaging in RP. Indeed, this perception is warranted because RP is based on informal social control instead of formal personal control by individual staff members. Staff who are most afraid of giving up power and control are likely the least skilled in relating to young people through interpersonal approaches of conflict management. Once power/control mechanisms of reward and punishment are removed, these staff members will have few tools left to engage with the young people under their care. In fact, some writers have questioned whether RP skills can be taught or if somebody needs to have an intuitive capacity to translate restorative values into skills as part of their daily life (Williams & Segrott, 2017).

"Overlapping roles for staff will need to be anticipated and managed."

124.   At the same time, there are valid concerns of staff about how to allow emotions and a certain level of personal vulnerability to be useful on their interactions with young people as well as each other, while remaining professional in their job and upholding necessary boundaries. Overlapping roles for staff will need to be anticipated and managed, such as being a caretaker, a circle facilitator, at times the harmed party and possible someone who has harmed (Hayden, 2010).

125.   No doubt, RP requires substantial time and effort and expecting staff to work restoratively while completing their usual demands could undermine the whole culture of RP. Davidson et al. (2011) reported that the successful change to a RP-based residence went hand in hand with a reduction of the size of resident groups, as well as an increase in the number of staff and their levels of training and support. While the integration with a formal therapeutic model is recommended, care also needs to be taken to not inundate staff with too many models and techniques. These were cited as essential prerequisites for accomplishing the changes into a restorative residence.

126.   Research has found that for organizational change to be successful, there are two important components. For one, staff's emotional reactions to the proposed changes have a tremendous impact on their long-term commitment and actions. Additionally, the role of leadership should not be underestimated. Transformational leadership needs to provide clear

communication about the changes, their benefits, the role of staff, and provide adequate support during the transition period (Seo, Taylor, Hill, Zhang, Tesluk & Lorinkova, 2012). Senior management needs to be fully committed when implementing RP and cannot expect easy adoption of this new approach with swift changes and immediate successes, as noted in the evaluation of the Goodwin Development Trust in Hull (UK; Lambert, 2011).

Voluntarism and Confidentiality

127.   There is an inherent tension between employing a restorative approach to conflicts in residences that is supposedly voluntary with the reality of living in a confined environment (Staines, 2013). Young people do not choose to live in a residence, nor do they usually have any input into how a residence is run. In an environment based on RP, active participation in decision-making is encouraged and respected, which will increase the likelihood of young people participating in times of conflict as well.

128.   While voluntary participation of the responsible youth is always preferable, (partial) restoration can also be achieved by imposed restorative sanctions, albeit as a last resort (Pleysier, 2017). There needs to be a delicate balance between encouraging voluntary participation and respecting a person's right to make their own decisions. Based on experience, it is likely for the person who has harmed to participate.

"There needs to be a delicate balance between encouraging voluntary participation and respecting a person's right to make their own decisions."

129.   Another issues of concern is that of confidentiality. In order to allow an open and honest conversation to occur, confidentiality of what is being said in circles and conferences should be assured. The biggest challenge can be to trust that other participants will keep the conversation confidential. Pranis (2006) noted that confidentiality was in fact higher after implementing RP in the aforementioned adult prison in Minnesota (USA), presumably because of the following elements (p.673):

the commitment is made directly to others, [there is a] values emphasis in the circle process, personal responsibility [is] engaged by circle process, personal connections [are] made in the circle, [there are] less threatening outcomes from a circle, strength in numbers in a circle, [and] ownership - personal power - having voice in a circle.

130. Through showing respect, commitments, such as confidentiality, are more likely to be upheld. Transferring a certain amount of power to the residents, be it adults or young people, can thus increase the ownership of their living space and increase their propensity to contribute to solutions.

Young people with communication difficulties

131. One reason for the lack of change after a FGC could be a young person's difficulties in language competencies. Language or communication difficulties can result from an impairment in understanding vocabulary and grammar, as well as difficulties with expressing ideas and needs (Snow, 2013). These difficulties hamper understanding of a conversation and subsequently one's own participation can only remain superficial, which is not unlike trying to converse in a foreign language (Riley & Hayes, 2018). In an Australian sample it was found that almost half of young male offenders were language impaired (Snow, 2013).

"There is reason to believe that children with language difficulties are both at an increased risk for abuse and for being at a disadvantage when coming in contact with the justice system."

132. In addition, there is evidence that children with cognitive impairments, such as verbal comprehension difficulties, are at increased risk of being maltreated (Danese, et al., 2016). As noted previously, maltreated children at in turn overrepresented in youth justice. There is thus reason to believe that children with language difficulties are both at an increased risk for abuse and for being at a disadvantage when coming in contact with the justice system, which is heavily language-based. Meaningful participation in a FGC would be especially challenging for these youth.

133. The whole spectrum of RP depends on conversations to facilitate insight and elicit change. Difficulties in this domain are therefore a clear obstacle for successful participation. Appropriately intervening with language difficulties would require a much more comprehensive approach to practicing language-based conflict resolution, such as in a RP environment. Implementing RP for day-to-day interactions would allow young people the time and practice for improving their language-based conflict resolution skills. Nonetheless, to adequately support these youth, it is recommended to use simple language and avoid complex terminology

or sentence structure, show a position of caring towards the young person and give the victim adequate time to talk. Staff should be familiar with the use of simple interviewing skills such as reflecting, summarizing and allowing silence (Riley & Hayes, 2018).

134.   Since there is reason to believe that the youth justice population in Aotearoa/NZ would also exhibit high levels of possibly 50% of young people struggling with oral language competencies, the expertise of a speech-language pathologist would be an important addition to all youth justice services. This practice could translate to more effective participation in language-based interventions, such as FGCs.

"The expertise of a speech-language pathologist would be an important addition to all youth justice services."

Summary and Recommendations

135.   Restorative practice is one of the few approaches that integrate all three levels of prevention in public health. First, when applying restorative essentials to all interactions with young people, relationships are stronger and conflicts do not need to escalate. Second, when a transgression occurred, conferences (e.g. FGCs) can recognize the harm, hold the responsible person accountable, and identify their obligations. Last but not least, RP can provide a child-centered, ethical, and therapeutic environment for young people who do live in youth justice residences.

136.   The philosophy of RP fits particularly well with the rehabilitative goals of youth justice and combining RP with tailored therapeutic interventions can increase the potential for desistance (Sellers, 2015; Ward, Fox, & Garber, 2014). Research has consistently shown that the most successful approach to rehabilitation and reducing recidivism is to deliver therapeutic interventions (Lipsey, 2009). To increase engagement with these interventions, all staff should be actively working on providing an environment congruent with the goals of rehabilitation (Prior & Mason, 2010).

137.   While RP is not an intervention programme in itself, it can be integrated with a variety of evidence based interventions. Programmes that are incompatible with RP have also not provided evidence of their effectiveness and are therefore not evidence-based practices, such as behaviour modification systems based on token economy/point systems or military-style activity camps.

"Restorative practice is not an intervention programme in itself, it can be integrated with a variety of evidence based intervantions."

138.   RP is particularly trauma focused because it recognizes that disruption in attachment to caregivers can impact the behaviour of children and young people in residence. Therefore, the child is never rejected but always provided with care and acceptance, while their behaviour may be deemed inappropriate. Through conversation with people affected by their behaviour, young people can reflect on the consequences of their actions and develop ways to repair the harm they inflicted.

139.   Since almost ¾ of young people in youth justice residences are Māori (State of Care, 2017), policies and practices need to be particularly sensitive

as to the effects on these already vulnerable youth. With the right level of expertise, RP can be a culturally responsive practice of care. As already accomplished with the RP components of PB4L in *Huakina Mai* (Savage et al., 2012), kaupapa Māori can be effectively integrated with the theoretical and practical elements of RP.

140.   In its core elements based on interconnectedness and the inherent dignity of everybody, as well as its adaptability to developmental stages, RP is a child centered approach to care. Through restorative conversations, daily circles and conferences, children and young people can practice skills for successfully building, maintaining and repairing relationships.

141.   RP is not a programme for residents, instead it represents a distinctive culture of care that applies 24/7 and is implemented by frontline staff and management alike. RP needs to permeate through all interactions and all levels of an organization to be successful. A clear organisational culture is needed to provide the best care (De Valk et al., 2016). This would include training each and every staff member in RP, implement a culture of care based on RP in every interaction with young people and between staff themselves, and utilise the principles of FGCs not only related to specific incidents but also to maintain and build community for youth while they live in residence and afterwards.

142.   A successful change of the climate in youth justice residences needs to be systemic in order to be successful. Ideally, young people would also not only experience RP when in residences but across the whole system of care and protection, making their experience consistent and predictable. Infusing RP only into the residences would not channel the possibilities as effectively as it would be to base all of Oranga Tamariki's work on restorative principles.

"Consult with people experienced in developing, implementing and evaluating RP. Train staff nand management in restorative values, skills and processes."

143.   In order to achieving "whole institution" culture change, the following steps are recommended:

   a. Allow youth to identify shared values for successfully living together in residences, with a particular focus on Māori values

   b. Consult with people experienced in developing, implementing and evaluating RP integrated with a bicultural (e.g. *Huakina Mai:* Savage

et al., 2012) and therapeutic approach (e.g. *Missouri Model* as reviewed by Lambie et al., 2016)

    c. Train not only staff and but also management in restorative values, skills and processes

    d. Invest most into proactive building of relationships/connection by using restorative essentials and daily check-in circles

    e. Plan for how to sustain connections under pressure/in crisis

    f. Hold formal conferences with everyone affected for serious transgressions

    g. Integrate Circles of Support and Accountability (CoSA) to assist in community building for successful reentry

    h. Hire a restorative project officer to train and provide ongoing support to all residences nationwide and sustain a long-term change in climate and culture

144.   Based on the experiences of using RP in a variety of settings and in various countries around the globe, Margrain and Macfarlane (2011, p.251) conclude:

> As an approach, restorative practice is clearly effective - socially, educationally and culturally: socially, because it reflects the social norms promoted by a society that embraces and espouses inclusion and human rights; educationally, because it serves to prevent, diffuse or resolve issues that can have a negative impact on learning and achievement by restoring harmony and not apportioning blame; and culturally, because it is able to be implemented from a kaupapa Māori/te ao Māori perspective.

145.   Building a restorative culture in the youth justice system would bring Aotearoa/NZ full circle; from the 1989 CYPF Act which pioneered the use of FGC before the RJ movement was on most people's radar, to the 21st century vision of supporting young people for their best possible future. Incorporating RP into an evidence-based model of therapeutic care in residences on a national level would once again allow Aotearoa/NZ to lead the way in innovative models of care for young people.

Appendix

Major Programmes and Networks Employing Restorative Practice in Residences

Atkinson Secure Children's Home – UK (www.atkinsondevon.org) This children's home houses up to 12 young people between the ages of 10 - 17 who are under care and protection orders. It is not a residence for youth justice. A RP specialist conducted the initial training and provides ongoing weekly supervision to staff. Conflict is not addressed through punishment, but needs-based restoration that is tailored to each situation.
Use of restraint dropped by 87% over five years (Puffett, 2013). This children's home received a Restorative Service Quality Mark awarded by the Restorative Justice Council.

Residential Homes Leicestershire - UK (Knight et al., 2011) In eight care and protection homes for 82 young people between 13-28 years, 59% were male and 79% white British. These are not youth justice residences. The RP approach was based on Hopkins' (2009) work as described above. A restorative project officer was hired provide ongoing training, advice and support.

Glenmona Residential Childcare Belfast - Northern Ireland (Davidson et al., 2011): Young people ages 10-18 within the Intensive Support Units present with very challenging behaviours as part of their care and protection status. They live in groups of a maximum of six residents. RP is combined with a trauma-sensitive approach, therapeutic crisis intervention and others. The number of assaults, admissions to youth custody and use of physical restraint decreased significantly in the six years after introducing RP.

Young People's Residential Units Hertfordshire County - UK (Littlechild & Sender, 2010). After a successful pilot, RP was introduced into four care and protection homes. Restorative Practice. Across all four residences, there was a 23% decrease in calls due to conflicts over the three-year period after RP was introduced, even though one residence had more.

Residential Care Homes - UK (Hayden & Gough, 2010)

Of these ten children's homes, nine are open facilities and one operates as a secure unit, which has a mix of children from care and protection as well as from the courts. The number of children across all homes within a year was between 60-100, of which 93% were white British. The evaluation observed a decrease in both recorded incidents as well as police call-outs within the year after introducing RP.

CSF Buxmont Academy - Pennsylvania, USA (McCold, 2002; 2008)
This setting consists of eight day treatment centers with integrated schools, which students attend 5 days/week for 18 weeks on average. The evaluation covered four years and was based on 1,636 students, of which 70% were male and 68% white with an average age of 15.5 years. Length of stay was related to a significantly lower amount of recidivism, even when taking other risk factors into account (e.g. prior and in-programme offences). Youth with the highest risk also exhibited the most reduction in reoffending.

Woodbourne Center - Baltimore (Maryland), USA (Park et al., 2008).
In the residential treatment center for young people aged 12-18, of which 84% are African American. The Restorative Healing Model developed by this center consists of RP, community conferencing, trauma-focused care and aggression replacement training. Staff members were trained by the the International Institute for Restorative Practices in Bethlehem (Pennsylvania) and the Community Conferencing Center in Baltimore (Maryland). No evaluative data is available as of yet.

Klingberg Family Centers - New Britain (Connecticut), USA (Wilcox, 2008) & **Residential Youth Services** - Canada (Baker et al., 2017)
In their care and protection residence, RP is combined with the Risking Connection trauma treatment into the Restorative Approach™ programme. No evaluative data is available as of yet.

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