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14

Evaluation of the ReBoot Intensive Intervention Trial: Final report

Prepared by the Australian Institute of
Criminology for the South Australian
Attorney-General's Department

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Acronyms

AGD	Attorney-General's Department
AIC	Australian Institute of Criminology
CBT	cognitive behavioural therapy
CSS	Criminal Sentiments Scale
CYJ	Community Youth Justice
DCSI	Department for Communities and Social Inclusion
FLO	flexible learning option
HREC	Human Research Ethics Committee
HYPA	Helping Young People Achieve
OCSAR	Office of Crime Statistics and Research
PRS	Personal Resilience Survey
URICA	University of Rhode Island Change Assessment Scale
URICA-S	University of Rhode Island Change Assessment—Short

Executive summary

The Australian Institute of Criminology (AIC) was commissioned by the South Australia Attorney-General's Department (AGD) to conduct a process and outcome evaluation of the ReBoot Intensive Intervention Trial (ReBoot program). The ReBoot program was developed in response to the need for intervention programs targeting young people who are in contact with the criminal justice system and at risk of reoffending.

Specifically, the ReBoot program works with young offenders aged 14–18, families, communities and the justice system to reduce offending and antisocial behaviours; increase engagement in education and employment; and increase engagement in structured, prosocial activities such as sport and volunteering. The program was designed to include a focus on cultural competence and comprises three components: intensive case management, peer mentoring and a wilderness camp.

This report describes the findings of the process and outcome evaluations. The evaluations used semi-structured interviews to obtain the views of 50 stakeholders involved in the delivery and management of the ReBoot program, 14 young people who engaged in the trial program and seven of their parents/carers. This qualitative information was supplemented by the analysis of administrative and assessment data collected by ReBoot service providers. Together, these data provide an important insight into the delivery and impact of the ReBoot program.

Overall, the process evaluation findings show that the ReBoot program was largely implemented as intended, fills an important gap in service provision for young offenders in South Australia, and provides a useful option in sentencing and family conference outcomes. The ReBoot program is the sole youth justice intervention in South Australia that provides a holistic service response. As such, there is strong support among consulted stakeholders for its continuation and expansion beyond metropolitan Adelaide.

Analysis of the assessment data completed by ReBoot case managers shows that 33–65 percent of young people improved on at least one measure within each of the six outcome domains—most commonly, health and wellbeing (65%), followed by social competency and connection (63%). Fewer young people improved on measures of decision-making and problem-solving (33%). Between 13 and 33 percent of young people were reported to have improved on all measures within each of the domains.

By comparison, analysis of self-reported assessment data shows that 27–71 percent of young people felt they had improved on at least one measure within each of the five outcome domains. Like case managers, young people most commonly reported improvements in relation to health and wellbeing (71%). Young people were more likely than case managers to report improvements in relation to decision-making and problem-solving (71%) and less likely to report improvements in relation to social competency and connection (27%). Young people improved on all measures in only two domains: access to support, and social competency and connection. Twelve percent of young people improved on all measures of access to support, and 27 percent improved on all measures of social competency and connection, although it should be noted that the latter has only one measure.

These findings indicate that the ReBoot program altered the attitudes of young people and helped them to consider what changes need to be made in their lives. This is an important outcome, as attitudinal change is a necessary precondition for behavioural change. However, the findings indicate that observable actions to alter high-risk behaviours were less evident. Therefore, specialised and targeted support to improve decision-making skills and produce behavioural change may be needed.

Specific findings from the process and outcome evaluations are described in further detail below. The findings highlight what is working well, while also identifying opportunities to improve the future implementation and outcomes of the program.

Key findings from the process evaluation

Finding 1: The eligibility criteria appropriately targeted young offenders requiring intensive intervention to alter high-risk behaviours, and the mechanisms for identifying appropriate referrals were effective.

ReBoot participants were aged between 13 and 18, with the average age being 15. The flexible application of the age and offending criteria allowed support to be offered to younger clients within a range of ages, and clients with offending histories that varied in type, severity and frequency. The effectiveness of identifying appropriate referrals was attributed to the consultative process employed by the family conference coordinators and the judicial officers of the Adelaide Youth Court with the young person, their family, ReBoot service providers, legal representatives, police and information contained in reports. The majority of young people (58%) were referred directly to the ReBoot program as an outcome of family conferencing.

Finding 2: The target of retaining 80 percent of young people for a minimum six-month engagement period was not met.

While the ReBoot program was successful at retaining young people for an average of 8.6 months (average of 13 months for completers and 6.5 months for partial completers), only two-thirds of participants spent at least six months engaged with the program. All young people who completed the program and 40 percent of young people who partially completed the program met this target.

Finding 3: Assessment and case planning processes were effective for identifying strengths, challenges, criminogenic needs, and protective and risk factors. However, there may be scope to reduce the burden and duplication of assessment processes through more effective collaboration.

Seventy-eight percent of engaged young people (n=39) had completed a ReBoot Action Plan at the time of data extraction. ReBoot Action Plans were described as flexible, practical and useful, and were revisited and updated to reflect progress and changes. The action plans were considered appropriate for the target cohort, including Aboriginal and Torres Strait Islander young people, and culturally and linguistically diverse young people, particularly as the young person was able to self-identify areas of strength and improvement. Young people reported that their ReBoot Action Plans were representative of the goals they wanted to achieve, were developed in cooperation with their case managers, and were updated regularly to reflect changes in their lives. Assessments and action plans facilitated referrals to community service providers that could assist with the specific needs of young people.

Challenges associated with assessment and case planning processes included:

- the similarities between, and duplication of, ReBoot and Department for Communities and Social Inclusion (DCSI) assessment and case planning processes;
- the burden on young people engaging in multiple assessment and case planning processes;
- role clarification among ReBoot and DCSI case managers; and
- ensuring that assessment and case planning processes were collaborative.

Finding 4: Time frames for receiving referrals and undertaking activities associated with the delivery of the program were not able to be met for all young people.

The more complex referral and intake procedures associated with the Youth Court pathway affected the timeliness of engaging young people in the program. Improved communication between Helping Young People Achieve (HYPA) and DCSI throughout the trial resulted in 77 percent of Youth Court referrals (n=27) being received by HYPA within 10 business days (an average of 11 days; range 1–69 days). Youth Court referrals still took longer to process compared with family conference referrals. Family conference referrals were more streamlined; 86 percent (n=31) were received by HYPA within 10 business days (an average of 5 days; range 1–43 days).

In only 15 percent of cases (n=11) was contact with the young person made within three days of the referral being received by HYPA. Forty-one percent (n=27) of eligibility assessments were conducted within 10 days of a referral being received. The average time between HYPA undertaking the assessment and forwarding the referral to the Australian Red Cross was 15 days (range 3–114 days). Once the Australian Red Cross received the referral, in 44 percent of cases (n=18) peer mentors made contact with the young person within 10 business days (an average of 13 days).

Finding 5: The intensive case management and peer mentoring program components were successfully implemented; however, there were challenges with participant attendance in the wilderness camp.

Case management was described as holistic, individualised, responsive and flexible, and focused on establishing prosocial behaviours, addressing the underlying causes of a young person's offending behaviours and connecting young people with a range of community-based services to address individual needs. Peer mentors were seen as having expert knowledge regarding local support services, with a good ability to engage with judicial and family conferencing stakeholders. Importantly, peer mentors had often had similar experiences to the young people, which allowed them to help clients change their behaviours and attitudes.

Only 10 young people completed the wilderness camp during the trial. Low participation was attributed to few young people demonstrating readiness to undertake the camp, and camps not being available when young people became ready. Due to these barriers, there were instances in the first year of operation where there were not enough ReBoot clients to form a team. However, a range of structured preparatory activities were introduced in the second year of program operation in order to better prepare young people for the camp, which resulted in improved camp attendance.

Finding 6: The ReBoot program was appropriate for and responsive to diverse participants.

Forty-three percent of ReBoot participants identified as Aboriginal and Torres Strait Islander (n=34), and nine percent identified as culturally and linguistically diverse (n=7). Diversity was also demonstrated through differences in offending behaviours, individual factors and familial factors. The ReBoot program was responsive to the needs of diverse participants through measures such as referring clients to culturally appropriate services; providing services within community and youth-centred environments; employing diverse staff, including those with cultural backgrounds and lived experiences similar to those of the client group; and maintaining a balance of male and female employees.

Finding 7: Relationships between program partners were positive overall and contributed to the successful functioning of the program, although communication and information exchange could be improved.

Formalised relationships facilitated strong communication between program partners, particularly those represented on the ReBoot Steering Committee. Although there were initial issues relating to partnerships, by the end of the evaluation period most of these had been addressed. Stakeholders identified barriers that continued to impact on effective information exchange, particularly the requirement to obtain consent from the young person to share information with each agency and an absence of information-sharing protocols between agencies. The logistics associated with scheduling multi-agency case conferences was also reported as a barrier to effective communication. Aside from these issues, working relationships between program partners were generally functional and positive, with interagency collaboration creating an integrated and coordinated service response.

Key findings from the outcome evaluation

Finding 8: Knowledge of and access to informal and formal supports increased among young people.

Young people's knowledge of and access to informal and community-based supports either improved or was maintained throughout program engagement. Support from family, friends and positive role models increased, resulting in more than half of the sample having these informal supports to draw on by program exit. Further, there was an increase in the number of young people who responded that they would choose to seek help more often, or choose to seek help when they previously would not have done so. Forty-five percent of young people reported increased engagement with informal supports, and 41 percent reported increased engagement with formal supports, as a result of participation in the ReBoot program.

Finding 9: The ReBoot program had a positive impact on young people's physical health and capacity for self-care. The program had a lesser impact on mental health and substance use.

Physical health improved for most young people, many of whom were able to maintain the positive changes they had implemented during program engagement. Most young people also reported that their capacity for self-care was positively impacted by program engagement, including their financial management and budgeting skills. The program had less of an impact on mental health and substance use, which improved for approximately one-third of young people. However, even where improvements in health-related issues were achieved, they continued to impact on the ability of young people to do things that they would like to do.

Finding 10: The ReBoot program had a limited impact on young people's decision-making abilities, and the ability to translate goals into actions.

The program had a limited impact on the decision-making and problem-solving abilities of young people. General decision-making and the ability to think things through logically when making decisions were improved for approximately one-third of young people. However, almost half of young people perceived that their decision-making abilities had declined. This may reflect that the program assisted young people to identify and acknowledge the limitations of their decision-making abilities, rather than an actual decline in these abilities.

While the program positively impacted on the ability of young people to identify and articulate goals and develop plans to achieve them, young people were less capable of taking the steps necessary to implement them. This also appears to have resulted in young people feeling unable to appropriately regulate their behaviour. Taken together, these findings suggest that the ReBoot program may have been effective in demonstrating to young people the limitations of their logical decision-making abilities and therefore assisting them with goal-setting, but less effective in assisting young people to implement goal-directed behaviour.

Finding 11: The ReBoot program had a positive impact on prosocial engagement among young people, such as improved connection to family and positive peers, but had a more moderate impact on social competency skills, such as communication and empathy.

The program had a moderate impact on the social competency skills of young people. Improvements were observed for approximately one-third of young people in relation to communication skills, empathy and ability to accommodate the interests or needs of others. However, the program positively impacted the assertiveness, confidence and initiative of a greater proportion of young people (42%).

The program had a substantial positive impact on prosocial engagement among young people. In particular, familial relationships improved for three in five young people. The program improved young people's connection with positive peer groups to a lesser extent, with one in three young people connecting or strengthening relationships with peers who demonstrate and encourage prosocial behaviours. The program had a relatively small impact on connecting or reconnecting young people with their community or land, and on community engagement.

Finding 12: The ReBoot program had a moderate impact on young people's education and employment outcomes.

Overall, 45 percent of young people achieved at least one of the education, training and employment criteria (ie 6 consecutive weeks of engagement), and both case managers and young people reported improvements in attitudes to education and learning, particularly among older participants (17–18 years). The program had a limited impact on longer term engagement in educational activities; however, most young people held positive attitudes towards employment and felt as though they had the knowledge and skills to find work. Case managers were confident of young people's work readiness, which was reflected by all young people obtaining some form of work experience while engaged with the program.

Finding 13: Most young people desisted from offending during engagement with the ReBoot program; however, the program did not have an impact on the frequency and severity of offending for those who continued to offend.

Risk-taking and problematic behaviours decreased for 39 percent of young people, with most of these young people being able to maintain a reduction for at least a three-month period before exiting the program.

More than half of young people were assessed by their case managers as having desisted from offending at program exit (55%). For young people who continued to offend, the number of offences in an offending episode decreased. However, the program had no impact on the seriousness or frequency of offending. These figures should be interpreted with caution as they are based on information available to case managers and only for a small sample of young people (n=20).

Recommendations

The following recommendations have been informed by the findings of the process and outcomes evaluation, and are intended to guide the future operation of the ReBoot program.

Recommendation 1

Provide referral sources and assessors with a definition of an offence for the purpose of determining program eligibility. Consideration should be given as to whether the same or a different definition should apply based on the referral pathway. Clarifying the definition of an offence will ensure the eligibility criteria are applied consistently.

Recommendation 2

Communicate to relevant stakeholders that participation in the Operation Flinders Foundation wilderness camp is not part of the ReBoot program's eligibility criteria, and referral sources are not required to make an assessment of a young person's ability or willingness to participate in the wilderness camp. Update relevant program documentation to reflect this.

Recommendation 3

Include a formalised communication strategy as part of DCSI and HYPA's partnership protocol. Within the communication strategy, require the DCSI Youth Justice Supervisor and HYPA ReBoot Manager to make contact on a weekly basis to discuss forthcoming referrals. Prompt notification of referrals will assist with program planning and reduce potential delays associated with referrals made by the Adelaide Youth Court.

Recommendation 4

Examine the feasibility of expanding the catchment zone in order to accept referrals from youth courts located at Port Adelaide, Elizabeth and Christies Beach, taking into account the demand for the program and the capacity to accept additional referrals.

Recommendation 5

Review the voluntary nature of program participation and consider introducing a mandatory period of program participation for young people referred through the Adelaide Youth Court, subject to the outcome of an eligibility assessment. Continue to accept referrals to the program at the discretion of the Adelaide Youth Court, taking into account the position and information provided by various parties involved in the court process. Consider and decide on the consequences of failing to participate, before any changes take effect.

Recommendation 6

Consider providing up to 12 months of service provision regardless of time spent in custody. Consider, therefore, extending the length of program engagement by the amount of time spent in custody. This should be based on the young person's willingness to continue engagement, the capacity to extend program participation, and the length of time spent in custody.

Recommendation 7

Reduce the number and duplication of assessments. Assessments and case planning processes should be collaborative, where possible, to minimise the young person having to retell their story to multiple workers.

Recommendation 8

Consider revising the target time frame for making initial contact with a young person from three business days to 10 business days.

Recommendation 9

Consider removing the requirement of mandatory participation in the Operation Flinders Foundation wilderness camp. All participants should be encouraged and supported to address barriers to their attendance at the camp, but their inability to do so or their informed choice not to attend should not preclude them from being referred to or participating in the ReBoot program, nor should their non-attendance at the camp represent an unsuccessful program outcome.

Consider alternative activities to the wilderness camp for young people who are unable to complete the exercise. These activities should take into account the goals and interests of the young person, the activity's therapeutic benefits and/or whether the activity acts as an incentive that improves motivation, positive behaviours and compliance.

Clarify with ReBoot program stakeholders the purpose of the wilderness camp and alternative activities.

Recommendation 10

Explore how appropriate and effective information sharing can be promoted among partner agencies, including what information may be shared, with whom and under what circumstances.

Recommendation 11

Raise awareness of the program among key stakeholders, particularly DCSI, through proactive engagement strategies (eg meetings, distribution of information materials) and efforts to establish effective partnerships. This engagement strategy should be ongoing, to account for staff turnover.

Recommendation 12

Explore ways of overcoming barriers to scheduling collaborative case conferences. Alternatively, identify ways for ReBoot and DCSI case managers to conduct joint assessments and case planning.

Recommendation 13

Consider options for including an additional component in the program which specifically focuses on improving the decision-making skills of young people and supports them to make positive changes to their behaviour. This may involve the inclusion of a cognitive behavioural therapy (CBT) component. Alternatively, consider developing stronger pathways between the ReBoot program and other organisations that provide these services, so that young people assessed as requiring this additional support can be provided with access in a timely manner. Any decisions regarding amendments to the ReBoot program should involve consultation with key stakeholder agencies, including those involved in the delivery of the program.

Recommendation 14

If the ReBoot program is extended or implemented in other sites, ensure ongoing performance monitoring and evaluation of the program. This should necessarily involve a review of the assessment tools currently being used by the service providers to assess the progress of young people participating in the program, with the view to supplementing these with validated assessment tools as necessary. Performance monitoring should be conducted on an ongoing basis to measure the impact of the program against its stated objectives, and to assess the impact of any changes to the operation of the program.

Introduction

The South Australian Attorney-General's Department (AGD) commissioned the Australian Institute of Criminology (AIC) to undertake a process and outcome evaluation of the ReBoot Intensive Intervention Trial (the ReBoot program) for the period 1 July 2015 to 30 June 2017. The overarching aim of the ReBoot program is to reduce offending behaviour and increase positive behaviour in young people who have a history of offending and are at risk of escalating their involvement in the youth justice and criminal justice systems. Specifically, the objectives of the ReBoot program are to:

- reduce offending and antisocial behaviour of young people;
- increase engagement of young people in education, training or employment; and
- increase engagement of young people in organised activities such as sport, performing arts, volunteering or other forms of voluntary civic engagement.

The ReBoot program is delivered by the community-based not-for-profit organisation Helping Young People Achieve (HYPA) in partnership with the Australian Red Cross and the Operation Flinders Foundation. The program is targeted at young people aged 14–18 living in Adelaide, South Australia. To be eligible for the program the young person must:

- be referred by the Adelaide Youth Court or Family Conference Team;
- have committed a second or subsequent offence; and
- require and possibly benefit from case management support.

The ReBoot program comprises intensive case management provided by HYPA, peer mentoring provided by the Australian Red Cross and a wilderness camp provided by the Operation Flinders Foundation. The program provides up to 12 months of support to:

- identify and address criminogenic needs;
- identify risk and increase protective factors;
- identify individual goals;
- develop and implement an action plan;
- engage in education, training and employment;
- access fitness, wellbeing and community programs;
- build sustainable and appropriate support networks;
- attend the Operation Flinders Foundation wilderness camp;
- attend court and engage legal representation;
- develop prosocial attitudes and new skills; and
- participate in HYPA and Australian Red Cross group programs.

Evaluation of the ReBoot program

The ReBoot evaluation involved a process and outcome evaluation for the period 1 July 2015 to 30 June 2017. The process evaluation examined whether the program was implemented as intended, by answering the following research questions:

- Has the ReBoot program been implemented as it was originally designed and as intended? If so, what factors were necessary for the successful implementation of the program? If not, why not?
- How responsive has the program been to clients from diverse backgrounds?
- What have been the benefits and challenges associated with establishing multiple partnerships and strategic relationships with internal and external stakeholders involved in the program?
- To what extent has the ReBoot program—specifically, the case management, mentoring and wilderness camp components—been consistent with the practice guidelines and service delivery principles?
- How could the ReBoot program’s service delivery model be improved or modified to deliver better outcomes for young people?
- To what extent have assessment processes and activities been appropriate for the target cohort, and have they met client needs?

The outcomes evaluation examined whether the ReBoot program was meeting its objectives, by answering the following research questions:

- To what extent have the intended outcomes for young people been achieved, including:
 - improved engagement in education, training and employment;
 - improved access to fitness, wellbeing and community programs;
 - building sustainable and appropriate support networks;
 - the development of prosocial attitudes and new skills; and
 - reduced reoffending?
- Were there any other positive, negative or unintended consequences for participating young people, program partner agencies and the community?
- How appropriate, efficient and effective have the program components (case management, peer mentoring and wilderness camp) been in achieving these outcomes?
- Was there variation across the different genders, ages and culturally diverse subgroups in terms of outcomes delivered by the ReBoot program?

The framework for answering the research questions was developed through consultation with the ReBoot Steering Committee, and is based on the program's logic model (see Figure 21).

Methodology

The evaluation utilised quantitative and qualitative methods to answer the research questions. This mixed methods approach had a number of benefits, including the ability to provide objective measures of performance supported by detailed explanation of findings. Further, the collection and analysis of information from multiple sources enabled findings to be examined from various perspectives.

Document analysis

Relevant program documentation was examined at various stages of the evaluation, including the program service delivery model, the HYPA case management and assessment tool, and the partnership protocol for HYPA and Community Youth Justice (CYJ, a division of the Department for Communities and Social Inclusion [DCSI]). Documents were compared with the findings from stakeholder interviews to assess implementation fidelity.

Interviews

Interviews with stakeholders

Semi-structured interviews were conducted with 50 stakeholders who were involved in the management and delivery of the ReBoot program or who had contact with young people who participated in the program. Stakeholders included representatives from HYPA, the Australian Red Cross, Operation Flinders Foundation, the Adelaide Youth Court and Family Conference Team, community service providers, education providers, AGD and DCSI.

The interviews elicited stakeholder views regarding:

- the establishment and management of the ReBoot program;
- referral and intake processes;
- assessment and case planning processes;
- the extent to which the ReBoot program's service delivery model had been implemented as intended;
- stakeholder relationships and partnerships;
- the suitability of the program for a diverse range of clients; and
- observed outcomes for program participants, particularly in relation to a reduction in reoffending and antisocial behaviours, improved education and employment outcomes, and improved health and wellbeing outcomes.

Interviews with young people and their parents/carers

Semi-structured interviews were conducted with 14 young people who participated in the ReBoot program and seven parents/carers. The interviews elicited information about:

- participant experiences while on the program;
- how the program differed from other services participants had previously engaged with;
- program strengths and improvements;
- what participants gained from participating in the program; and
- what participants thought had changed as a result of the program.

Where possible, interviews were conducted within the three-month period before program completion. This was to ensure that the time period in which the young people had been participating in the program was long enough for them to have experienced changes (if any) as a result of their participation, and to allow them to reflect on their experiences. Follow-up interviews were completed with two young people and five parents/carers, approximately three months following program exit. The purpose of follow-up interviews was to elicit information about exit and transition processes and determine the extent to which any changes were maintained after leaving the program.

Stakeholder and family interview data were analysed thematically. Thematic analysis is a method of presenting qualitative information according to patterns that emerge when collating the data. The stakeholder and family interview schedules were based around the evaluation questions, which were then coded according to data familiarisation and patterns. The presentation of data was then organised around the themes that emerged from the analysis. Thematic analysis was selected based on its appropriateness for presenting data based on experiences, understandings, views and perceptions (Bryman 2016).

Two limitations may affect the analysis of interview data. First, the evaluation may be limited by selection bias, whereby young people and parents/carers who consented to participate in an interview may have done so because they had particularly positive experiences in the ReBoot program. The findings may also be affected by social desirability bias, whereby young people and parents/carers who participated in an interview may have been reluctant to discuss any negative program experiences because of how they felt they may be perceived by the researchers or perceived implications for their participation in the program. The researchers attempted to mitigate the impact of these biases by inviting all young people and parents/carers to participate in an interview, regardless of their experiences of the program and as long as they could do so safely, and by testing for and challenging perceived social desirability bias when it occurred.

Analysis of administrative data

Administrative data collected by HYPA were analysed for all young people referred to and/or engaged in the program between 1 July 2015 and 30 June 2017. These data included:

- sociodemographic characteristics (eg age, gender and Indigenous status);
- information about personal circumstances (eg living situation, primary carer/s and issues identified in addition to offending);
- offending history (type of offence at referral);
- referral source (Adelaide Youth Court or Family Conference Team);
- dates of key milestones (eg date of referral, date of eligibility assessment, date of first contact between young people and various service providers, date of young person's exit from the program);
- referral, consent and engagement numbers;
- information regarding program components (eg ReBoot Action Plan, wilderness camp participation);
- barriers to program participation (eg reasons for non-engagement or disengagement, whether young people entered custody while on the program, reasons for not participating in the wilderness camp); and
- participant exit information (eg date of program exit, reasons for exit).

A total of 85 referrals to the program were made for 81 young people. Of these young people, 50 commenced and engaged with the program. Unless otherwise specified, analysis was conducted using the total number of engaged young people (n=50). For young people with multiple episodes of engagement (n=3), data from only their first episode were analysed. Thus, at the time of analysis, 15 young people had completed the program, 30 young people had partially completed the program, and five young people were still active clients.

Analysis of assessment data

The evaluation framework identified four assessment tools to measure whether the ReBoot program was meeting its objectives:

- University of Rhode Island Change Assessment Scale (URICA);
- Criminal Sentiments Scale (CSS);
- HYPA Personal Resilience Survey (PRS); and
- HYPA Outcomes Checklist.

Each of these tools is described in detail below.

University of Rhode Island Change Assessment—Short (URICA-S)

The URICA is a self-report scale designed to measure an individual's degree of motivation to modify their behaviour. The URICA aims to determine the respondent's 'stage of change' at the time of completing the assessment (McConaughy, Prochaska & Velicer 1983). The stages of change vary from the individual demonstrating no intention to change, contemplating change, actively engaging in change, and working to maintain change (Prochaska, DiClemente & Norcross 1998; Prochaska & Norcross 2001).

The URICA is one of the most widely used measures of general readiness to change (Sutton 2001) and has consistently demonstrated sufficient internal validity across a wide range of populations, including adolescent and offender samples in Australia and overseas (eg see Cohn et al. 2005; Neal 2011; Norberg et al. 2011; Stephens, Cellucci & Gregory 2004).

For the current evaluation, a shortened version of the URICA (URICA-S) was provided as an independently validated measure of an individual's motivation to change across time. The URICA-S was to be administered to young people by the ReBoot service providers at program entry, midpoint and exit. Of the 50 young people who commenced and engaged with the program, 11 young people completed a baseline survey only, two young people completed a midpoint survey only, and two young people completed both a baseline and a midpoint survey. Due to a low response rate, survey responses were unable to be analysed as part of the evaluation.

Criminal Sentiments Scale (CSS)

The CSS is a self-report survey that measures antisocial attitudes, values and beliefs related to criminal activity (Andrews & Wormith 1984). The CSS comprises three subscales measuring a respondent's tolerance for law violation; identification with criminal others; and attitudes towards the law, courts and police. The CSS has proven reliability and validity (Andrews 1985) and may be predictive of recidivism among juvenile offenders (Skilling & Sorge 2014).

Two of the three subscales (Andrews & Wormith 1984) were provided as independently validated measures of an individual's attitudes towards law violation and identification with criminal others. The scales were to be administered to young people by the ReBoot service providers at program entry, midpoint and exit. Of the 50 young people who commenced and engaged with the program, nine young people completed a baseline survey only and two young people completed both a baseline and a midpoint survey. Due to a low response rate, survey responses were unable to be analysed as part of the evaluation.

HYPA Personal Resilience Survey (PRS)

The PRS is a bespoke tool designed to measure resilience among young people who participate in the range of programs provided by HYPA, including the ReBoot program. The PRS comprises 49 attitudinal and behavioural questions, which are completed by the young person at program entry, three-monthly intervals and exit. Items fall into four key focus areas: home, wellbeing, learning and working. Participants rate their level of agreement with each item according to dichotomous yes/no response options and various Likert-type scales. Responses to the questions are used to generate a client's score out of 100 for each of the key focus areas as well as a total resilience score. Higher scores indicate greater resilience. Rather than using this scoring methodology, the current evaluation used individual items from each of the key focus areas to answer the research questions.

Seventeen young people completed the PRS at program entry and exit. This accounts for 34 percent of all young people who engaged in the program. Characteristics of these 17 young people are described in Table 1. Chi-square significance tests of association revealed no statistical differences between young people who completed the PRS and those who did not. As such, the sample of young people who participated in this component of the evaluation may be representative of all young people who were referred to and engaged in the program.

HYPA Outcomes Checklist

The HYPA Outcomes Checklist is a generic tool utilised by HYPA case managers to record the progress of young people participating in HYPA programs and services. Case managers are encouraged to complete the Outcomes Checklist for participating young people at program entry, three-monthly intervals and exit. The Outcomes Checklist comprises a large number of items that relate to various domains that HYPA may be working on with young people: home, wellbeing, learning and working.

Case managers document a young person's progress against each of the items included in the checklist using five mutually exclusive response categories, listed below with their definitions based on advice provided by HYPA:

- 'Not relevant'—the item is not relevant for the young person (typically because the young person does not have a deficit in this area) and so is not included as a goal in their action plan at time of completing the checklist;
- 'Not yet achieved'—the item is relevant for the young person, which means that the program is working with the young person to address this issue, and it is included as a goal in their action plan;
- 'Achieved'—the item is included as a goal in the young person's action plan, and the young person has made an improvement in this area;
- 'Achieved but not maintained'—the item is included as a goal in the young person's action plan, and over the prior three-month period the young person made improvement in this area but was unable to maintain this change so had returned to their prior state; and
- 'Maintained'—the item is included as a goal in the young person's action plan, the goal has been achieved, and the improvement has been maintained over the prior three-month period.

Table 1: Characteristics of young people included in the HYPA assessment data				
	Personal Resilience Survey (n=17)		Outcomes Checklist (n=33)	
	n	%	n	%
Gender				
Male	14	82	26	79
Female	3	18	7	21
Age (years)^a				
13–14	6	35	13	39
15–16	8	47	11	33
17–18	3	18	8	24
Indigenous status				
Indigenous	6	35	15	45
Non-Indigenous	11	65	18	55
Completion status				
Completed	10	60	13	39
Partially completed	4	18	15	45
Active	3	24	5	15
Referral source				
Adelaide Youth Court	3	18	15	45
Family Conference Team	14	82	18	55
Wilderness camp participation^{bc}				
Yes	8	47	8	24
No	9	53	25	76

a: Excludes 1 young person who was the subject of an Outcomes Checklist for whom this data were unavailable

b: Excludes 4 young people who completed the PRS for whom these data were unavailable

c: Excludes 17 young people who were the subject of an Outcomes Checklist for whom these data were unavailable

For the purpose of analysis, the decision was made to collapse ‘Not yet achieved’ and ‘Achieved but not maintained’ into the single category of ‘Not achieved’. The researchers took the view that, if a young person had achieved but was unable to maintain the outcome, this should be classified as non-achievement for evaluation purposes.

Responses reflect the young person’s progress since the last assessment, typically a three-month period, and are informed by case managers’:

- direct observation of young people’s attitudes, behaviours and circumstances,
- conversations with young people and their parents/carers; and
- other available information, such as information provided by the other ReBoot service providers, community service providers and DCSI Youth Justice case managers.

The analysis is limited to young people for whom an item was relevant at both the entry and exit assessments. The number of young people analysed for each item therefore fluctuates according to the proportion of young people for whom items were relevant across their program participation.

Case managers completed an Outcomes Checklist at program entry and exit for 33 young people (66% of all young people who engaged in the program). Characteristics of these young people are described in Table 1. As with the PRS, chi-square significance tests of association revealed no statistical difference between the characteristics of young people who completed the Outcomes Checklist and those who did not. Therefore, this sample of young people may be representative of all young people who were referred to and engaged in the program.

Analysis and limitations of HYPA PRS and Outcomes Checklist

To assess the impact of the ReBoot program, responses to the PRS and HYPA Outcomes Checklist were compared for the three-month period following commencement (entry/first survey) and within the three-month period before exit (exit/last survey). Three young people who completed the PRS and five young people who were the subject of Outcomes Checklists were active clients at time of data extraction (see Table 1). For these young people, their entry assessment was compared with their last completed assessment. The decision was made to include these young people as they comprised only a minority of the sample and had been participating in the program for an average of six months, and so there is a reasonable expectation that they would have received some benefit.

Most young people exited the program after completing their last survey. Assessments completed at program exit therefore refer to the last assessment completed by the young person at time of data extraction. The average length of time between the entry and last PRS completed by young people was 207 days (range 59–408 days), or approximately seven months. The average time between Outcome Checklists for entry and exit was 258 days (range 30–491 days), or approximately nine months.

Outcomes for the completed PRS and Outcomes Checklists were assessed by examining whether young people had improved, declined or experienced no change at the time of their last assessment. This analysis allows for comparison across multiple types of survey questions with different Likert-type scales. Finally, outcomes were assessed according to several factors, including young people's demographic characteristics (gender, age and Indigenous status), completion status, referral pathway and wilderness camp participation. All findings were tested for statistical significance, and this is presented where relevant.

A number of notable limitations affected the analysis of the assessment data. First, the number of young people who completed entry and exit assessments was lower than anticipated, resulting in small sample sizes. The sample was further decreased due to non-entry of assessments into HYPALink, an online database designed by HYPA to store client information, including their assessment data. This system was implemented in 2016, meaning that assessment information for young people engaged in the ReBoot program before 2016 was limited. The small sample sizes limited the analysis of outcomes by participant factors and characteristics. While appropriate statistical tests for small numbers were used (eg Fisher's exact test), few differences based on these characteristics were able to be identified.

Second, the PRS and Outcomes Checklist are generic tools utilised for all programs delivered by HYPA. The surveys are not specific to the ReBoot program and have not been designed to facilitate external monitoring and evaluation activities. As a result, the data were not always fit for purpose and at times may be best described as a proxy for outcomes relevant to the ReBoot program. It is also important to note that the PRS and Outcomes Checklist have not been validated, so findings should be interpreted with caution.

Third, many items in the Outcomes Checklist relied on case managers' knowledge of behaviours that were 'hidden' because they were unlikely to occur in the presence of case managers and/or because the young person was unwilling to disclose them. Young people may be more reluctant to talk about behaviours that are socially undesirable or illegal, such as offending and substance use. As such, information provided by case managers was limited to what they were able to observe or information they were provided, and so may not be a precise reflection of the behaviours and attitudes of young people. The evaluation did not draw on officially recorded offending data; however, a concurrent recidivism study has been undertaken by the Office of Crime Statistics and Research (OCSAR) to supplement the data provided in this report.

Fourth, the outcomes described in this report relate only to those observed during the young person's period of participation in the program. Changes that were observed may not be sustained beyond the intervention period, and may better reflect the impact of the program while young people are being supported, rather than the impact of the program on long-term behavioural change.

Finally, a pretest–posttest design without a matched control group was utilised, meaning it is not possible to compare outcomes for young people who participated in the ReBoot program with those who did not participate. Consequently, one cannot be certain that the observed results would not have been achieved regardless of the intervention.

Ethical research

All research conducted by the AIC involving human participants is subject to clearance by the AIC Human Research Ethics Committee (HREC). This ensures that all research involving human research participants complies with the:

- National Statement on Ethical Conduct in Human Research (National Health and Medical Research Council 2007a);
- Australian Code for the Responsible Conduct of Research (National Health and Medical Research Council 2007b)
- Guidelines for the Ethical Conduct of Evaluations (Australasian Evaluation Society 2013);
- Guidelines for Ethical Conduct in Aboriginal and Torres Strait Islander Health Research (National Health and Medical Research Council 2003);
- Guidelines for Ethical Research in Australian Indigenous Studies (Australian Institute of Aboriginal and Torres Strait Islander Studies 2012); and
- *Privacy Act 1988* (Cth).

The ReBoot evaluation received AIC HREC approval in February 2016 (P0241A, P0241B).

Review of the implementation and operation of the ReBoot program

This section of the report presents the findings from a detailed assessment of the implementation and operation of the ReBoot program during the two-year trial period from 1 July 2015 to 30 June 2017. The review has drawn on key program documentation (such as the program service delivery model and practice guidelines), consultations with key stakeholders, and analysis of administrative data collected by the ReBoot service providers.

Program development

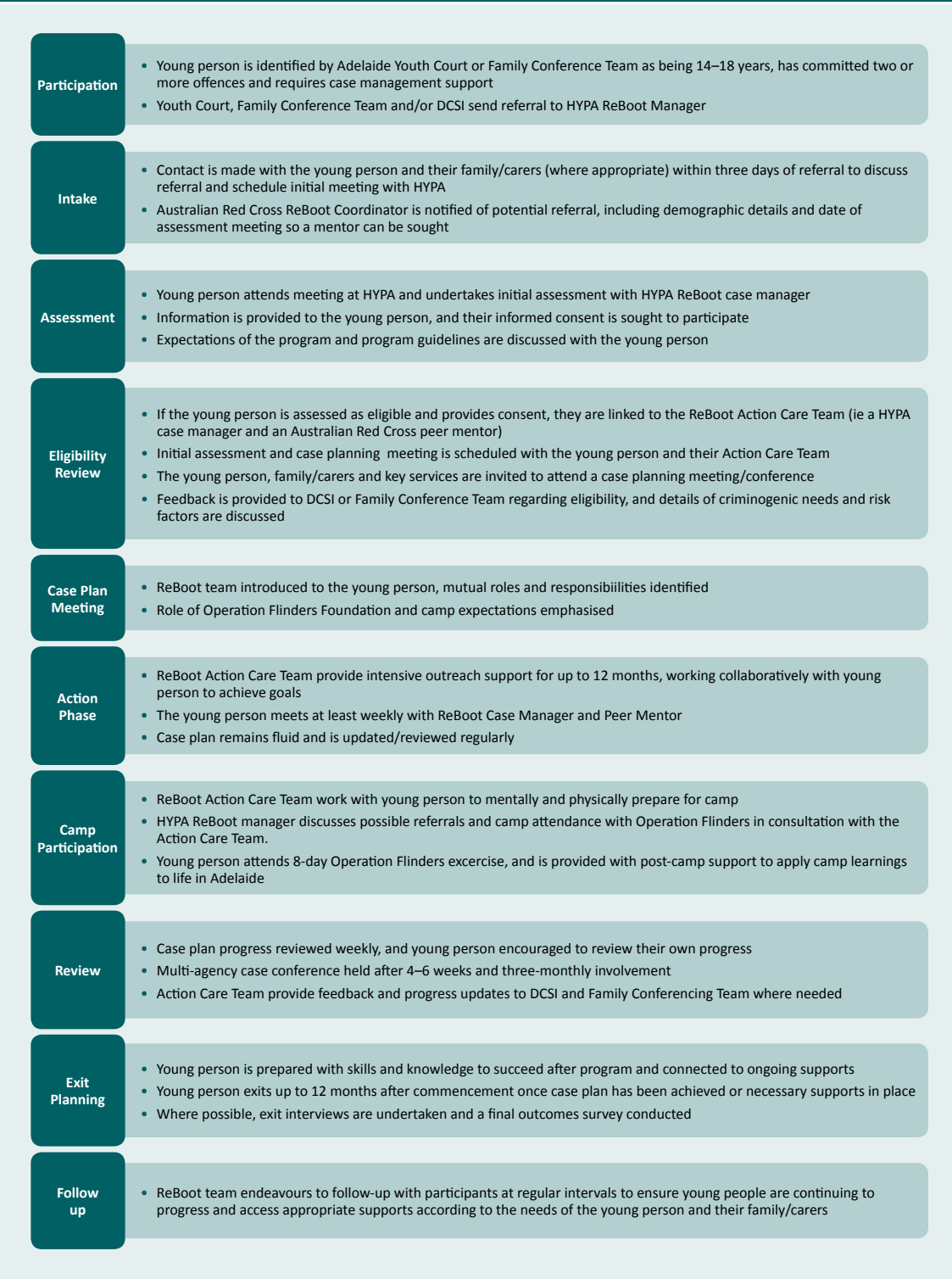
The ReBoot program was designed in consultation with a number of key stakeholders, including the South Australia AGD, Operation Flinders Foundation, South Australia Police, DCSI, the Courts Administration Authority of South Australia and the Family Conference Team. Program planning involved a series of consultations related to program design, a review of the available literature on 'what works' for addressing offending behaviour among young people, analysis of available statistical data, and consideration of advice provided by local researchers and organisations with knowledge and expertise in juvenile justice.

Stakeholders emphasised that it was important for the ReBoot program to deliver community-based support to address identified needs, and to focus on education and employment as protective factors against reoffending. However, they were careful not to be overly prescriptive in designing how the program would operate, and intended for the program to be focused on outcomes rather than processes. The resulting model (see Figure 1) therefore incorporates a pay-by-results approach, whereby key performance indicators must be met in order for payment to be triggered and received by service providers.

Importantly, the ReBoot program accords with the relevant Principles of Youth Justice in Australia (Australasian Juvenile Justice Administrators 2014). These principles were designed to guide effective policy and program design in order to respond to the needs of young people

who offend and reduce the harm caused by such offending. The principles draw together best practice evidence, advice of key stakeholders, and obligations stipulated by legislation and international conventions.

Figure 1: ReBoot program service delivery model



Eligibility criteria

There are two flexible eligibility criteria for participation in the ReBoot program: that the young person is 14–18 years at the time of referral, and that the young person has committed a second or subsequent offence. The process evaluation found that the age criterion was appropriately targeted due to the absence of community-based intensive interventions for 14–18-year-old offenders in South Australia. Further, the flexible application of the age criterion allowed a small number of clients to participate in the program at a slightly younger age (ie 13 years). Stakeholders considered this flexibility to be a strength of the program, as younger offenders who were identified as requiring intensive intervention could still be offered support. However, not all stakeholders were aware of the flexibility of the age criterion, including those who were responsible for referring young people to the program.

Similarly, the offence criterion was appropriately targeted at young people requiring intensive intervention to disrupt antisocial behaviours and prevent escalation within the criminal justice system. Given Australian youth have the highest offending rates of any age group (AIC 2012; Richards 2011; Shepherd et al. 2016), and young offenders are at significant risk of further contact with the youth and adult criminal justice systems (Indig, Frewan & Moore 2016; Payne & Weatherburn 2016), the intensity of support being offered was suited to a youth cohort with a history of offending (Noetic Group 2017).

The offence criterion also allowed for young people with varying criminal justice experiences to be referred. Judicial and family conferencing stakeholders offered various interpretations of what constituted an eligible offence, ranging from police cautions to criminal convictions. While broad definitions of an eligible offence allowed clients with varying criminal justice contact to be referred, stakeholders acknowledged that differing interpretations could lead to inconsistent application of the eligibility criteria.

The process evaluation found that some stakeholders believed a young person's ability and willingness to participate in the Operation Flinders Foundation wilderness camp was part of the eligibility criteria and had informed their decision to refer young people to the program. While a young person's unwillingness to participate in the wilderness camp may result in them being exited from the program, it did not preclude them from being referred. The perception that young people were ineligible for the program if they indicated they were unable or unwilling to participate in the wilderness camp may have resulted in some young people not being considered for referral who may have otherwise been eligible.

Recommendation 1

Provide referral sources and assessors with a definition of an offence for the purpose of determining program eligibility. Consideration should be given as to whether the same or a different definition should apply based on the referral pathway. Clarifying the definition of an offence will ensure the eligibility criteria are applied consistently.

Recommendation 2

Communicate to relevant stakeholders that participation in the Operation Flinders Foundation wilderness camp is not part of the ReBoot program's eligibility criteria, and referral sources are not required to make an assessment of a young person's ability or willingness to participate in the wilderness camp. Update relevant program documentation to reflect this.

Referral and engagement

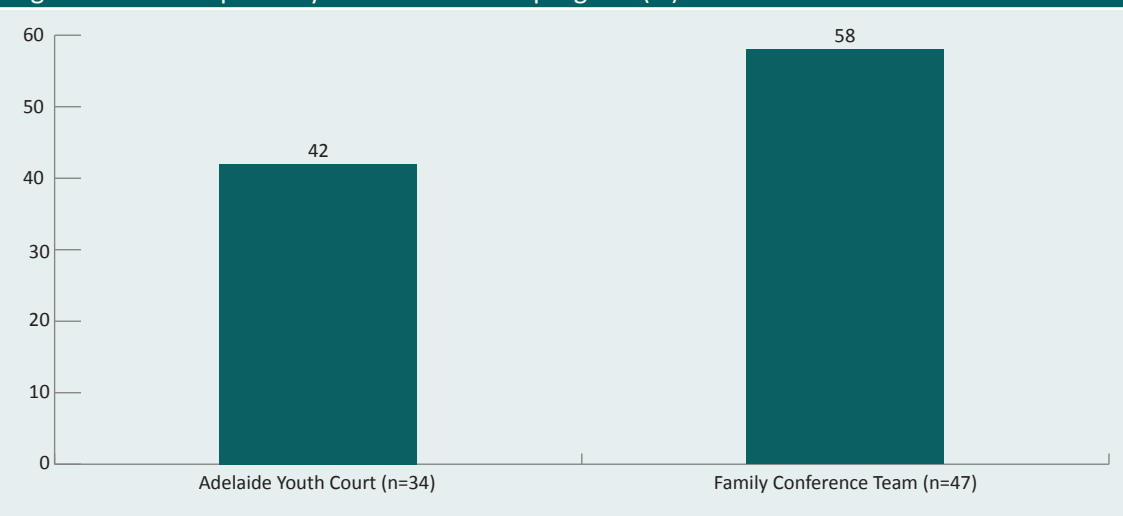
Referral pathways

Eighty-one young people were referred to the ReBoot program during the evaluation period. Of these, 42 percent (n=34) were referred by the Adelaide Youth Court and 58 percent (n=47) as an outcome of family conferencing (see Figure 2).

Stakeholders expressed high levels of satisfaction with the decision-making processes for identifying appropriate referrals to the ReBoot program. For the family conference pathway, the appropriateness of a referral was considered as part of the coordinator's pre-conference work. This was a collaborative process that involved speaking with the young person, their family, police representatives and ReBoot case managers (if they were present), and considering information available through reports.

Judicial officers of the Adelaide Youth Court employed similarly collaborative decision-making processes. The appropriateness of a referral was based on submissions from legal representatives; the views of the young person, their family and police; and information provided by ReBoot case managers at the time of sentencing (if they were present). While stakeholders acknowledged the value of ReBoot case managers attending court and family conferences to facilitate appropriate referrals, there were also concerns that long wait times diverted case managers from their core case management tasks.

Figure 2: Referral pathways into the ReBoot program (%)



Source: HYPA Administrative dataset 2017 [computer file]

Stakeholders expressed a high level of satisfaction with referral and intake procedures associated with the family conference pathway. This was largely due to the streamlined referral and intake process, whereby the referral was made directly to the HYPA ReBoot manager once conference participants had reached agreement to undertake an eligibility assessment.

Due to the more complex administrative referral and intake process associated with the Adelaide Youth Court pathway, stakeholders highlighted challenges related to the timeliness of referrals and clarity of the referral process. In comparison with the expedited referral process for family conferencing, statutory obligations necessitated that DCSI assume responsibility for the administration of court mandates. As such, as part of the referral process, DCSI:

- received the mandate from the Adelaide Youth Court Registrar on the day the referral was made;
- recorded the condition to undertake a ReBoot program eligibility assessment;
- allocated a DCSI Youth Justice case manager to supervise the young person for the length of their obligation and monitor compliance;
- informed HYPA of the mandate using the ReBoot referral form and arranged a joint meeting between the DCSI Youth Justice case manager, the ReBoot case manager and the young person to discuss the court order and program expectations;
- communicated progress and issues back to the court; and
- monitored the number of ReBoot referrals.

While a partnership protocol was developed between DCSI and HYPA that outlined the referral process, time frames and the roles and responsibilities of each agency, stakeholders identified that the protocol could be difficult to adhere to in practice, and that referral and intake processes needed to be adaptive and considerate of the challenges of engaging with young people in a statutory environment. The issues identified by stakeholders as impacting on the timeliness of referrals to HYPA included:

- the capacity of DCSI to immediately enter the referral into the case management system;
- DCSI Youth Justice case managers choosing to delay ReBoot referrals until the young person is assessed by DCSI as being capable of engaging with the program;
- delays with ReBoot program staff acknowledging receipt of a referral;
- the young person not reporting for statutory supervision, which delays the obtaining of consent from the young person for a ReBoot case manager to initiate contact; and
- scheduling statutory supervision so that a ReBoot case manager is also able to attend.

Lack of clarity around referral and intake processes among stakeholders responsible for the administration of the mandate further impacted on the timeliness of referrals. While stakeholders understood that DCSI was the lead agency and that the ReBoot program was typically one of a number of conditions attached to the mandate, they also reported having an inconsistent understanding of how the program operated, being unaware of the partnership protocol, and being unsure of the differences between the role of a DCSI case manager and a ReBoot case manager.

Many of these issues remained throughout the trial period; however, stakeholders acknowledged that communication about new referrals had become more proactive between DCSI and HYPA. This involved the establishment of weekly informal contact between the DCSI Youth Justice supervisor and the HYPA ReBoot manager to discuss forthcoming referrals, and the referral form being sent to HYPA before DCSI seeking the young person's consent to allow a ReBoot case manager to initiate contact. Removing the requirement for consent to be obtained before a referral form was provided to HYPA allowed the ReBoot case managers to begin planning for the referral much earlier.

The catchment zone for the ReBoot program is defined by the referral pathway. The catchment zone for the Adelaide Youth Court pathway is limited to those young people whose offences fall within the court's remit (metropolitan Adelaide). In comparison, because youth conferencing is available in a range of locations, the catchment area for this pathway is much broader. Stakeholders were supportive of expanding the catchment zone for the ReBoot program. Stakeholders who engaged with or provided services to young people outside metropolitan Adelaide indicated that they would have recommended participation in the ReBoot program had their location fallen within the catchment area. As such, stakeholders conveyed strong support for referrals to be made through the youth courts located at Port Adelaide, Elizabeth and Christies Beach. Judicial officers and family conference coordinators familiar with the ReBoot program typically completed circuits at these locations, and also identified these locations as areas of high need.

Recommendation 3

Include a formalised communication strategy as part of DCSI and HYPA's partnership protocol. Within the communication strategy, require the DCSI Youth Justice Supervisor and HYPA ReBoot Manager to make contact on a weekly basis to discuss forthcoming referrals. Prompt notification of referrals will assist with program planning and reduce potential delays associated with referrals made by the Adelaide Youth Court.

Recommendation 4

Examine the feasibility of expanding the catchment zone in order to accept referrals from youth courts located at Port Adelaide, Elizabeth and Christies Beach, taking into account the demand for the program and the capacity to accept additional referrals.

Voluntary nature of the program

The program guidelines stipulate that young people are required to participate in an eligibility assessment conducted by HYPA, although participation in the program is ultimately voluntary. The consultation process identified that stakeholders responsible for referring young people through the Adelaide Youth Court often believed that participation was mandatory, as it was written into the young person's court orders. In this regard, referrals made through the Adelaide Youth Court were ostensibly mandatory. Empirical evidence indicates that there is little difference between voluntary and mandatory programs in producing positive outcomes. A recent meta-analysis examining studies of 14 mandatory and 11 voluntary young offender rehabilitation programs in Europe found that both treatments showed the same significant positive effects on recidivism (Koehler et al. 2013).

Stakeholders held mixed views regarding whether the ReBoot program should be voluntary or mandatory. Most stakeholders indicated strong support for the program to become mandatory for young people assessed as eligible, and offered several reasons in support of this view. First, stakeholders indicated that a specified period of program participation was already being mandated for young people appearing before the Adelaide Youth Court, and so in effect participation was mandatory for these young people. Second, stakeholders noted that young people often believed that the program was compulsory or felt obliged to participate in the program, even when the voluntary nature of the program was explained to them. This was supported by interviews with young people participating in the program, some of whom indicated, when asked why they chose to participate in the program, that they believed they had to. In this regard, stakeholders also supposed that young people would choose not to participate if they understood the program was voluntary.

Third, stakeholders suggested that there were community expectations that participation in a government-funded program targeted at recidivist offenders should be compulsory and not at the discretion of a young person. Fourth, stakeholders held concerns that voluntariness created uncertainty for young people at a time when they needed clear guidance and instruction. Finally, if a young person declined to participate, stakeholders argued that the young person could be left without appropriate intervention and support. Stakeholders were therefore of the opinion that many young people who may be initially unwilling to participate in the program would still benefit from their contact with the program, and become more engaged and motivated to change as a result.

The views of stakeholders were in part supported by some of the parents/carers interviewed as part of the evaluation. One parent exemplified that making participation mandatory may motivate young people to make lasting changes to their behaviour:

“

I would recommend [the program], but I found it a little bit ineffective, as in they don't have any power over [the young person]. Everything is voluntary...it's all voluntary, so unless the kid volunteers, you can't force them...I think it would help if the program was mandated. Not so much for kids who are motivated, but for kids who are not motivated, they say all the right words when the case manager is here, and then go and sit on their bum and do nothing (parent/carer, August 2017).

Conversely, stakeholders in support of the program remaining voluntary noted that this empowers the young person to take ownership of their antisocial and offending behaviours, and to take responsibility for changing those behaviours; it also involves them in decisions that impact on their lives. They argued that this was important in terms of encouraging motivation.

Despite these contrasting views, all stakeholders agreed that the young person's willingness and readiness to engage with the program were important factors associated with successful completion and positive outcomes, and that a key purpose of the program was to increase motivation to change. In this regard, it is perhaps willingness and readiness, rather than voluntariness, which should be considered as part of the intake process and monitored throughout the young person's engagement.

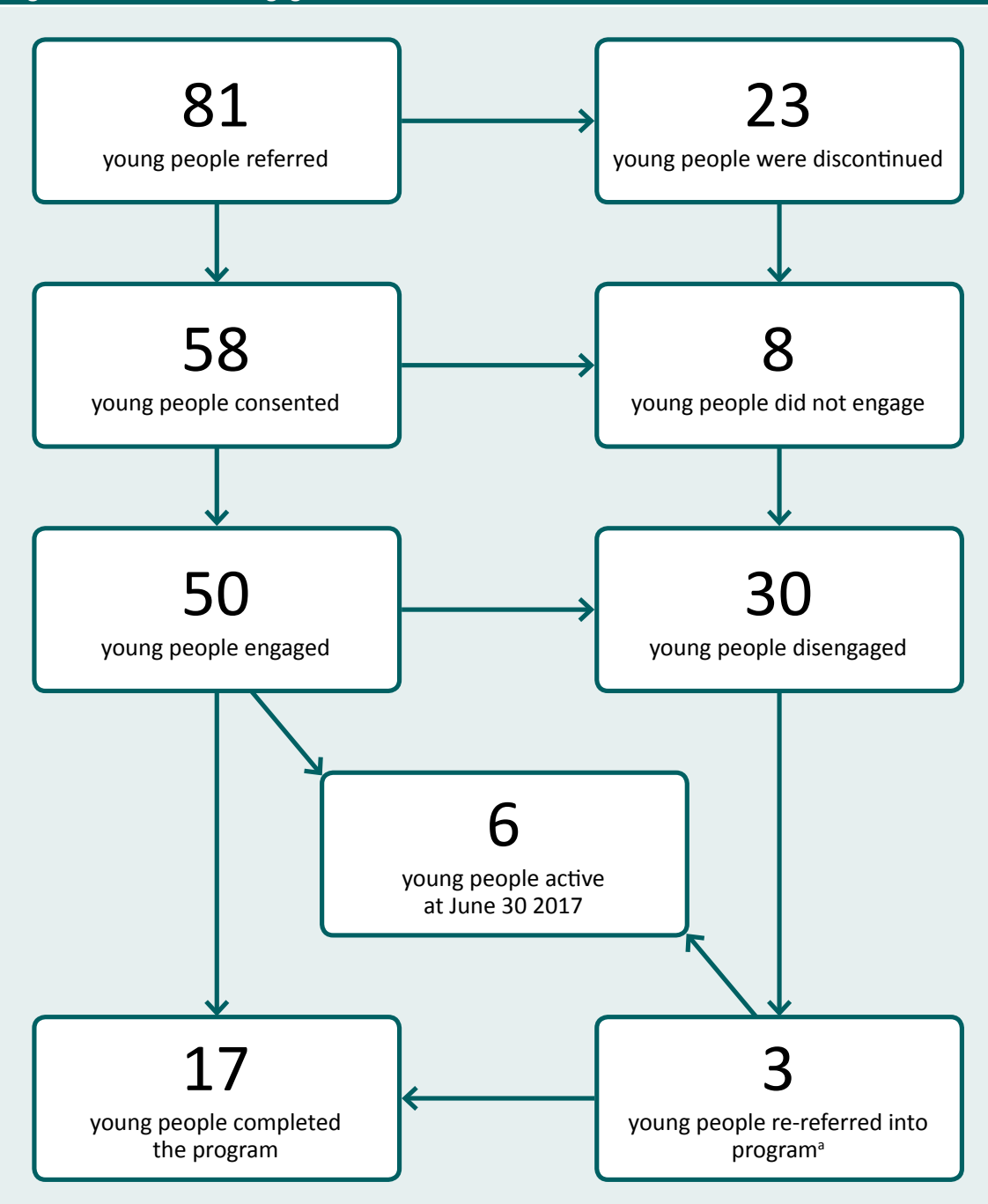
Recommendation 5

Review the voluntary nature of program participation and consider introducing a mandatory period of program participation for young people referred through the Adelaide Youth Court, subject to the outcome of an eligibility assessment. Continue to accept referrals to the program at the discretion of the Adelaide Youth Court, taking into account the position and information provided by various parties involved in the court process. Consider and decide on the consequences of failing to participate, before any changes take effect.

Referral and engagement numbers

The numbers of young people referred to and engaged in the ReBoot program are presented in Figure 3. As at 30 June 2017, 81 young people had been referred to the program, of whom 58 consented to participate and 50 commenced engagement. Seventeen young people completed the program during the trial period. Thirty young people partially completed the program, three of whom were re-referred and subsequently re-engaged. A further six young people were active participants of the program at time of analysis.

Figure 3: Referral and engagement numbers as at 30 June 2017



a: Of the 3 young people who were re-referred to the program, 2 young people were still active clients and 1 young person had gone on to complete the program at time of data extraction

Source: HYPA Administrative dataset 2017 [computer file]

Characteristics of young people who engaged in the ReBoot program

Program participants were aged 13–18, with the average age being 15 (see Table 2). The majority of young people were male (n=40; 80%), and nearly half identified as Indigenous (n=23; 46%). Five young people identified as culturally and linguistically diverse (10%).

Table 2: Characteristics of young people referred to and engaged in the ReBoot program

	Referred (n=81)		Engaged (n=50)	
	n	%	n	%
Gender				
Male	63	78	40	80
Female	18	22	10	20
Average age (range)	15 ^a (13–18)		15 ^b (13–18)	
Young person identified as Indigenous	34 ^b	43	23	46
Young person identified as culturally and linguistically diverse	7 ^b	9	5	10

a: Excludes 10 young people for whom these data are unavailable

b: Excludes 2 young people for whom these data are unavailable

Source: HYPA Administrative dataset 2017 [computer file]

At program entry, most participants were living in stable accommodation (n=32; 64%; see Table 3). However, one-quarter of young people were either homeless/transient (n=7; 14%) or residing in temporary crisis accommodation (n=5; 10%). As shown in Table 4, mothers were most commonly identified as the young person's primary carer (n=16; 32%), although a similar proportion were classified as independent (n=15; 30%).

Table 3: Living situation of young people engaged in the ReBoot program (n=50)

	n	%
Stable accommodation	32	64
Homeless/transient/couch surfing	7	14
Temporary accommodation/shelter	5	10
Residential care facility ^a	6	12

a: Includes government and non-government residential facilities

Source: HYPA Administrative dataset 2017 [computer file]

Table 4: Carer arrangements of young people engaged in the ReBoot program (n=50)

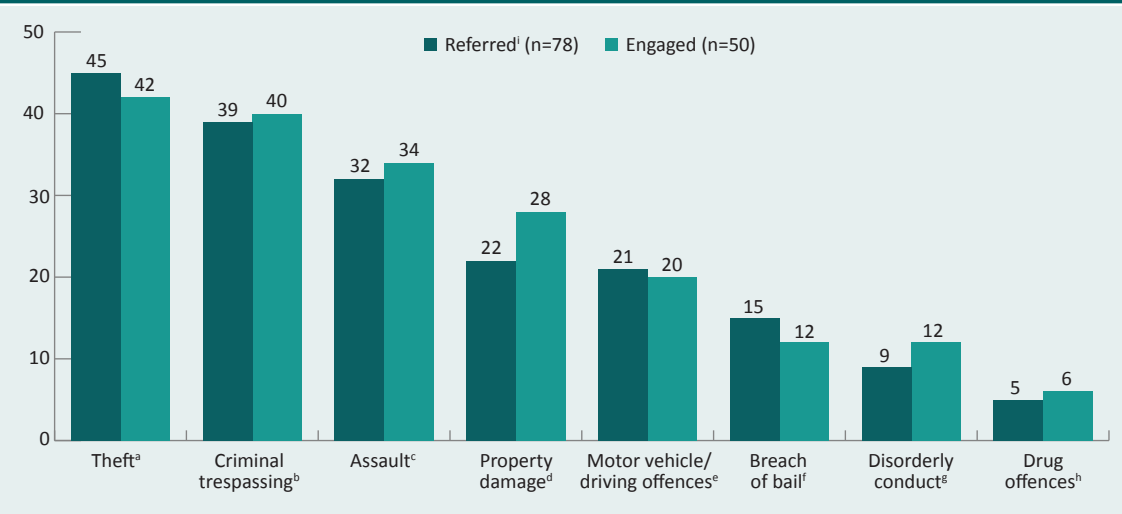
	n	%
Independent	15	30
Mother	16	32
Father	9	18
Both parents	3	6
Extended family	6	12
Sibling	1	2

Source: HYPA Administrative dataset 2017 [computer file]

At time of referral, young people had been charged with a range of offences (see Figure 4). Theft was the most common charge for young people both referred to and engaged in the ReBoot program (n=35; 45% vs n=21; 42%), followed by criminal trespassing (n=30; 39% vs n=20; 40%) and assault (n=25; 32% vs n=17; 34%). The majority of young people referred to (n=43; 55%) and engaged in (n=30; 60%) the ReBoot program were charged with multiple offences.

Young people typically experienced complex personal issues in addition to offending, with more than three-quarters of the young people referred to (n=56; 77%) and engaged in (n=43; 86%) the program experiencing at least two issues in addition to their offending (see Figure 5). Drug and/or alcohol use was the most common issue for young people who were referred to (n=51; 69%) and engaged in (n=38; 76%) the program, followed by issues related to education, such as school disengagement and low numeracy and literacy (n=43; 58% for referred young people vs n=31; 62% for engaged young people). Between 31 percent and 56 percent of referred and engaged young people also had mental health issues (n=34; 46% vs n=28; 56%), family-related issues (n=30; 41% vs n=24; 48%) and housing issues (n=23; 31% vs n=20; 40%).

Figure 4: Common charges at program referral (%)



a: Includes aggravated theft, possession of stolen goods and use of vehicle without consent

b: Includes serious criminal trespassing and unlawfully on premises

c: Includes aggravated assault and assault of police officer

d: Includes graffiti and vandalism

e: Includes driving and traffic offences, and use or interference with a motor vehicle without consent

f: Refers to failure to comply with bail conditions

g: Includes disturbing the peace and indecent behaviour/language

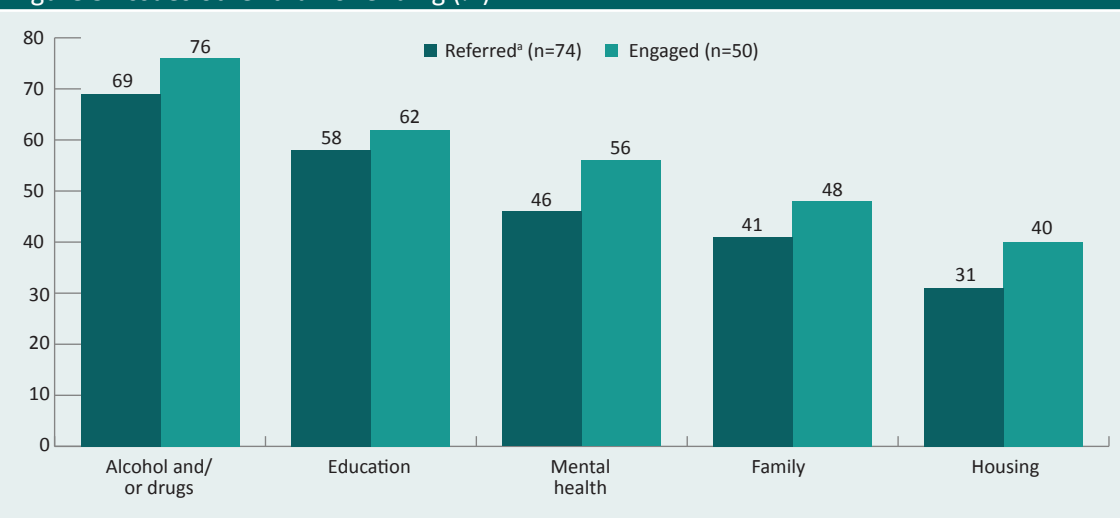
h: Includes selling and/or possessing a controlled drug

i: Excludes 3 young people for whom these data are unavailable

Note: Figure includes most common offence types; less common offences have been excluded, such as carrying an offensive weapon and resisting arrest. Percentages do not sum to 100 as young people could be charged with more than one offence

Source: HYPA Administrative dataset 2017 [computer file]

Figure 5: Issues other than offending (%)



a: Excludes 7 young people for whom these data are unavailable

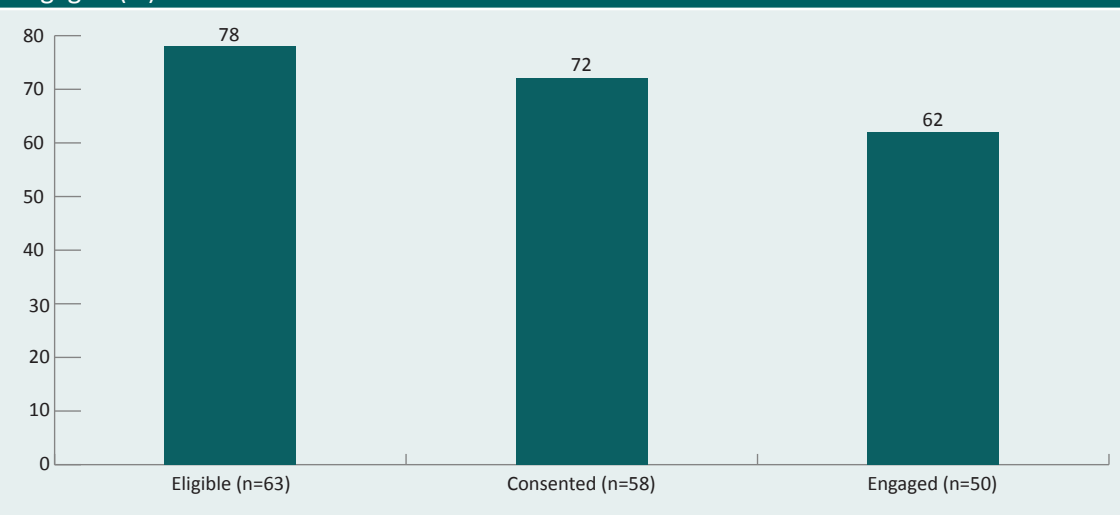
Note: Percentages do not sum to 100 as young people could have more than one issue other than offending

Source: HYPA Administrative dataset 2017 [computer file]

Factors influencing engagement

The majority of young people referred to the program went on to engage (62%; n=50; see Figure 6).

Figure 6: Referred young people (n=81) who were found eligible, who consented and who engaged (%)

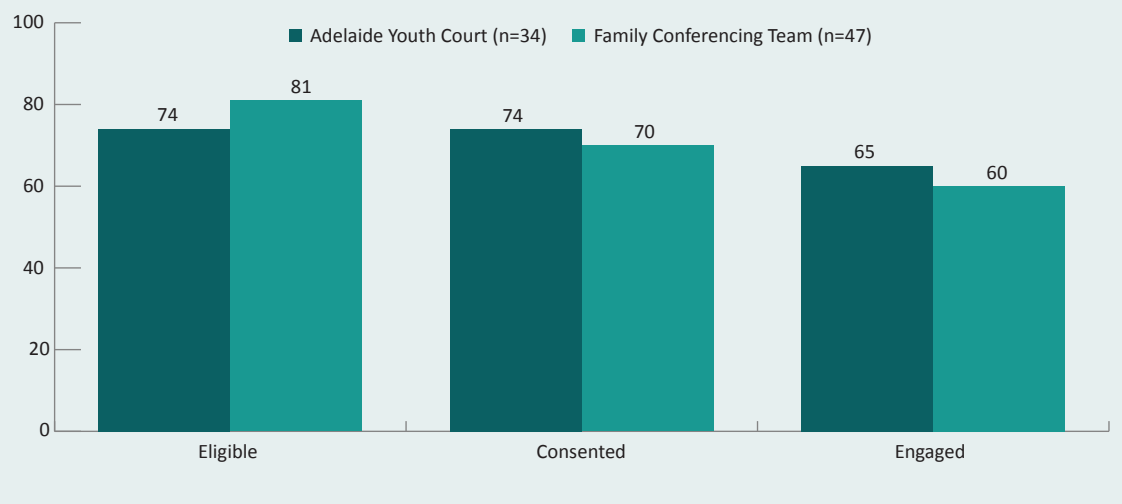


Note: This figure presents engagement by the number of young people. Three young people were referred multiple times. Of the 85 referrals for 81 young people, 64 percent (n=54) resulted in engagement by the young person

Source: HYPA Administrative dataset 2017 [computer file]

Young people referred by the Adelaide Youth Court were more likely than young people referred as an outcome of family conferencing to engage in the program (see Figure 7). Of the young people referred by the Adelaide Youth Court, 25 (75%) were found to be eligible and consented to participate, and 22 (65%) subsequently engaged. Of the young people referred through family conferencing, 38 (81%) were found to be eligible, 33 (70%) consented to participate and 28 (60%) subsequently engaged. However, the proportion of young people who engaged was comparable for both pathways. This is an encouraging and important finding in light of the ReBoot program comprising a condition of a young person's mandate when referred through the Adelaide Youth Court.

Figure 7: Referred young people who consented and engaged in the program, by referral source (%)

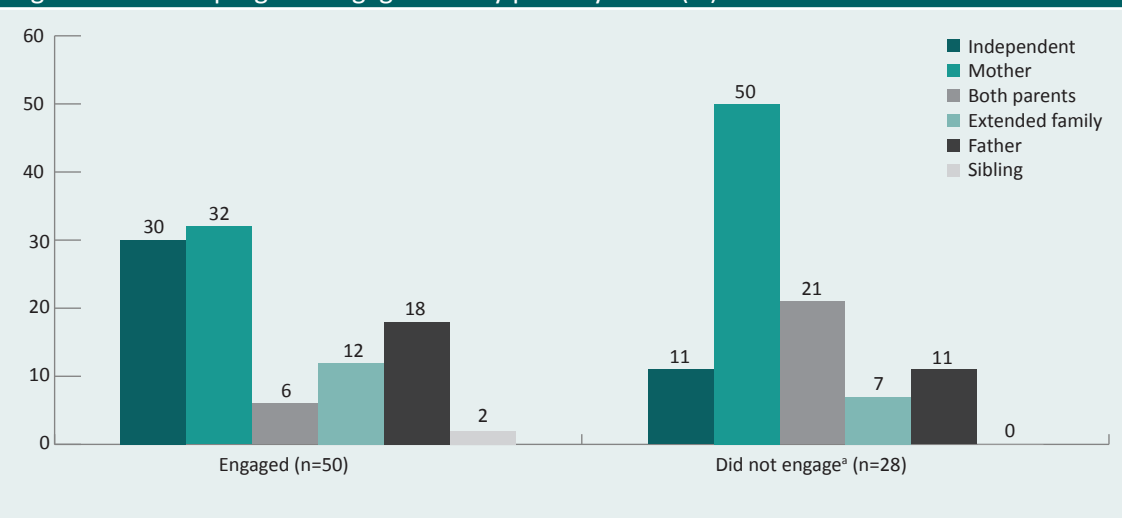


Source: HYPA Administrative dataset 2017 [computer file]

As shown in Figure 8, young people who engaged in the program were more likely than those who did not engage to be independent (ie have no primary carer; n=15; 30% vs n=3; 11%). This could potentially indicate that young people without a readily accessible support network were more receptive to service provision. Those who lived with a family member may have had adequate support and therefore did not require additional assistance from sources outside of their immediate familial and social network.

Similarly, young people who were assessed by ReBoot case managers as having issues related to education, alcohol and/or other drugs, mental health, family and housing were more likely to engage in the program than those without these problems (see Figure 9). This demonstrates that young people who engaged in the program also tended to have more complex needs compared with those who did not engage. Half of engaged young people (n=27; 54%) were identified as having 2–3 additional issues, and one in three young people were identified as having 4–5 additional issues (n=16; 32%; see Figure 10). While young people who did not engage in the program commonly had 2–3 issues, the same proportion were identified as having one additional issue (n=9; 36%) or no additional issues (n=3; 12%). This suggests that young people with complex needs who are without a stable support network and living arrangements may be more inclined to accept help from services to whom they were referred.

Figure 8: ReBoot program engagement by primary carer (%)



a: Excludes 3 young people for whom these data are unavailable

Source: HYPA Administrative dataset 2017 [computer file]

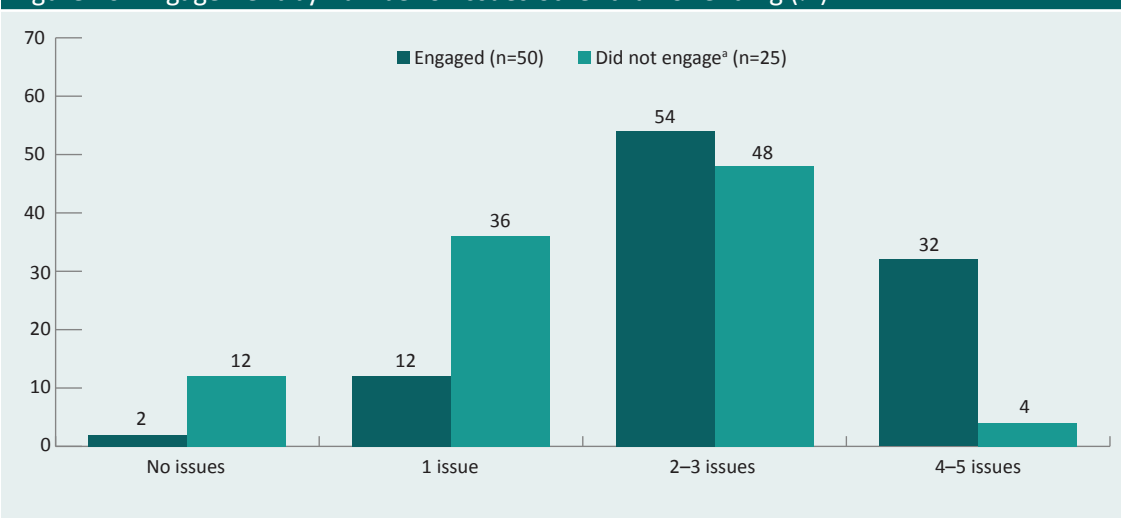
Figure 9: ReBoot program engagement by issues other than offending (%)



a: Excludes 7 young people for whom these data are unavailable

Note: Percentages do not sum to 100 as young people could have more than one issue other than offending

Source: HYPA Administrative dataset 2017 [computer file]

Figure 10: Engagement by number of issues other than offending (%)


a: Excludes 6 young people for whom these data are unavailable

Source: HYPA Administrative dataset 2017 [computer file]

In order to trigger the pay-by-results reward payment, the ReBoot program is required to meet a minimum six-month retention target of 80 percent of young people who are assessed as eligible and commence engagement. While the ReBoot program has been successful in engaging young people for a substantial period of program participation—an average of 256 days, or 8.6 months—this target was not reached. Only two-thirds of participants (n=31; 62%) spent at least six months engaged in the program. When considering completion status, all young people who completed the program (n=15; 100%) and 40 percent of young people who partially completed the program (n=12) were engaged for the minimum six-month period (see Table 5).

Table 5: Length of program participation

Completion status	Days		Months	
	Mean	Range	Mean	Range
Completed (n=15)	392	310–590	13.0	10.0–19.7
Partially completed (n=30)	193	45–508	6.5	1.5–17.0
Active (n=5)	226	165–287	7.5	5.5–9.6
All young people (n=50)	256	45–590	8.6	1.5–19.7

Source: HYPA Administrative dataset 2017 [computer file]

Note: One month is equal to 30 calendar days for the purpose of this analysis. Days have been rounded to the nearest integer. Months have been rounded to 1 decimal place

Many young people remained engaged for a considerable period of time, even if they did not complete the program. Young people's willingness to engage for substantial periods was attributed to the service providers' ability to explain the program to young people, promptly establish positive relationships and offer assertive outreach. The ReBoot service providers explained the program to young people in an easy-to-understand manner and emphasised their autonomy over the process. Stakeholders and young people reported that service providers, when engaging with young people, displayed motivation, respect, authenticity, energy and approachability.

The assertive outreach provided by ReBoot service providers was also identified as a key strategy in engaging hard-to-reach clients. In particular, ReBoot case managers and peer mentors travelled to meet young people at convenient community-based locations, such as their homes or local shops, and undertook opportunistic case management sessions while transporting young people to appointments, activities, school or their place of employment.

Despite this, several barriers to engagement were also identified. Engagement can be harder with recidivist offenders, who are less willing to trust agencies that are part of the youth justice system. Prior negative experiences with the youth justice system and the misconception that the ReBoot program was delivered by CYJ were commonly reported barriers. Some stakeholders also reported that, because ReBoot service providers and DCSI CYJ collaborate for youth court referrals, young people entering through this pathway may not differentiate between the two types of case managers. This may act as a further deterrent for young people who distrust the youth justice system.

Stakeholders explained that resistance from parents/carers was occasionally a barrier to program engagement. Engagement can be difficult when young people and their families are in crisis, which was often the case when a referral was made. During this time, young people and their families may be less able to make long-term plans or commit to programs for extended periods of time.

Non-engagement and disengagement

One in three referrals did not result in program engagement (n=31; 38%). Reasons for non-engagement included:

- noncompliance with the requirement to attend the eligibility assessment (n=8);
- being assessed as ineligible (n=3);
- declining to consent (n=8);
- being over-serviced (n=2; ie engaged in too many support services at time of referral);
- residing outside of the service area (n=1);
- incarceration (n=2);
- the program being at capacity (n=5);
- service providers being unable to contact the young person for a period of more than six weeks (n=1); and
- unknown reasons (n=1).

Of the 50 young people who engaged in the ReBoot program, 30 young people left the program before completion (disengaged). Reasons for disengagement included:

- service providers being unable to contact the young person for more than six weeks (n=13);
- incarceration (n=9);
- relocating outside of the service area (n=5);
- the young person being unable to make time to meet with service providers (which may have been due to other commitments like school, sport or meeting with other services, or the unwillingness of the young person to engage; n=1);
- exiting and being re-referred to the program following appearance in court for further offences (n=1); and
- withdrawal of consent (n=1).

Three of the disengaged participants were re-referred to the program and subsequently re-engaged.

Fourteen young people entered custody on at least one occasion during their participation in the program. Ten young people entered custody once, two young people entered custody twice, and one young person entered custody three times. The number of custody episodes was not available for one young person who entered custody. Service providers reported that, when a young person entered custody, the service provider would often maintain contact in an effort to continue the young person's engagement with the program. Custody was also identified as an opportunistic setting for service providers to re-establish contact and re-engage young people in the program.

The program guidelines initially stipulated that young people who are incarcerated for 28 or more consecutive days should be exited from the program. Following the first year of operation, stakeholders raised concerns about this requirement. Service providers noted that a young person could remain in the program after an extended period in custody if they were re-referred into the program through the court. However, this meant that, if a young person's matter was finalised outside of court, they were unable to be re-referred.

Further, stakeholders argued that the requirement to exit clients after this time was inflexible and excluded young people who could benefit from intensive support, particularly at a time when it might most be needed. To this end, the number of consecutive days spent in custody before a young person was required to be exited was increased to 35 days in the second year of operation. Stakeholders praised the extension, noting that young people would have a greater opportunity to continue engagement. However, stakeholders contended that the length of participation should be extended by the amount of time spent in custody so that the young person did not experience a shorter engagement period.

Recommendation 6

Consider providing up to 12 months of service provision regardless of time spent in custody. Consider, therefore, extending the length of program engagement by the amount of time spent in custody. This should be based on the young person's willingness to continue engagement, the capacity to extend program participation, and the length of time spent in custody.

Assessments and case plans

Assessments and case planning were undertaken by ReBoot case managers, peer mentors and DCSI Youth Justice case managers (where relevant) at various points throughout the program. Once a young person was assessed as eligible and provided consent to engage, the ReBoot case manager undertook an initial case plan meeting with the young person to identify strengths, challenges, criminogenic needs, protective factors and risk factors. To facilitate the meeting, the ReBoot case managers used the HYPA Case Management Tool to collect personal, financial, situational, familial and relational, and health and wellbeing information. A ReBoot Action Plan was then developed that outlined the young person's goals, action steps and time frames for achievement. The HYPA PRS and HYPA Outcomes Checklist were also completed upon the young person's entry into the program and at three-monthly interviews to monitor progress. These assessments form the basis of the outcomes evaluation and are discussed in detail in later sections of this report.

Seventy-eight percent of engaged young people (n=39) had completed a ReBoot Action Plan at the time of data extraction. Stakeholders emphasised that the action plan was flexible and fluid, and was revisited and updated (where necessary) at each case management session to reflect progress. The action plans were considered appropriate for the target cohort, including Aboriginal and Torres Strait Islander young people and culturally and linguistically diverse young people, because the young people were able to self-identify areas of strength and areas for improvement. Assessments also facilitated referrals to community service providers that could assist with particular needs. In this regard, the ReBoot case manager was recognised by community stakeholders as the lead agency coordinating holistic service provision. Stakeholders involved in the delivery of the program reported that the assessments helped them to elicit relevant information that informed the action plan.

Young people reported that their ReBoot Action Plans were generally representative of the goals they wanted to achieve, were developed in cooperation with their HYPA case manager, and were updated regularly to reflect accomplishments and emerging challenges. Of the action plans, young people and parents/carers said:

“

They were goals that I picked out myself. They were my biggest things that I wanted to sort out, like stopping drugs (young person, August 2017).

We worked on [the goals] together, but I felt like I was responsible for them (young person, May 2017).

[My goals] have changed...At the start, it was more self-development and my health and stuff...Now it's more about the future. I've been thinking about doing a lot more things, things I want to achieve in my life, like getting a licence, getting a job. Sometimes it's things that are way, way off in the future, but most of the time it's goals for right now (young person, August 2017).

The Australian Red Cross peer mentors also undertook informal assessments with participants using the Personal Development Guide, which asks the young person to consider what is important to them now, where they see their future selves, and changes they wish to implement in their lives. The responses to the guide supported the development and implementation of goals for education and training, employment, and health and wellbeing, as well as the broader goals of the young person's action plan. Stakeholders and young people reported that the assessments undertaken by peer mentors were useful and practical.

For young people referred through the Adelaide Youth Court with a statutory supervision order, DCSI Youth Justice case managers undertook a variety of assessments to determine levels of risk, levels of intervention, levels of supervision, and criminogenic needs (focused around education, drug and alcohol issues, health and wellbeing, and connection to culture). Assessments were similarly used to inform case planning, which was reviewed and updated every three months. DCSI Youth Justice case managers also made referrals for the young person to access relevant services, although these were typically provided by the government rather than the community sector.

Stakeholders held mixed views regarding the purpose of various assessments, case plans and services provided by the ReBoot program and DCSI. Some stakeholders perceived that DCSI Youth Justice case managers were primarily focused on compliance with the court mandate, including specific discussions regarding the young person's offending. In contrast, ReBoot case managers and peer mentors were perceived as focusing on the young person's broader needs by understanding existing and desired circumstances, values and attitudes, skills, and relationships. Further, the ReBoot program was recognised as having increased capacity to make referrals to community-based services to promote protective factors, as well as to engage with family members.

However, other stakeholders highlighted similarities between the assessments and therefore raised concerns about:

- the duplication of ReBoot and DCSI case planning processes;
- the burden on young people of engaging in multiple assessment and case planning processes;
- role confusion among ReBoot and DCSI case managers; and
- ensuring that assessment and case planning processes were collaborative.

The partnership protocol between HYPA and DCSI encourages joint case management sessions throughout the ReBoot program and youth justice mandate. To this end, ReBoot case managers can be invited to attend up to three joint sessions for sentenced young people and two joint sessions for non-sentenced young people. The purpose of these sessions is to enable the young person to meet and build rapport with both workers without having to retell their story, and to jointly discuss the life domain areas that are common to both assessments.

Stakeholders noted the benefits of this approach for minimising duplication and the burden on young people. However, stakeholders were not always supportive of this collaborative process, as it may be important for DCSI Youth Justice case managers to establish rapport with the young person before their contact with their ReBoot case manager. Stakeholders conveyed that joint case management sessions were also difficult to schedule because agencies engaged with the young person at different times.

As a result, stakeholders reported that young people were expected to engage in multiple assessment processes, which was considered burdensome and unnecessary as well as affecting the willingness of young people to engage in the process. Concerns were raised that this resulted in young people being unclear about the differing roles of their ReBoot case manager, peer mentor and DCSI case manager. Moreover, stakeholders felt that the role of a ReBoot case manager, peer mentor and DCSI case manager, while clearly defined, were not obviously demarcated in practice.

Recommendation 7

Reduce the number and duplication of assessments. Assessments and case planning processes should be collaborative, where possible, to minimise the young person having to retell their story to multiple workers.

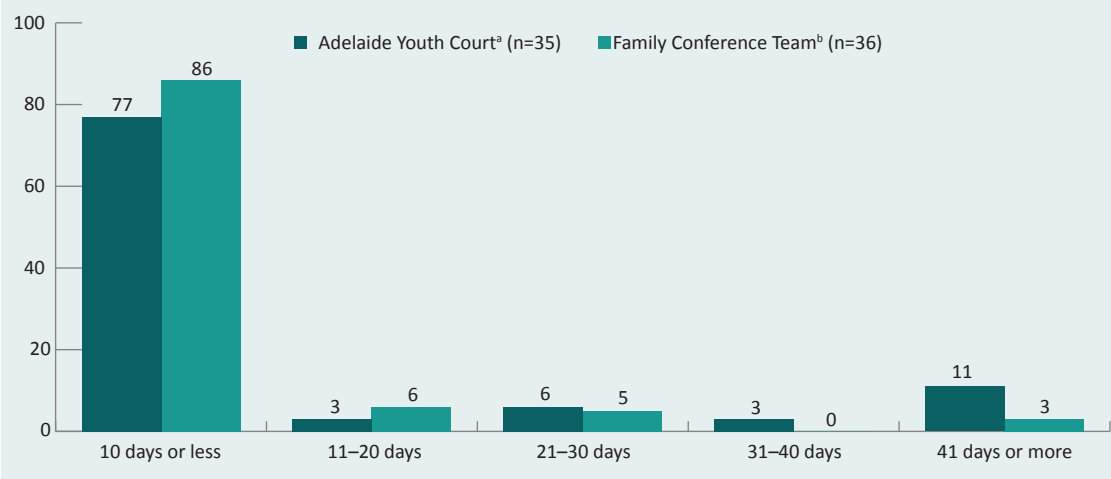
Milestones and time frames

The process evaluation sought to identify whether the specified milestones and time frames for assessments and activities were being met. While there was no target time frame for HYPA to receive referrals, most referrals were received within 10 business days ($n=31$; 86% for Family Conference Team referrals vs $n=27$; 77% for Adelaide Youth Court referrals; see Figure 11). The number of business days from a referral being made to the referral being received by HYPA ranged from one to 43 days (an average of 5 days) for the family conferencing pathway and one to 69 days (an average of 11 days) for the Adelaide Youth Court pathway.

As DCSI are responsible for the administration of Adelaide Youth Court mandates, delays between the making of a referral and the referral being received by HYPA may be attributed to the capacity of DCSI to promptly enter the referral into the DCSI case management system and inform HYPA of the referral. However, the improved communication between HYPA and DCSI appears to have reduced delays by an average of seven days between the first and second years of operation.

Once the referral is received by HYPA, initial contact should ideally be made with the young person and their parent/carer (where appropriate) within three business days. Analysis of the administrative data found that the number of business days between referral and contact being made ranged from one to 63 days, with an average of 14 days. In only 15 percent of cases ($n=11$) was contact with the young person made within three days (see Figure 12).

Figure 11: Number of business days from the date of a referral being made to the date of a referral being received by HYPA (%)



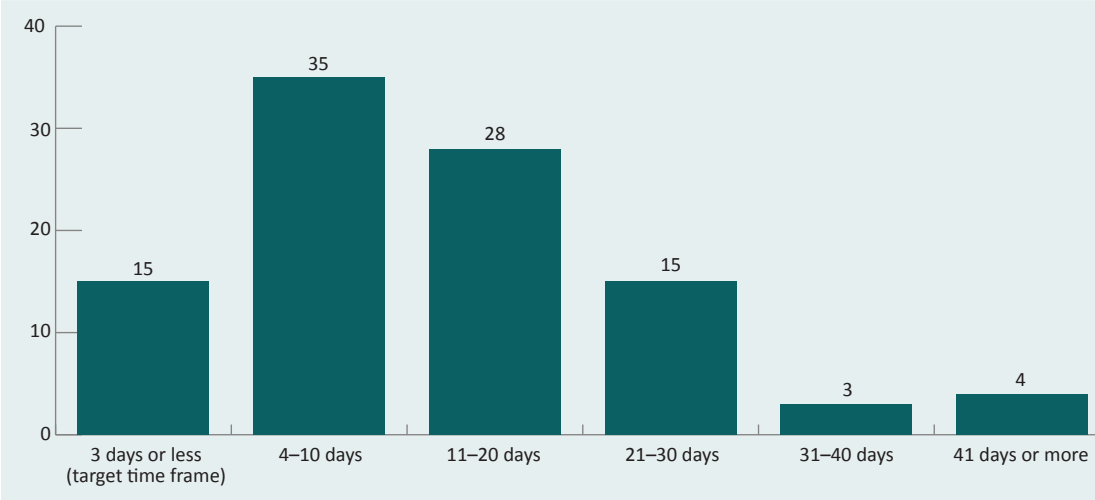
a: Excludes 3 referrals for which these data are unavailable

b: Excludes 10 referrals for which these data are unavailable and one outlier of 86 days

Note: Data are presented by the number of referrals. Percentages may not sum to 100 due to rounding

Source: HYPA Administrative dataset 2017 [computer file]

Figure 12: Number of business days from the date of a referral being received by HYPA to the date of first contact between HYPA and the young person (% , n=75)^a



a: Excludes 11 referrals where these data are unavailable

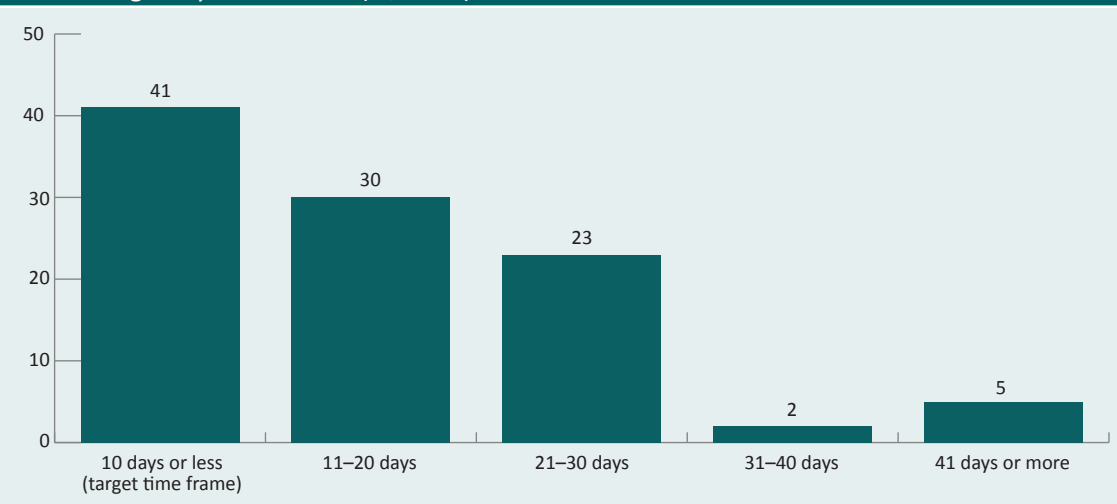
Note: Data are presented by the number of referrals

Source: HYPA Administrative dataset 2017 [computer file]

While HYPA make extensive attempts to contact the young people after receiving a referral, including through telephone calls and house visits, this time frame was often difficult to meet. This is often due to the young people being uncontactable as a result of changed contact details or being the subject of a missing person report. Delays may also result from DCSI requesting to initiate first contact and establish a relationship with the young person before HYPA becomes involved. Most young people were able to be contacted within 10 business days (2 calendar weeks), indicating that the current guidelines should be extended.

The difficulties with making initial contact with some young people within the target time frame had implications for the timing of eligibility assessments. Program guidelines stipulate that 90 percent of young people are to be assessed for eligibility within 10 business days of HYPA receiving a referral. While forty-one percent (n=27) of the assessments were conducted within the specified time frame, the majority (59%; n=39) were conducted more than 10 days after a referral was received (see Figure 13). On average, eligibility assessments occurred 16 business days following receipt of a referral (range 1–74 business days).

Figure 13: Number of business days from the date of a referral being received by HYPA to the date of eligibility assessment (%; n=66)^a



a: Excludes 13 referrals where an assessment was not completed and 6 referrals where these data are unavailable

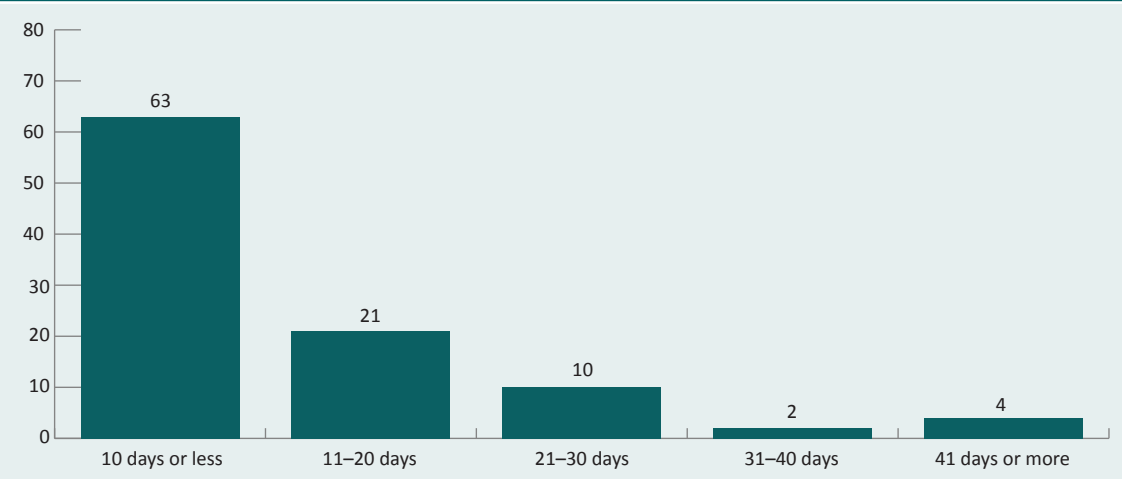
Note: Data are presented by the number of referrals. Percentages may not sum to 100 due to rounding

Source: HYPA Administrative dataset 2017 [computer file]

In addition to the challenges with making initial contact with some young people, assessment time frames could be difficult to meet due to the often extensive efforts that are required to make further contact with young people and their support network to schedule assessments, and for the assessment to occur as scheduled. Assessments often needed to be rescheduled due to non-attendance.

The number of business days between HYPA undertaking an eligibility assessment and providing the referral for eligible young people to the Australian Red Cross ranged from three to 114 days with an average of 15 days. Sixty-three percent of referrals (n=33) were received by the Australian Red Cross within 10 days of an assessment being undertaken by HYPA (see Figure 14).

Figure 14: Number of business days from the date of assessment to the date of the referral being received by the Australian Red Cross (% , n=52)^a

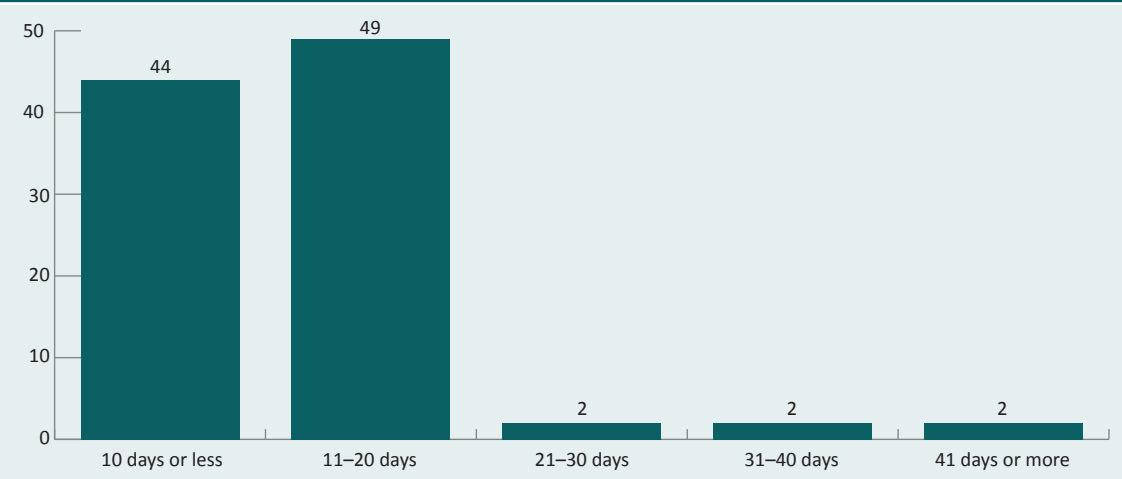


a: Excludes 14 referrals where these data are unavailable

Note: Data are presented by the number of referrals

Source: HYPA Administrative dataset 2017 [computer file]

Figure 15: Number of business days from the date of a referral being received by the Australian Red Cross to the date of first contact between peer mentors and the young person (% , n=41)^a



a: Excludes 11 referrals where these data are unavailable

Note: Data are presented by the number of referrals. Includes only young people who engaged. Percentages may not sum to 100 due to rounding

Source: HYPA Administrative dataset 2017 [computer file]

The number of business days from a referral being received by the Australian Red Cross to the date of first contact between peer mentors and the young person ranged from two to 53 days, with an average of 13 days. In 44 percent of cases (n=18), contact with the young person was achieved within 10 days of the referral being received (see Figure 15).

These findings suggest that the target time frames may need to be reviewed in light of the complexity of the youth court referral pathway and the difficulties with making initial contact with young people.

Recommendation 8

Consider revising the target time frame for making initial contact with a young person from three business days to 10 business days.

Review of program components

The ReBoot program comprises three components: intensive case management (provided by HYPA), peer mentoring (provided by the Australian Red Cross) and a wilderness camp (provided by the Operation Flinders Foundation). Each component has been assessed against the program service delivery model to:

- determine if the component was implemented as intended;
- understand why the component was not implemented as intended; and
- identify the strengths and challenges related to each component.

Intensive case management

Case management includes a range of approaches, practices and processes that aim to coordinate multiple services in a young person's life into one integrated support plan. Young people often have complex needs requiring numerous supports, such as by schools, medical professionals and social services. Case managers typically collaborate with these services to assist young people in a range of life domains (Barker et al. 2012). Research with young people has shown that regular and intensive case management interventions are associated with improved psychological wellbeing and reduced problematic behaviour. In particular, intensive interventions have been correlated with reduced aggression, reduced externalising behaviours and increased satisfaction with quality of life (Cauce et al. 1994).

All ReBoot program participants were allocated a HYPA case manager and engaged in the case management component of the program. Case managers were responsible for conducting assessments and case planning, liaising with peer mentors and DCSI Youth Justice case managers, addressing ongoing needs (which may involve making referrals to other services), tracking and reviewing progress, revisiting goals, amending action plans as necessary, preparing the young person for the wilderness camp, and exit planning.

Stakeholders held positive views regarding the implementation and operation of the intensive case management component of the program. In particular, case managers and associated case management processes were identified as effective in the following domains:

- identifying the young person's criminogenic needs, risk factors and challenges;
- identifying the young person's strengths, protective factors and goals;
- with DCSI Youth Justice case managers, sharing responsibility for identifying and facilitating interventions;
- case manager allocation processes (ie matching young people with case managers who are the 'best fit');
- coordinating referrals and multi-agency meetings;
- responding to the needs of young people; and
- building rapport and relationships with young people.

Case management was described as holistic, individualised, responsive and flexible, with a focus on establishing prosocial behaviours and addressing the underlying causes of a young person's offending.

The flexibility of the case management model was manifested in a number of key strategies and practices used by the case managers. This included allocating case managers based on the young person's preferences (eg gender), and matching the skill sets of the case managers with the needs of the young person. Case managers met with young people at locations that were convenient, such as parks, local shops and their homes. The capacity to meet young people at convenient locations was particularly important considering the range of locations that a young person could be referred from through the family conferencing pathway, meaning that their ability to travel to the HYPA offices could be limited. The ability of case managers to provide outreach support will become increasingly important if the program is to accept referrals from youth courts outside of metropolitan Adelaide. However, this could have significant implications for resourcing, which will need to be considered carefully.

The allocation processes and flexible engagement facilitated the development of strong relationships and rapport with program participants. Young people and parents/carers described their case managers as 'good', 'easy to talk to', 'supportive' and 'knowledgeable'. Young people generally understood that their case managers were there to help them identify the underlying causes of their offending and antisocial behaviours, and support them to make positive changes to their lives. Young people commented:

“

Case management is all stuff to help me out and benefit me. Anything to improve, get to my life goals and achieve in the future (young person, May 2017).

[The case managers were] good. Supportive...They were a good help, really easy to talk to. I saw [the case manager] a few times and liked it. I thought it would be helpful, so I stuck with it (young person, October 2016).

Yeah, he understands. Easy to talk to (young person, October 2016).

I like talking to them because they are understanding and not judgemental. I don't need to hold back because they still think positively of me even if I make mistakes. They listen and take everything into account (young person, May 2017).

In particular, parents/carers acknowledged the ability of case managers to keep young people engaged and focused, build rapport and trust, and implement a routine. Parents/carers reflected on the effectiveness and legitimacy of case managers and case management sessions:

“

[The ReBoot case manager] was outstanding. It was a big struggle, but he got through to [my child] (parent/carer, October 2016).

It's about that sense of support and being able to talk to somebody about the things that are going on for him. Because there are things that he won't talk to me about. They're all there for [the young person] (parent/carer, May 2017).

[The ReBoot case manager has been] helping him to self-reflect and feel good about the skills he currently has. They've been working from a strengths-based approach. [The ReBoot case manager] works well with other people, friendly and just positively reinforcing him, which for any young person is a good thing (parent/carer, August 2017).

However, some young people and their parents/carers felt that the intensity of case management, combined with extensive multi-agency service provision, may have been overwhelming and confusing at some points.

“

Sometimes the routine got a little too much for him...I think he felt he wasn't trusted because there was so much commitment. It frustrated him a lot. It just took up his life basically. He was seeing someone different every day (parent/carer, May 2017).

They started overlapping on things and I didn't really need to see two people (young person, August 2017).

...too many people were trying to make decisions and he didn't know which one to choose (parent/carer, January 2017).

In response to these identified issues, Case Managers adapted their methods of engagement throughout the trial by undertaking opportunistic case management (eg while transporting a young person to school or their place of employment) and reducing the frequency of case management sessions (eg from weekly to fortnightly). The intensive involvement that case managers had with the young people meant that DCSI case managers could also reduce their level of contact, where appropriate. This was a positive outcome for young people who had frequent contact with many service providers and meant their contact with the youth justice system could be reduced.

Peer mentoring

Mentoring is a widely utilised youth intervention strategy for at-risk young people (DuBois et al. 2002). Mentoring involves young people being paired with positive role models from the community, with the aim of cultivating positive youth development and wellbeing (DuBois et al. 2011). While mentoring programs vary in their specific purpose, design and aims (Labin 2017), the general feature is contact between a less experienced or 'at risk' individual and a more experienced and often older individual who can provide guidance, advice, encouragement and practical support (Jolliffe & Farrington 2007). Meta-analyses of mentoring interventions show that mentoring has a moderate positive effect in reducing juvenile offending, delinquency and aggression, substance use, bullying and depressive symptoms, and in improving academic achievement, school attendance, academic grades, social skills and peer relationships, self-esteem, motivation to achieve, and prosocial attitudes (see DuBois et al. 2011; Tolan et al. 2008). Taken together, research points towards the broad applicability of mentoring for supporting young people who are at risk or already involved in antisocial and offending behaviours.

The ReBoot program implemented a peer mentoring scheme whereby young adults with similar backgrounds and life experiences to the ReBoot cohort were paired with a ReBoot client. All young people who engaged in the program were allocated a peer mentor (n=50) and 90 percent had participated in at least one peer mentoring session (n=45).

Stakeholders held positive views regarding the implementation of the peer mentoring component of the program and its potential to deliver positive outcomes for young people. Peer mentoring was flexible, fluid and individualised, with a focus on the health and wellbeing of the young person. Peer mentoring was largely implemented through prosocial relationship building by providing young people with someone they could talk to, helping them attend appointments, and facilitating engagement in individual and group community-based activities with peers.

Peer mentors were described as providing reliability, consistency and positive role modelling for young people. They utilised expert knowledge to refer young people to local support services, and demonstrated a sound ability to engage with community, judicial and family conferencing stakeholders. Importantly, peer mentors had lived experiences similar to those of the young people, which allowed them to demonstrate to clients that they could change their behaviours, develop prosocial relationships, seek and benefit from community-based support, and set and achieve goals. This created legitimacy and trust for the young people, which resulted in stronger rapport with the peer mentors and improved likelihood of engagement. Further, peer mentoring sessions were directed by the young people, which encouraged ownership of their behaviours and goals.

Of peer mentoring, young people said:

“

I felt like we had a lot in common. We came from very different backgrounds, but we were kind of similar, you know? He was awesome, he was good to talk to...He was kind of like a big brother (young person, August 2017).

I dunno, they just understand where I'm coming from. I know my mentor has gone through stuff, and has had similar life experiences (young person, May 2017).

I don't think I have ever met people as kind, caring or absorbing of information as them. They make sure I'm involved in everything. We talk about my future and what I want to do...My mentor is the most wonderful person to be with, I love being in his presence. I look up to him like a big brother...When I have no-one to talk to or help me out I go to my mentor (young person, May 2017).

[Other services] pretty much forced me into a program that I didn't want to do. With ReBoot they actually get me out doing things, whereas my other workers would just see me one day a week and then leave me. They actually do things that I want to do (young person, May 2017).

As with case management, the allocation of peer mentors accounted for the young person's individual preference for a male or female mentor and aimed to pair a young person with a mentor with similar background and experiences. Before allocation, case managers would regularly discuss which mentor might be the best fit for the young person. Young people were also encouraged to develop relationships with other peer mentors, so that if their own peer mentor was unavailable they would feel comfortable engaging with another mentor.

Flexible engagement with young people at convenient locations encouraged long-term participation in the program, while individual and group activities—largely, structured recreational activities—were central to connecting young people with the community and establishing prosocial relationships. However, stakeholders noted that it was challenging to ensure that a variety of activities was available. Stakeholders highlighted the potential value of sporting activities, and suggested that increased emphasis should be placed on facilitating access to sport for clients. In particular, sporting activities were suggested for young men and Aboriginal and Torres Strait Islander clients.

Stakeholders also noted that most sporting activities took place on the weekend, while mentoring occurred during weekday business hours. Opportunities to engage in structured, team-based sporting activities were therefore unavailable to many clients. However, once a peer mentor assisted the young person to connect with a sporting club, then the team members and coaching staff were able to provide the young person with positive role modelling and practical support. This was seen as an ideal way for young people to integrate with peers and the community.

Wilderness camp

Wilderness camps typically involve a series of physically challenging activities, such as hiking or abseiling, usually in an outdoor environment (Wilson & Lipsey 2000). These activities are designed to facilitate participants' personal growth by directly challenging their skills and self-concepts (Gass 1993). This focus on experiential learning differentiates wilderness camps from boot camps, which are military style correctional programs focused on increasing discipline through strict regimes, punishment and gruelling physical activity (Wilson & MacKenzie 2006).

Wilderness camps have received considerable attention as rehabilitative and preventive interventions for young people with behaviour problems (Wilson & Howell 1993). The rise in the use of wilderness camp programs is supported by empirical evidence of their effectiveness for reducing offending and antisocial behaviour. A meta-analysis by Wilson and Lipsey (2000) found that wilderness camps produced a positive, although modest, reduction in officially recorded and self-reported recidivism, antisocial behaviour and delinquency. On average, juveniles who participated in wilderness camp programs were eight percent less likely to reoffend compared with juveniles who did not participate. Wilson and Lipsey (2000) argue that this reduction, while modest, is not trivial. Wilderness camp programs may also produce moderate positive effects on school adjustment, psychological adjustment, social skills and self-esteem. Programs were found to be most effective when they are relatively short term (less than 6 weeks), involve moderately intense physical activities, and contain therapeutic elements such as individual, family and group counselling sessions.

The wilderness camp component of the ReBoot program is managed by the Operation Flinders Foundation. This wilderness camp involves a 100 km hike completed over eight days in the Flinders Ranges of South Australia (Operation Flinders Foundation 2017a). Small teams of young people participate in physical activities such as abseiling and team-building activities such as cooking, and learn bush survival skills, navigation and first aid skills. Understanding of Aboriginal culture and the history of the Flinders Ranges is also incorporated into the camp. Each day involves a cross-country hike to a designated night location where a supply of food, water, camp equipment and cooking implements are kept. Participants walk approximately 10–15 km each day, carrying backpacks containing sleeping and camping equipment, personal items, water and a limited supply of food (Operation Flinders Foundation 2017a).

An evaluation of the Operation Flinders Foundation camp program conducted in 2013 using a pretest–posttest design with a control group showed evidence of reduced short-term offending, reduced aggression, increased self-control, improved attitudes towards authority figures, enhanced wellbeing, increased motivation to change, and improved educational engagement (Operation Flinders Foundation 2017b; Raymond 2014). Notably, while the existing wilderness camp literature largely applies primarily to Anglo or Caucasian groups of young males, the evaluation of the Operation Flinders Foundation camp program involved the examination of outcomes for a participant sample that included females and Aboriginal and Torres Strait Islander young people. While the analysis did not examine outcomes specifically by gender or Indigenous background, the overall positive findings suggest that the camp may be an effective intervention for female and Aboriginal and Torres Strait Islander participants.

To be eligible for the Operation Flinders Foundation camp, young people must be:

- 14–18 years old;
- physically prepared to undertake a challenging eight day hike; and
- participating voluntarily.

Operation Flinders is not suitable for young people who:

- have serious mental health issues (eg psychosis, suicidal ideation);
- require a withdrawal program for substance dependence;
- require a substitute for temporary housing or accommodation; or
- do not have a fixed address and support of a parent/carer.

During the two-year ReBoot program period, relatively few ReBoot participants completed the wilderness camp, due to issues related to eligibility, willingness, readiness and timing. Of the 50 young people who engaged in the program, 20 young people (40%) were referred to the wilderness camp and 10 young people attended and completed the camp (which represents 50% of young people who were referred to the camp and 20% of young people who engaged in the ReBoot program). Reasons young people were not referred to or did not attend the wilderness camp included:

- young person exited the program before camp participation (n=14);
- young person had commitments during scheduled camp dates, such as school or work (n=3);
- young person was required to attend court during scheduled camp dates (n=2);
- young person was found ineligible according to the camp eligibility criteria (n=3);
- young person was not engaged in the program at time of camp being scheduled (n=1);
- young person was not ready and/or willing to participate (n=5); and
- unknown reasons (n=12).

The primary challenges to young people participating in the camp identified by stakeholders were the timing of the camps and the readiness of ReBoot clients to attend. Participation in the wilderness camp was expected to occur at the midpoint of a young person's engagement in the program. This was to allow sufficient time after the camp for young people to participate in debriefing and receive follow-up support before exiting the program. However, stakeholders acknowledged that ReBoot clients were unlikely to be ready for the camp by the midpoint of their program participation.

As a result, the young people who attended the wilderness camp did so towards the end of their period of engagement, which meant that there was insufficient time to review progress and action plans for camp participants before exit. It was also argued that the camp was a longer term goal and thus the reward of the camp was too distant for some young people.

Further, the wilderness camp operates for only six months of each year (March–September), with one camp taking place each month. While the timing of the camps was necessary to ensure the safety of participants during harsh weather conditions over the warmer months, this created an inherent challenge for young people who reached the midpoint (or indeed the end point) of program participation or demonstrated readiness at a time when the camp was not operating. Stakeholders reported feeling conflicted between pressure to ensure clients were physically and mentally prepared for the camp, and unwillingness to facilitate participation if the young person was not yet ready.

Stakeholders also noted that the wilderness camp was operational before the implementation of the ReBoot program, and was established by the Operation Flinders Foundation in 1991 for at risk young people. However, many stakeholders perceived that there was a discrepancy between the risk levels of the camp's usual target cohort and ReBoot participants. While the most recent independent evaluation of the Operation Flinders Foundation wilderness camp found that young people who had recently offended or engaged in truancy behaviours gained the most wide-ranging and consistent benefits from attending the wilderness camp (Raymond 2014), stakeholders perceived that the increased complexity and risk profile of ReBoot participants made some of them ineligible for, or incapable of, completing this component. As such, stakeholders revealed that they were unwilling to refer a client to the camp if they were not confident that the young person could undertake such a demanding exercise.

Due to the tensions between the requirement to attend the camp, the timing of the camps, and the substantial barriers faced by young people to become ready for the camp, there were instances in the first year of operation where there were not enough ReBoot clients to form a team, which resulted in cancellations at short notice and missed opportunities for school teams to attend. However, a range of structured preparatory activities (such as bushwalking and rock climbing) were introduced in the second year of program operation in order to better prepare young people for the camp. These activities had a number of aims:

- to assist ReBoot service providers to undertake risk management planning. This involves assessing young people's preparedness and capabilities, seeing who works best together, determining whether the young people have the required level of fitness, and testing how young people respond to challenging situations. A client synopsis is then provided to the Operation Flinders Foundation so the camp leaders have an understanding of the group and can anticipate any issues;
- to introduce young people to each other and the camp leaders. This supports the development of positive relationships and teamwork among participants and staff before the commencement of the camp. Activities are structured to give young people the opportunity to talk about their strengths, challenges and triggers, and discuss advice for supporting each other through tough camp experiences; and
- to build the physical capabilities of prospective camp participants and teach the skills they will need while on the camp, such as carrying a backpack, making a fire, assembling a swag, and preparing food.

Young people are required to participate in a minimum of five preparatory activities before attending the camp, which are scheduled as part of the Australian Red Cross's group mentoring sessions. The Operation Flinders Foundation camp leaders also attend a minimum of two activities for each group that attends the camp.

The preparatory activities resulted in improved camp attendance, with most young people who attended the camp doing so in the second year of operation following the introduction of these activities. While stakeholders praised the preparatory activities, it was suggested that young people should be offered alternative challenges, in addition to the wilderness camp, that were not dependent on timing, weather or physical and mental health, and which could appeal to a broad range of interests.

Parents/carers and the young people who completed the camp generally held positive views of the exercise and its ability to positively impact on young people's self-esteem and confidence, reduce aggression, build tolerance and learn life skills, teamwork skills and leadership capabilities. Of the experience, young people and parents/carers said:

“

It was hectic. In a good way...I would do it again (young person, October 2016).

I miss lying there in the swag. I was thinking the other night, I wanted to be back out there, just lying in it (young person, October 2016).

It was heaps good. Heaps challenging, but good in the end. Like, walking and trying to make friends with a bunch of people I didn't know, who were similar but different (young person, May 2017).

There were ups and downs. But you know, I've always been a city kid, I've never been camping before. But yeah, it was really good, I'd recommend it to anyone...Teamwork was definitely the biggest lesson...[The camp] was kind of like the icing on the cake. It got me out of my comfort zone (young person, August 2017).

They realised that you can do anything that you put your mind to. They definitely learnt survival skills. It was a lot of character-building for them and they've brought a lot away from the experience (parent/carer, August 2017).

Finally, stakeholders held mixed views regarding the purpose of the Operation Flinders Foundation wilderness camp and its potential to produce outcomes for ReBoot participants. Some stakeholders saw the camp as a reward to be experienced towards the end of program participation (ie an incentive), while other stakeholders highlighted the intrinsic value of the camp in terms of challenging attitudes and behaviours, learning new skills, developing leadership and teamwork, improving self-esteem and motivation, problem-solving, connecting with the environment, and providing opportunities to self-reflect (ie a therapeutic intervention).

Recommendation 9

Consider removing the requirement of mandatory participation in the Operation Flinders Foundation wilderness camp. All participants should be encouraged and supported to address barriers to their attendance at the camp, but their inability to do so or their informed choice not to attend should not preclude them from being referred to or participating in the ReBoot program, nor should their non-attendance at the camp represent an unsuccessful program outcome.

Consider alternative activities to the wilderness camp for young people who are unable to complete the exercise. These activities should take into account the goals and interests of the young person, the activity's therapeutic benefits and/or whether the activity acts as an incentive that improves motivation, positive behaviours and compliance.

Clarify with ReBoot program stakeholders the purpose of the wilderness camp and alternative activities.

Appropriateness and responsiveness of the ReBoot program for diverse clients

Forty-three percent of ReBoot participants identified as Aboriginal and Torres Strait Islander (n=34), and nine percent identified as having a culturally and linguistically diverse background (n=7). Stakeholders noted, however, that diversity was broader than a young person's ethnic or cultural background and could be demonstrated through differences in offending behaviours (eg type, severity, frequency), complex needs (eg homelessness, engagement with education and/or employment, drug and alcohol use, disability, mental health) and familial factors (eg relationships with family members, domestic violence, child abuse, familial drug and alcohol abuse).

Cultural appropriateness was factored into the design of the program, with service providers needing to demonstrate knowledge of and experience with working with Aboriginal and Torres Strait Islander young people and young people from culturally and linguistically diverse backgrounds as a requirement of their contract. Key measures and strategies that ensured the program was appropriate for a diverse range of clients included:

- flexible, individualised and holistic service delivery;
- assessment and case-planning processes that considered the young person's family and community context;
- intensive support;
- assertive outreach and service provision within community and youth-centred environments;
- capacity for case managers to provide support to members of the client's family;
- referring clients to culturally appropriate services;
- seeking advice and guidance from Indigenous persons;
- employing diverse staff, including those with cultural backgrounds and lived experiences similar to those of the client group;
- maintaining a balance of male and female staff;
- use of oral communication strategies, including action plans that used drawings to convey and explain the young person's personal and familial context, goals, progress and achievements;
- interacting with Indigenous elders while on the camp; and
- access to interpreters.

ReBoot service providers were seen as having the expertise and capability to respond appropriately to client needs, through an individualised approach that allowed for each young person's needs to be identified and responded to, and the ability of the program to address varied and multiple needs. Service provision within a community setting, as opposed to a statutory setting, was also highlighted as contributing to the responsiveness of the ReBoot program.

However, while the case management and peer mentoring components were considered appropriate for clients with a diverse range of backgrounds and complex issues, stakeholders noted concerns regarding the responsiveness of the wilderness camp for some clients (ie those with very complex or very high needs, those with comorbid issues, those who do not meet the eligibility criteria for the camp). Further, the program was perceived as being more suitable for clients who demonstrated willingness to engage and participate consistently. These clients were more likely to have stability in their lives, particularly in terms of housing and family support, and lower levels of risk and complexity.

Relationships between ReBoot partners

Partnership working is a key feature of the ReBoot program. Various partners worked together at different stages throughout program delivery to:

- communicate and exchange information about the program and its clients;
- collaborate to deliver the program; and
- coordinate engagement and interactions with partners and other stakeholders.

Although there were initial issues relating to partnership working, by the end of the evaluation period most of these had been addressed. Accordingly, working relationships between program partners were functional and positive, with no major barriers to effective engagement identified. ReBoot service providers were professional, approachable, committed, reliable, consistent, willing to discuss and negotiate aspects of program implementation, and capable of initiating and maintaining relationships with partners and other stakeholders.

Program governance and management

Stakeholders reported a high level of satisfaction with program governance and management. The ReBoot Steering Committee is the primary mechanism through which the overall operation of the ReBoot program is governed. The committee comprises high-level representatives from all agencies and organisations involved in the delivery and oversight of the program. Committee members meet monthly to monitor progress and timelines for implementation, track outputs (eg client numbers, participation in each program component, summary of participant demographics), establish communication channels between partners, identify and resolve issues, and deliver anecdotal feedback on outcomes. Stakeholders indicated that this forum had been successful for:

- creating a common sense of ownership for program delivery;
- ensuring that decisions were collaborative, and that responsibility and accountability was shared;
- monitoring implementation and communicating changes;
- sharing information, project updates and progress reports; and
- identifying, discussing and resolving issues and challenges.

Communication and information exchange

Stakeholders identified both strengths and challenges related to communication and information exchange. Formalised relationships facilitated strong communication between the ReBoot Steering Committee members. However, interagency communication between frontline service providers occurred on a more ad hoc basis, facilitated by individual relationships. As such, the effectiveness of communication and information exchange differed between partners. For example, community service providers noted regular, targeted, bi-directional, useful communications with the ReBoot service providers, which allowed each provider to remain updated about client progress. Similarly, youth court and family conferencing representatives noted the usefulness of having ReBoot case managers and peer mentors attend court or a conference to discuss the program and report on a young person's progress. Improved communication between agencies also resulted in improved frequency of and attendance at dual case management sessions held between HYPA and DCSI Youth Justice case managers.

Although communication pathways appeared to be working well by the end of the evaluation period, stakeholders identified barriers that continued to impact on effective information exchange. It was observed that some service providers were unable or unwilling to share information with other agencies. The main barriers to information exchange were the requirement to obtain consent from the young person to share information and an absence of information-sharing protocols between agencies. This highlights the need for the development of information-sharing protocols between agencies involved in supporting young people referred to the ReBoot program.

The logistics associated with scheduling multi-agency case conferences was also reported as a barrier to effective communication. Stakeholders identified that regular case conferences could improve communication and information sharing, thus reducing the number of assessments undertaken by a young person. However, there were various challenges associated with finding a suitable time for all participants to attend, particularly as many of them are involved in frontline service delivery and may have to cancel meetings due to competing priorities (eg clients in crisis).

Before commencement and throughout the first year of operation, information about the program was distributed to key partner agencies, and the ReBoot service providers convened targeted meetings with youth justice stakeholders to raise awareness of the program and establish working relationships across all levels of operations. However, the stakeholder consultations identified that understanding and knowledge of the ReBoot program differed between agencies. This continued to pose a challenge throughout the two-year trial period. Specifically, awareness of the program's components, how they were delivered and by whom varied among youth justice stakeholders. Turnover of DCSI Youth Justice staff further contributed to reduced knowledge of the program, compared with other stakeholders. Further, inconsistent attendance at and active participation in ReBoot Steering Committee meetings impacted on the level of awareness and understanding of the ReBoot program among key stakeholders.

Recommendation 10

Explore how appropriate and effective information sharing can be promoted among partner agencies, including what information may be shared, with whom and under what circumstances.

Recommendation 11

Raise awareness among key stakeholders, particularly DCSI, through proactive engagement strategies (eg meetings, distribution of information materials) and efforts to establish effective partnerships. This engagement strategy should be ongoing, to account for staff turnover.

Collaboration

The process evaluation identified collaborative relationships between:

- ReBoot service providers (HYPA, Australian Red Cross and Operation Flinders Foundation);
- ReBoot service providers and other key partners (eg DCSI); and
- ReBoot service providers and other community service providers.

Stakeholders identified a number of benefits associated with the program's collaborative approach to supporting young people, including that young people formed connections with a range of prosocial and positive role models (eg case managers and peer mentors), that young people felt supported by a team of workers, and that partners felt supported by each other. Further, interagency collaboration created an integrated and coordinated service response that drew on the strengths and knowledge of each agency. Finally, collaboration—particularly among community service providers—expanded the breadth of services available to the young people, and provided them with multiple avenues to receive support.

However, the strength, nature and frequency of collaboration varied by agency and was influenced by awareness of the ReBoot program, pre-existing relationships between individuals, and staff attrition. Stakeholders also held mixed views regarding the desirability of multiple agencies being involved with young people at any given time. Although most stakeholders agreed that multi-agency service provision was well placed to provide holistic support for young people and address their complex needs, other stakeholders noted that the involvement of many agencies could be overwhelming, and some young people struggled with the intensity and commitment required by the ReBoot program.

Recommendation 12

Explore ways of overcoming barriers to scheduling collaborative case conferences. Alternatively, identify ways for ReBoot and DCSI case managers to conduct joint assessments and case planning.

Coordination

A central aim of the ReBoot program is to link young people with education, and health and community services when required. To achieve this, HYPA case managers assumed the role of coordinators in initiating and maintaining relationships with a range of external service providers. This involved:

- identifying what services were available;
- initiating contact with the service providers and making referrals for the young person;
- undertaking joint case planning with the service providers; and
- assisting young people to attend appointments with service providers.

Reboot service providers explained that HYPA case managers took on this role in order to minimise duplication in service provision and connect young people with expert support in their areas of need.

Stakeholders consistently stated that HYPA case managers excelled in this coordinating role. It was reported that HYPA continually monitored young people's progress and activities with external service providers, and kept external service providers informed and focused.

Impact of the ReBoot program

The ReBoot program's overarching aims are to reduce offending behaviours and increase positive behaviours among young people who have previously offended. The evaluation drew on measures included in the Outcomes Checklist, reported by case managers, and the self-reported PRS to assess the impact of the program across six outcome domains (see Table 6). Interviews with young people and their parents/carers and stakeholder consultations also informed this component of the evaluation, although most stakeholders noted their tangential role in the program meant they were unable to comment on the impact of the ReBoot program. Analysis of data from the stakeholder consultations were therefore limited to individuals who felt they had sufficient exposure to young people participating in the program to comment on its impact.

Table 6: Number of measures analysed from the Outcomes Checklist and PRS, by outcome domain

Domain	Outcomes Checklist measures	PRS measures
Access to support and resources	4	8
Health and wellbeing	6	7
Decision-making and problem-solving	1	7
Social competency and connection	7	1
Education, training and employment	5	9
Offending and antisocial behaviours	5	–

Note: The PRS did not have any measures related to offending and antisocial behaviours

Overall, case managers reported that 33–65 percent of young people improved on at least one measure within each of the six domains, most commonly health and wellbeing (65%) followed by social competency and connection (63%; see Table 7). Case managers reported that young people were least likely to improve on measures of decision-making and problem-solving (33%). Between 13 and 33 percent of young people were reported to have improved on all measures within each of the domains.

By comparison, 27–71 percent of young people felt they had improved on at least one measure within each of the five domains (see Table 8). Like case managers, young people most commonly reported improvements in health and wellbeing (71%). In contrast to case managers, young people were likely to report improvements in decision-making and problem-solving (71%) and less likely to report improvements in social competency and connection (27%). Young people improved on all measures in only two domains: access to support, and social competency and connection. Twelve percent of young people improved on all measures of access to support, and 27 percent improved on all measures of social competency and connection, although it should be noted that the latter has only one measure. Findings related to each of the domains are described in detail below.

Table 7: Outcome Checklist measures where young people improved, by outcome domain

Domain	Did not improve on any measure (%)	Improved on at least one measure (%) ^a	Improved on all measures (%)	Total (n)
Access to support and resources	44	56	25	32
Health and wellbeing	35	65	16	31
Decision-making and problem-solving	67	33	33	30
Social competency and connection	38	63	13	32
Education, training and employment	44	56	28	32
Offending and antisocial behaviours	50	50	16	32

a: Includes young people who improved on all measures

Table 8: PRS measures where young people improved, by outcome domain

Domain	Did not improve on any measure (%)	Improved on at least one measure (%) ^a	Improved on all measures (%)	Total (n)
Access to support and resources	41	59	12	17
Health and wellbeing	29	71	0	17
Decision-making and problem-solving	29	71	0	17
Social competency and connection	73	27	27	15
Education, training and employment	60	40	0	15

a: Includes young people who improved on all measures

Access to support and resources

Having knowledge of and access to appropriate informal and formal sources of support is important for improving the status of young people across a number of domains, including health and wellbeing, employment and prosocial engagement in the community. It is expected that if young people have the ability to identify appropriate supports and resources then their access to and engagement with these sources of support, as well as their confidence that they can get help if they need it, will improve.

Informal and community support

The evaluation found evidence that knowledge of and access to informal and community-based sources of support either improved or was maintained among young people participating in the program. Informal and community support networks comprise people who may have more regular contact with young people (eg family members, friends and neighbours) and are best placed to identify when they are experiencing difficulty or are at risk of reoffending and so require additional support. Further, the informal nature of these support networks means they are not dependent on a referral being made, formalised arrangements or the ability to pay incurred costs.

Analysis of the PRS found that some young people became more confident in their family's and friends' ability to provide them with support by program exit (n=6; 38%; see Table 9). Further, over half of young people reported that they had family and friends who could help them on all occasions when they needed it (n=9; 56%). The number of positive role models in the lives of young people also increased, with half of young people reporting that they had six or more positive role models at the time they left the program (n=8; 50%).

	n	%
Improved	6	38
No change ^b	7	44
Declined	3	19
Total	16	

a: Excludes 1 young person for whom these data are unavailable

b: Includes 2 young people who responded 'Some of the time', 1 young person who responded 'Most of the time' and 4 young people who responded 'Yes' to this outcome at entry and exit

Note: Percentages may not sum to 100 due to rounding

Source: HYPA Personal Resilience Survey 2017 [computer file]

Thirteen young people (45%) experienced an improvement in their level of engagement with community-based sources of support over the course of the program (see Table 10).

Community engagement remained unchanged for another 15 young people (52%), of which most (n=12) were assessed as having low levels of engagement in the community at program entry and exit. Community engagement declined for one young person.

	n	%
Improved	13	45
No change ^b	15	52
Declined	1	3
Total	29	100

a: Excludes 3 young people for whom this outcome was not relevant for at least one time point, and 1 young person for whom these data are unavailable

b: Includes 12 young people who were reported to have 'Not achieved', 2 young people who were reported to have 'Achieved' and 1 young person who was reported to have 'Maintained' this outcome at entry and exit

Source: HYPA Outcomes Checklist 2017 [computer file]

Formal support

Informal and community-based supports have regular contact with young people and are therefore well placed to monitor change over time; however, these individuals may not have the necessary skills and training to help young people address their often complex needs. As such, ReBoot service providers worked with young people to improve their engagement with formal sources of support, such as health professionals.

Young people reported some degree of improvement in feeling comfortable with, and prepared to seek help from, formal support services. More than two-thirds of young people said they would be comfortable and prepared to seek help at least some of the time (n=9; 69%) at program entry, and this increased to 76 percent at exit (n=10). Further, approximately two in five young people (n=5; 38%) reported that by program exit they had become more confident and prepared to seek help if needed (see Table 11). However, an equal number of young people had become less comfortable and prepared to seek help (n=5; 38%), all of whom reported that they would seek help only some of the time.

Table 11: Changes in young people's confidence to seek help when needed^a

	n	%
Improved	5	38
No change ^b	3	23
Declined	5	38
Total	13	

a: Excludes 2 young people who responded 'Not applicable' for at least one time point and 2 young people for whom these data are unavailable

b: Includes 1 young person who responded 'No', 1 young person who responded 'Some of the time' and 1 young person who responded 'Most of the time' to this outcome at entry and exit

Note: Percentages may not sum to 100 due to rounding

Source: HYPA Personal Resilience Survey 2017 [computer file]

While some young people's confidence to seek help declined, the program had a positive impact on actual help-seeking behaviours. Although young people were most likely to report seeking help only some of the time at both entry and exit (n=9; 60%), the proportion of young people who responded that they would choose to seek help more often, or choose to seek help when they previously would not have, increased (n=5; 33%; see Table 12).

Table 12: Changes in young people asking for help when they need it^a

	n	%
Improved	5	38
No change ^b	3	23
Declined	5	38
Total	13	

a: Excludes 2 young people for whom these data are unavailable

b: Includes 1 young person who responded 'Rarely', 8 young people who responded 'Some of the time' and 1 young person who responded 'Yes' to this outcome at entry and exit

Note: Percentages may not sum to 100 due to rounding

Source: HYPA Personal Resilience Survey 2017 [computer file]

Access to formal support services increased between entry and exit for 41 percent of young people (n=12). Case managers reported that approximately one-third of young people had previously accessed support from formal sources (n=11; 38%) at entry and that this increased to 76 percent (n=22) by program exit. Further, one-third of young people (n=9; 33%) increased their level of engagement with appropriate support services throughout their participation in the program. This means that more than half of young people were regularly engaging with appropriate support services by program exit (n=15; 56%).

This finding was reflected in the responses of young people and parents/carers who participated in an evaluation interview. Both groups noted how the ReBoot case managers and peer mentors had connected program participants with housing support, mental health services, counselling, drug and alcohol services, and general practitioners. For example, one young person said:

“

I've never had my own house. I was on a homeless waiting list for three years. After they put me on a list I got a house in three weeks. I've never felt safer. I never had a proper place to call home; now I have a proper place to call home (young person, May 2017).

Others were assisted to apply for welfare benefits and fine repayment schemes. Most young people also reported that engagement with the program had increased their knowledge of appropriate support services and stated that they would know how to seek help in the future.

The ability of young people to access support is often influenced by their access to transport (eg attendance at scheduled appointments). The ability to identify and access reliable transport may also contribute to reduced offending and improved prosocial engagement among young people by facilitating attendance at school or alternative learning facilities and work, and assist them to become more independent and not as reliant on others for mobility, including antisocial or offending peers.

Case managers reported that the ability to identify and access reliable transport had improved for one-third of young people (n=6; 35%; see Table 13) by program exit. The remaining young people experienced no change in their ability to identify and access reliable transport (n=11; 65%). Most of these young people (n=7) were already able to access transport when they entered the program, meaning their capacity for improvement was limited.

Table 13: Changes in young people's ability to identify and access reliable transport^a

	n	%
Improved	6	35
No change ^b	11	65
Declined	0	0
Total	17	100

a: Excludes 15 young people for whom this outcome was not relevant for at least one time point and 1 young person for whom these data are unavailable

b: Includes 4 young people who were reported to have 'Not achieved' and 7 young people who were reported to have 'Achieved' this outcome at entry and exit

Source: HYPA Outcomes Checklist 2017 [computer file]

Overall, there is evidence that participation in the ReBoot program improved the ability of young people to access formal and informal support. Many young people left the program with confidence that they would be able to get support from family and friends, as well as a greater number of positive role models to seek support from. Young people also reported that they would seek help more often, or choose to seek help when this previously would not have been an option for them.

Health and wellbeing

Improved health and wellbeing enhances a young person's ability to function as a productive member of the community, and acts as a protective factor against future offending and problematic behaviour. In particular, poor physical and mental health can impede the ability to plan for the future, make positive decisions and take positive actions. The program's impact on young people's health was measured in terms of improved physical and mental health, including a decrease in substance use and reduced health constraints on their everyday lives.

Physical and mental health of young people

The ReBoot program had a moderate positive impact on the physical health of young people. More than half of young people had experienced an improvement in their physical health (n=11; 58%) at program exit, with many having maintained these improvements for at least three months (n=5; see Figure 16). Eight young people had experienced no change in their physical health, although two of these were assessed as having already achieved this goal at program entry.

Two in five young people (n=6; 38%) who completed the PRS similarly appeared to have experienced an improvement in their physical health. Seven (44%) reported no change and rated their health as either 'OK' or 'Good' at program entry and exit. Only three young people reported that their health had declined over the course of their participation (19%; see Figure 17). The circumstances surrounding this deterioration are unclear.

Some young people who participated in an interview reported that they had developed more positive attitudes towards leading a physically healthy lifestyle and even experienced tangible improvements to their health since starting the program. In particular, they stated their peer mentors had played a significant role in discussing healthy eating and facilitating their engagement in physical activities, which included joining sporting clubs and gyms.

“

We go to the gym together every week, and other times I go by myself...I've been eating healthy (young person, May 2017).

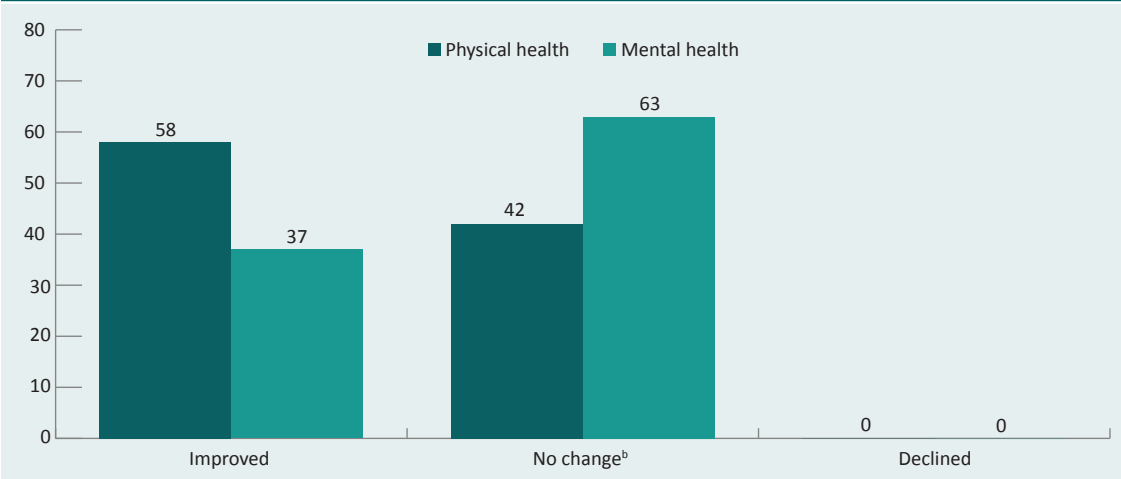
They've given me motivation to become healthier (young person, May 2017).

We've been doing boxing...It's good, more productive than what I'd usually be doing...Going on walks and rock climbing and that (young person, August 2017).

Some young people also noted that the preparatory activities for the wilderness camp, such as rock climbing and hiking, had sparked their interest in physical activity.

Case managers reported that thirty-seven percent of young people (n=7) experienced improved mental health outcomes by program exit (see Figure 16). However, most young people experienced no improvements to their mental health status (n=12; 63%). Similar results were reported by young people who responded to the PRS. Almost one-third (n=5; 31%) reported their mental health had improved at program exit (see Figure 17). Half of the sample reported no change, although six of these young people said their mental health was 'OK' or 'Good' at the time of program entry and exit. Again, a small number of young people reported a decline in their mental health over the course of the program (n=3; 19%).

Figure 16: Changes in young people's physical and mental health, as reported by case managers (% , n=19)^a



a: Excludes 13 young people for whom this outcome was not relevant for at least one time point, and 1 young person for whom these data are unavailable

b: Physical health: Includes 6 young people who were reported to have 'Not achieved', 1 young person who was reported to have 'Achieved' and 1 young person who was reported to have 'Maintained' this outcome at entry and exit. Mental health: All young people were reported to have 'Not achieved' this outcome at entry and exit

Source: HYPA Outcomes Checklist 2017 [computer file]

Conversely, many of the young people who participated in an interview highlighted changes to their mental and emotional health as a significant benefit of the program. Young people attributed these changes to the social support provided by the ReBoot service providers and referrals to other community-based supports that specialise in mental health service provision.

“

My health is slowly improving, it's not something that happens straightaway, but it's improving. And my mental health, definitely, it's a lot less cloudy (young person, August 2017).

[The most important change has been] my mental health. My thinking. Because the people around me are being positive influences on me...I'm just a lot brighter. I just didn't care about myself...I used to think the world owes me something. I really just started to try making moves to better myself (young person, May 2017).

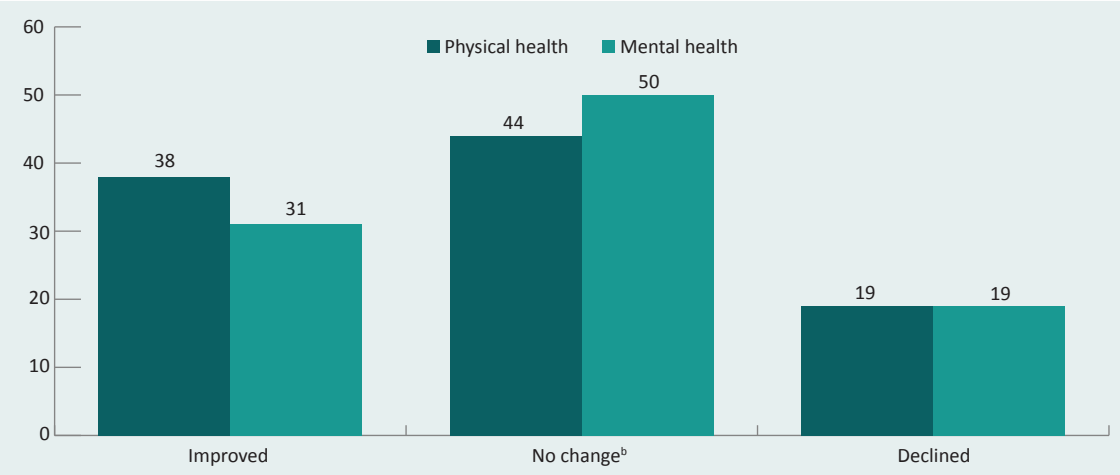
I wouldn't have been able to get my mental health care plan done, or even admitted to myself that I needed to get it done, until I got off drugs and started the program and all that. I had my whole life in a mess basically. But things are looking really good now (young person, May 2017).

Parents/carers reported similar reflections on the program's impact on young people's coping mechanisms and how young people feel about themselves. For example, one parent/carers said:

“

His moods have improved. He was quite aggressive and confused and very volatile, but about six months ago I could start seeing changes that he was actually improving through medication and through counselling...I could say today that he's easier to talk to, he's engaging and he's less volatile (parent/carers, August 2017).

Figure 17: Changes in young people's physical and mental health, as reported by young people (% , n=16)^a



a: Excludes 1 young person for whom these data are unavailable

b: Physical health: Includes 4 young people who responded 'OK' and 3 young people who responded 'Good' to this outcome at entry and exit. Mental health: Includes 2 young people who responded 'Not good', 4 young people who responded 'OK' and 2 young people who responded 'Good' to this outcome at entry and exit

Note: Percentages may not sum to 100 due to rounding

Source: HYPA Personal Resilience Survey 2017 [computer file]

Health issues continued to impede the ability of many young people to pursue their interests and engage in prosocial activities, although some young people made positive changes to their physical and mental health throughout the program. Case managers reported that the majority of young people (n=15; 94%) experienced constraints on their daily lives as a result of health issues at program entry. One-third of young people experienced a reduction in health-related constraints on their daily lives throughout program engagement (n=5; 37%); however, two-thirds (n=11; 63%) experienced no change in these restrictions (see Table 14).

Similarly, the majority of young people who completed the PRS (n=10; 71%) identified that their physical and/or mental health was impacting on their everyday lives to some extent at program entry. Four young people (29%) reported the impact of health issues on their ability to do things had reduced by program exit. Approximately one-third of young people (n=5; 36%) experienced no change, of whom two reported at entry and exit that health issues rarely impacted their lives. Finally, five young people believed that the impact of their health issues had increased (n=5; 36%; see Table 15). Unsurprisingly, the impact of physical and/or mental health constraints on daily living were found to be more profound for young people with multiple complex issues (Fisher's exact $p < 0.05$).

Table 14: Changes in young people's physical and mental health-based constraints^a

	n	%
Improved	5	37
No change ^b	11	63
Declined	0	0
Total	16	100

a: Excludes 14 young people for whom this outcome was not relevant for at least one time point, and 3 young people for whom these data are unavailable

b: Includes 10 young people who were reported to have 'Not achieved' and 1 young person who was reported to have 'Achieved' this outcome at entry and exit

Source: HYPA Outcomes Checklist 2017 [computer file]

Table 15: Changes in young people's perception that their physical/mental health stops them from going to school, training or work, or prevents them from doing things they want to do^a

	n	%
Improved	4	29
No change ^b	5	36
Declined	5	36
Total	14	

a: Excludes 3 young people for whom these data are unavailable

b: Includes 1 young person who responded 'No', 2 young people who responded 'Rarely' and 2 young people who responded 'Some of the time' to this outcome at entry and exit

Note: Percentages may not sum to 100 due to rounding

Source: HYPA Personal Resilience Survey 2017 [computer file]

Substance use

Case managers reported that all young people were engaging in some form of problematic or harmful substance use and/or smoking when they entered the program (n=23; 100%). Eight young people (35%) achieved a reduction in these harmful behaviours over the course of the program (see Table 16). However, two-thirds of young people had not reduced their use of harmful substances at program exit (n=15; 65%).

Table 16: Changes in young people's harmful substance use/smoking^a

	n	%
Improved	8	35
No change ^b	15	65
Declined	0	0
Total	23	100

a: Excludes 8 young people for whom this outcome was not relevant for at least one time point, and 2 young people for whom these data are unavailable

b: All young people were reported to have 'Not achieved' this outcome at entry and exit

Source: HYPA Outcomes Checklist 2017 [computer file]

Conversely, most young people reported at program entry that alcohol and/or drug use was not impacting their engagement with school, training, work or the capacity to do the things they would like to do (n=9; 56%; see Table 17), and this remained the case at program exit. Further, one-quarter of young people (n=4) improved with regard to the extent to which alcohol and/or drug use impacted their everyday lives. This indicated that young people still perceived that they were capable of engaging in prosocial activities and accomplishing their goals, despite only a modest reduction in substance use.

Table 17: Changes in young people's perception that their alcohol and/or drug use stops them from going to school, training or work, or prevents them from doing things they want to do^a

	n	%
Improved	4	25
No change ^b	9	56
Declined	3	19
Total	16	100

a: Excludes 1 young person for whom these data are unavailable

b: Includes 7 young people who responded 'No' and 2 young people who responded 'Rarely' to this outcome at entry and exit

Source: HYPA Personal Resilience Survey 2017 [computer file]

Interviews with young people and parents/carers revealed that substance use was a frequent and serious health-related impediment for young people when they joined the program, and that the program had assisted young people to recognise these harms and take action to reduce or cease these behaviours.

“

When I was first on the program, I was on heavy drugs. I've now been clean for six or seven months. I can't thank them enough (young person, May 2017).

I look totally different. I stopped using drugs (young person, October 2016).

They still drink and smoke marijuana every now and then but nowhere near as much as they used to (parent/carer, August 2017).

Young people, parents/carers and stakeholders reported that reduction or cessation of substance use had subsequent positive effects in other domains of the young people's lives, such as reducing their offending, increasing their performance at school and work, avoiding negative peer influences and maintaining a normal routine.

“

Like, yesterday I was going to steal a bottle of alcohol. But I didn't. Just didn't feel like it (young person, October 2016).

They know that if they need to go to school or go to work they won't smoke anything, whereas before they would have smoked something to go to school. But now they are more aware of what it does to their brains and they know the importance of not being under the influence of drugs or alcohol to go to work (parent/carer, August 2017).

He's no longer in contact with his dealers or the peers that were enabling him to use [drugs]. He's eating. He didn't eat. It was little goals that we started with, like a regular eating and sleeping pattern, getting on top of drugs (ReBoot service provider, June 2016).

Self-care

Self-care involves various skills, including the ability to look after personal hygiene, eat properly, get enough sleep, and dress properly. Case managers reported that over half of young people had improved their capacity for self-care (n=14; 54%) at program exit. This remained unchanged for another 11 young people (42%), one of whom was assessed as demonstrating self-care at both program entry and exit, and 10 of whom demonstrated no improvement. Young people's self-reported ability to look after themselves on a day-to-day basis was similarly positive. One-third of young people (n=5) reported that their skills in this area had improved, while another six reported that they already had these skills at program entry and were able to maintain them by program exit (40%). Four young people said that their ability to care for themselves had declined (27%).

Financial management and budgeting skills

The program appeared to have a positive impact on the financial management and budgeting skills of young people. Case managers reported that two in five young people (n=7; 41%) showed an improvement in these areas by time of program exit. Financial skills remained unchanged for more than half of young people (n=10; 59%), and no young person was assessed as declining.

Almost half of young people self-reported that their ability to budget to cover basic expenses had improved by program exit ($n=6$; 46%). Two young people's (15%) abilities did not change, although they reported that they already had these skills at program entry. Five young people (38%) reported that their financial management skills had declined. The circumstances surrounding this are unclear.

Young people with alcohol and other drug issues were more likely to report an improvement in their financial management skills (Fisher's exact $p<0.05$). The direction of this relationship was unclear; however, it may be that addressing the underlying drug and alcohol issues of these individuals impacted on their financial skills.

Finally, only one young person (8%) reported that their access to financial resources to support themselves and their families had improved by program exit. The majority of young people ($n=8$; 67%) recorded no change between entry and exit, with three of these individuals reporting that they were able to continue to support themselves and/or their families. Consequently, the ability of young people to support themselves remained poor ($n=5$) or declined ($n=3$) in eight cases (67%).

Overall, the ReBoot program appears to have had a moderate but positive effect on young people's health, although this varies according to which aspect of health is examined. Young people experienced significant improvements in their physical health and substance use, and modest improvements in their mental health and daily health-related constraints. In some cases, there were slight declines in young people's perception that their physical health, mental health and substance use impact on their ability to complete daily tasks. It should be noted that this change may reflect a greater awareness by young people of how their health impacts on their life, rather than a decline in health.

Many of the young people participating in the ReBoot program have complex needs which are beyond the scope and skills of staff directly involved in the program. As such, the ability of young people to receive support for these issues and experience improvements depends in part on their referral to other services (eg counsellors, substance use treatment). ReBoot staff (particularly case managers) are skilled at identifying appropriate services to link young people with. However, their ability to do so is limited by a number of external factors. For example, young people may not meet the eligibility criteria for certain organisations and services, particularly if they have substance abuse issues and histories of violence and aggression. Further, some organisations will not engage with young people who are not perceived as willing to change their behaviour, or if they miss scheduled appointments, which is common within the ReBoot population. For these reasons, the minor but positive impact of the program on various health-related domains is important.

Decision-making and problem-solving

Research has established the link between offending behaviour and poor problem-solving skills and decision-making deficits (Reeker & Meissner 1977; Zamble & Porporino 1988). Adequate decision-making and problem-solving skills are therefore a necessary prerequisite to change negative behaviours and make positive choices. Necessary skills include the ability to logically think through situations and problems, identify different ways to achieve goals, identify strengths and understand the role that individuals have in shaping their futures. Having insight into and understanding of one's own thoughts and actions is also necessary for reducing problematic behaviours. The ReBoot program therefore aims to improve young people's decision-making and problem-solving skills, as well as their insight into and understanding of their own behaviour.

Impact on young people's decision-making and problem-solving skills

There is limited evidence that the decision-making abilities of young people improved as a result of participating in the ReBoot program. Analysis of the Outcomes Checklist identified that decision-making abilities improved for one in three young people (n=10; 33%; see Table 18). However, three in five young people (n=19; 63%) demonstrated no change in this area and were assessed as not achieving this goal at entry and exit. One young person's decision-making abilities declined during their participation in the program.

Table 18: Changes in young people's decision-making^a

	n	%
Improved	10	33
No change ^b	19	63
Declined	1	3
Total	30	

a: Excludes 2 young people for whom this outcome was not relevant for at least one time point, and 1 young person for whom these data are unavailable

b: All young people were reported to have 'Not achieved' this outcome at entry and exit

Note: Percentages may not sum to 100 due to rounding

Source: HYPA Outcomes Checklist 2017 [computer file]

Young people's responses to the PRS partially supported the case managers' assessments. A similar proportion of young people (n=5; 31%) reported their ability to think things through logically when making a decision had improved by the time of program exit. However, almost half (n=7; 44%) believed that their abilities had declined (see Table 19). Consequently, three-quarters of young people entered the program feeling as though they were able to think things through logically most or all of the time (n=12; 75%), although by program exit the proportion who felt this had halved (n=6; 38%).

The difference between case managers' and young people's assessments may indicate that young people held an inaccurate or inflated view of their own decision-making skills at the time of program entry. Deterioration by program exit could therefore reflect young people's improved understanding of their limitations and challenges in this regard, rather than an actual reduction. The finding that logical thinking was more limited among young people with multiple complex issues supports this hypothesis (Fisher's exact $p < 0.05$). This suggests the ReBoot program may have been effective in demonstrating to young people the limitations of their logical decision-making abilities, but less effective in assisting young people to actually improve on them.

Table 19: Changes in young people's perception that they are able to think things through logically when making decisions^a

	n	%
Improved	5	31
No change ^b	4	25
Declined	7	44
Total	16	100

a: Excludes 1 young person for whom these data are unavailable

b: Includes 2 young people who responded 'Some of the time' and 2 young people who responded 'Most of the time' to this outcome at entry and exit

Source: HYPA Personal Resilience Survey 2017 [computer file]

Young people's ability to understand the role that they have in determining their future, and their ability to disrupt their pattern of offending and negative behaviours, is related to decision-making. The program appears to have had a positive impact on the ability of young people to understand that they have the power to influence their own futures. Most young people who completed the PRS entered the program feeling they could positively influence their future ($n=10$; 63%) and either felt they had improved ($n=5$; 31%) or maintained this positive skill set over the course of the program ($n=7$; 44%; see Table 20). Therefore, more than two-thirds of young people at program exit felt they were able to influence their own future ($n=11$; 69%). Perceived ability to influence their future declined for four young people (25%).

Table 20: Changes in young people's perceived ability to influence their future^a

	n	%
Improved	5	31
No change ^b	7	44
Declined	4	25
Total	16	100

a: Excludes 1 young person for whom these data are unavailable

b: All young people responded 'Yes' to this outcome at entry and exit

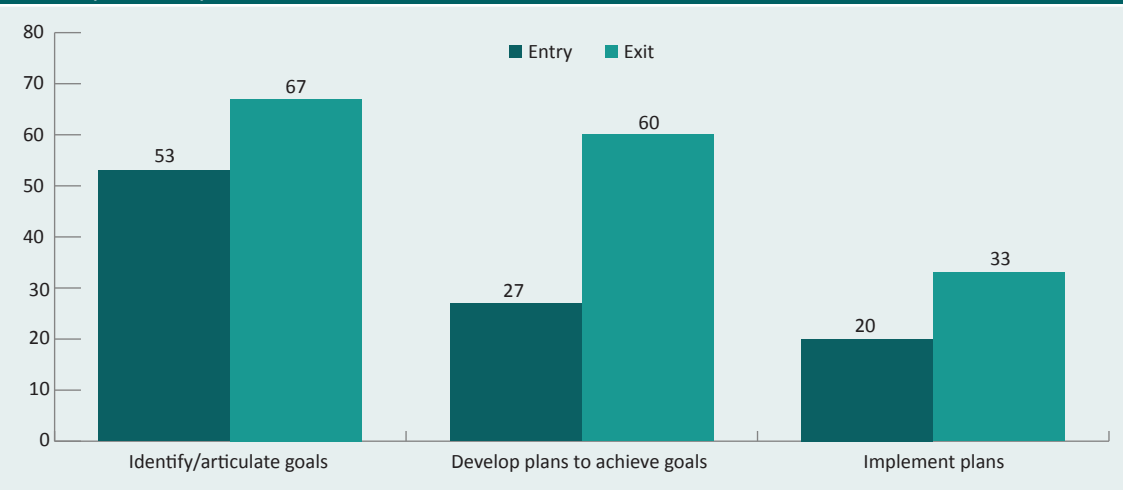
Source: HYPA Personal Resilience Survey 2017 [computer file]

The program also appears to have had a positive impact on the ability of young people to identify and articulate goals, develop plans to achieve them and, to a lesser extent, demonstrate goal-directed behaviours. As shown in Figure 18:

- the proportion of young people able to identify and articulate a goal increased from 53 to 67 percent at program exit;
- the proportion of young people who were able to develop a plan to achieve their goals increased from 27 to 60 percent at program exit; and
- the proportion of young people who took actions to implement their plans increased from 20 to 33 percent.

These findings reflect the broader research, which has demonstrated that taking concerted action to address problem behaviours requires a different level of readiness to change that some young people may not have been ready for.

Figure 18: Changes in young people's ability to identify goals, develop plans to achieve goals, and implement plans (% , n=15)



Note: Excludes 2 young people for whom these data are unavailable

Source: HYPA PRS 2017 [computer file]

Insight and understanding of negative behaviours

Young people's ability to self-regulate is a key requirement of behavioural change. Stakeholders involved in the delivery and management of the ReBoot program emphasised the importance of supporting young people to learn to control their emotions in situations that may lead to aggression or other negative behaviours.

Young people's ability to manage their behaviour when they were emotionally heightened was minimally impacted by program participation. Three-quarters of young people exited the program feeling they could regulate their behaviour only some of the time (n=7), rarely (n=3) or not at all (n=2). Seven of these young people (44%) reported that their ability to manage their behaviours had deteriorated after participating in the program (see Table 21).

Table 21: Changes in young people's ability to manage their own behaviour when angry, stressed, frustrated or sad^a

	n	%
Improved	3	19
No change ^b	6	38
Declined	7	44
Total	16	

a: Excludes 1 young person for whom these data are unavailable

b: Includes 2 young people who responded 'Rarely', 3 young people who responded 'Some of the time' and 1 young person who responded 'Most of the time' to this outcome at entry and exit

Note: Percentages may not sum to 100 due to rounding

Source: HYPA Personal Resilience Survey 2017 [computer file]

Only three young people improved the ability to manage their behaviour when emotionally heightened (19%). Young people experiencing multiple complex issues were less able to regulate their behaviour compared with those who were experiencing fewer issues (Fisher's exact $p < 0.05$). That most young people declined in relation to this outcome may reflect that the program highlighted negative behaviours and challenged young people's perceived ability to manage such behaviours, especially among those with higher needs, rather than an actual deterioration.

Interviews with young people revealed a more positive assessment of the impact of the program on their ability to make better decisions for themselves and have insight into their own behaviour. In particular, young people spoke of an improved understanding of the immediate and future consequences of their actions:

“

I make better decisions, like actually think about the future, not just right now (young person, October 2016).

I think about what I say before I do it and my future and the way I affect everything around me (young person, August 2017).

Young people believed this change in perspective had helped them to identify areas in their lives that they wanted to change and led to more proactive behaviours in responding to problems.

“

The way I lived on a day-to-day basis, I realised I couldn't keep living the way I was living (young person, May 2017).

I achieved my goals by attending meetings, and tackling problems rather than just pushing them to the side (young person, October 2016).

Talking about the things that you do, when you say them out loud, you can see where the problems are (young person, May 2017).

The way I look at everything has changed, like bad situations. The way I was before, I was so lost (young person, October 2016).

Young people also explained that improved decision-making and problem-solving had given them increased confidence in making the right decisions going forward, which led them to change negative behaviours and work towards new goals.

“

All I used to care about was money and drugs and all that silly stuff. Now I care about things in the real world. I used to be very self-centred. I didn't care about how I affected the people around me...I'm definitely looking forward to the future. I never used to look forward to the future. I used to want to be a teenager forever. Now I'm looking forward to growing up and, you know, contributing to society (young person, August 2017).

I have a lot more motivation and confidence. I have self-belief in what I can do (young person, May 2017).

It's changed my motivation to actually get up and do something, rather than just talk about it (young person, August 2017).

At the end of the day, I've done what I've done. And I can only do what I need to change that...it's just never really too late to change (young person, May 2017).

I'm going to stay out of trouble to be honest (young person, May 2017).

Parents/carers also held positive views regarding the ReBoot program's influence on decision-making and problem-solving abilities. They felt that the program's focus on realistic goal-setting contributed to improvements in decision-making and problem-solving.

“

All the goals were realistic. They weren't stupid goals that no-one was going to reach. They took slow, baby steps so it made it easier. And every three months they redid the goals, and I think that helped. And the goals were realistic. They were goals they could achieve (parent/carer, May 2017).

Goals give kids purpose...They were always encouraged to achieve and had someone to support them in achieving (parent/carer, May 2017).

Parents/carers also noted that the ReBoot service providers had taught the young people independence by encouraging them to think about the future, take ownership of their responsibilities and do things for themselves.

“

They are making good decisions with their education and with their work life...not just doing something because it sounds fun right now (parent/carer August 2017).

Before they would just go do things and not really care about any consequences from it or how it might affect other people or how it might affect their life as well. But now they think about all of those things (parent/carer, August 2017).

To say it simply, he's grown up a bit more. He's definitely making better choices. His insight into himself and his criminogenic behaviours has been quite good (parent/carer, May 2017)

Overall, the ReBoot program appears to have had a positive impact on young people's recognition that they have a role in determining their future, which includes the ability to identify goals and implement plans to achieve them. There was mixed evidence, however, regarding the impact of the program on young people's logical decision-making and ability to manage their own behaviour. These findings appear to be mediated by the presence of multiple issues or complex needs, and may in fact reflect young people's increased analysis of their own thought processes and behaviour patterns when making negative decisions. There was also less evidence that the program improved the ability of young people to take actions to address their goals.

Social competency and connection

Research has also established the link between offending and low levels of social competency (Langeveld, Gundersen & Svartdal 2012; Palmer & Hollin 1999), and demonstrated the effectiveness of programs that build social and interpersonal skills to alter antisocial behaviours and reduce offending among young people (Ang & Hughes 2002; Lipsey & Wilson 2000; Wilson, Lipsey & Derzon 2003). The program's impact on the social competency skills of young people was measured in relation to improved communication and listening skills, increased empathy towards others, and increased assertiveness, confidence and initiative.

Case managers reported that, at the time of program exit, communication and listening skills had improved for one-third of young people (n=11; 35%; see Table 22). However, case managers observed no change for approximately two-thirds of young people (n=19; 61%), of whom the majority (n=17; 89%) had communication deficits at program entry and exit. One young person's communication and listening skills had declined at program exit.

Table 22: Changes in young people's communication and listening skills^a

	n	%
Improved	11	35
No change ^b	19	61
Declined	1	3
Total	31	

a: Excludes 2 young people for whom these data are unavailable

b: Includes 17 young people who were reported to have 'Not achieved' and 2 young people were reported to have 'Achieved' this outcome at entry and exit

Note: Percentages may not sum to 100 due to rounding

Source: HYPA Outcomes Checklist 2017 [computer file]

Similar findings emerged in relation to young people's empathy and ability to accommodate the interests or needs of others. Case managers observed that empathy and accommodation of others' interests or needs increased for more than one-third of young people (n=10; 37%; see Table 23). However, most young people (n=16; 59%) exited the program having demonstrated no increase in empathy or improved ability to accommodate others' interests or needs.

Young people's PRS responses also demonstrated that the program had a moderate impact on the ability of young people to empathise and respond to what others are feeling in a helpful way. One in four young people (n=4; 27%) reported that their abilities had increased by program exit; however, one in three young people (n=5; 33%) indicated that their abilities had declined (see Table 24). Forty percent (n=6) reported that their abilities had not changed, with most of these young people feeling they could adequately respond to the needs of others at least some of the time (n=4) at program entry and exit.

Table 23: Changes in young people's demonstration of empathy and accommodation of others' interests or needs^a

	n	%
Improved	10	37
No change ^b	16	59
Declined	1	4
Total	27	100

a: Excludes 5 young people for whom this outcome was not relevant for at least one time point, and 1 young person for whom these data are unavailable

b: Includes 15 young people who were reported to have 'Not achieved' and 1 young person who was reported to have 'Achieved' this outcome at entry and exit

Source: HYPA Outcomes Checklist 2017 [computer file]

Table 24: Change in young people's ability to recognise and respond to what other people are feeling in a helpful way^a

	n	%
Improved	4	27
No change ^b	6	40
Declined	5	33
Total	15	100

a: Excludes 2 young people for whom data are unavailable

b: Includes 4 young people who responded 'Some of the time' and 2 young people who responded 'Yes' at entry and exit

Source: HYPA PRS 2017 [computer file]

Case managers' responses to the Outcomes Checklist indicate the program positively impacted on the assertiveness, confidence and initiative of 42 percent of young people (n=13; see Table 25). The majority of these young people (n=10) had been able to maintain this improvement for at least a three-month period. However, more than half of young people demonstrated no improvement in this area, all of whom were assessed as having deficits in this area at program entry and exit.

Table 25: Change in young people's assertiveness, confidence and initiative^a

	n	%
Improved	13	42
No change ^b	18	58
Declined	0	0
Total	31	100

a: Excludes 1 young person for whom this outcome was not relevant for at least one time point, and 1 young person for these data are unavailable

b: All young people responded as having 'Not achieved' this outcome at entry and exit

Source: HYPA Outcomes Checklist 2017 [computer file]

Prosocial engagement

The program’s impact on young people’s prosocial engagement was measured in relation to improved family connection and relationships, increased connections with prosocial peers, engagement in prosocial activities, and increased community connection.

Case managers observed a substantial improvement in young people’s connection with family over the course of the program. Case managers reported that all young people (n=15) were disconnected from their family at program commencement; however, 60 percent of young people (n=9) had re-engaged or reunified with members of their family by program exit (see Table 26). This was particularly the case for older participants (15–18 years), who were more likely to reconnect with their family than were younger participants (13–14 years; Fisher’s exact $p=0.001$).

Table 26: Changes in young people’s re-engagement or reunification with their family ^a		
	n	%
Improved	13	42
No change ^b	18	58
Declined	0	0
Total	31	100

a: Excludes 16 young people for whom this outcome was not relevant for at least one time point, and 2 young people for whom these data are unavailable
b: All young people were reported to have ‘Not achieved’ this outcome at entry and exit
Source: HYPA Outcomes Checklist 2017 [computer file]

Interviews with young people and their parents/carers also highlighted stronger familial relationships as an outcome of the ReBoot program. Young people conveyed that their relationships with their parents/carers were less strained due to the changes that the program had helped them implement, particularly with regard to reduced offending and antisocial behaviours, choosing to spend more time at home, and keeping their parents/carers informed of their whereabouts.

“

My parents have seen a lot of changes in me. It’s a lot easier for them to manage me (young person, August 2017).

Family life is really good. The cops aren’t at our house every week, which is good (young person, August 2017).

Mum’s really proud of me. It proves I’m doing something with my life. She’s really happy (young person, May 2017)

Interview participants also noted program’s impact on improved communication and openness between young people and their parents/carers, and the willingness of young people to seek advice and help from their family members.

“

She's respectful in her communication. She still has her ups and downs. But she's got more confidence through having the opportunity to voice her opinion (parent/carer, October 2017).

They like me again. They listen to me and respect me, and they'll come and talk to me about stuff (parent/carer August 2017).

I talk to [my family] more now, which is pretty good (young person, October 2016).

As a result, parents/carers identified that young people had become more respectful in their interactions with family members, and appeared to understand the impact of their actions on their family.

“

Two years ago I was starting to think I didn't even know who they were anymore, but now they are respectful and caring and kind...Our relationship has gone back to where it should have been (parent/carer, August 2017).

Finally, parents/carers acknowledged the specific impact the program has had on their lives, both in terms of being provided direct support for their own challenges (such as parenting advice and referrals to other services) and as a result of improvements in their children's behaviours. One parent/carer summarised the impact on her life as follows:

“

I was able to go back to work. In the last couple of years there was no way I could have worked because who knows what the boys were up to. I needed to be at home. They weren't doing any schooling so I was trying to get as much [home schooling] in with them as I could...I stopped work for almost two and a half years, and half the time I was too scared to go out anywhere because I just wanted to be there just in case they did something stupid again or just in case the police came again...But last month I got offered work and I've gone back and for the first time in a couple of years I've just gone, 'Yeah, I can do this. I can go back to work now,' and that has impacted the family amazingly...The whole program has made a major impact on every aspect of our family (parent/carer, August 2017).

The ReBoot program had a more moderate impact on young people's connections with positive peer groups, with case managers reporting that prosocial peer relationships were developed or strengthened for nine young people (30%; see Table 27). Thus, most young people (n=19; 63%) exited the program without having connected, or strengthened existing relationships, with peers who demonstrate and encourage prosocial behaviours.

Table 27: Change in young people connecting with and/or strengthening their prosocial peer group^a

	n	%
Improved	9	30
No change ^b	21	70
Declined	0	0
Total	30	100

a: Excludes 2 young people for whom this outcome was not relevant for at least one time point, and 1 young person for whom these data are unavailable

b: Includes 19 young people who were reported to have 'Not achieved', 1 young person who was reported to have 'Achieved' and 1 young person who was reported to have 'Maintained' this outcome at entry and exit

Source: HYPA Outcomes Checklist 2017 [computer file]

Young people who participated in an interview revealed a different perspective. These young people emphasised how the program had assisted them to develop and maintain relationships with people they considered to be a positive influence.

“

The way I look at it now, if you want to find bad people in your life, you'll find them. And if you want to find good people, you'll find them. It all depends on your mindset and who you hang around (young person, May 2017).

I got a girlfriend. She's been a good influence, like I didn't want to let people like her down (young person, May 2017).

Parents/carers also recognised that young people had made better decisions about who to associate with, confronted others about their antisocial behaviours, and encouraged others to make changes to their own lives.

“

To a couple of their friends, they've gone, 'Hey dude, that's probably not a good idea,' and they would never had done that a couple of years ago... Their workers encouraged them to speak up and say, 'No, that's not my choice'...I've seen it myself where they've told me about what someone else did and I've thought, 'You would have done that a few years ago' (parent/carer, August 2017).

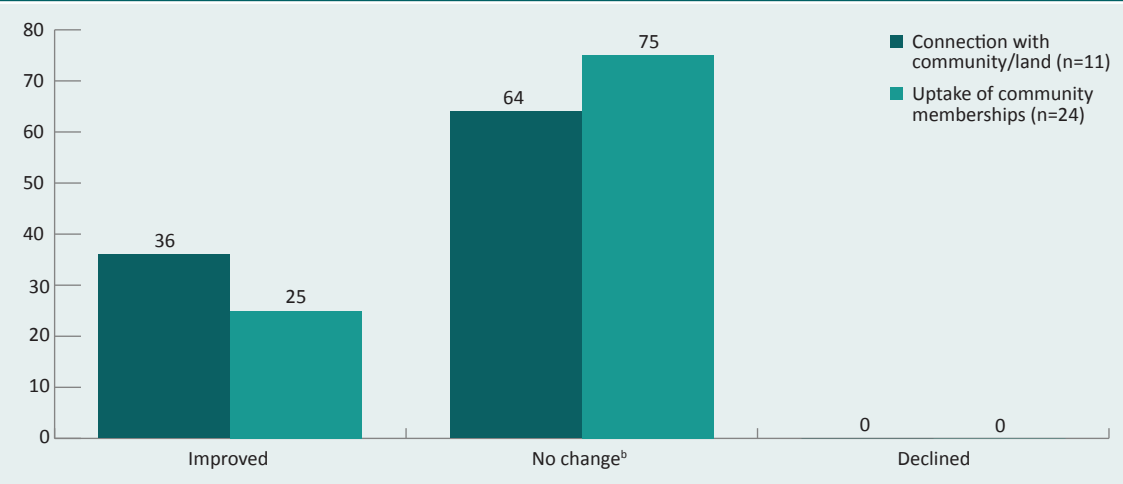
They are making better decisions for themselves now, particularly in terms of relationships with peers. Choosing to associate with better people who aren't going to influence them to do bad things. They are not hanging out with a few people they know do bad things or they get into trouble with and do stupid things or get drunk or whatever. They've opted to not hang out with those people, and they tend to hang out a bit more at home and bring their friends home, which are the friends they think are making right decisions themselves. They've stopped hanging out with druggy dropkicks who were doing stupid things that they thought were fun and games but were actually wrecking their lives...They are more aware of the company they keep and how peers can affect them (parent/carer, August 2017).

They learnt to walk away and have a think about things before you start talking and I can see that in them now as well. When they have arguments between them, one of them will walk away rather than come back at them (parent/carer, August 2017).

He's stopped [shoplifting], and he actually avoids people and places that put him at risk [of further offending]. So he knows if he goes into the city and hangs around with those group of friends then that could be tempting enough for him to think of doing it again...He talked about his offending with the supports he had and they've helped him to maintain that distance from that behaviour and those times, places or people that might trigger him to reoffend (parent/carer, August 2017).

The apparent contradiction between case managers' responses and the interviews with young people and parents/carers could be due to different samples, or it may be that young people are making connections with others who case managers may not consider to be positive peers. Alternatively, case managers may not have been aware of the young person's new friendships and relationships and so could not include this information in their assessments.

Figure 19: Changes in young people's connection with community/land and uptake of membership with community groups, organisations or facilities (%)^a



a: Connection with community/land: Excludes 20 young people for whom this outcome was not relevant for at least one time point, and 2 young people for whom these data are unavailable. Uptake of memberships: Excludes 8 young people for whom this outcome was not relevant for at least one time point, and 1 young person for whom these data are unavailable

b: Connection with community/land: Includes 6 young people who were reported to have 'Not achieved' and 1 young person who was reported to have 'Achieved' this outcome at entry and exit. Uptake of memberships: Includes 17 young people who were reported to have 'Not achieved' and 1 young person who was reported to have 'Achieved' this outcome at entry and exit

Source: HYPA Outcomes Checklist 2017 [computer file]

The ReBoot program had a relatively small impact on connecting or reconnecting young people with their community or land. Case managers reported that, of the 11 young people for whom increased connection to community or land was important, only four young people (36%) made improvements in relation to this goal and seven (64%) experienced no change (see Figure 19). The majority of young people (n=18; 75%) also experienced no change in their uptake of memberships with community groups, organisations or facilities (eg libraries, sporting clubs and gyms). Eight young people were assessed by case managers as improving their engagement in the community (25%). However, further analysis identified that young people who participated in the wilderness camp were more likely to take up memberships with community organisations (Fisher's exact $p < 0.05$).

Despite case managers reporting relatively small increases in community connection as a result of participation in the ReBoot program, interviews with young people and parents/carers revealed that many of the young people had become involved in sport, fitness and recreational activities, and had developed an interest in becoming involved in volunteering once they were of an eligible age.

Education, training and employment

A primary objective of the ReBoot program is to improve education and employment outcomes for young people by helping them to develop more positive attitudes towards education and employment, and improving engagement with school and work. Improved education and employment outcomes are widely associated with reduced offending among young people (Archwamety & Katsiyannis 2000; Duwe 2012; Malmgren & Leone 2000; Wilson, Gallagher & MacKenzie 2000).

For example, as part of a meta-analysis conducted by Cottle, Lee and Heilbrun (2010) on the risk factors predicting recidivism among young offenders, young people with lower standardised achievement scores were found to be at increased risk of recidivism. Improving academic achievement and educational success among young offenders may therefore be important factors in preventing further offending (Katsiyannis et al. 2008). Similarly, Lipsey's (1995) review of 400 international studies on youth justice found that employment was the single most important factor in reducing reoffending, while the United Kingdom's Social Exclusion Unit (2002) found that employment reduced reoffending by 33–50 percent.

Attitudes to school and employment

Overall, the ReBoot program appears to have had a positive impact on young people's attitudes towards education, learning and employment. The majority of young people who completed the PRS agreed at program entry that finishing school or obtaining a qualification (n=12; 80%) and finding employment (n=10; 67%) were important; these attitudes were maintained throughout program engagement. Attitudes towards education (n=1; 7%) and employment (n=4; 27%) improved for a small number of young people (see Table 28).

Table 28: Changes in young people's attitudes to finishing school/getting a qualification and work^a

	Education		Work	
	n	%	n	%
Improved	1	7	4	27
No change ^b	10	67	9	60
Declined	4	27	2	13
Total	15		15	100

a: Excludes 2 young people for whom these data are unavailable

b: Education: Includes 1 young person who responded 'No/don't know', 1 young person who responded 'Sort of' and 8 young people who responded 'Yes' to this outcome at entry and exit. Work: Includes 1 young person who responded 'Sort of' and 8 young people who responded 'Yes' to this outcome at entry and exit

Note: Percentages may not sum to 100 due to rounding

Source: HYPA PRS 2017 [computer file]

These findings are supported in part by the analysis of the Outcomes Checklist. Case managers reported that attitudes to education improved for 45 percent (n=13) of young people, while attitudes to employment improved for 63 percent (n=12) of young people (see Table 29). Subsequent analysis identified a statistically significant relationship between young people's age and their attitudes (as assessed by case managers). This indicates that the ReBoot program may have been more effective at improving the attitudes of older participants (17–18 years) towards education and learning (n=7; 88%; Fisher's exact $p<0.05$) and work (n=6; 100%; Fisher's exact $p<0.01$) compared with younger participants.

Table 29: Changes in young people's attitudes to education/learning and work^a

	Education		Work	
	n	%	n	%
Improved	13	45	12	63
No change ^b	16	55	7	37
Declined	0	0	0	0
Total	29	100	19	100

a: Education/learning: Excludes 2 young people for whom this outcome was not relevant for at least one time point, and 2 young people for whom these data are unavailable. Work: Excludes 11 young people for whom this outcome was not relevant for at least one time point, and 3 young people for whom these data are unavailable

b: Education/learning: Includes 15 young people who had 'Not achieved' and 1 young person who had 'Achieved' this outcome at entry and exit. Work: Includes 4 young people who had 'Not achieved', 1 young person who had 'Achieved' and 2 young people who had 'Maintained' this outcome at entry and exit

Source: HYPA Outcomes Checklist 2017 [computer file]

Engagement in school and training

The pay-by-results model requires that young people achieve at least one of three criteria:

- commencement or recommencement of engagement in school or an equivalent education, demonstrated by regular attendance for at least six consecutive weeks;
- maintenance of regular employment (full-time, part-time or casual employment, including apprenticeships and traineeships; at least one shift per week) for at least six consecutive weeks; or
- completion of a TAFE award or skill set course equivalent, or (if they do not have time to complete the course before the evaluation concludes) enrolment in and attendance at the course for a minimum of six consecutive weeks.

Forty-five percent of young people who engaged in the program (n=22) achieved at least one of the education, employment or training criteria (see Table 30). Thirty-three percent of young people (n=16) met one criterion, eight percent (n=4) met two criteria, and four percent (n=2) met all criteria. Commencing or recommencing engagement in school or an equivalent education was the most commonly achieved education outcome; 39 percent of young people met this criterion (n=19).

Table 30: Young people who met the pay-by-results education and employment criteria (n=49)^a

	n	%
Commenced engagement in school or an equivalent education	19	39
Maintained regular employment	4	8
Completed or enrolled in a TAFE award or skill set course equivalent	6	12
Met at least one of the above criteria	22	45

a: Excludes 1 young person for whom these data are unavailable

Note: Percentages do not sum to 100 as the categories are not mutually exclusive

Source: HYPAs Administrative dataset 2017 [computer file]

Characteristics of those who achieved the pay-by-results education and employment criteria and those who did not are described in Table 31. Achievement of at least one of the education, employment or training criteria was significantly related to young people's completion status (Fisher's exact $p < 0.01$). This indicates that young people who completed the program were more likely to have met at least one criterion (n=13; 87%) compared with young people who partially completed the program (n=7; 24%). Young people's participation in the wilderness camp was also significantly related to their achievement of the education, employment or training criteria (Fisher's exact $p < 0.05$). Camp participation was associated with a higher likelihood of meeting at least one criterion (n=8; 80%), compared with young people who did not participate in the camp (n=14; 36%). There were no significant differences based on demographic characteristics and referral pathway.

Table 31: Characteristics of young people who met the pay-by-results education and employment criteria (n=49)

	Achieved (n=22)		Did not achieve (n=27)	
	n	%	n	%
Gender				
Male	18	82	22	81
Female	4	18	5	19
Age (years)^a				
13–14	7	33	11	42
15–16	10	48	9	35
17–18	4	19	6	23
Indigenous status				
Indigenous	11	50	12	44
Non-Indigenous	11	50	15	56
Completion status				
Completed	13	59	2	7
Partially completed	7	32	22	81
Active	2	1	3	11
Referral source				
Adelaide Youth Court	10	45	11	41
Family Conference Team	12	55	16	59
Wilderness camp participation				
Yes	8	36	2	7
No	14	64	25	93

a: Excludes 1 young person for whom these data are unavailable

Source: HYPA Administrative dataset 2017 [computer file]

A number of additional measures were used to assess the extent to which case managers reported improved educational engagement among young people. These measures include connection to a school or learning environment, attendance at school, and engagement in learning activities.

Attendance at school or equivalent

The ReBoot program appears to have had a positive impact on attendance among only a small number of participants (n=6; 25%; see Table 32). Rather, case managers reported that the majority of young people had poor attendance at school or an equivalent program at both entry (n=22; 92%) and exit (n=17; 71%); therefore, attendance did not change for 75 percent of young people (n=18). Further, most young people were not engaged in learning activities at entry (n=21; 88%) and exit (n=15; 63%) and did not experience a change in their engagement in learning activities while engaged in the program (n=16; 75%; see Table 33).

Table 32: Changes in young people's attendance at school or equivalent^a

	n	%
Improved	6	25
No change ^b	18	75
Declined	0	0
Total	24	100

a: Excludes 8 young people for whom this outcome was not relevant for at least one time point, and 1 young person for whom these data are unavailable

b: Includes 17 young people who were reported to have 'Not achieved' and 1 young person who was reported to have 'Maintained' this outcome at entry and exit

Source: HYPA Outcomes Checklist 2017 [computer file]

Table 33: Changes in young people's engagement in learning activities^a

	n	%
Improved	8	25
No change ^b	16	75
Declined	0	0
Total	24	100

a: Excludes 8 young people for whom this outcome was not relevant for at least one time point, and 1 young person for whom these data are unavailable

b: Includes 15 young people who were reported to have 'Not achieved' and 1 young person who was reported to have 'Achieved' this outcome at entry and exit

Source: HYPA Outcomes Checklist 2017 [computer file]

For young people and parents/carers who participated in an interview, improved school attendance and engagement was acknowledged as an important change supported by the program. Reported changes included re-engagement or increased attendance in school or vocational training, which sometimes required service providers to collaborate with schools and flexible learning option (FLO) programs.

“

Before ReBoot, I wasn't really going to school. It was three or four years where I just wasn't going to school...Then [the HYPA case manager] told me about [a course] where they have smaller classes and it's more hands on, and that's where I am right now (young person, August 2017).

The most important change for me was going back to school. I hadn't been since Year 9, but I came back in Year 12 and now I'll get my certificate (young person, May 2017).

Young people attributed this success to the practical support offered through the program, such as service providers discussing different education and training options and helping the young person access particular courses. Seven young people referenced specific employment goals such as becoming youth workers, hairdressers or chefs, or working in construction, and felt the program's practical assistance was particularly useful in this regard.

“

We wrote up a resume and stuff. And did my white card, first aid and working at heights [certification]. I want to get into construction later in life (young person, May 2017).

They contributed to helping the boys succeed by not shoving it down their throat but suggesting they could do different things and linking them in with opportunities. I think they succeeded because they had all that help (parent/carer, August 2017).

The views of young people and parents/carers were also supported by staff involved in the delivery and management of the program. Stakeholders reported providing different support to young people to facilitate their attendance at school and to increase their employment opportunities:

“

I had a young person meet me at a library, and he wanted to do his resume, but he was very illiterate. So having me there to support him to write his resume was massive for him. Because after that, he spent an hour applying for jobs. Even after I left, he sat there applying for jobs. It's just those things which might be simple for us but are massive for them. And the day after, he had an interview, and the day after that, he started employment (ReBoot service provider, May 2017).

Education and work outcomes

The ReBoot program's impact on education and employment outcomes was examined, including changes in young people's knowledge and skills to get work, and work readiness.

Young people were asked as part of the PRS whether they felt they had the necessary knowledge and skills to get some form of work. A small number of young people (n=3; 20%) felt more confident in their abilities to get work by program exit. Knowledge and skills remained unchanged for 60 percent of young people (n=9), although four of these young people reported they were confident of their abilities to get work at program entry and exit. Three young people reported they had become less confident (n=3; 20%; see Table 34).

Table 34: Changes in young people's knowledge and skills to get work^a

	n	%
Improved	3	20
No change ^b	9	60
Declined	3	20
Total	15	100

a: Excludes 2 young people for whom these data are unavailable

b: Includes 1 young person who responded 'No', 4 young people who responded 'Sort of' and 4 young people who responded 'Yes' to this outcome at entry and exit

Source: HYPA Personal Resilience Survey 2017 [computer file]

Case manager responses to the Outcomes Checklist support young people's self-reported feelings towards work readiness, although case managers appeared to be somewhat more confident. Forty-one percent of young people (n=7) were assessed as being more willing and prepared to identify, apply for and participate in some form of work at program exit (see Table 35). Another 10 young people (59%) were reported as not changing in this area, with three of these young people being assessed as ready for work at program entry and exit.

Young people's willingness and preparedness to identify work opportunities appears to have translated into young people obtaining work experience. Case managers reported all young people engaged in some form of work experience during their time on the program, with the majority of young people having maintained some form of work experience at program exit (n=13; 87%).

Table 35: Changes in young people's work readiness^a

	n	%
Improved	7	41
No change ^b	10	59
Declined	0	0
Total	17	100

a: Excludes 12 young people for whom this outcome was not relevant for at least one time point, and 4 young people for whom these data are unavailable

b: Includes 7 young people who were reported to have 'Not achieved', 1 young person who was reported to have 'Achieved' and 2 young people who were reported to have 'Maintained' this outcome at entry and exit

Source: HYPA Outcomes Checklist 2017 [computer file]

Interviews with young people, parents/carers and stakeholders reinforced the findings from the analysis of the Outcomes Checklist and PRS. Participants spoke about young people staying in school, gaining employment and completing training courses during their participation in the program:

“

They've managed to get the boys to do so many things in the last two years, that they are going to finish school early and qualify for the equivalent of Year 12...Two years ago they were not even going to finish Year 8 and now they will have a good education (parent/carer, August 2017).

Employment was identified as a particularly important learning experience for young people as it helped them to gain financial independence, develop social skills and principles, build their confidence in a work environment, and start considering their careers into the future.

“

[The young person is] working and earning quite good money. He got a job and he's really proud of the job that he's got in construction. And his manager has told him if he keeps doing this for the next few years he might be a manager himself and he might lead a group into a construction sort of work, but when he first came on [to the program] things were really rough for him (ReBoot service provider, June 2016).

The people at work have morals, and you have to act in a certain way. And you start to pick that up in everyday life (young person, May 2017).

He's doing really well at [work]. He's getting added responsibilities and he's going for team leader. He's also doing some short courses for numeracy and literacy (parent/carer, August 2017).

Since they've been making their own money, instead of mum giving it to them at home, they've learnt the value of money a bit better and the value of being able to buy things and take their girlfriends out to the movies and dinner, instead of offending to get money to go buy [drugs] or a cheap bottle of wine to get drunk. That's a big lesson they've learnt (parent/carer, August 2017).

These findings indicate that the ReBoot program has had a modest but positive impact on young people's education and employment outcomes. The pay-by-results data indicate that a substantial proportion of young people consistently (for at least 6 weeks) engaged in education, employment or training while participating in the program. Additionally, there was significant improvement in young people's attitudes towards employment, work readiness and attainment of work experience. Changes were more modest regarding young people's attendance at school, knowledge and skills to get work, and attitudes towards education and employment. In terms of attitudinal change, young people self-reported that they already had relatively positive attitudes towards education and employment when they commenced the program, meaning the program succeeded in maintaining these attitudes. Education and employment outcomes were unlikely to decline among program participants.

Offending and antisocial behaviours

The ReBoot program's primary aim is to reduce offending and antisocial behaviours among young people. It aims to achieve this by addressing the underlying causes of the offending behaviour, which can differ among participating young people.

Interviews with individuals involved in the management and delivery of the ReBoot program suggested the program is assisting some young people to stop or decrease their offending. Stakeholders said they had observed or received feedback that some young people had desisted from offending altogether, meaning they were not returning to court or having additional contact with the youth justice system. Stakeholders also reported the program had an impact on young people who continued to offend, as their offending had reduced in frequency and severity.

Interviews with parents/carers and young people supported stakeholders' views. Young people and parents/carers reported that they had observed or made a number of changes to their behaviour, which in turn led to a reduction in offending. Specifically, parents/carers and young people noted an increased willingness to change negative or risky behaviours that may have been contributing to or facilitating their offending, as well as an improved understanding of the consequences of offending and negative peer influences. These changes were linked with the opportunity that the ReBoot program provided the young person to gain insight into their offending behaviour and focus on the future.

“

All parties around the table, including Youth Justice, have all said how impressed with [they are with his] own insights into his criminal activities and behaviour...He's stopped [shoplifting] and he actually avoids places that put him at risk [of further offending] (parent/carer, August 2017).

I used to do bad things a lot more...I wasn't doing much with my days, but now I think about what I'm doing to do. There's been a major, major reduction in crime, that's all gone. It's pretty much changed everything (young person, August 2017).

I've stopped thinking about offending and stuff. I'm more focused on school work and been making good choices and stuff (young person, May 2017).

It's not the right way of doing things. It's going to get you nowhere really... Instead of going to the shops and stealing, I'll just pay for it (young person, May 2017).

[Before the program] I wasn't engaged in anything. I was missing all the time, had police after me all the time, getting in trouble. It wasn't good...It's helped me a lot. Especially having trouble with the cops. I haven't been in trouble at all since I've been on the program. I haven't gotten arrested since. I haven't even spoken to a police officer since (young person, May 2017).

They were making stupid choices and getting in trouble with the police, and I don't think from here onwards that they will ever turn back. Getting into trouble and going through the court system and being arrested, that's definitely not in the foreseeable future. Just from their attitudes towards life now, they've grown up and gotten away from that (parent/carer, August 2017).

The views of young people and parents/carers appear to be supported in part by the analysis of the Outcomes Checklist and PRS. Case managers and young people who completed these tools were asked to assess changes in offending behaviour across a number of dimensions:

- risk-taking and problematic behaviour;
- desistance from offending;
- frequency of offending;
- seriousness of offending; and
- number of offences in an offending episode.

Engagement in risk-taking and problematic behaviours

The majority of young people were still engaging in some form of risk-taking or problematic behaviour at program exit (n=19; 61%); however, case managers reported that these behaviours had decreased for 39 percent (n=12) of young people (see Table 36). The majority of these young people had been able to maintain this reduction for a period of at least three months at program exit (n=10; 83%). Notably, risk-taking behaviour did not increase for any of the young people included in the sample.

	n	%
Improved	12	39
No change ^b	19	61
Declined	0	0
Total	31	100

a: Excludes 1 young person for whom this outcome was not relevant for at least one time point, and 1 young person for whom these data are unavailable

b: All young people were reported to have 'Not achieved' this outcome at entry and exit

Source: HYPA Outcomes Checklist 2017 [computer file]

The change in risk-taking behaviours was significantly related to completion status (Fisher's exact $p < 0.05$; see Table 37). Young people who completed the program were more likely to reduce their risk-taking behaviours (n=9; 69%) when compared with those who partially completed the program (n=2; 15%).

	Completed		Partially completed		Active	
	n	%	n	%	n	%
Improved	9	69	2	15	1	20
No change ^b	4	31	11	85	4	80
Declined	0	0	0	0	0	0
Total	13	100	13	100	5	100

a: Excludes 1 young person for whom this outcome was not relevant for at least one time point, and 1 young person for whom these data are unavailable

b: All young people were reported to have 'Not achieved' this outcome at entry and exit

Source: HYPA Outcomes Checklist 2017 [computer file]

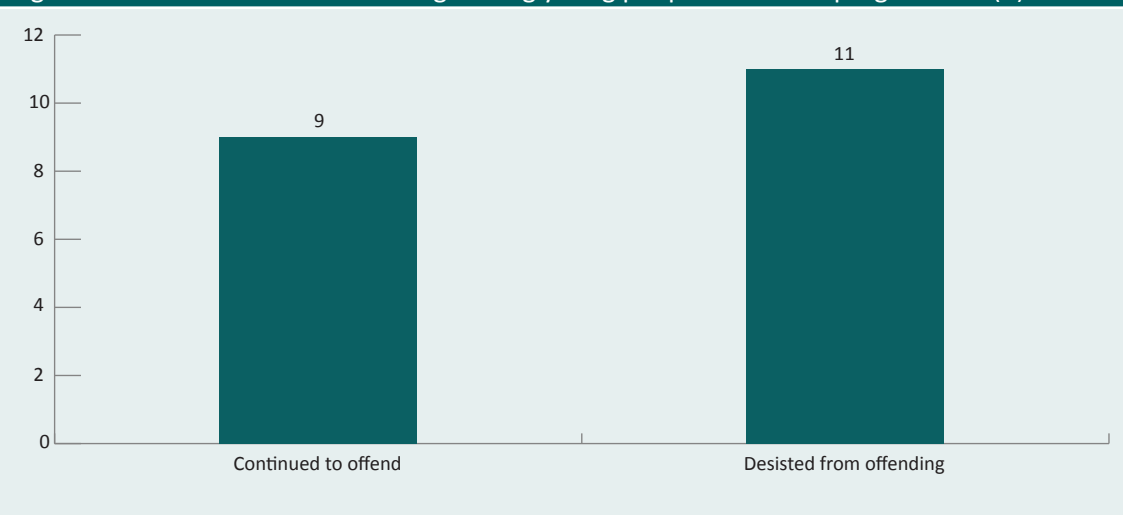
Young people referred through the family conferencing pathway were more likely to reduce their risk-taking behaviours (n=9; 50%) compared with young people referred through the Adelaide Youth Court (n=3; 23%). Similarly, young people who participated in the wilderness camp were more likely to improve their behaviours (n=6; 75%) compared with participants who did not go on the camp (n=3; 38%). However, these results were not statistically significant.

Desistance from offending

Case managers reported that 11 out of 20 young people (55%) had desisted from offending by program exit, nine of whom had achieved desistance at least three months before exit (see Figure 20). Although this may not represent a substantial period of desistance, young people participating in the ReBoot program are at significant risk of short-term reoffending given their repeated contact with the criminal justice system.

These findings are positive; however, they are based on the observations and knowledge of the case managers rather than official criminal justice records. As such, they may not accurately represent the incidence of reoffending among the sample.

Figure 20: Desistance from offending among young people at time of program exit (n)



Note: Excludes 10 young people for whom this outcome was not relevant for at least one time point, and 3 young people for whom these data are unavailable

Source: HYPA Outcomes Checklist 2017 [computer file]

Desistance from offending was significantly associated with completion status (Fisher's exact $p < 0.05$). Young people who ceased offending were more likely to have completed the program ($n=7$; 64%). Referral pathway, camp participation, gender and age had no impact on desistance from offending.

Young people who desisted from offending commonly demonstrated improvements in relation to other key domains. Young people who desisted from offending were significantly more likely to have improved on Outcomes Checklist measures of social competency and connection, health and education than young people who did not desist from offending (Fisher's exact, $p < 0.05$; see Table 34). Young people who desisted from offending were significantly more likely to have achieved on at least one measure of improved social competency and connection ($n=10$; 91%) than young people who continued to offend ($n=3$; 33%). Young people who desisted from offending were also significantly more likely to have achieved on at least one measure of improved health outcomes ($n=10$; 91%) than those who continued to offend ($n=2$; 22%). They were also more likely to have achieved on at least one measure of improved education outcomes ($n=9$; 82%) than those who did not desist ($n=2$; 21%).

While not statistically significant, they were also more likely to have achieved improved access to support on at least one Outcomes Checklist measure (n=8; 73%) than those who did not desist (n=2; 22%; see Table 38), and were more likely to have improved their decision-making and problem-solving skills (n=6; 60%) than those who did not desist (n=1; 11%).

Table 38: Outcome Checklist measures where young people improved, by outcome domain for young people who desisted (% , n=11)			
Domain	Did not improve on any measure	Improved on at least one measure ^a	Improved on all measures
Access to support and resources	27	73	36
Health and wellbeing	9	91	18
Decision-making and problem-solving	40	60	60
Social competency and connection	9	91	27
Education, training and employment	18	82	36

a: Includes young people who improved on all measures

Young people who desisted from offending (n=11) also had higher achievement in the pay-by-results education and employment component (n=7; 64%) than those who continued to offend (n=3; 33%), although this difference was not statistically significant.

Frequency and severity of offending

The Outcomes Checklist asks case managers to report whether the young person has achieved a:

- reduction in frequency of offending;
- reduction in seriousness of offence type; and
- reduction in the number of offences in an offending episode.

Young people who continued to offend did not reduce the seriousness of their offending or the frequency of offending episodes. However, all young people were reported as reducing the number of offences committed during an offending episode, although the extent of the reduction (ie number of offences) was not reported.

Overall, the program had a positive impact on the offending behaviours of some young people. In particular, it assisted young people to desist from offending, and also to maintain desistance. However, the program appears to have had minimal impact on young people who continued to offend, in terms of reducing the severity and frequency of this behaviour.

Conclusion

The ReBoot program aims to reduce offending and increase prosocial behaviours among 14–18 year olds who have a history of offending and are at risk of escalating their involvement in the youth and adult criminal justice systems. The program has three key objectives:

- reduce offending and antisocial behaviour of young people;
- increase engagement of young people in education, training or employment; and
- increase engagement of young people in organised activity such as sport, performing arts, volunteering or other forms of voluntary civic engagement.

The South Australia AGD commissioned the AIC to conduct a process and outcome evaluation of the ReBoot program for the period 1 July 2015 to 30 June 2017. This report has described the findings from this research.

Overall, the evaluation found that the ReBoot program has been implemented as intended, and there are high levels of support for the program. In particular, there is clear evidence of a need for the program, as it fills an important gap in service provision for young offenders in South Australia and has been a useful option in sentencing and family conference outcomes. Services exist that target the specific needs of young people involved in offending (eg mental health or drug and alcohol services); however, the ReBoot program was acknowledged as the sole youth justice intervention in South Australia that provided a holistic response. As such, there is strong support for its continuation and expansion beyond the metropolitan area of Adelaide.

Further, the services delivered as part of the case management and peer mentoring components were of high quality and met the needs of young people from diverse backgrounds, including ethnic and cultural background, offending history and risk profiles.

It was difficult to draw strong conclusions about the implementation and impact of the wilderness camp for ReBoot program clients due to low participation in this component. Low participation was in part attributed to young people not consenting to attend, and the complex needs of young people meant that it often took longer for them to become ready to participate. Further, the camp was available at only certain times of the year, which sometimes did not coincide with the young people's participation in the ReBoot program. Program staff responded to perceived issues relating to camp participation by introducing preparatory activities in the trial's second year. This improved camp attendance. However, challenges with camp participation highlighted the difficulty of readying complex and high-needs clients to undertake this exercise.

Other barriers to the effective operation of the program identified by the process evaluation included low program awareness among some stakeholders, difficulties with convening multi-agency meetings and case conferences, and challenges with information sharing. Young people were required to engage with multiple workers to undertake similar assessments and case planning processes as a result.

Findings from the outcomes evaluation are less clear due to data limitations. However, based on available data, the evaluation found some evidence that the program had a moderate but positive impact on young people in a number of key domains:

- young people's knowledge of and access to informal and formal sources of support;
- physical health; and
- positive family and peer relationships.

The program also had a positive impact on some young people's substance use, communication skills, ability to empathise with others, and attitudes towards school and work.

The program appears to have contributed to desistance from offending, with case managers reporting that 55 percent of young people (n=11) ceased offending before program exit. However, this information was available for only a small number of young people (n=20) and based on the assessments of case managers. Therefore, the results may not reflect official criminal justice data.

There was little evidence that the program impacted school attendance and engagement, young people's decision-making abilities, mental health outcomes, and the severity and frequency of offending.

The findings indicate that the program's greatest effect has been to change the attitudes of young people and help them consider what changes need to be made in their lives, rather than improving their decision-making skills and bringing about behavioural change. This is an important outcome, as attitudinal change is a necessary precondition for behavioural change. However, the findings may indicate that amendments to the program should be considered in order to support young people to undertake observable actions to alter high-risk behaviours. In particular, specialised and targeted support to improve decision-making skills may be needed. There are different options for what this may look like in practice, with cognitive behavioural therapy (CBT) being one option.

CBT addresses a host of problems associated with criminal behaviour, and has been shown to be effective with juvenile offenders across a range of criminal justice settings (Landenberger & Lipsey 2005). CBT models assist young people to understand and recognise which thinking patterns, coping strategies and emotions are unhelpful or negative, and provide them with the skills to develop new coping strategies, different ways of thinking about or interpreting certain situations, and emotional regulation skills (Clarke 2010; Noetic Group 2017). In a review of 548 intervention studies, Lipsey (2009) found that approaches that built cognitive behavioural skills were the most effective therapeutic intervention for reducing reoffending. In a review of 58 research studies, Landenberger and Lipsey (2005) also found that the flexible, engaging and self-directed approach of CBT can make it effective for both low- and high-risk clients. There may be value in piloting different interventions to determine which is the most effective and suitable for the target cohort.

Overall, there is evidence that the ReBoot program had a positive impact on participating young people in important domains. However, the absence of suitable assessment data precluded definitive conclusions about whether the program achieved its stated objectives. If the ReBoot program were to be extended or implemented in additional sites, it should be the subject of ongoing monitoring activities and evaluation. As part of this process, a review should be undertaken of the assessment tools that were used as part of the current evaluation to identify opportunities for supplementing these with rigorous and validated assessment tools, like the URICA and CSS. Evaluation and performance monitoring should be conducted on an ongoing basis to monitor the performance of the program against key objectives, and to assess the impact of any changes to the operation of the program on outcomes.

Recommendation 13

Consider options for including an additional component in the program which specifically focuses on improving the decision-making skills of young people and supports them to make positive changes to their behaviour. This may involve the inclusion of a cognitive behavioural therapy component. Alternatively, consider developing stronger pathways between the ReBoot program and other organisations that provide these services, so that young people assessed as requiring this additional support can be provided with access in a timely manner. Any decisions regarding amendments to the ReBoot program should involve consultation with key stakeholder agencies, including those involved in the delivery of the program.

Recommendation 14

If the ReBoot program is extended or implemented in other sites, ensure ongoing performance monitoring and evaluation of the program. This should necessarily involve a review of the assessment tools currently being used by the service providers to assess the progress of young people participating in the program, with the view to supplementing these with validated assessment tools as necessary. Performance monitoring should be conducted on an ongoing basis to measure the impact of the program against its stated objectives, and to assess the impact of any changes to the operation of the program.

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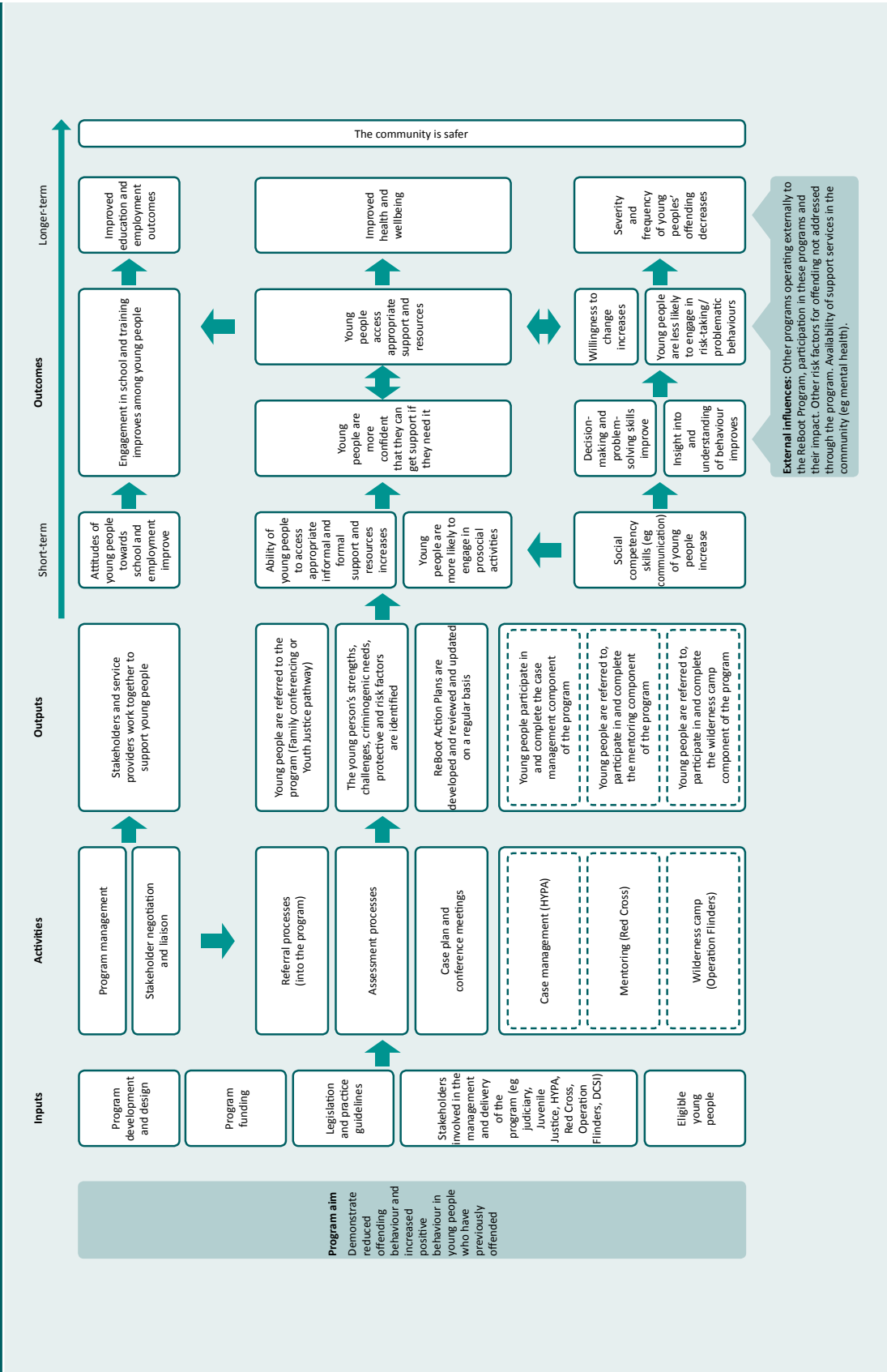
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Figure 21: ReBoot program logic



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