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RECIDIVISM MONITORING PROGRAMME

REPORT

STUDY PERIOD 1

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INSTITUTIONAL SERVICE  
DEPARTMENT FOR COMMUNITY WELFARE  
WESTERN AUSTRALIA

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## Part 1

### INTRODUCTION

The Recidivism Monitoring Programme is an evaluative process designed to assess, in terms of recidivism, the performance of the three major training centres administered by the Department for Community Welfare. It involves a series of studies relating to separate, six-month Study Periods. This report concerns the results of the first Study Period which ran from January to June, 1979.

The centres involved in the Programme - Hillston, Riverbank and Nyandi - are all concerned principally with the treatment and training of adolescent offenders. Riverbank and Nyandi are secure centres, the former dealing with boys and the latter with girls. Hillston is an open centre in a semi rural setting on the outskirts of Perth. It too deals with boys but generally its population is younger and less sophisticated by comparison with that of Riverbank. All three centres administer hostel annexes and have large numbers of children under supervision in the community, but only those admitted to the main centres are included in the Recidivism Monitoring Programme.

Basically the Recidivism Monitoring Programme involves collecting, for each child, data that spans the 180 days that he was in the community both before and after his admission to the centre concerned. The "before" and "after" sets of data, which focus on the individual's offence record, are then compared and otherwise analysed.

Apart from measuring recidivism, the Programme provides a variety of other meaningful ongoing data related to offences and the children passing through the centres.

Examples of these are, a breakdown of offences committed by persons in company and when alone, details of offences and offenders in terms of the metropolitan area and country divisions, and information relating offences and offenders to ethnic origin.

In fact, the data collected is capable of providing a very detailed account of the delinquency characteristics and patterns of the children concerned. Information of this kind is essential if the ongoing effectiveness of a centre is to be monitored and if the results of new programmes that are introduced are to be measured reliably. Another aspect of crucial importance concerns public accountability.

In addition to being used for general analysis, the recorded data provides an ongoing, day-to-day account of each child's progress and hence is useful for supervision and management purposes.

The issues examined by the Recidivism Monitoring Programme relate to overall recidivism, personal characteristics of the children at the time of admission or "Intervention", offence patterns prior to Intervention, and Departmental action after Intervention. More specifically, the issues examined are:

1. Overall

- 1.1 Recidivism
- 1.2 Offence Patterns

2. Recidivism in Relation to Personal Characteristics at Intervention

- 2.1 Age
- 2.2 Ethnic Identity
- 2.3 Normal Place of Abode
- 2.4 Lifestyle before Intervention
- 2.5 Personality Indication
- 2.6 Admissions at Intervention

### 3. Offence Patterns Prior to Intervention

- 3.1 Offence Frequency
- 3.2 Offender Types
- 3.3 Offender Type (Company/Alone)

### 4. Departmental Action after Intervention

- 4.1 Observed legal Constraint
- 4.2 Number and Length of Admissions
- 4.3 Lifestyle after Intervention
- 4.4 Institutional Responsibility

The main section of this report and the Volume of Tables are both structured according to this set of issues.

Whilst detailed comments concerning the methodology of the Recidivism Monitoring Programme are contained in Part 2 of this report, it is appropriate that two brief, introductory comments concerning the design be made here. Firstly, it should be noted that the Programme uses the term "recidivism" comparatively; that is, an earlier rate of offending is compared with subsequent performance. Improvement is said to have occurred when there has been a reduction in the rate of offending. Secondly, the Recidivism Monitoring Programme is descriptive rather than experimental in nature. It aims to monitor trends rather than experimentally test hypotheses. Conceivably, trends which become evident through the Recidivism Monitoring Programme may raise questions which could be subjected to separate, experimental analysis.

Finally a few words concerning the structure of this report, which has been prepared with various purposes in mind. One of these is simply to document what has been done and the results which have been obtained, for the future reference of the Department in general and the Recidivism Monitoring Programme Committee in particular. Just as important, however, is communication of this information to different interest groups.

Those who require only a brief description of the Programme and its principal findings may find it sufficient to refer directly to Part 5 - Summary. For a discussion of the findings in relation to the study design and various matters of public interest the reader should also consult Part 4 - Overview of Results. Part 2 - Methodology and Part 3 - Results will probably be of most benefit to the researcher and organisations which may have an interest in replicating the Recidivism Monitoring Programme. Such readers may also wish to refer to the Volume of Tables and copies of the manuals and forms, which are available on request from the Department.

Being the first comprehensive statement emanating from the Recidivism Monitoring Programme, this report is regarded as an important document. It will be followed by further reports, essentially of a supplementary nature, as the results of subsequent Study Periods become available. However, it is anticipated that progressively greater confidence will surround the conclusions which are drawn from later Study Periods as consistent trends should be distinguished from random variations. With this in mind, it may well be appropriate to provide a consolidated report after about four or five Study Periods. It is hoped that the results of a literature search will be available by then, in order to provide an international perspective to the material being generated by the Recidivism Monitoring Programme.



## Part 2

### METHODOLOGY

The Recidivism Monitoring Programme is an ongoing series of studies, each separate study relating to cases collected during a particular "Study Period". Basically, it involves recording, for each case included, offence-related data pertaining to the 180 days that the child was in the community both before and after a particular admission to the Centre concerned. This admission is known as "Intervention" and recidivism is represented by the percentage reduction or increase in offences when the pre and post-intervention data are compared.

#### 1. DEFINITIONS

Several concepts and variables are utilised in the Recidivism Monitoring Programme and the more fundamental of these are defined as follows:-

##### Study Period

A six month period, either the first or second half of the calendar year. It is the period of time in which cases for each separate study are 'collected', on the basis of children admitted to the nominated centres.

##### Nominated Centres

One of the three centres involved in the programme - Hillston, Riverbank and Nyandi. Only the main centres are included. Hostel annexes are excluded.

##### Cases Included

All children admitted to any of the nominated centres for treatment or training purposes during the Study Period in question. This excludes children admitted purely for the purpose of serving default in lieu of payment of fines. It also excludes children admitted

for special reasons and where the stay is for no more than a few days e.g. awaiting Court and not returned after Court, short Court remands of up to 7 days after which the child is not returned, 'time-out' periods of up to 7 days when the child is semi-isolated and then discharged. The admission which causes a case to be included in the Recidivism Monitoring Programme is known as "Intervention", for purposes of the study.

### Intervention

Intervention occurs the first time in any Study Period that a child is admitted to any of the nominated centres, as outlined above under "Cases Included". Subsequent admission to the same centre during the same Study Period are not counted as Interventions but a further Intervention will occur if a child is admitted to another of the nominated centres e.g. Riverbank after Hillston. A further Intervention can occur if a child is admitted to the same centre in a subsequent Study Period, but then the second Intervention will relate to that subsequent Study Period.

### Admission

The intake of a child to a centre where it is intended that the child stay at least one night. This definition is not in conflict with the definition of "Cases Included". It has application in determining the total number of previous admissions. For example, an admission for a Court remand of up to 7 days would not be treated as an Intervention, but would be counted as a "previous admission" if an Intervention subsequently occurred.

### Community Time

Basically, this is time when a child has an opportunity to offend. Data is collected for 180 days of community time before and after Intervention. Specifically,

community time is the time, in days, when the child is not officially residing in Hillston, Riverbank, Nyandi, Longmore (a secure Departmental assessment centre), gaol or a locked ward of a Mental Health Services Hospital. Temporary absences from such facilities e.g. hospitalisation, short periods of compassionate leave are regarded as periods of official residence and are not counted as post-Intervention community time.

Absence without leave is counted as post-Intervention community time only after a child has been absent from the centre in question for one calendar month. It is also counted as community time from the outset if it occurs from a centre other than the one collecting the data e.g. if a boy previously at Hillston was transferred to Riverbank and then went absent without leave the full period of absence would count as community time for purposes of Hillston's post-Intervention data, whilst it would not count for one month for purposes of Riverbank's data.

All periods of temporary absence or absence without leave are counted when determining pre-Intervention community time.

#### Offence

An offence is defined as behaviour that is proscribed by law. For purposes of the Recidivism Monitoring Programme, offences are counted when a child has been charged in a Court of Law and guilt has been established. This includes offences where the complaint is dismissed by the Court without proceeding to conviction, under Section 26 of the Child Welfare Act. It does not include care and protection or uncontrolled applications, Court appearances related to truancy or complaints brought before Children's Panels. Offences are counted in the pre or post-Intervention period of

180 days community time according to the date upon which the offence occurred, as best this can be established, and not according to the date of the Court appearance.

### Recidivism

Recidivism refers to offences committed during the post-Intervention period of 180 days' community time. It is represented as the percentage reduction or increase in offending when the pre and post-Intervention offence data are compared.

### Other Definitions

Numerous definitions are applied in relation to the different variables examined in the study. Details of these are to be found in the Volume of Tables.

## 2. DISCUSSION OF THE STUDY DESIGN

The following comments are offered in order to elucidate certain aspects of the design of the Recidivism Monitoring Programme and to answer some queries which may be raised in relation to it.

- 2.1 The Recidivism Monitoring Programme is essentially a series of *descriptive* studies, designed to *monitor* the effectiveness of the centres concerned. It enables the comparison of offence-related data collected under standard conditions before and after Intervention. Conclusions concerning the effectiveness of the centres rely upon the assumption that any changes are attributable to their work. There are no control groups or other design features which enable cause and effect to be conclusively established.
- 2.2 Subject to the foregoing assumption, the Recidivism Monitoring Programme monitors the *overall* effectiveness of the centres. It

cannot discriminate between specific programme elements, though, conceivably, certain results could prompt experimental evaluation of such elements.

Furthermore, it records the performance of *groups* of children and one must be cautious in drawing inferences about individuals. For example, in comparing the pre and post-Intervention frequencies of a certain type of offence it cannot necessarily be assumed that the particular children who committed that type of offence before Intervention were the same individuals who committed it afterwards.

- 2.3 When the Recidivism Monitoring Programme was first designed, the pre and post-Intervention data were seen to be the vehicles for measuring the effectiveness of work conducted throughout a "during" period, which extended from Intervention to the next formal discharge from the centre concerned. Some of the design details reflect this concept, which is now seen to be deficient in that it does not acknowledge the ongoing influence of the centre throughout the post-Intervention period or, in some cases, during the pre-Intervention period.

Accordingly, Intervention is now conceptualised as being essentially an *arbitrary* divider between two periods of time - the pre-Intervention period, which is used as a baseline, and the post-Intervention period, during which the centre's performance is being monitored and evaluated, by comparison with the baseline. In other words, no matter how much has been attempted or achieved with cases prior to Intervention, the Recidivism

Monitoring Programme monitors whether they subsequently improve or deteriorate in terms of offence-related data, by comparison with their pre-Intervention behaviour.

- 2.4 For purposes of the Recidivism Monitoring Programme, each case is probably best conceptualised as a *set of facts*, rather than as an individual person. For example, in any Study Period a certain number of boys will have Interventions at both Hillston and Riverbank and hence, as individuals, participate in the particular study twice. However, their pre and post-Intervention offence records as well as certain other details will vary between the two centres. Another example is that a child may appear in the Recidivism Monitoring Programme as a pre-Intervention non-offender, but may have a Court record prior to the commencement of the 180 day pre-Intervention period.

This does not detract from the Programme, but it must be borne in mind when working with the data. For example, the overlap between the Hillston and Riverbank samples presents no difficulty if Hillston and Riverbank data are treated separately. If they are combined or, as is more likely, compared then it must be recognised that some individuals will be contributing to the results twice. The effect will vary firstly according to the number of overlapping cases and secondly according to whether their collective performance is better or worse than that of the other cases.

- 2.5 The Recidivism Monitoring Programme monitors the effectiveness of the centres only in terms of *offence frequency and quality of offending*. Whilst this is undoubtedly the most important measure as far as the public is concerned, there are other important areas in which the centres do make rehabilitative efforts, such as education,

employment and housing, but which are not subject to direct evaluation by the Recidivism Monitoring Programme.

- 2.6 The period of measurement requires careful understanding. A period of 180 days' community time may be accumulated in a single, unbroken sequence or it may be accumulated intermittently over a period of as long as two years or so. Hence the period of measurement varies, but *the opportunity to offend* is held constant for all cases.

It should be noted that it would be misleading to think of the measurement as a "six months' follow up", for two reasons. Firstly, as aforementioned, the period may be more than six months. Secondly, it is not a "follow up" in the usual sense of that expression, because it is the centre's performance during the 180 day period which is being monitored, as outlined in Section 2.3 above.

One hundred and eighty days was selected as the period of measurement because it was regarded as the longest possible if results were to be available within a reasonable time. One important function of a monitoring programme is to assist organisational decision making and hence the data generated must reflect current systems and performance.

Notwithstanding this, some may regard a period of 180 days as being too short and think it likely to generate unduly favourable results. This is not necessarily so, because the same period applies to both pre and post-Intervention data and if one were to be extended then so would the other. On this basis it is possible and perhaps likely,

that a relatively greater number of offences would be included in the pre-Intervention period thus producing a more, rather than less, favourable result.

- 2.7 A time limit was imposed for completion of the post-Intervention period. Originally it was intended that this would be 2 years after the commencement of the Study Period. However, it was later extended to 27 months so that at least 90 percent of cases would complete the post-Intervention period at each centre. Even so, the problem of how to deal with the incompleting cases remains.

There is no thoroughly satisfactory method of treating such cases. Inclusion as if they had completed 180 days' post-Intervention community time would introduce and disguise a degree of error, whilst pro-rating the offence data would not only do likewise but also produce some absurd statistics. The best solution was seen to be to *exclude* these cases from the main analysis and to report on them separately. An appendix to the Volume of Tables provides their raw offence data and discussion of this in relation to the mainstream data is included in Part 4 - Overview of Results.

- 2.8 The samples for each centre in each Study Period have *inherent validity* in that they include all cases admitted to the main centres for training purposes, with the exception of the small number of excluded cases mentioned in the previous paragraph.

The samples so obtained are of reasonable size for purposes of considering broad issues, except in relation to Nyandi, for which the results are therefore likely to be erratic. However, the only



means by which the samples could be increased would be to increase the length of each Study Period, but this would extend both the interval between monitoring reports and the time between commencement of a Study Period and the availability of results.

It should be noted that the samples do not include all children managed by the centres. Overall, there are about three times as many children supervised entirely in hostel annexes or the community. Hence, those included in the Recidivism Monitoring Programme are those whose behaviour is *giving rise to greatest concern*. To the extent that the public is interested in what is achieved with children who are institutionalised, this is legitimate but it must be borne in mind when considering the results. This is especially so for Nyandi, which has the highest proportion of its caseload in the community.

- 2.9 It should be particularly noted that offences are included in pre or post-Intervention periods not according to the dates of Court appearances but rather according to the *dates upon which the offences occurred*. This is obviously the most accurate approach but it is one which creates additional work because most offence statistics are Court based.
- 2.10 Finally, the Recidivism Monitoring Programme uses the term 'recidivism' comparatively; that is, an earlier rate of offending is compared with subsequent performance. In this sense it is a measure of improvement or deterioration, improvement being said to have occurred when there has been a reduction in the rate of offending. 'Recidivism' has also been used in studies elsewhere to signify whether or not any re-offending at all has occurred.

With the Recidivism Monitoring Programme the view has been taken that rarely does offending suddenly cease at a point in time. Rather, in response to treatment, it should diminish over time.

### 3. ADMINISTRATION OF THE PROGRAMME

#### Committee

The Recidivism Monitoring Programme was designed and is administered by a committee comprising the Superintendent or Deputy Superintendent of each centre concerned, representatives of the Institutional Services' administration at Head Office and a representative of the Department's Planning and Research Unit.

The Committee is under the chairmanship of one of the Superintendents and normally meets monthly for about three hours. Additional meetings are held when required. Although initial meetings were devoted mainly to design issues, the normal business of the Committee now involves monthly progress reports from the centres, interpretation of design in relation to various queries, noting of any environmental factors which may need consideration when examining results and matters relating to the general administration of the Programme.

#### Clerical Assistance

Each centre has found it necessary to allocate to one person the responsibility of maintaining the Individual Record Booklets, which represent the basis source of data for the Programme. These persons are known as "recording clerks" and must arrange for the collection of data, record it in the booklets in accordance with the study design and prepare the monthly progress reports for the centres.

In addition, one or two persons are specially employed on a contractual basis to convert this basic data to a form acceptable for computer analysis, using individual Computer Data Booklets. These persons are known as "transposition clerks" and, as well as transposing data,

they provide a check on the accuracy of and consistency between the recording clerks.

For the first two years operation of the Recidivism Monitoring Programme the costs of the transposition clerks were met by a grant from the Criminology Research Council, which saw fit to assist in the establishment of the project.

### Manuals

Two manuals were designed for the Recidivism Monitoring Programme. The first, the Instruction Manual, was designed for use by the committee, the recording and transposition clerks and all institutional staff who contribute towards or are interested in the operation of the Programme. The second is an Instruction Manual for the Computer Data Booklet and is used only by the transposition clerks.

### Seminars

When the Recidivism Monitoring Programme was first introduced a seminar was held to explain its purpose, design and administration of those staff involved. In addition, meetings were held with the recording clerks to discuss design details and resolve numerous practical questions. These meetings proved to be an important feature in the process of design development. It is considered that further meetings of this kind will be necessary from time to time in order to provide feedback to the staff who participate and to maintain consistency as personnel change.

### Data Analysis

Computer programming and data analysis are carried out at the Regional Computing Centre, University of Western Australia, using the *Statistical Package for the Social Sciences* (SPSS).

### Part 3

#### RESULTS

In total, 188 cases were included in the study made up from amongst the three centres as follows:

	<u>Number</u>	<u>Percentage of Total Sample</u>
Hillston	90	48%
Riverbank	62	33%
Nyandi	36	19%

The Nyandi cases were all girls, whilst the Hillston and Riverbank cases were all boys.

Eleven boys were transferred from Hillston to Riverbank during the Study Period and are included in the data for both centres. In general there is no reason to believe that this aspect has introduced serious distortion, but it must be borne in mind when combining data from the two centres. More comments on the design issues of this matter are contained in Part 2 - Methodology.

It should be noted that there were originally 198 cases included in the sample, but 10 had to be excluded because they failed to complete 180 days post-Intervention community time. These 10 cases represent a genuine research problem and yet because they were generally atypical, cannot be ignored. Comments on the design aspects of this matter also are contained in Part 2 - Methodology, whilst a discussion of the performance of the 10 cases in relation to the overall results of the study is to be found in Part 4 - Overview of Results.

In the material which follows, the results are presented and discussed in summary form. Detailed tables are presented in a separate volume.

## 1. OVERALL RESULTS

### 1.1 Recidivism

Relevant Table: 1.1.1.

In its broadest aspect, this programme provides an overall measure of recidivism for children admitted to the centres concerned. Recidivism is not the only guide to the effectiveness of these centres but undoubtedly it is the most important one as far as the public is concerned.

In this study Recidivism was regarded as the number of offences committed during the 180 "community days" after Intervention. This was related to the number of offences in the comparable period before Intervention to provide a measure of the percentage reduction in offending.

The offence rates for the pre-Intervention period were:

Hillston	-	7.8 offences per person
Riverbank	-	16.2 offences per person
Nyandi	-	4.6 offences per person

The difference between Hillston and Riverbank is in line with their respective roles within the Department's overall service. More noteworthy is the lower offence rate for the girls, although if 8 non-offenders are excluded the rate for Nyandi was a more comparable 5.9 offences per person.

The levels of offence reduction for the three centres were:

Hillston		50.1%
Riverbank	-	55.6%
Nyandi	-	58.7%

Allowing for normal statistical fluctuations, these results are comparable and it cannot be concluded at this stage that one centre is doing "better" than another.

Overall, however, it is apparent that the offence rate was reduced by about a half. This is not a result which can be regarded as inevitable. Intervention occurs because the behaviour of children is deteriorating and so if anything an increase in the offence rate would have been the more likely outcome, if nothing effective had occurred after Intervention.

The results obtained thus represent a very considerable difference and improvement. They are not consistent with any generalised view that juvenile rehabilitation centres fail to reduce crime or, worse still, that they provide a breeding ground for it. On the contrary, they indicate that a substantial reduction in offending can be expected to follow admission to one of the centres concerned.

## 1.2 Offence Patterns

Relevant Table: 1.1.2

About 80% of all offences related to property. These mostly involved common stealing and, to a lesser extent, the unlawful use of motor vehicles. About 2% of offences were against the person, almost all of these involving assault. There was one homicide which related to a motor vehicle accident. The balance of the offences were against good order, and related almost exclusively to misconduct. There was only one drug offence, in keeping with the relatively small number of drug-

related offences dealt with in the Children's Court for the 1979/80 financial year.

In view of the special importance of offences against the person, a more exhaustive survey was conducted of all assault offences, before and after Intervention. The details, summarised below, throw further light on this area.

Serious personal attack, innocent victim involved.	-	11
Bullying and stand-over tactics often involving other children.	-	8
Assaults on police, usually associated with drinking and resisting arrest.	-	4
Domestic incidents	-	5
Common fighting, usually associated with drinking	-	15
Details not available	-	2

Overall, there was a greater reduction in property offences than for other categories, especially at Nyandi, resulting in an overall shift of 4% from property to good order when the before and after offence patterns are compared. However, whilst this trend is in a desirable direction, it is not substantial overall and does not warrant firm conclusions at this stage.

## 2. RECIDIVISM IN RELATION TO PERSONAL CHARACTERISTICS AT INTERVENTION

### 2.1 Age

#### Relevant Table 2.1.1

A question commonly asked is whether juvenile rehabilitation programmes are more effective with one age group than another. In particular, there is current debate within Western Australia as to whether 17-year olds are generally suited to the juvenile justice system.

In this study, age was determined at the time of Intervention. Nearly all the children were aged between 13 and 17 years. Hillston's largest age group was its 15-year olds, whilst for Riverbank and Nyandi it was the 16-year olds.

Overall, the 14-year olds showed the highest offence rate before Intervention and thereafter the rates generally declined as age increased. This trend was particularly apparent at Hillston and Riverbank. This does not imply that children offend less as they get older. What it does suggest is that beyond the age of 14 years older children were generally admitted to centres after progressively fewer offences than younger children.

There was no clear trend at any centre to suggest that recidivism increases or decreases with age. As a point of interest, better than average results were obtained with 17-year-olds at all centres. Overall, however, the conclusion best supported by the figures is that success may be expected regardless of age.

## 2.2 Ethnic Identity

Relevant Tables: 2.2.1

5.1.1

There is a widely held view that institutionally-based programmes do not generally meet the needs of Aboriginal children, particularly those from the more remote parts of the State. Without addressing the subtleties of this issue, it is therefore of interest to ask whether less success is achieved with Aboriginal children.

In this study the definition of "Aboriginal" was that the child claimed Aboriginality or was at least quarter-caste. At Hillston and Riverbank Aboriginal children accounted for about 40% of the population, whilst at Nyandi the figure was nearer to 60%. These figures compare with a State



population figure of about three percent. Overall, the Aboriginal offence rate before Intervention did not appear to be significantly different to that for other children.

Hillston was clearly more successful with the Aboriginal group with an offence reduction of 72% as compared with 32% for other children. On the other hand, Riverbank and Nyandi were less successful with their Aboriginal children, though the differences were not so marked and one would hesitate at this stage to interpret these figures as a trend.

The foregoing comments have to be considered together with the fact that most Aboriginal boys came from the country. There was a highly significant statistical relationship between these two factors. Thus it is tempting to speculate whether the rural atmosphere of Hillston holds out some special benefit for the Aboriginal group.

The broad conclusion at this stage is that institutionally-based programmes are achieving good levels of success with Aborigines despite a commonly held view to the contrary.

### 2.3 Normal Place of Abode

Relevant Tables: 2.3.1

5.1.1

The principal point of interest here is whether or not greater success is achieved with metropolitan than with country children, bearing in mind that there is sometimes said to be no point in bringing country children to metropolitan institutions.

Cases were classified according to the area of the State in which they had spent most time during the five years prior to Intervention. For each of the three centres, a little over one-third of the children came from country

areas. As a matter of interest, the overall numbers from each of the Department's country Divisions were:

Kimberley	-	1
Pilbara	-	12
Murchison	-	11
Goldfields	-	12
Central	-	17
Southern	-	17

However, as no clear trends emerged for different Divisions, country cases have been considered collectively in the discussion which follows.

Overall, the offence rate for country children before Intervention was lower than that for metropolitan children, but this difference was almost entirely accounted for by the Riverbank cases. The trend was very mildly in the opposite direction for Hillston.

Country children showed the most improvement at Hillston and, to a lesser extent, at Riverbank. The metropolitan children improved more at Nyandi. Once again the correlation between ethnic identity and normal place of abode for the boys must be borne in mind, because it means that with both these factors we are most likely looking at the same thing.

Taken altogether, it would be risky at this stage to draw any firm conclusions distinguishing country and metropolitan children, except to say that Hillston did very well with its country boys, who were mostly Aboriginal. What is clear, however, is that good levels of success can be achieved by the placement of country children in metropolitan centres, again, despite commonly held views to the contrary.

## 2.4 Lifestyle before Intervention

### Relevant Table: 2.4.1

To persons working with young offenders it often seems that the prospects of success are bound up with the existence or otherwise of a supportive family. An attempt was therefore made to examine recidivism in relation to various lifestyles before Intervention.

Six alternative lifestyles were identified:

Institutional Annexes

Open Institutional type care

Home or extended family

Private Board

A.W.O.L.

Mixed

For each child, lifestyle was identified for each of the 180 "community days" before Intervention. The child was then classified according to whichever of the first five lifestyles predominated, provided it had occurred for at least ninety days and no other for sixty days or more. The remainder were classified as "mixed".

Whether this is an appropriate method of examining the issue in hand may be debatable. For one thing, the time-frame may be too short and for another the lifestyle as defined here may be less pertinent than the specific experiences that occur within that lifestyle. On the other hand, the approach taken seemed to be the only one feasible within the context of a monitoring programme.

In any event the result was inconclusive, mainly because about two-thirds of the cases were classified as "home or extended family", leaving small samples and erratic figures in the other categories. Even when children in the "home

or extended family" category are compared with those in all other categories combined, no consistent trend could be found in either the offence rates or the offence reduction figures. Conclusions will have to await the results of further Study Periods.

## 2.5 Personality Indication

Relevant Tables: 2.5.1

5.3.1

Most of the children entering Hillston, Riverbank and Nyandi present as educationally backward and socially deprived. Generally, they have become accustomed to moving in delinquent circles and have adopted behaviour patterns of which offending is a by-product. In short, they have learned to offend and on the face of it should be amenable to programmes which teach them not to offend.

However, there are two other small but noticeable groups of children who present more complex pictures. One comprises emotionally disturbed children, and the other a more calculating type of child who appears to be rather deliberately opting for a career of crime. The Committee thought it would be interesting to see whether these groups of children differed in terms of recidivism.

Cases were classified on or soon after Intervention by the Superintendent according to the following:-

- P - Unable to relate genuinely to others, little remorse, calculating, may have explosive outbursts when frustrated, may be superficially likeable as with the typical con-man.

- A - Common delinquent type, anti-social peer-group associations, property offences including cars and stealing fairly common.
- E - Possible psychiatric record and/or a definite indication of disturbance in the psychologist's report.

On strictly scientific grounds, one cannot show much objectivity about a classification of this kind, but the 'P' and 'E' types of children are generally so apparent that the Committee felt justified in attempting the exercise.

As expected, the majority of cases were classified as 'A' whilst about one-eighth were classified as 'E'. Very few were classified as 'P': only two cases at Hillston, one at Riverbank and four at Nyandi. The number of children classified as 'E' was somewhat higher than expected.

For the first Study Period no consistent trend emerged in regard to offence rates, offence reduction figures or, in a special analysis, whether offences were committed in company or alone. This is inevitable with such small samples in the 'P' category. If any trends are to become apparent concerning these aspects, it will have to be after a few Study Periods when data can be compared and perhaps combined.

## 2.6 Admissions at Intervention

### Relevant Table: 2.6.1

Short multiple periods of institutional care in conjunction with community support work are favoured by the Department. In this context, readmission can be a constructive step in an

ongoing process of corrective management, particularly if it is taken in response to emerging behavioural difficulties and before further offences occur. In other words, a readmission does not necessarily signify failure, though it does imply an absence of total success.

Recidivism was therefore examined in relation to the number of admissions to the centre concerned, including the admission designated as Intervention, to see how much success can be expected with multiple admissions.

Half of Hillston's cases, and almost three-quarters of Riverbank's were first admissions. Most of the others had experienced 2 - 4 admissions, though eight Hillston boys were in the 5 - 9 admission category. Nyandi's cases were spread more evenly across these categories and three cases had experienced ten or more admissions.

There is no clear trend between the categories in terms of offence rates. An earlier indication, mentioned in the Interim Report, that children with five admissions or more appeared to have a lower offence rate overall, was in fact due to the relatively high proportion of Nyandi girls in this category and of Riverbank boys in the other categories.

Hillston and Nyandi achieved their best results with the 2 - 4 admissions group whilst Riverbank's first admissions showed the greatest offence reduction. But overall there was no consistent trend to indicate that the prospects of success are affected at all by the number of admissions at the time of Intervention. In general, the implication is that it pays to persist.

### 3. OFFENCE PATTERNS PRIOR TO INTERVENTION

Is it possible to identify different types of offenders, or is there too much variation for this to be practicable? If it is possible, are significantly different levels of success achieved with the different types? Regardless of the level of recidivism, do offenders remain "true-to-type"? These are the questions which prompted the following set of analyses, with the general thought in mind that positive answers may lead to selective programme development for certain types of offenders.

#### 3.1 Offence Frequency

Relevant Tables: 3.1.1

3.1.2

Children were firstly classified according to how many offences they had committed in the 180 day pre-Intervention period. The categories were 0, 1 - 5, 6 - 20 and more than 20 offences.

Overall, the majority of cases were spread across the 1 - 5 and 6 - 20 offence categories, although Riverbank had 30% of its sample in the category for more than twenty offences.

Unexpectedly, the improvement rates obtained were poorer for the lower offence categories. Substantial offence reductions were achieved consistently with the more frequent offenders. For the 6 - 20 groups the reductions ranged from 55% to 70% at the three centres, whilst with their 20+ groups Hillston and Riverbank achieved reductions of 51% and 56% respectively. This is interesting, of course, since heavy offenders are commonly regarded not only as amongst the worst but also those least likely to respond. However, from these results it certainly does not appear that an offender with a long record is beyond the reach of improvement.

Table 3.1.2 is probably one of the most important Tables of the study, because it reveals what happened to individual children in terms of recidivism. This Table is easily read because the cases which neither improved nor deteriorated in terms of these categories, are found in the cells running diagonally from the top left-hand to the bottom right-hand corner. All the cases which improved in terms of moving into a category for less offences, appear below and to the left of this diagonal, whilst those which deteriorated are above and to the right.

For the purposes of this discussion, the children who were classified as non-offenders in the pre-Intervention period will be considered separately from the offenders. There were twelve non-offenders beforehand, four at Hillston and eight at Nyandi. Some Tables show one non-offender at Riverbank but this was traced to a data processing error. It should be noted that a child classified as a "non-offender" could have had a Court history prior to the 180 community-day pre-Intervention period.

Only three of the twelve non-offenders committed offences in the post-Intervention period, but two of them were from Hillston's sample of four. Such children are taken into the centres basically because their behaviour is giving rise to concern about their safety or welfare. Some may question whether this is just and in general it would be fair to say that it is one of the more vexatious issues concerning the management of juveniles whose behaviour fringes on delinquency. From a pragmatic viewpoint, one important question is whether or not they are "contaminated". Because of the small numbers involved, the results of a few Study Periods will be needed to draw firm conclusions, but at this stage any contentment with the result from Nyandi must be tempered by concern about the two boys from Hillston who subsequently offended.



Turning to the mainstream of this analysis, it is pleasing to note that of the 170 offender cases which the computer was able to analyse, a total of 65 committed no offences at all in the post-Intervention period. If the overlap of eleven cases between Hillston and Riverbank is eliminated, this means that 41% of the offenders remained completely clear of trouble in the follow-up period. This is a very good result in what amounts to an alternative, but more stringent, test of recidivism.

Taking all the offender cases in the pre-Intervention period together, 66% improved in the sense that they moved into a less serious category and 27% remained the same. Only 6% deteriorated. Once again it is difficult to reconcile results such as these with any generalised view that juvenile rehabilitation is not working.

### 3.2 Offender Types

Relevant Tables: 3.2.1

3.2.2

3.2.3

3.2.4

This part of the study categorised cases according to the nature of the offences committed in the pre-Intervention period. Two separate classifications were used, one more detailed than the other, but for convenience the results are discussed together.

The first classification employed five broad categories as follows:

<u>Category</u>	<u>Nature of Offences</u>
1. Non-offender	None
2. Good Order	Good Order only
3. Property	Property with or without Good Order
4. Property and Person	Person offences with offences in any other category.
5. Person	Person only

The second classification was based on nine more descriptive categories. Cases were sorted according to those offences in the pre-Intervention period which presented as the main problem. As offenders often have a mixture of convictions, the classification had to take into account not only the frequency of each offence, but also its relative seriousness in the eyes of the public. For example, a child with two convictions for assault and five for disorderly conduct would be seen first and foremost as an assailant, rather than a disorderly conduct offender.

The Committee therefore developed a system for weighting offences according to the seriousness with which they are viewed by the Courts and the community, as far as this could be gauged. By a process of trial and error a simple formula was then developed until the overall process produced classifications consistent with those which the Committee had previously made by "judgment" in relation to six sample cases from each centre. Details of the weightings and formula are given in the volume of Tables.

The nine categories and the broad types of offences pre-dominant within each were:

1. Assailant	Homicide, Assault, Rape
2. Sex Offender	Sex (not Rape)
3. Vandal	Arson, Wilful Damage
4. Car Thief	Motor Vehicles (not traffic)
5. Common Property Offender	Common Stealing, False Pretences
6. Drug Offender	Drug Charges (use, Possession)
7. Disorderly Conduct Offender	Disorderly Conduct, Traffic, etc.
8. Mixed Offender	Various
9. Non-Offender	None

As would be expected from the overall offence data (Section 1.2 above), a clear majority of cases were classified as Property Offenders. Of those, about two-thirds were sub-classified as Common Property Offenders whilst about one-third were Car Thieves. The next largest group was the Property and Person Offenders, most of whom were sub-classified as Assailants and the remainder as Mixed Offenders. There was only one individual who had offended exclusively against persons and as a matter of interest, he had committed only one offence.

The overall character of the populations of the three centres tended to differ. The predominant groups for each centre, in descending order of frequency were:

Hillston            - Common Property Offenders  
                          Car Thieves  
                          Assailants

Riverbank	-	Car Thieves
		Common Property Offenders
		Mixed Offenders
		Assailants
Nyandi	-	Common Property Offenders
		Non-offenders
		Disorderly Conduct Offenders
		Assailants

Only Nyandi had Disorderly Conduct Offenders and there were no cases classified as Sex or Drug Offenders at any Centre.

As far as offence rates in the pre-Intervention period were concerned, the only noteworthy feature was that male Assailants at Riverbank and Hillston had relatively low rates whilst female Assailants at Nyandi showed a relatively high rate of offending. Whether this trend holds up in later Study Periods remains to be seen.

Good results were obtained in terms of offence reduction in all dominant categories for each centre. Relatively large reductions were obtained for Car Thieves at all centres but one would not draw firm conclusions concerning this until further Study Periods have been completed. Overall, there is little to lead one to think at this stage that any one category is likely to do better than another.

A most interesting aspect of these results is that if the detailed breakdown of offences on Table 3.2.3 is examined closely, it will be found that for every type of offender, each centre achieved significant reductions in the identified problem areas. That is to say, for example, Assailants

showed a reduction in person offences, Car Thieves in property offences, and so on.

Tables 3.2.2 and 3.2.4 reveal the extent to which individual cases moved into different categories in the post-Intervention period. Table 3.2.4 is the more sensitive and therefore the more useful of the two. Further, probably the most pertinent way of using it is to examine only those cases which offended in the pre and post-Intervention periods. In other words to examine, for those offenders who continued to offend, whether or not they remained the same types of offenders. It should be noted that discussion concerning the other cases, that is the non-offenders in both the pre and post Intervention periods, is contained in the previous Section (3.1).

Forty-one percent of the cases who continued to offend remained in the same category. Thirty-five percent moved into a more serious category, whilst 24% moved into a less serious category. On the face of it, one could see in this a mild tendency for re-offenders to remain true to type, and if they do not for them to become of a more serious type. But taking all considerations into account, including the possible effect of the overlap between the eleven Hillston/Riverbank cases, the figures may represent a random distribution. The main implication of this would be that it is not generally meaningful to think of offenders as being of one particular type or another in the sense that something in their make-up will predispose them to certain offence patterns.

Such a conclusion would also find support in the material outlined earlier in this section concerning improvement in identified problem areas, and the absence of significantly different patterns of improvement between the various offender categories.

### 3.3 Offender Type (Company/Alone)

Relevant Tables: 3.3.1

3.3.2

5.3.2

This area is of interest because offences committed alone tend to imply a more deliberate, self-sufficient act on the part of the offender concerned. In contrast, the company offender impresses as a weaker person, dependent upon and influenced by the behaviour of his peers. But are these clearly distinguishable types and do they show different rates of improvement?

Interestingly, it was found from the data that only 17% of the offenders had committed offences both in company and alone during the pre-Intervention period. The greater majority, about 75% of the offenders, had offended only in company, leaving a small group of less than 10% who had offended only alone. This distribution was consistent between centres.

No consistent trend emerged to differentiate the various groups in terms of offence rates for the pre-Intervention period. Nor did there appear to be much to separate the groups in terms of offence reduction figures, although all centres obtained good results with their groups of company offenders. This is elucidated further in Table 3.3.2 which reveals the movement of individuals between categories after Intervention. For all centres, about 40% of company offenders subsequently became non-offenders, compared with 30% of company and lone offenders, and 20% of lone offenders. These differences are not great and the samples of the last two categories were small, but the consistency of the trend cannot be overlooked.

A further point is that only six cases changed from company to lone offenders or vice versa, which in itself would suggest that these are fairly durable characteristics. As against this, however, it must be noted that a further fifty-one different cases, more than 25% of the sample, committed company and lone offences in either the pre- or post-Intervention periods.

An examination of the relationship between offender type (company/alone) and the different personality types proved inconclusive due to small samples in a number of categories.

In conclusion, it seems that children are usually either company offenders or lone offenders, mostly the former. There is reason to suspect that these characteristics are fairly durable and that company offenders may be the more likely to become non-offenders. If this trend is confirmed in future study periods it would be worth examining lone offenders in more detail with a view to improving the success rate with them.

#### 4. DEPARTMENTAL ACTION AFTER INTERVENTION

The following series of analyses generally brought to the fore the limitations of descriptive research. There are two types of factors which have to be taken into account. First there are those which existed prior to Intervention, over which the Department generally had no control. In relation to these, inferences have been drawn about the Department's performance as a whole, after Intervention. Then there are those factors which occur after Intervention. The Department's decisions are involved in, and affect, these factors. Obviously, individual cases are treated differently. More difficult cases involve the use of different options. It is important to remember, when evaluating factors after Intervention, that the success of each category may reflect the

difficulty of the cases treated in that particular way. One cannot compare simply such post-Intervention options. In other words, certain categories may show good results because those particular options could be applied to children with good prospects of success. Conversely, other categories may show poor results because of the poor prospects of those children to which they had to be applied. Therefore it would not be correct, for example, to conclude that a category with a poor result showed that particular option to be "wrong", for the result may well have been even worse had the option not been applied.

However, if this point is kept firmly in mind, the following analyses provide interesting descriptive information which, sooner or later, could point to certain areas where improved performance might be sought.

#### 4.1 Observed Legal Constraint

##### Relevant Table: 4.1.1

Under West Australian legislation offenders may, amongst other things, be placed under the control of the Department with or without a recommendation from the Court. The decision as to whether or not they will subsequently be placed in a centre is usually made by the Department, though sometimes the Court makes a recommendation to this effect, perhaps with a stipulation as to time. The only exceptions, very rare at the time of this Study Period, concern children who are dealt with by the higher Courts under a provision of the Criminal Code which enables detention at the Governor's pleasure.

From the Department's point of view, whilst an indication of the Court's attitude is not unwelcome, problems are considered to arise when a recommendation is handed down as if it were a sentence. In particular, children then commonly take the attitude that they are "doing time" and their motivation to



achieve behavioural targets is diminished. A dilemma can also arise if a child has not completed a recommended period of detention but release would be timely in terms of his progress or, more particularly, if he has completed a recommended period but is not considered ready for release.

It is inferred that, from the Court's point of view, a recommendation as to detention is sometimes seen as necessary to give its decision "teeth", either as a demonstration to the offender or to allay its concern that the Department would otherwise release the child too soon.

It was decided to analyse the recidivism data to see whether any light could be thrown on these issues. Court recommendations as to time and Governor's Pleasure decisions were termed "constraints" and cases classified according to whether or not they had been subject to a constraint, with those which were being further sub-classified according to whether or not the constraint had been observed within the centre, to the extent of 75% of the recommended period. The point of 75% observance is that this represents full compliance if 25% "remission" has been allowed for good behaviour, as would apply with a prison sentence. Obviously, by definition, the Governor's Pleasure decision was fully satisfied.

Only 8% each of the Hillston and Nyandi cases were subject to constraints, in contrast to 32% of the Riverbank cases. Overall, about two-thirds of the constraints were observed to the 75% level or above, sometimes exceeding the period recommended by the Court. Of the ten cases with a constraint observed to less than the 75% level, one involved an incorrectly endorsed Court Order and was not subject to constraint at all. Another three of these ten cases were transferred to institutional annexes and detained for further periods which together with those periods already spent in the centres, satisfied each recommendation to a 75% level.

As far as offence rates in the pre-Intervention period were concerned, at Hillston and Nyandi the "no constraint" groups were lowest and the group with "constraints" observed to 75% level and above were the highest, as one might expect. But surprisingly, the trend was in the opposite direction at Riverbank.

In regard to offence reduction, all centres obtained similar results for the "no constraint" cases to those obtained for the cases who were released before 75% of a constraint had been satisfied. This could be taken to imply that if there is a departure from a Court recommendation a similar degree of success is achieved to that obtained overall. The results in regard to those cases which had constraints observed to the 75% level and above were inconsistent and do not permit any conclusions to be drawn at this stage. The one thing which is evident from this data, however, is the substantial degree of compliance by the Department with Court recommendations relating to length of detention.

#### 4.2 Number and Length of Admissions

##### Relevant Table: 4.2.1

In Section 2.6 the relationship between recidivism and the number of past admissions was examined. Here the relationship between recidivism and the number and overall length of admissions after Intervention is considered. For purposes of this analysis, only admissions to the centre in question were counted, which produces a slight problem in the Hillston data in relation to the eleven cases which went on to Riverbank. All things considered, however, this is unlikely to have had a material bearing on the overall results.

Cases were classified according to whether they spent 0 - 45, 46 - 90, 91 - 135 or more than 135 days, in total, in the nominated centre after Intervention. Each group was then sub-

classified according to whether this time had been accumulated in one admission, or in more than one admission. There was a reasonable spread across most categories for all centres, except that Nyandi had few cases staying for more than forty-five days in single admissions, reflecting its general practice of relatively short stays followed, if necessary, by frequent but even shorter readmissions.

It was difficult to discern any trend in pre-Intervention offence rates and the picture was not generally clear in relation to offence reduction. For Hillston and Riverbank improvement appeared to be similar for single and multiple admissions within each of the 46 - 90 and 91 - 135 day groups, suggesting that if the number of admissions has any bearing, then overall it is being determined appropriately in most cases.

Of the 0 - 45 day groups at each centre those with single admissions showed clearly better improvement than the multiple admissions. On the face of it, this could suggest that one relatively short stay is better than a few very short stays, but equally it could be that the single admissions were new cases whilst the multiple admissions were children previously dealt with by the centres and who were being readmitted because of unsatisfactory behaviour.

Likewise, there is a patchy trend suggesting that improvement declines as overall length of stay increases, but this may be merely reflecting a trend for the least promising cases to be detained longer.

Small samples in a number of categories detract from this analysis, but in any case it is difficult to know what interpretation to place on those trends which are suggested by the data. If any trends are confirmed by subsequent Study Periods, then a separate and more experimentally oriented investigation could be needed to explain them with certainty.

### 4.3 Lifestyle After Intervention

Relevant Tables: 4.3.1

4.3.2

5.2.1

The reasons for examining recidivism in relation to lifestyle were discussed above in Section 2.4, which dealt with lifestyle before Intervention. On similar grounds it was decided to examine lifestyle after Intervention, and this was defined along similar lines.

It is difficult to know how to interpret most of the trends which did emerge, for even though they were fairly clear and had some consistency between centres, many of the samples tended to be small and underlying explanations for some of the results were not readily apparent.

Most cases were in the "home or extended family" category and from Table 5.2.1 it is evident that most of these had been similarly classified for the pre-Intervention period. Because this group was so highly represented, its pre-Intervention offence rates and offence reduction figures were similar to the average though, in the case of the latter, at no centre less than the average. In other categories, consistent trends in pre-Intervention offence rates were not discernible. In regard to offence reduction, consistently good results were obtained for the "open institutional type care" and "A.W.O.L." categories. Results for the "mixed" group were about average. Less improvement was shown by the "private board" groups.

A marked deterioration was shown by a small "institutional annexes" group at Hillston, but on closer inspection this was found to be due to one particularly unsuccessful case whose spate of offences was committed after discharge from the annexe. This reinforces a point of methodology, namely, that

this programme examines the performance of groups of children and does not directly evaluate alternative training options as such.

Further enquiry was conducted to a certain point concerning the "open institutional type care" and "A.W.O.L." groups. In regard to the former, there was no clear trend as to the type of institution involved, such as might explain what was a surprisingly good result, particularly in view of relatively high pre-Intervention offence rates. Likewise, explanations are not readily apparent for the result with the "A.W.O.L." groups, though it does appear that a measure of family support may have been afforded in some cases. Certainly the "A.W.O.L." result is not reflecting a gap in our information, as all but one of the children concerned had been located at the time of analysing the data.

A further analysis, examining relative stability of lifestyle, produced a clearer result, more in accordance with expectations. The number of life-style changes in the post-Intervention period was compared with the number in the pre-Intervention period and cases grouped into five categories according to the degree of change.

There is a design problem in the analysis, which cannot be economically corrected for this or the next few Study Periods, for which data has already been collected. The problem relates to admissions to institutions, which produce one life-style change on admission and another on discharge. In analyzing the data this was compensated by subtracting one lifestyle change for each admission to the nominated centre, but no distinction could be made between those cases which were discharged to the same lifestyle from which they were admitted and those who were not, or between those who were released from the same institution to which they were admitted and those who had an intervening transfer. In short, there is a degree of approximation which has to be accepted, but which is unlikely to have had a material bearing on the results.

A clear trend emerged at all centres favouring those groups which showed a reduction in lifestyle changes. In general, the degree of offence reduction improved as the relative improvement in stability increased with those groups which experienced decreased stability being least successful. Whilst it is not possible to show which is cause and which is effect, from a practical viewpoint, it seems reasonable to think that efforts to improve lifestyle stability may be accompanied by an enhanced reduction in offences.

A final point here is that Table 5.2.1 shows that with the exception of the "home or extended family" group the majority of cases were moved into a different lifestyle after Intervention. Most of those who did remain were "mixed" lifestyle cases but even the total number of those was reduced from thirty-eight to twenty-six. This implies, as experience affirms, that attention is already directed by community support staff to the matter of appropriate lifestyle.

In all, this presents as a most interesting area in respect of which clarification will need to be sought from future Study Periods. But if a tentative conclusion is to be drawn at this stage, it would be that stability of lifestyle, which of course implies appropriateness of lifestyle, may be more important than the specific nature of any particular lifestyle as such.

#### 4.4 Institutional Responsibility

Relevant Tables: 4.4.1

4.4.2

The final area which was examined related to the proportion of the post-Intervention period that was spent under the direct supervision of the community support staff of the centre concerned. The Department strongly favours this arrangement and in fact, sees community support staff as an

integral part of institutional "systems", each system comprising the centre, its annexes, its community support staff and various other resources such as private board placements, interested employers and so on.

It was therefore decided to examine recidivism in relation to the degree of direct institutional-based community support, i.e. "institutional responsibility" after Intervention to see whether this type of supervision was associated with better results than independent, non-specialised supervision by the Department's field service. But the same methodological problem arises again, because direct institutional responsibility is maintained for children in the metropolitan area, whilst field responsibility is offered to children who go to the country. As was discussed in Section 2.3 above, these groups may not be comparable. Certainly, as far as the boys are concerned, there is an ethnic difference. The analysis was therefore conducted separately for metropolitan and country cases, as determined by normal place of abode in the five years before Intervention.

Cases were classified into six groups according to the number of days of institutional responsibility, with 0 and 180 days forming the two groups and the remainder being based on forty-five day-increments.

As anticipated, most of the country cases were in the 0 and 1 - 44 day categories, whilst most of the metropolitan cases were in the 180-day category, indicating that children were generally placed after Intervention in accordance with their normal place of abode. However, whilst it was not altogether clear, there appeared to be a tendency for children with higher pre-Intervention offence rates to move from the country to the metropolitan area and vice versa, suggesting that a complete change in place of abode is seen to be necessary for success with such children.

Unfortunately, the offence reduction figures were too erratic to permit any conclusions, no doubt due to small samples in most of the categories. The results of further Study Periods will be needed to identify any trends in this analysis and, in passing, it should be noted that conclusions will probably depend to some extent on the outcome of longer term analyses in relation to ethnic identity and normal place of abode.



## Part 4

### OVERVIEW OF RESULTS

The intention of this part of the report is to draw together the more important results of the first Study Period of the Recidivism Monitoring Programme and place them within what is hopefully a fair and balanced context. A review of some central design aspects of the R.M.P. is the most appropriate starting point, because the key to understanding any statistics is a firm appreciation of how they have been derived.

Firstly, the R.M.P. basically provides descriptive information from which cause and effect must be inferred. This causal relationship is implicit in an assumption underlying the entire programme; namely, that it is possible to monitor the effectiveness of the centres through offence data. More specifically in this report it has been assumed that if centres were not effective, the number of offences would increase or remain the same. Trends which had some consistency and which differed from this expectation have been assumed to occur as a result of the centres' programmes.

Secondly, the R.M.P. monitors only in relation to the frequency and quality of offending. Whilst, undoubtedly, this is the most important measure as far as the public is concerned there are other measures of improvement which are related to recidivism but which are not included in the R.M.P. These measures relate to such areas as education, employment, housing and general living habits in the community, all of which receive attention under the Department's present rehabilitative programmes. Furthermore, improvement in such areas should be fairly durable, enhancing a child's opportunity

for choosing a non-criminal lifestyle even in adulthood. By contrast, frequency of offending is a more brittle measure, in the sense that it is influenced by adverse social pressures which compete with those exercised by the justice system. This is especially so with juveniles who are acknowledged to be more impressionable, as a rule, than adults.

Thirdly, it is the overall effectiveness of the centres which is monitored by the R.M.P., rather than specific elements of their programmes. Each case involves an individualised "mix" comprising various programmes, detention of a certain duration, supervision by community support staff, a certain placement on release, possible further admissions to the centre, and so on. It is the effectiveness of this overall mix which continues throughout the post-Intervention period, that is monitored by the R.M.P. - not just the programmes applied during the period of detention.

Fourthly, Intervention is essentially an arbitrary point in time. It marks the end of the "pre-Intervention" period, which is used to collect a baseline measure, and the beginning of the post-Intervention period, which is the period in which the centre's performance is monitored. Emphasizing this point is the fact that Intervention is not necessarily an individual's first admission, although it is the first admission for treatment purposes in the particular Study Period. In such circumstances, the baseline against which the centre's performance is measured may in itself contain a degree of improvement brought about prior to Intervention, and it could perhaps be said that this "loads the dice" against the centres as far as demonstrating effectiveness is concerned.

Fifthly, the R.M.P. confines itself to a specific time frame, as any study of this nature must. The time frame is that period required to complete 180 "community days". It should

be particularly noted that this is not the same as a "six months' follow up". For one thing, it is not a "follow up" in the usual sense of that expression because during the 180 days a centre has a continuing influence which is also under evaluation as part of the total management of a case. Furthermore, the 180 days may be accumulated in an unbroken sequence or intermittently over a period of up to two years. Hence, although the opportunity to offend is held constant for all cases, the total period of post-Intervention monitoring varies with the longer periods inevitably relating to the more difficult cases.

Some may ask whether even two years is long enough and to this there is no straight-forward answer. From a practical point of view, a monitoring programme can hardly allow longer, if it is to produce information which is sufficiently up-to-date to be useful. But a more fundamental issue to consider is how durable one can expect the effects of a centre's programmes to be. Sooner or later children must be returned to the community and once this has occurred they are potentially exposed to anti-social influences in the same way as any other child. If such influences prompt further offending after, say, three or four years, can it be said that this reflects adversely on a centre's work? Of course, the question is rhetorical, but one's view on this matter will influence the context in which the results of the R.M.P. are read.

A further point which should be made here, is that an extension of the monitoring period would not necessarily affect the overall results of the Programme, but if it did the effect could well be in a positive direction. The reason for this is that both pre and post-Intervention monitoring periods would be extended equally. If an extended pre-Intervention period incorporated a greater number of additional offences than did the extended post-Intervention period, the percentage reduction in offences would increase.

Such a situation is quite possible, if not likely, because the 180 day pre-Intervention period incorporated only 44% of all offences committed by the cases concerned prior to Intervention.

Sixthly, the R.M.P. sample is one with inherent validity - it incorporated all children admitted, for treatment purposes, to one of the three centres during a particular six-month Study Period. These are not all the children dealt with by the centres concerned but they are, by definition, those whose behaviour is causing most concern. Not included are those admitted solely for purposes of default, remand or short periods of isolation, and those managed entirely in hostel annexes or the community.

In the first Study Period, from 1 January to 30 June, 1979, a total of 198 cases were collected. From these, ten had to be excluded from the analysis because the individuals concerned were unable to complete the required post-Intervention community time. This left a sample of 188, which is quite reasonable from a research viewpoint, at least as far as the broader analyses are concerned. It did become too "thinly spread" for some of the more detailed analyses and for these it will be necessary to await the results of a few Study Periods when, in some areas, firm conclusions may be possible. However, this is a design strength and not a weakness because, in the event of a consistent trend, repeated analyses will contribute a greater certainty than one single analysis.

The excluded cases represent a genuine research problem, in that there is no completely satisfactory way of handling the data which relates to them. They are not comparable to the other cases because they have not had the same opportunity to re-offend and so inclusion in the study would have introduced and obscured a degree of error.

At the same time, this group cannot be completely ignored, for as a group they increased their offending. If their pre and post-Intervention offence data were to be included, regardless of the amount of post-Intervention time they accumulated, then the overall offence reduction figure would be reduced by about a fifth, from 54% to 43%. It should be noted that this effect is out of all proportion to the numbers of cases concerned: 3% of the sample for Hillston and 10% for Riverbank. Details are summarised in the Appendix to the Volume of Tables.

This in turn raises an important point which is that there are, in any case, some individuals in the sample of 188 who have had a disproportionate bearing on the overall offence reduction figures obtained. Bearing in mind that the purpose of a monitoring programme is to clarify and not to obscure what is happening, a worthwhile future development of the Recidivism Monitoring Programme would be to identify these as atypical cases and examine their effect on the data. The impression one gains is that if, say, 10% to 15% of the total sample were to be treated separately then overall offence reduction for the remaining 85% to 90% of the sample would be in the vicinity of 65%.

Finally, before proceeding to draw together the more conclusive results of the first Study Period, it should be noted again that the Recidivism Monitoring Programme uses the term "recidivism" comparatively; that is, an earlier rate of offending is compared with subsequent performance. In this sense it is a measure of improvement (or deterioration), improvement being said to have occurred when there has been a reduction in the rate of offending. "Recidivism" has also been used in other studies elsewhere to signify whether or not any re-offending at all has occurred. With the Recidivism Monitoring Programme the view has been taken that rarely does offending suddenly cease at a point in time. Rather, in response to treatment it should diminish over time.

On this basis, an offence reduction of 54% was achieved for the 188 completed cases. The result was similar for all centres. Overall, the reduction represented 1,004 fewer offences of all kinds in the post-Intervention period.

Comments concerning the effects of the incomplete and the atypical cases have already been made and in the absence of data which distinguishes them from the main stream of the sample, perhaps the safest generalisation is that offence reduction was in the order of 50%. In any case, precision beyond this point could, for the present, tend to mislead because some fluctuation around the "true" average is to be expected from one Study Period to another. At this stage, we do not know how 50% rests in relation to this average, though preliminary inspection of the trends in later Study Periods suggests that it is reasonably close.

There is no reason to believe that this result may have happened by chance. Intervention occurs when and because the behaviour of children is deteriorating. Furthermore, per capita offence rates in Western Australia rise progressively throughout the age range relevant to this study. On both these grounds one would expect a deterioration, if nothing effective occurred after Intervention. In this context a reduction in the order of 50% stands on its own as a very considerable difference and improvement.

The situation is just as encouraging when one looks at individual children. Of all offenders in the pre-Intervention period, 41% did not offend in the post-Intervention period. Once again this is an important result in what amounts to an alternative definition of recidivism, albeit one not regarded as the most useful, as already indicated. A further 25% improved in the sense that they moved into a category of less frequent offenders. Equally significant was the finding that offenders consistently showed improvement in whichever area had been the principal cause of concern, for example, assailants showed a reduction in person offences.

Much has been written over past years deprecating rehabilitation. It is not uncommon to see journal articles with headings such as "Delinquency Reform Fails", "Is Rehabilitation Dead?" "Residential Centres fail to reduce Crime", referring to juvenile rehabilitation. If such claims are generally correct then Western Australia has some cause for satisfaction because the R.M.P. has revealed a very different picture in relation to Hillston, Riverbank and Nyandi. None of the foregoing results are consistent with a generalised view that these three centres fail to reduce crime or, worse still, that they provide breeding grounds for it. On the contrary, they indicate that a substantial reduction in offending can be expected to follow admission.

Furthermore, it appears that substantial improvement can be expected with various groups of individuals who are commonly thought to be especially poor prospects for existing institutionally-based programmes. The groups concerned are frequent offenders, Aboriginal children, children with several previous admissions and older children. The results of the first Study Period indicated that all these groups did as well as, and in some cases better than, their respective counterparts.

In general, however, very little emerged from the study to suggest that certain types of offenders are more likely to do better than others. Possibly as further six monthly Study Periods are completed, more trends will emerge. But for this Study Period the only characteristic which appeared likely to have any predictive ability was whether or not a child tended to offend in company or alone. Most children offended only in company and there was a consistent indication that these were more likely to become non-offenders than those who offended alone. Whether this is in fact so, or whether it was merely a chance result remains to be seen from further Study Periods.

Perhaps surprisingly the evidence at this stage suggests that it may not be meaningful to think in terms of certain types of offenders, such as "car thieves" or "assailants". Whilst most children's records for the pre-Intervention period could be clearly categorised in such terms, there was little to suggest that those who did reoffend would tend to be characterised by the same types of offences or, as previously noted, that one group was more likely to improve than another.

There are two ways of interpreting information such as this. Firstly, one could say that different groups of children appear to have inherently equal prospects of success. Alternatively, it could be speculated that their inherent prospects of success differ but that flexibility of programming compensates for these differences. Whilst there is no means of resolving this question it should be noted that the second explanation is in keeping with one of the original assumptions underlying the R.M.P., namely, that knowledge of differing success rates with various groups could guide programme development and lead to equalisation of these rates.

A similar problem of interpretation arises in respect of various analyses which were intended to reflect on Departmental practices, and essentially one is left with descriptive information only. However, few trends emerged. From a programming viewpoint, there was a useful indication that offence reduction may be associated with increased stability of lifestyle. In addition, the data revealed substantial compliance by the Department with Court recommendation as to length of detention, and an equivalent degree of success in respect of the small number of cases where such recommendations were not fully observed, as compared with those for whom no recommendations were made.

Overall, then, the first Study Period of the Recidivism Monitoring Programme has provided for the first time a consistent and objective measure of the effectiveness of



the Department's three institutionally-based rehabilitation programmes for delinquents. It has produced little in the way of predictive indicators of recidivism but has challenged a number of commonly held views about the prospects of success for different groups of offenders and, indeed, young offenders as a whole. Above all, however, it has produced evidence that the three centres concerned are making worthwhile gains in terms of rehabilitation, as an offence reduction figure in the order of 50% would appear to be unusually high.

## Part 5

### SUMMARY

In recent years there has been growing recognition of the role of evaluation in achieving accountability in the delivery of welfare services. This principle was strongly affirmed in the Baume Report, tabled in Federal Parliament in November, 1979.

During 1978 the Department for Community Welfare in Western Australia decided to introduce a standardised system of evaluation for its three major training centres for juvenile delinquents - Riverbank, Hillston and Nyandi. Whilst these centres have various objectives with children, it was considered that offence reduction was clearly the most important goal and therefore the main criterion to be applied in evaluating effectiveness.

Accordingly, a "Recidivism Monitoring Programme" (R.M.P.) was introduced on 1 January, 1979, having been planned and designed by the Superintendents of the centres concerned in conjunction with the Department's senior administrative and research staff. Financial assistance towards the initial phase of the Programme was provided by the Criminology Research Council.

The Recidivism Monitoring Programme uses the term "recidivism" comparatively; that is an earlier rate of offending is compared with subsequent performance. In this sense it is a measure of improvement (or deterioration), improvement being said to have occurred when there has been a reduction in the rate of offending. "Recidivism" has also been used in studies elsewhere to signify whether or not any re-offending at all has occurred. With the Recidivism Monitoring Programme the view has been taken that rarely does offending suddenly cease at a point in time. Rather, in response to treatment it should diminish over time.

The Recidivism Monitoring Programme is designed so as to be an ongoing series of studies, based on six month "Study Periods". Each period corresponds with either the first or second half of a calendar year and it is during these periods that the cases for each study are collected. The cases comprise all those children admitted for training purposes at some time during a particular "Study Period".

The first admission by each child during a "Study Period" is regarded as a cut-off point, referred to as "Intervention". Offence-related data for each person are then collected for 180 days before and 180 days after "Intervention" and compared. In determining these 180 day periods only days when the individual is in the community and therefore in a position to commit offences are counted. Some of the individuals concerned have previously been to the centres and some are admitted more than once during a "Study Period". For everyone, however, "Intervention" remains the time of first admission during the particular "Study Period".

Ideally, it is considered that data should be analysed within about two years. However, experience has shown that about twenty-seven months is required for at least 90% of cases at all centres to complete their 180 post-Intervention days in the community. The remaining cases, unable to complete this requirement due to various factors such as gaol terms and other Court imposed constraints, have to be excluded from the data analysis.

The first Study Period involved a sample of 188 after ten cases had been excluded due to non-completion of the post-Intervention period. Eighty-one percent were boys and nearly all were aged between thirteen and seventeen years inclusive.

In the pre-Intervention period for the overall sample of 188 there was a total of 1872 offences, of which property offences accounted for 84%, offences against the person 2% and good order offences 14%.

In the post-Intervention period there were 868 offences, representing an overall reduction of 54%. This is regarded as a very considerable difference and improvement, bearing in mind that deteriorating behaviour at Intervention and a tendency for offence rates to rise with age would both suggest that an increase in offending should be found if nothing effective was done after Intervention.

The situation is equally encouraging in relation to individual children. Of all offenders in the pre-Intervention period, 41% did not offend in the post-Intervention period. A further 25% improved in the sense that they moved into a category for less frequent offenders. Further, there was a consistent tendency for improvement to occur in whichever area of offending had been the principal cause of concern, for example, assailants showed a reduction in person offences. The excluded cases were small in number but as a group would clearly have gone against the overall trend, showing an increase from 187 offences in the pre-Intervention period to 320 in the incomplete post-Intervention period. It must be accepted that had it been possible to include these cases, the overall offence reduction figure would have been lowered to 43%, an effect out of all proportion to the number of cases involved.

However, this has drawn attention to the fact that even within the overall sample of 188, there were a small number of cases which had a disproportionate influence on the overall data. In the interest of gaining even more informative data, it is intended to explore the possibility of identifying such cases and reporting on the two groups separately. It appears there may be a "hard core" of about 10% who perform quite badly, and separate data may provide clues as to how they can be more effectively dealt with.

Several analyses were conducted with a view to seeking some predictive indicators of recidivism. Little of substance was found from the first Study Period but it is hoped that clearer trends will emerge once a few Study Periods have been completed. At this stage it is difficult to distinguish trends from random fluctuations when analysing in finer detail.

However, even at this stage some clear trends with interesting implications have emerged - implications which run counter to some commonly held views about the effectiveness of juvenile institutions. In summary these were:-

- (a) more frequent offenders responded as well as less frequent offenders;
- (b) Aboriginal children and country children (which tended to be one and the same) did as well as other children;
- (c) the number of previous admissions to an institution appeared to have no bearing on recidivism;
- (d) there was no clear trend favouring either younger or older children;
- (e) there was no evidence to suggest that certain "types" of offenders, for example car thieves or assailants, do better than others or, indeed, that such types have any real meaning;
- (f) most children offended only in company and these appeared to be better prospects than those who offended only alone;
- (g) improvement appeared to be associated with increased stability of lifestyle.

In conclusion, the Recidivism Monitoring Programme has introduced a clear and consistent process of evaluation of institutionally-based work at the centres concerned. To date its most important product has been a firm refutation of any generalised view that juvenile institutions fail to reduce crime or, worse still, that they provide a breeding ground for it. In time, the programme should go on to provide a variety of other ongoing measures useful in management of the centres concerned. Apart from the issue of public accountability, such information is essential if the ongoing effectiveness of a centre is to be maintained and if the results of new programmes that are introduced are to be measured reliably.