

Stopping Violent Offending in New Zealand: Is Treatment an Option?

Steve Berry

Psychological Service, Department of Corrections

A quasi-experimental design using survival analysis and other measures showed that a community-based, residential treatment programme for violent offenders could significantly impact on reconviction patterns of a group of men previously convicted of serious violent offences. The results are important because of the paucity of data attesting to treatment success with serious violent offenders and, more specifically, with offenders who are Māori. The implications of these results and of the data collected on non-completers are discussed.

The notion that nothing works in treating offenders has been debunked (Cullen & Gendreau, 1989). However, the literature concerning the efficacy of specifically treating violent offenders is limited. For instance, Polaschek and Collie's (in press) review found few methodologically sound outcome studies to guide the development of violent offender programmes. In fact they located just four studies that reported violent recidivism outcome data on treated, generally violent offenders. Other authors (e.g., Berkowitz, 1993; Meloy, 1995; Polaschek & Reynolds, 2001; Quinsey, Harris, Rice & Cormier, 1998) have concluded that there is equivocal evidence of treatment efficacy with adult violent offenders

and that new treatment technologies are needed.

The social and financial costs of violent offending are significant (Polaschek & Dixon, 2001). Violent offending is a particular problem for New Zealand, highlighted by Spier (2001), who reported that, although convictions for violence have shown a decreasing trend to the year 2000, the number of convictions for violent offences in 2000 was still 53% greater than the figure in 1991. Violent offending ranks as the most serious type of crime, attracting relatively much higher terms of imprisonment than other crimes (Spier, 2001). A report by the Department of Corrections (2002) reveals that imprisonment rates (per 100 000 population) in New Zealand (150) are high compared to other similar jurisdictions such as Canada (120), Australia (109), England and Wales (122) and Scotland (115). In 2000 the 2132 jailed violent offenders represented 27% of the 7931 people imprisoned in New Zealand's jails (the second largest grouping after property offenders). Re-offending is an issue because, in the two years after reconviction in 1995, 21% of violent offenders were reconvicted for a violent offence (Department of Corrections, 2002).

Māori make up just under 15% of the New Zealand population (Statistics New Zealand, 2001) but are heavily over-represented in convictions statistics. Māori offenders accounted for approximately 45% of all convictions for violent offences in 2000; Europeans accounted for about 37%

and Pacific Islanders for approximately 15% of convictions for violence (Spier, 2001). The proportion of the prison population that is indigenous in New Zealand is 51%, considerably higher than comparison countries such as Canada (17%) and Australia (19.8%). Further adding to the dismay concerning these statistics for Māori is international research, such as that of Canadian researcher Zellerer (1994), that describes poor outcomes of treatment given to "aboriginals" (a term used by Zellerer). Zellerer concludes that non-native counsellors have difficulty helping even highly motivated clients.

One New Zealand initiative designed to address violent offending is the Montgomery House Violence Prevention Programme. The programme began in 1987 as a residential treatment option that employed social learning methodology in the treatment of groups of men who repeatedly commit serious violent offences. An uncontrolled evaluation, by Polaschek and Dixon (2001), using data generated by residents of the first "functional phase" (1987-1990) of the Montgomery House programme, suggested grounds for optimism that the programme was having a beneficial effect. Conviction rates for all those who started the programme were lowered in the post-programme phase and there were also some changes in the desired direction on psychometric measures.

Despite the promising early results presented by Dixon and Polaschek (1992a, 1992b) significant problems in the operation and integrity of the

programme emerged from 1990 onwards (Hahn, 1993). The integrity of the programme deteriorated to such an extent that it was recommended that the programme should be closed or completely overhauled (Hahn, 1993). Decision-makers chose the latter option and assigned me the task of assisting with the restructuring of the programme. The problems I encountered as I commenced the restructuring task, were documented (Berry, 1994). These included; absence of integrated and updated treatment manuals; poorly defined and undocumented offender assessment and programme integrity monitoring processes; the programme had a poor reputation with referral agents; staff numbers had been depleted; the focus of the programme had shifted from preventing violent offending; resources to undertake the programme were considered inadequate and few operational guidelines were available. These difficulties were systematically addressed (Berry, 1995) and in 1995 the programme was re-opened.

The promising results noted by Dixon and Polaschek (1992a, 1992b), and later Polaschek and Dixon (2001), were contrasted by the more methodologically sophisticated longer-term study of Behrnes (1996). In his evaluation Behrnes used a pre-treatment/post-treatment quasi-experimental design with matched assignment to the control condition and almost 6 years of follow-up. Behrnes found that there were no significant differences between the completer group and the control group on any of a range of outcome measures following intervention. The Behrnes study drew from the sample studied by Dixon and Polaschek (1992a, 1992b) and Polaschek and Dixon (2001).

This paper describes the programme as it ran during 1995 and 1996, and presents reconviction statistics comparing controls with a sample of violent offenders who started during that time. In contrast to the early evaluation provided by Polaschek and Dixon (2001) this study utilises a subject-to-subject matched control design. Additionally, this study is intended to add to the knowledge gained by the Behrnes study in that it

reports results from participants who attended a better resourced and modified version of the Montgomery House programme.

Method

Programme Description

Montgomery House is a large house located in suburban Hamilton, owned and administered by the Prisoners' Aid and Rehabilitation Society. Just as it did in the earlier evaluations, during this evaluation period Montgomery House provided a structured, cognitive behavioural programme based on social learning principles (described in Polaschek & Dixon, 2001). The fundamental underpinnings of the programme were drawn from "what works" researchers such as Cullen and Gendreau (1989). A guiding principle of the programme was that violent behaviour is learned and offenders can learn alternatives to substitute for violence. A key emphasis was that a necessary first step to residents stopping their violence was that they accepted responsibility for their violent behaviour, and rejected violence as a means to achieve their goals. Facilitators were required to use a range of teaching methods to emphasise this principle, including role-play, self-disclosure, didactic teaching, setting reading homework, role-modelling, and skills practice.

Montgomery House's mainly Māori staff and mainly Pakeha psychologists from the Department of Corrections provided treatment that was delivered in sessions and grouped into modules. The process and content of sessions was documented in treatment manuals. Modules included: *Violence Prevention, Relationships, Culture, Problem-solving, Addictions, Communication, Social Education and Health*. Violence Prevention, relationships and culture modules each consisted of two, two-hour sessions per week. Health, social education (information about social agencies), problem-solving and communication modules were also two-hour sessions but were only provided once a week. Residents also attended three two-hour physical fitness sessions per week and participated in weekend camps for the first four weekends of each programme.

A case management committee (consisting of a Probation Officer, a Department of Corrections psychologist and assigned Montgomery House staff) met with each resident, generally on a weekly basis, to discuss progress and advise on recommended actions for the resident for the following week.

The programme was of ten weeks duration and intensive. Each resident participated in structured, supervised activity for an average 47 hours per week. Treatment was delivered in the context of a highly structured, supervised environment designed to promote group communication and support, non-violent peer confrontation of antisocial attitudes, adherence to community rules, and respect for others. Participation was voluntary, but once offenders consented, it was expected that they would participate in all aspects of the programme.

During the period covered by this evaluation, approximately 80% of those who began the restructured Montgomery House programme were Māori, since 85% of referrals were Māori. I speculated that this referral rate for Māori reflected referral agents' (typically probation officers and prison unit managers) impression that Montgomery House was a programme primarily for Māori. This impression may have arisen because the referral package (Montgomery House, 1994) emphasised Māori processes and protocols operating within the programme. Also, seven of the eight staff members employed to deliver the programme were Māori. However, there are also high numbers of Māori people in the Waikato/Bay of Plenty region (Statistics New Zealand, 2001), so relatively more Māori violent offenders were likely to be referred to the programme.

In accordance with the high number of Māori residents, facilitators and other staff at Montgomery House emphasised Māori processes and content during programmes. While at Montgomery House, all residents learned basic Māori language skills and kapahaka (songs and dances), and they learned to understand and recite their ancestry (a process called whakawhanaungatanga). Residents usually visited a marae at least once during the programme. Staff

continually emphasised that residents were expected to behave as members of a whanau (extended family). Māori myth and tradition were common topics of discussion. Traditional Māori ceremonies marked the opening (powhiri) and closing (poroporoaki) of each programme. Staff members were expected to role-model, then encourage residents to use, karakia (incantations) on a daily basis. Staff regularly used whakatauki (Māori proverbs) to illustrate aspects of programme content.

Men were referred to Montgomery House directly from the courts or prison. Most referrals (77%) came from the Waikato/Bay of Plenty region.

Evaluation period programme participants

During 1995 to 1996 Montgomery House received 135 programme referrals. The assessing psychologist rejected 53 of these for a variety of reasons, including: lack of motivation (39); limited intellectual ability (4); minor and/or infrequent violent offending (3); inability to speak English (1); unwillingness to cease drug use (3); and psychiatric disorders (3). Several men were accepted into the programme but had sentences that prevented participation. Others withdrew once they became more aware of the challenges the programme posed. One offender was unable to undertake the programme because the intake for which he was eligible was full.

A psychologist interviewed each man who applied, or was referred, to enter the programme. Before the interview the psychologist collected and considered pre-sentence reports, psychological and psychiatric reports, Police offence descriptions, Judge's Sentencing Notes and lists of previous convictions. The psychologist then prepared a psychological report detailing: referral information, current circumstances, offending history and current offending status, impressions of the candidate's suitability for the programme, a psychological formulation of the candidate's offending history and a recommendation on whether the client should be accepted for the programme.

Eighty-two convicted offenders began the programme during the

evaluation period. All had at least one conviction for violent offending. Eighteen of these 82 did not complete the programme, giving a completion rate of 78%. Of the 64 participants who completed the programme in the evaluation period, 44 were paroled from prison to attend; the other 20 were serving community sentences. Of the 33 offenders serving community sentences who started the programme, only 20 (61%) completed. In contrast, 44 of the 49 offenders (90%) who started the programme on parole, completed it.

Table 1 shows that there were almost no differences in demographic characteristics between the completers and non-completers groups, with the exception that the completers group contained Pacific Islanders and married men in contrast to the non-completers group which contained no married men or Pacific Islanders.

An accurate quantitative measure of re-offending risk is the probability of reconviction, based on the reconviction model of Bakker, Riley and O'Malley (1995). The reconviction probability (RoC) as described by Bakker, et al. is defined as the likelihood, expressed in percentage terms, of an offender being reconvicted of a criminal offence over a five-year period of being at liberty to offend. This model was employed to produce reconviction probabilities for all offenders in the present study, using a logistic regression model to previous

criminal histories. RoC scores for completers ($M=.90$, $SD=.11$) and non-completers ($M=.90$, $SD=.12$) were not significantly different: $t(79) = .15$, $p=0.9$.

Conviction Data: Comparison with Matched Control Groups

In June 1997, conviction histories of all those who started the Violence Prevention Programme were extracted from the New Zealand national convictions database. All men convicted of a violent offence ($n=3649$) in New Zealand in 1990 were used to draw matched control groups for comparison with treatment completers and non-completers.

Convictions for both groups were coded using New Zealand Police offence codes. Sexual attacks and property destruction convictions met admission criteria and were included as convictions for violence in the evaluation because, although these are not officially classified as violent offences, they fitted the definition of violence taught on the programme.

Each treatment group offender in the sample was matched to an offender from the control group using a subject-to-subject matching process. A control was only selected when he had the same ethnicity and length of pre-programme period (refer to Figure 1). Comparisons were then made to find a control for each treatment group member that minimised differences on the following

Table 1. Demographic details of men completing and not-completing the Violence Prevention Programme between January 1995 to December 1996

Category	Subcategory	Completers ($n=64$)	Non-completers ($n=18$)
Age	Average age	28 years (9.7)	28 years (10.2)
Ethnicity	Māori	52 (81%)	15 (83%)
	Pacific Islander*	8 (13%)	0
	Caucasian	4 (6%)	3 (17%)
Relationship status	De facto	16 (25%)	4 (22%)
	Single	22 (34%)	9 (50%)
	Separated/divorced	15 (23%)	5 (28%)
	Married*	11 (17%)	0
Educational level	Completed Form 5 (Yr 11)	4 (6%)	0
	Did not complete Form 5	60 (94%)	18 (100%)
Employment history	Manual	52 (81%)	15 (83%)
	No work history	10 (16%)	2 (11%)
	Service	2 (3%)	1 (6%)

* $p < .05$

matching variables: age at first violent offence, number of violent offences, number of non-violent offences, amount of time spent in prison, maximum seriousness of offending, rate of pre-programme violence and non-violence and probability of reconviction. The date of birth of each control had to be within four years of the date of birth of the person to whom he was matched. All control selections were compared with completers and non-completers to ensure those participating in the programme were not included in the control groups.

The Policy and Research Division of the former Department of Justice developed the Seriousness Scale (Spier, Luketina & Kettles, 1991) that was used to determine maximum seriousness of offending for each offender in the study. The Seriousness Scale ranks only imprisonable offences (non-imprisonable offences have a ranking of zero). The score assigned to each offence is the average number of days imprisonment imposed on every offender convicted of that offence between 1990 and 1994. Spier et al. (1991) averaged days of imprisonment over imprisoned and non-imprisoned offenders. The maximum score is 3650 (the score for murder), the minimum, 0.2. The minimum score was reserved for offences that are imprisonable but rarely result in a custodial sentence (Spier, personal communication, March 1996).

Analysis of variance (ANOVA) was used to evaluate the differences between the completer and non-completer groups on all matching variables. Results are displayed in Tables 2 and 3.

There were no statistically significant differences between completers and non-completers and their matched controls on any matching variables, indicating an acceptable match.

Treatment and control groups' conviction histories were categorised into two separate phases: pre-programme and post-programme. Figure 1 is a representation of the way convictions data were categorised into these two phases.

The pre-programme phase began when the offender received his first

conviction for violence, or reached 16 years of age, whichever happened first. It ended when the offender entered the Violence Prevention Programme or, in the case of the control group, on the date of their criterion conviction (the conviction leading to selection as a control subject).

The post-programme phase began when the offender left the Violence Prevention Programme, and ended in June 1997 when post-programme convictions data were collected. The post-programme phase for the control group began the day after their criterion conviction date (if they received a community-based sentence), or on the date they were released from prison for that offence and so had the opportunity to offend. Adjustments were made to the post-programme period for completers and non-completers if their selected controls spent some time in prison during the treatment group post-programme period (see Figure 1). The

mean pre-programme duration for completers was 142 months and for non-completers was 146 months. The mean post-programme durations were 17 and 16 months respectively for completers and non-completers.

Results

Several conviction-related indices were used to compare outcomes for completers and matched controls, non-completers and matched controls and a combined group of completers and non-completers and their controls: frequency of reconvictions; ratings of the seriousness of offending; and latency to reconviction for violence.

Frequency of Reconviction of Completers

During the post-programme phase, completers registered 35.3% fewer convictions for violent crimes than matched controls. There were 33 convictions for violent offences by

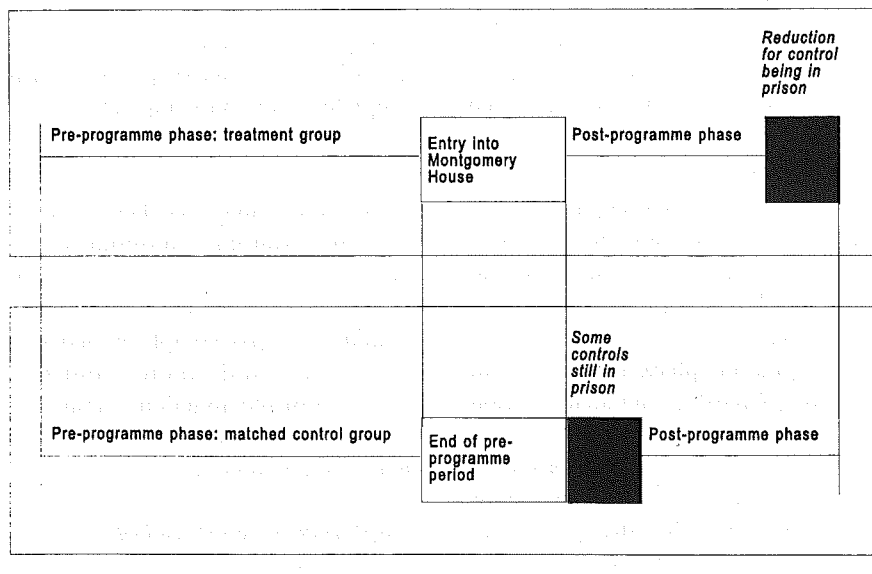
Table 2. Comparison of matching variables for completers and their controls

Variable	Completers (n=64)		Completer Controls (n=64)	
	Mean	SD	Mean	SD
Age at first violent offence (yrs)	19	4	19	4
Total number of offences	32	26	30	24
Number of violent offences	8	5	7	5
Number of non-violent offences	24	23	24	20
Time spent in prison (months)	23	28	25	34
Maximum seriousness of offending	568	652	508	508
Rate of pre-programme violence	0.98	1.1	0.76	0.7
Rate of pre-programme non-violent offending	2.15	2.03	2.64	2.51
Probability of reconviction	0.89	0.11	0.92	0.09

Table 3. Comparison of matching variables for non-completers and their matched controls

Variable	Completers (n=18)		Completer Controls (n=18)	
	Mean	SD	Mean	SD
Age at first violent offence (yrs)	17	2	17	2
Total number of offences	32	30	51	26
Number of violent offences	11	10	10	7
Number of non-violent offences	39	27	40	21
Time spent in prison (months)	36	31	43	43
Maximum seriousness of offending	490	502	470	417
Rate of pre-programme violence	1.05	0.65	1.01	0.67
Rate of pre-programme non-violent offending	4.45	3.95	5.07	3.98
Probability of reconviction	0.90	0.13	0.93	0.09

Figure 1. Model of pre-programme and post-programme phases for conviction analyses.



completers of the Violence Prevention Programme, compared to 51 convictions for violence by the matched control group. This difference was statistically significant ($p < .01$). Completers had fewer convictions in the post-programme phase than the control group, especially in the following categories of convictions: grievous assaults; serious assaults; intimidation/threats; and property destruction. Note that two completers and their controls were excluded from the analysis because of anomalies in their data so the sample size was reduced to two groups of 62. These two control offenders were found to have been in prison for the entire post-programme period. Since they had not re-entered the community, probably because of offences committed during their prison sentence, they were excluded from the analysis. This same problem also occurred with one non-completer control.

Seriousness of Reconvictions of Completers

The mean maximum seriousness score (68, $SD = 197.2$) of the completers group during the post-programme period was 49% less than the mean maximum seriousness score for their controls (101, $SD = 273.4$). This difference was not statistically significant ($p = .43$).

Completers' Latency to Reconviction for Violence

One possible measure of the Montgomery House programme's effectiveness is the time to reconviction once an individual has completed the programme. However, many residents had not been reconvicted by the time data collection ceased, making their 'time to reconviction' unknown. A statistical method needs to be selected that allows for the inclusion of these offenders. Survival analysis is a group

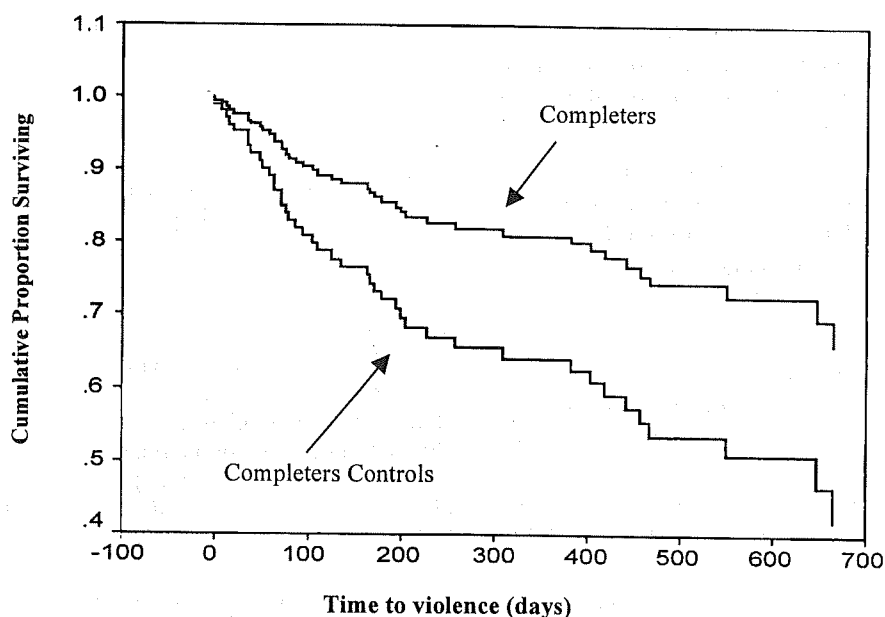
of statistical techniques used to analyse time to a target event, that allows researchers to meet this challenge by analysing results in terms of censored and complete observations. Complete observations are those for which the offender has been reconvicted before data collection stopped. Censored observations are those cases in which the offender has not reoffended before data collection stopped.

Figure 2 shows the first of three survival analyses, using the Cox proportional hazard method. In all of these analyses, proportional hazard regression analyses were also conducted, with the estimated risk of reconviction (RoC) entered into the analysis as a predictor variable. However, in no case was a significant relationship found between RoC and survival analysis outcome. For Figure 2 (treatment completers and their controls), $Wald = .28, p = .56$.

This figure compares the cumulative proportion of completers and controls surviving (not re-convicted of violence) over time, and shows the relative rates at which they failed.

By the end of the post-programme period, 16 of the 62 completers (26%) had been reconvicted of a violent offence. This compared favourably with the matched control group of whom 27

Figure 2: Cumulative proportion of completers and matched controls who survived reconviction for violence during follow-up



(44%) had been convicted of a violent offence in the post-programme period.

The graph in Figure 2 shows that, for approximately the first 50 or 60 days after treatment, the two groups have a similar post-programme attrition rate for violence convictions. After this time, a gap opens up between them. The difference in survival times between the completers group and their matched controls is statistically significant; Cox's $F(54,30) = 2.1, p=0.01$. The conclusion is therefore, that those completing treatment at Montgomery House are slower to be reconvicted for violent crimes than a comparison group.

Frequency of Reconvictions of Non-completers

A frequency count showed that the non-completers group had more violence convictions post-programme than the control group, especially in the categories of: grievous assaults, serious assaults, minor assaults, intimidation/threats and property destruction. In the post-programme phase, there were 25 convictions for violence, 127% more than controls (11 convictions).

By the end of the follow-up period, 8 of the 17 men (47%) who failed to complete the Violence Prevention Programme had been reconvicted of a violent offence. The matched control group fared equivalently, with six being convicted of another violent offence

(35%). This difference was not statistically significant ($p = .25$).

Seriousness of Reconvictions of Non-completers

The mean maximum seriousness non-completers score for the post-programme phase (283) was 192% more than the maximum seriousness score for the control group (97).

Non-completers' Latency to Reconviction for Violence

Once again, in the survival analysis, risk of reconviction did not predict survival time over and above group membership: Wald=.28, $p=.56$. Visual inspection of Figure 3 suggests that, immediately after discharge from the Montgomery House programme, non-completers were re-convicted much sooner than their matched controls. This difference was not statistically significant; Cox's $F(12,16) = 1.65, p=0.17$. However, given the small sample size and degree of variability, it is possible that this result is a function of low statistical power.

Combined Completers' and Non-completers' Latency to Reconviction

The comparison of the combined treatment group with the combined controls was undertaken because men who drop out of treatment have often

been found to re-offend at a higher rate than untreated controls. Even when it appears that treatment non-completers and completers are equivalent on matching variables, it can be argued that they may still differ on some risk-related variable that wasn't measured. It can then be argued that treatment effects result from selective attrition of higher risk cases (e.g., Hanson, 2000). Alternatively the programme may actually be increasing risk in men who fail to complete it. Therefore, a conservative measure of the total impact of treatment on outcome combines all those who commenced the programme into one group for comparison with controls. This analysis provides some measure of the aggregated effect of the programme on re-offending experienced by the community as a result of the treatment programme's activities.

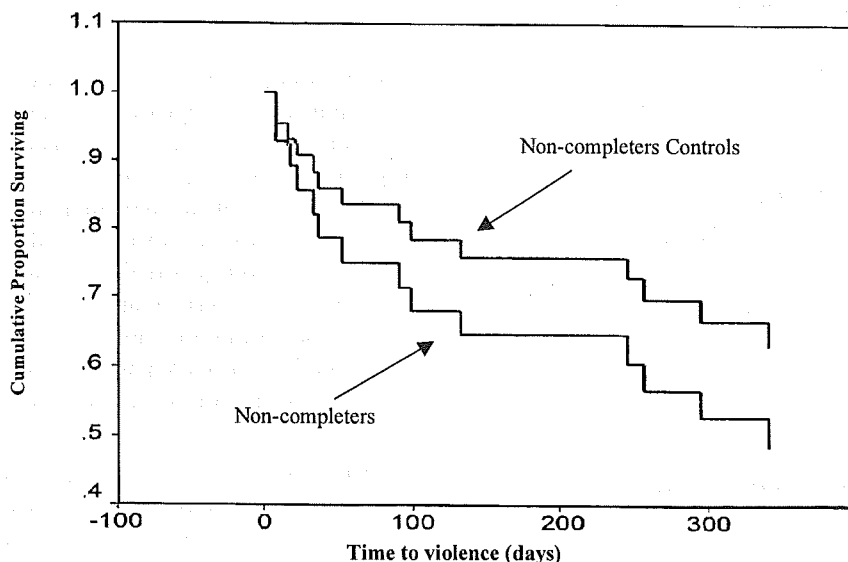
Figure 4 shows that adding non-completers to the completers and comparing them to the combined control group did not alter the significance of the overall reduction in re-convictions; Cox's $F(108,66) = 1.67, p = .01$.

Discussion

After undertaking the Montgomery House Violence Prevention Programme, completers recorded fewer convictions for violence, their convictions were less serious and they were comparatively slower to be reconvicted for violent offences compared to controls. In contrast, non-completers appear to have performed more poorly than their controls on all outcome measures. However, small sample size means that this interpretation should be treated with caution; none of the differences tested were statistically significant. If non-completers are demonstrating poorer outcome, these results are not attributable to different probabilities of risk for reoffending given that the mean reconviction risk estimates were equivalent.

Seriousness results must be interpreted cautiously because of the high variability between phases. The post-programme period is much shorter than the pre-programme period (16 months compared to 12 years) and so,

Figure 3: Cumulative proportion of non-completers and matched controls surviving convictions for violence during follow-up.



far fewer serious offences were likely to have occurred post-programme. Thus, results concerning seriousness of reconviction across phases (pre-programme to post-programme) are not comparable. However, comparisons can be made within phases and between groups. On the basis of intra-phase and between-group comparisons made in this study it can be tentatively concluded that the Montgomery House programme impacted positively on seriousness ratings for completers and adversely on seriousness ratings for non-completers.

There are a number of methodological issues that need to be taken into account in the interpretation of the results of this evaluation. One issue is that some members of the control group had probably been exposed to treatment. There was no practical means of determining whether controls had undertaken treatment that was available to them in the normal course of offender management processes. Such treatment could be ineffective, in which case it has no significant bearing on the findings, or it could have been effective in reducing reoffending. If it was effective, then results from the present study are even more impressive given the improvement seen in the treatment group

compared to controls and non-completers.

A possible limitation of this study is the impact that selection factors might have had on results. Fifty-three referrals were rejected for a number of reasons including motivational factors. This could lead to claims that the Montgomery House programme only treated lower risk and more responsive candidates and so results were spuriously elevated. Although not reported here, previous analyses show that those not accepted had an equivalent level of risk to those who were. The subject-to-subject matching process also gives some confidence that selection factors are not responsible for the positive outcomes seen in those who completed the programme.

Another concern relating to this study is that convictions are not considered to be the best measure of the effectiveness of a Violence Prevention Programme (Polaschek & Dixon, 2001) since not all offending results in conviction. However, other measures that might augment conviction records, such as police arrest records, self-report of significant others, self-report of offenders and observations of offenders, were unavailable for this study. Consequently, these results may simply reflect a greater desire for

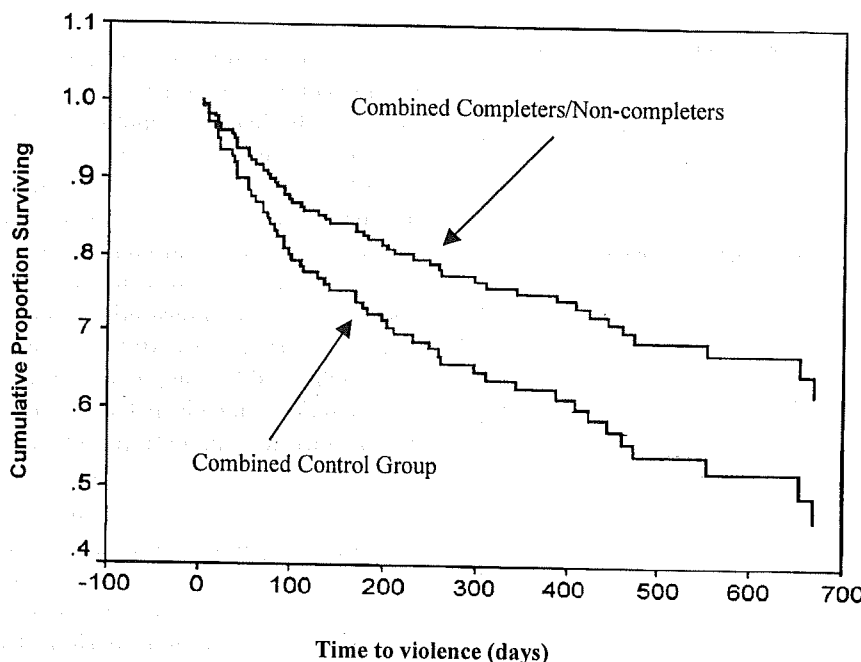
completers to not be caught or some other unknown factor.

Other factors that could possibly bring about a reduction in violence convictions rather than treatment effects are maturation effects (e.g., Mulligan 1996), natural variability of data, impact of sanctions, changes in law enforcement and changes in legislation. However, even in what is only a quasi-experimental design such as this study, where a close match of controls to treatment participants was achieved, there can be some confidence that these factors are not solely responsible for observed changes.

The poor outcomes of non-completers are a concern. Survival analysis found no significant difference between non-completers and their controls on latency to reconviction, but the trend of the data suggests it would become significant, given a larger sample. Why might non-completers have shown poorer outcomes? One possible explanation for the poor outcomes of non-completers can be drawn from the theorising of Bush (1995) who described the process of "anti-social logic". According to Bush (1995), anti-social logic involves thinking of oneself as a victim, taking an accusatory stance toward whoever is responsible and giving oneself licence to do as one pleases. These elements are mutually supportive: believing themselves victimised, offenders believe they have the right to act as they please and that any interference is, by definition, unfair and victimising (Bush, 1995). Non-compliance was the most common reason offenders failed to complete the Montgomery House programme. Applying the concept of anti-social logic, the non-completer confronts the imposition of social control at Montgomery House, may then feel victimised and come to believe that breaking the law is justified. They then act accordingly. Further investigation of the impact of non-completion is an important future research priority once larger sample numbers become available.

The results of this study impose a burden of responsibility on those delivering violence prevention programmes to strive to optimise

Figure 4. Cumulative proportion surviving convictions for violence during follow-up: Combined completers and non-completers vs. their matched controls



conditions that enable offenders to appropriately address their criminogenic needs while minimising the likelihood of non-completion. So, motivation levels of offenders need to be regularly monitored and motivational issues must be attended to as part of regular case management processes. Selection for treatment must be directed at eliminating as many potential non-completers as possible. Official responses to non-completion (for example, a return to court for a review of sentence or perhaps referral to a different service provider) need to be clear to participants and immediately and consistently applied. Given the tendency of violent offenders (who are generally "versatile" offenders) to violate norms and boundaries, programmes need to be tightly structured. Additionally, supervision and monitoring needs to be intensive and appropriately responsive to prevent minor issues escalating.

An evaluation design like this one does not reveal exactly which aspects of the programme are active in producing change. The programme design is consistent with general theoretical perspectives on the origins of violent behaviour (e.g., Nietzel, Hasemann & Lynam, 1999) but it is an intensive intervention with multiple components. Which of those components has an effect is of interest and it was not possible for this study to test that in any meaningful way. As an example of this issue, the results of this evaluation, in contrast to the findings of Zellerer (1994), suggest that Māori and Pakeha can work effectively together and produce promising results with Māori offenders. However, which, if any aspects of the cultural components of the programme were instrumental in producing change, is unclear. Some might argue that matching the ethnicity of staff to offenders was critical. Others might emphasise different aspects of the cultural content and process of the programme as being the key to change. Others might contend that both of these features were instrumental. The same can be said of other aspects of the programme. Was it the violence prevention module or other modules that made the difference? Clarifying

which aspects of a programme have a positive impact is an important step toward designing more cost-effective programmes.

The results of this evaluation are important when considered in the context of the paucity of evidence of the success of treating violent offenders. Polaschek and Collie (in press) recently reviewed the outcome evaluation research on programmes for adult violent offenders such as those who attend Montgomery House. They found Montgomery House to be one of just three multiple-component programmes with publicly available outcome data, and the only one that was explicitly responsive to indigenous offenders.

The answer to the question posed in the title of this paper, is "yes". This evaluation of Montgomery House suggests that a structured cognitive-behavioural programme, based on the "what works" principles and emphasising Māori kawa and tikanga, can have a significant impact on violent recidivism over a short follow-up period. Further research on the sustainability of these findings over a greater period of time will strengthen confidence that operating violence programmes in New Zealand is a worthwhile pursuit.

References

- Bakker, L., Riley, D. & O'Malley, J. (1995). The measurement of risk among offenders. Psychological Services, Department of Justice, New Zealand: *Proceedings of the Annual Conference*, pp. 3-30. Rotorua, New Zealand.
- Behrnes, S. I. (1996). *Evaluating the effectiveness of the pilot New Zealand Violence Prevention Project*. A thesis submitted for the degree of Master of Arts at the University of Otago, Dunedin, New Zealand.
- Berkowitz, L. (1993). *Aggression: Its causes consequences and control*. Philadelphia: Temple University Press.
- Berry, S.P. (1994). *What is needed at Montgomery House?* Unpublished memorandum, Department of Justice, New Zealand.
- Berry, S.P. (1995, September). *Montgomery House: The re-development*. Paper presented at the Annual Conference of Psychological Services, Department of Justice, Rotorua, NZ.
- Bush, J. (1995). Teaching self-risk management to violent offenders. In J. McGuire (Ed.), *What Works: Reducing offending - Guidelines from research and practice* (pp. 139-154). Chichester, UK: Wiley.
- Cullen, F.T., & Gendreau, P. (1989). The effectiveness of correctional rehabilitation - reconsidering the "nothing works" debate. In L. Goodstein & D.L. McKenzie (Eds.), *The American prison: Issues in research policy* (pp. 23-44). New York: Plenum.
- Department of Corrections (2002). *Annual Report: 1 July 2001 - 30 June 2002*. Wellington, New Zealand: Authors.
- Dixon, B.G., & Polaschek, D.L. (1992a). *The Violence Prevention Project: Evaluation summary report*. Hamilton, New Zealand: Psychological Services Division, Department of Justice.
- Dixon, B.G., & Polaschek, D.L. (1992b). Development and evaluation of a treatment programme for violent offenders: *Progress in forensic psychiatry (conference proceedings)*. Auckland, New Zealand: Conference Publishing Ltd.
- Hahn, M.R. (1993). *Violence Prevention Programme: A proposal for restructuring*. Unpublished memorandum. Hamilton, New Zealand: Department of Justice.
- Hanson, R. K. (2000). Treatment outcome and evaluation problems (and solutions). In D. R. Laws, S. M. Hudson, & T. Ward (Eds.), *Remaking relapse prevention: A sourcebook* (pp. 485-499). Thousand Oaks, CA: Sage.
- Meloy, J.R. (1995). Antisocial personality disorder. In G.O. Gabbard (Ed.), *Treatment of psychiatric disorders: 2nd Edition*. (pp. 2273-2290). Washington D.C.: American Psychiatric Association.
- Montgomery House (1994). *Montgomery House Violence Prevention Programme: Referral Package*. Hamilton, New Zealand: Montgomery House.
- Mulligan, A. (1996). *Base rates and reconviction rates for New Zealand violent offenders*. Unpublished manuscript.
- Nietzel, M. T., Hasemann, D. M. & Lynam, D., R. (1999). *Handbook of Psychological Approaches with Violent Offenders: Contemporary Strategies and Issues*. New York: Kluwer Academic/Plenum.
- Polaschek, D. L. L. & Collie, R. M. (in press). Rehabilitating serious violent adult offenders: An empirical and theoretical stock-take. *Psychology, Crime, & Law*.

- Polaschek, D. L. L. & Dixon, B.G. (2001). The violence prevention project: The development and evaluation of a treatment programme for violent offenders. *Psychology, Crime & Law*, 7, 1-23.
- Polaschek, D. L. L. & Reynolds, N. (2001). Assessment and treatment: Violent offenders. In C.R. Hollin (Ed.), *Handbook of offender assessment and treatment* (pp. 415-431). Chichester, UK: Wiley.
- Quinsey, V. L., Harris, G. T., Rice, M. E. & Cormier, C. A. (1998). *Violent offenders: Appraising and managing risk*. Washington, DC.: American Psychological Association.
- Spier (2001). *Conviction and sentencing of offenders in New Zealand: 1991 to 2000*. Wellington, NZ: Ministry of Justice.
- Spier, P., Luketina, F., & Kettles, S. (1991). *Changes in the seriousness of offending and in the pattern of sentencing 1979-1988*. Wellington, NZ: Department of Justice.
- Statistics New Zealand (2001). *Census of Population and Dwelling*. Wellington, New Zealand: Statistics New Zealand.
- Zellerer, E. (1994). *A review of aboriginal family violence treatment programs for men*. Canada: Correctional Services of Canada.

Acknowledgements

Those involved: Montgomery House staff and residents, Hamilton Probation Officers and Psychological Service staff.
Advice and support: Phillip Taylor, Christina Rush, Leon Bakker, Marion Dixon, Professor Ian Evans, Murray Hahn, Glen Kilgour, Devon Polaschek and Nick Wilson.

Address for correspondence:

Steve Berry
Regional Manager (Southern)
Psychological Service
Department of Corrections
P.O. Box 25-146
Christchurch, New Zealand.
Phone: 03 353 8410
Fax: 03 353 8415

Email:
steven.berry@corrections.govt.nz