

**PAROLE (MANDATORY COMPLETION OF REHABILITATIVE PROGRAMMES) AMENDMENT  
ACT 2024**

**SUBMISSIONS BY THE LAW ASSOCIATION  
PAROLE AND PRISONERS RIGHTS COMMITTEE**

**16 April 2024**

**INTRODUCTION**

1. The Law Association (formerly the Auckland District Law Society) Parole and Prisoner Rights Committee ("The Parole Committee") comprises senior and junior lawyers specialising in criminal and parole law. We are lawyers with particular experience representing prisoners seeking parole.
2. The Parole Committee makes the following submissions in respect of the Parole (Mandatory Completion of Rehabilitative Programmes) Amendment Bill ("the Bill").
3. The Parole Committee is opposed to the Bill.

**SUBMISSIONS**

4. There are both practical and legal problems with the Bill. Clause 5 specifically, which we understand to prevent and delay a prisoner being considered for release by the Parole Board unless the prisoner has completed a (indeed, all) rehabilitative program(s) a Corrections officer has listed on the prisoner's section 51 management plan.
5. We endorse the intention of the Bill insofar as it seeks to promote prisoner engagement with rehabilitation programs. However, we oppose the Bill because it places the onus on prisoners to access and complete programs. This is unreasonable and impractical.

**ACCESS TO PROGRAMS**

6. The Bill fails to recognise the dynamic process of prisoners' suitability for and ability to access programs. The Bill rather assumes that access to and completion of all programs is within the prisoner's power and that completion of recommended programs is always required before a prisoner can be considered safe to release.

7. Corrections recently advised the Parole Committee that:

We make every effort to provide rehabilitation interventions and treatment to people in prison before their release date or first parole hearing. Every attempt is made to ensure timely entry into a programme, however, this is a complex exercise – participants need to be suitable for the intervention, motivated to participate, and *located in the right place, and we need to balance parole eligibility dates with the capacity of the units where services are provided as well as the staff that are available to provide that service.*<sup>1</sup>

8. Not everyone eligible for treatment is considered ready to begin treatment. Entry into the programmes is dependent on the individual also being considered suitable. A person's low level of motivation may also need to be addressed prior to them being considered suitable for engagement in treatment. A participant who is not motivated or ready to actively take part in the process is unlikely to succeed and may have a detrimental impact on the treatment outcomes of other group members. Other considerations can include security classification, and whether the prisoner is segregated or in the mainstream prison population.
9. We consider it is uncontroversial that completion of programs is *one* part of an offender's rehabilitation. Prison rehabilitation is much more complex than simply having a prison officer recommend a program, complete the program then done. Completion of a program can assist. In other cases a program is recommended but for endless different reasons may not be needed before release can be safe.
10. One common enough example might be that a prisoner is recommended to complete a drug treatment program. However, the prisoner completes a different program and is considered by prison staff to have made important behavioural changes such that release on strict conditions to a drug rehabilitation facility is considered suitable by the Parole Board.
11. This example shows not only the many factors at play for Parole matters but also how the limited resources of Corrections can be supplemented by community based organisations in suitable cases. The point is that the section 51 report is a list of recommendations.
12. Further, we draw attention to the many factors at play in whether a given prisoner gets access to a program. As the above quoted information from Corrections highlights, factors including the availability of a program at a given time and place are at play and well out of a prisoner's control.
13. One example is prisoner's security classification. If a prisoner's security classification is high or maximum, it ordinarily renders them ineligible to participate in a programme. This can be despite a recommendation for completion of that programme from either the case manager, psychologist or parole board. Security classification can be increased by the presence of a pending charge or an appeal. Despite prisoners being

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<sup>1</sup> See attached Official Information Request response from Corrections dated 1 March 2024 (attached).

well behaved and / or motivated which are indicators of low risk, if there is an active charge that they are defending, or a live appeal, this affects their security classification, which may increase. That directly affects their eligibility to participate in a programme negatively.

14. There are also occasions where recommendations made by the Parole Board, case manager or psychologist are not acted on or become unavailable. The Parole Committee has included case examples to illustrate this point<sup>2</sup>.
15. Statistical information the Parole Committee have been provided by Corrections demonstrates the inability of Corrections to enrol prisoners in recommended programs before the prisoner's eligibility for consideration of their release.
16. Please see the below table<sup>3</sup> which shows the percentage of prisoners who commenced and completed any rehabilitation programmes, including AOD programmes, prior to their parole eligibility date over the last four financial years, broken down by those serving indeterminate sentences and long-term sentences. Please note that if a person has completed a programme and remains on an indeterminate or long-term sentence after their parole eligibility date passes, they will be counted for each year they remain sentenced.

Financial year	Starts	Completes
<b>Indeterminate</b>		
2019/20	45%	40%
2020/21	47%	43%
2021/22	49%	44%
2022/23	47%	44%
<b>Long-term</b>		
2019/20	42%	38%
2020/21	43%	38%
2021/22	40%	38%
2022/23		

17. Prisoners do not determine their admission to programs. The determinants are their RocRoi and a sufficiently low security classification and a programme for which they are eligible for.<sup>4</sup> is the availability of the program and in many cases (more than 50%) a prisoner becomes eligible for release without having had the benefit of a program.
18. Programs not being available at all is a common reason for the Parole Board to decline parole. Prisoners refusing to participate in programs is rare. The assessment of whether a prison is an undue risk often requires completion of programmes already. The lack of available programmes is one reason why parole is declined. This was evident during Covid. Due to restriction on people's movement and contact, most if not all programmes and counselling ceased to operate during Covid and as a result, a

<sup>2</sup> See Schedule A (attached)

<sup>3</sup> See attached Official Information Request response from Corrections dated 1 March 2024(attached).

<sup>4</sup> See document setting out available courses provided on 2 April 2024 in response to Official Information Act request including eligibility criteria.

significant number of prisoners' parole eligibility was affected, through no fault of their own. It did not matter whether they were motivated to attend or not. The programmes were not offered nationwide. There of course was a ripple effect even after lockdown restrictions were lifted.

19. We of course accept that there are many cases where a program is required before release is suitable. However, where that is the case, the Parole Board are best placed to make that determination. Indeed, when that is clear, the case must be easy for the Board to decide.
20. Presently, the Parole board must determine whether a person poses an undue risk – the paramount consideration for the board in every case is of course the safety of the community, **not** whether a programme has been completed. That is only one of many relevant factors to consider, which is not mandatory.
21. Parole board members are comprised of lay people as well as Judges, lawyers who have legal expertise but also psychologists who have expert knowledge of mental health and psychology of offenders. They, using their collective experience and skills, undertake a comprehensive risk assessment based on a number of factors.

#### **MAXIMUM SECURITY PRISONERS AND REHABILITATION**

22. It is noted that group rehabilitation is currently permitted only for those with low/medium classification or lower. Those with high or maximum security have very limited access to rehabilitation. It is limited to psychological 1:1 treatment. This is ordinarily insufficient to reduce their risk profile to a level that they can meaningfully apply for parole.
23. The proposed amendment to the Corrections Act would mandate provision of rehabilitation to those who are currently ineligible. It is noted that an improvement in behaviour is needed to reduce security classification. To expect this from offenders who do not have the skills to change their behaviour is counter-intuitive. They ought to be given access to basic programmes like the SRP or anger management so that they can acquire the skills to reduce their classification. These programmes could be undertaken by workbook with 1:1 oversight or by way of video links if they are considered too high risk to have contact with other prisoners. Special mention is made of the PERU, the super-maxi unit, who also need access to rehabilitative care, despite their risk profiles.

#### **SUBMISSIONS ON STATUTORY FRAMEWORK**

24. There are issues on independence which arise. The Parole Committee highlights the role of the Parole Board as an independent entity, per section 108 of the Parole Act 2002. This section states:

#### **108 New Zealand Parole Board established**

(1) The New Zealand Parole Board is established as an independent statutory body.

(2) The Department of Corrections provides administrative and training support to the Board.

25. The Parole Act thereby clearly delineates the independent role of the Board, and its relationship with Corrections. We suggest that the Bill subverts the independence of the Parole Board by providing Corrections officers a power to impose a pre-condition to release (and consideration for release). This would be to allow the tail to wag the dog. There are good reasons to prevent Corrections determining eligibility, including the risk that changing government policies could then influence the content of release plans. The risks posed by any undue influence exercised by a prisoner over a Corrections staff member would also be all the more significant as the officer's power would be all the more significant.
26. The Parole Committee also wish to highlight the rehabilitative role that due process has for a prisoner. The Courts and prisons are not only about punishment and consequence. We consider that showing an offender that they are worthy of fair, equal and transparent consideration rather than just being subject to an invisible administrative process can play an important role in the offender regarding "the system" as one in which everyone, including themselves, deserves and gets respect and proper consideration.
27. The Parole Committee opposed the policy objective of the Bill which is to impose a requirement for individuals in a corrections facility to complete skills and rehabilitation programmes. Such requirement currently rests and should remain with prisons, not prisoners.
28. The Parole Committee considers that ample provisions already exist in current legislation that, if followed, strictly and applied responsibly, will address the policy expressed in the Bill of ensuring that prisoners are properly rehabilitated through proper programmes provided in prisons.
29. It would therefore be better utilisation of the select committee's time to focus efforts on further strengthening the already existing legislative provisions to achieve these objectives, rather than creating new legislation, which does not achieve the stated objectives.
30. Examples of current legislative provisions are listed below:

#### **Section 5 of the Corrections Act 2004 (under purpose)**

##### **5 Purpose of corrections system**

- (1) The purpose of the corrections system is to improve public safety and contribute to the maintenance of a just society by—

- (a) ensuring that the community-based sentences, sentences of home detention, and custodial sentences and related orders that are imposed by the courts and the New Zealand Parole Board are administered in a safe, secure, humane, and effective manner; and
- (b) providing for corrections facilities to be operated in accordance with rules set out in this Act and regulations made under this Act that are based, amongst other matters, on the United Nations Standard Minimum Rules for the Treatment of Prisoners; and
- (c) **assisting in the rehabilitation of offenders** and their reintegration into the community, where appropriate, and so far as is reasonable and practicable in the circumstances and within the resources available, through the provision of programmes and other interventions; and
- (d) providing information to the courts and the New Zealand Parole Board to assist them in decision-making.

**Section 6 of the Act states –**

**Principles guiding corrections system**

- (1) The principles that guide the operation of the corrections system are that—
  - (a) the maintenance of public safety is the paramount consideration in decisions about the management of persons under control or supervision:
  - (b) victims' interests must be considered in decisions related to the management of persons under control or supervision:
  - (c) in order to reduce the risk of reoffending, the cultural background, ethnic identity, and language of offenders must, where appropriate and to the extent practicable within the resources available, be taken into account—
    - (i) in developing and providing rehabilitative programmes and other interventions intended to effectively assist the rehabilitation and reintegration of offenders into the community; and
    - (ii) in sentence planning and management of offenders:
  - (d) offenders must, where appropriate and so far as is reasonable and practicable in the circumstances, be provided with access to any process designed to promote restorative justice between offenders and victims:
  - (e) an offender's family must, so far as is reasonable and practicable in the circumstances and within the resources available, be recognised and involved in—
    - (i) decisions related to sentence planning and management, and the rehabilitation and reintegration of the offender into the community; and

- (ii) planning for participation by the offender in programmes, services, and activities in the course of his or her sentence:
  - (f) the corrections system must ensure the fair treatment of persons under control or supervision by—
    - (i) providing those persons with information about the rules, obligations, and entitlements that affect them; and
    - (ii) ensuring that decisions about those persons are taken in a fair and reasonable way and that those persons have access to an effective complaints procedure:
  - (g) sentences and orders must not be administered more restrictively than is reasonably necessary to ensure the maintenance of the law and the safety of the public, corrections staff, and persons under control or supervision:
  - (h) offenders must, so far as is reasonable and practicable in the circumstances within the resources available, be given access to activities that may contribute to their rehabilitation and reintegration into the community:
  - (i) contact between prisoners and their families must be encouraged and supported, so far as is reasonable and practicable and within the resources available, and to the extent that this contact is consistent with the maintenance of safety and security requirements.
- (2) Persons who exercise powers and duties under this Act or any regulations made under this Act must take into account those principles set out in subsection (1) that are applicable (if any), so far as is practicable in the circumstances.
- (3) Subsection (1) does not affect the application or operation of any other Act.

## AN ALTERNATIVE PROPOSAL TO PROMOTE REHABILITATION IN PRISON

31. An amendment to s52 of the Corrections Act 2004 will achieve the stated policy objective of this Bill. Section 52 current states:

### **52 Rehabilitative programmes**

The chief executive must ensure that, to the extent consistent with the resources available and any prescribed requirements or instructions issued under section 196, rehabilitative programmes are provided to those prisoners sentenced to imprisonment who, in the opinion of the chief executive, will benefit from those programmes.

32. Section 52 could be amended in the following way:

The chief executive must ensure that, to the extent consistent with the resources available and any prescribed requirements or instructions issued under section 196,

rehabilitative programmes are provided to those prisoners sentenced to imprisonment who, in the opinion of the chief executive, will benefit from those programmes or if directed by the parole board.

33. The Parole Committee considers the aim of having prisoners attend suitable programs prior to release must be met with a corresponding increase in resourcing of programs. Increasing program availability will allow prisoners who wish to complete programs can progress their rehabilitation and eventually achieve release. In our experience, most prisoners want to access rehabilitation, but are unable to.

### CLOSING REMARKS

34. The Parole Committee welcomes the opportunity to discuss these issues outside of the Select Committee process if desired. We further note that we would like to make oral submissions. If you require any further information or clarification, please contact Moira McFarland 09 306 5742 or [moira.mcfarland@thelawassociation.nz](mailto:moira.mcfarland@thelawassociation.nz).

Ngā mihi



**Emma Priest**  
Co-Convenor  
TLA Parole Law Committee



**Hannah Kim**  
Co-Convenor  
TLA Parole Law Committee



**Conrad Wright**  
Committee Member  
TLA Parole Law Committee



01 March 2024

C177738

Emma Priest

[emma@emmapriest.co.nz](mailto:emma@emmapriest.co.nz)

Tēnā koe Emma

Thank you for your email of 1 February 2024 to the Department of Corrections – Ara Poutama Aotearoa, requesting information about access to rehabilitation programmes and release dates over the last four years for people on indeterminate and determinate sentences. Your request has been considered under the Official Information Act 1982 (OIA).

Determinate sentences fall into two distinct categories; short-term, and long-term prison sentences. People on short-term prison sentences (two years or less) are subject to automatic release after serving half the days imposed by their sentence, and their release is not determined by the New Zealand Parole Board. People on long-term prison sentences (sentences of over two years) are those who are required to appear before the parole board, once they have reached their parole eligibility date, to determine whether they can be released with conditions prior to their final release date. We have therefore interpreted your request for information relating to people on determinate sentences to refer to those on long-term sentences of over two years.

You requested:

*I am seeking information about prisoner access to rehabilitation programmes and release dates over the last 4 years (2020, 2021, 2022, 2023)*

*Please supply the following information under the Official Information Act 1982:*

- 1. For each year listed above, the percentage of prisoners who are serving indeterminate sentences were granted parole at their first appearance before the Extended Parole Board (at their Parole Eligibility Date).*
- 2. For each year listed above, the percentage of prisoners who are serving determinate sentences were granted parole at their first appearance before the Parole Board (at their Parole Eligibility Date).*

Corrections manages people on sentences and orders at the direction of the Courts and the New Zealand Parole Board. Decisions to grant parole are made by the New Zealand Parole Board, which is an independent statutory body.

Corrections works with people in prison to plan a rehabilitation pathway appropriate to their offence and sentence and provide them with the opportunity to complete the right rehabilitation at the right time.

Corrections provides the New Zealand Parole Board with a Parole Assessment Report. Its purpose is to collate a range of information to give the Parole Board the ability to gain a perspective of the person's behaviour, rehabilitation progress and release proposal to support decision-making regarding release.

Please see the below table which shows the percentage of prisoners who had parole granted at their first hearing over the last four financial years, broken down by those serving indeterminate sentences and long-term sentences:

Financial year	Indeterminate	Long-term
2019/20	3%	10%
2020/21	9%	10%
2021/22	0%	11%
2022/23	0%	7%

3. *For each year listed above, the percentage of prisoners serving an indeterminate sentence who had commenced a Department of Corrections Offence-Focused or Drug and Alcohol Rehabilitation Programme (including Individual Psychological Treatment) before their Parole Eligibility Date.*
4. *For each year listed above, the percentage of prisoners serving an indeterminate sentence who had completed a Department of Corrections Offence-Focused or Drug and Alcohol Rehabilitation Programme (including Individual Psychological Treatment) before their Parole Eligibility Date.*
5. *For each year listed above, the percentage of prisoners serving a determinate sentence who had commenced a Department of Corrections Offence-Focused or Drug and Alcohol Rehabilitation Programme (including Individual Psychological Treatment) before their Parole Eligibility Date.*
6. *For each year listed above, the percentage of prisoners serving a determinate sentence who had completed a Department of Corrections Offence-Focused or Drug and Alcohol Rehabilitation Programme (including Individual Psychological Treatment) before their Parole Eligibility Date*

As noted, Corrections works with people in prison to plan a rehabilitation pathway appropriate to their offence and sentence and provide them with the opportunity to complete the right rehabilitation at the right time. Our Case Managers work closely with people in prison to help with their reintegration and rehabilitation needs to ensure the

safety of the community when they are released. Case management practice is to commence planning for a person's release at the start of their arrival into prison.

Each person's rehabilitative and reintegrative pathway is unique and based on many considerations including the nature of their offending, their risk of re-offending, their motivation to change, their physical and mental wellbeing, and the support they have around them. In prisons, Case Managers work with people one-on-one to identify their rehabilitation needs and match these with available programmes to be completed throughout their sentence.

We make every effort to provide rehabilitation interventions and treatment to people in prison before their release date or first parole hearing. Every attempt is made to ensure timely entry into a programme, however, this is a complex exercise - participants need to be suitable for the intervention, motivated to participate, and located in the right place, and we need to balance parole eligibility dates with the capacity of the units where services are provided as well as the staff that are available to provide that service.

Not everyone eligible for treatment is considered ready to begin treatment. Entry into the programmes is dependent on the individual also being considered suitable. A person's low level of motivation may also need to be addressed prior to them being considered suitable for engagement in treatment. A participant who is not motivated or ready to actively take part in the process is unlikely to succeed and may have a detrimental impact on the treatment outcomes of other group members. Other considerations can include security classification, and whether the prisoner is segregated or in the mainstream prison population.

Rehabilitation programmes are one part of an individual's pathway through prison. Corrections offers a wide range of programmes aimed at reducing re-offending and improving public safety, and people often access multiple types of rehabilitation over the course of their sentence.

Please see the below table which shows the percentage of prisoners who commenced and completed any rehabilitation programmes, including AOD programmes, prior to their parole eligibility date over the last four financial years, broken down by those serving indeterminate sentences and long-term sentences. Please note that if a person has completed a programme and remains on an indeterminate or long-term sentence after their parole eligibility date passes, they will be counted for each year they remain sentenced.

Financial year	Starts	Completes
<b>Indeterminate</b>		
2019/20	45%	40%
2020/21	47%	43%
2021/22	49%	44%
2022/23	47%	44%
<b>Long-term</b>		

2019/20	42%	38%
2020/21	43%	38%
2021/22	40%	36%
2022/23	40%	38%

Please note that this response may be published on Corrections' website. Typically, responses are published quarterly, or as otherwise determined. Your personal information including name and contact details will be removed for publication.

I trust the information provided is of assistance. I encourage you to raise any concerns about this response with Corrections. Alternatively, you are advised of your right to also raise any concerns with the Office of the Ombudsman. Contact details are: Office of the Ombudsman, PO Box 10152, Wellington 6143.

Ngā mihi

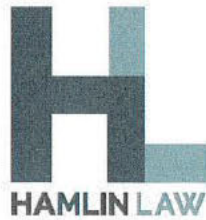


Jeremy Lythgoe  
Principal Adviser Ministerial Services  
People and Capability



**Schedule A: Five examples which include a letter to NZPB and NZPB Decisions**





**PHILIP HAMLIN**  
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06 September 2023

**Gerald Smith**  
Director  
Auckland South Corrections Facility

By email: [Gerald.Smith@serco-ap.com](mailto:Gerald.Smith@serco-ap.com)

Dear Sir,

**RE: [REDACTED] Concern Regarding Delays with Psychological Treatment**

I act for [REDACTED] who is currently serving a sentence of 6 years' 6 months imprisonment at Auckland South Corrections Facility. [REDACTED]'s sentence end date is 27 May 2024. This letter sets out my concerns at the slow progress with psychological treatment in light of Mr [REDACTED]'s complex needs and impending sentence end date.

#### **Vulnerable Prisoner**

Mr [REDACTED] has a long established diagnosis of severe ADHD. Furthermore, he was given a provisional diagnosis of foetal alcohol spectrum disorder in June 2022 by an independent psychologist, Dr [REDACTED]. Dr [REDACTED] expressed the view that Mr [REDACTED] would not be suitable for group treatment programmes and recommended one-on-one treatment from an experienced psychologist. The Parole Board agreed with this recommendation and made a direction that he receive treatment of this type pursuant to s 21A of the Parole Act 2002 at his Parole Hearing on 23 June 2022 (decision **attached**).

#### **Delays in treatment**

Mr [REDACTED] did not receive any one-on-one psychological treatment in 2022. Early in 2023 he advised me that his father had passed away and that he was struggling with the associated emotions. His family had intentionally not advised him of the death until after the tangi, which prevented him from attending it. This was very upsetting for him. I immediately wrote to Complaints and Enquiries and his case manager about this on 26 January 2023 (email **attached**).

On 13 February 2023 Francois Meyer contacted me to advise that the planned treatment at the STU had been over-riden and that Mr [REDACTED] would now be added to the priority psychological treatment list. It is of concern this step was not taken immediately following the Board's s 21A direction for one-on-one treatment in June 2022. On 9 March 2023 Mr Meyer advised me that a treatment session was booked the following day for 10 March 2023. According to my records this was Mr [REDACTED]'s first treatment session.

As at [REDACTED]'s parole hearing on 20 July 2023, I understand a total treatment of just 4 sessions had been completed. Case Management advised that the remaining sessions would take a further 4 months to complete and Mr [REDACTED] was stood down until November 2023. Since Mr [REDACTED]'s July Parole Board hearing I understand that no further treatment sessions have been completed to date. The limited number of completed treatment sessions at this point in time is a significant concern.

I note that the Parole Board also expressed concerns about the apparent slow progress given that he is fast approaching the end of his sentence. The Board are expecting the treatment to be completed prior to his next hearing in November 2023. It is clearly in both Mr [REDACTED]'s and the community's interests that he receive appropriate treatment prior to his release to reduce the likelihood that he will re-offend.

I would be grateful if [REDACTED]'s course of treatment could please be resumed as soon as possible. Thank you very much for your time and assistance with this.

Yours faithfully,

A handwritten signature in blue ink, appearing to read 'P.O.' with a flourish.

Phillip Osborne  
Employed Barrister



Parole Hearing  
Under section 21(2) of the Parole Act 2002

[REDACTED]

**Hearing:** 02 November 2023  
at Hawke's Bay Regional Prison via Ms Teams

**Members of the Board:** Ms S Bailey – Panel Convenor  
Mr S Perry  
Mr P Elenio

**Counsel:** Ms A Hill

**In Attendance:** [REDACTED]

**Support Persons:** [REDACTED]

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### DECISION OF THE BOARD

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1. [REDACTED] appears for a further consideration of parole. [REDACTED] is serving a sentence of 12 and a half years imprisonment after serious sexual offending against both children and adults. There were four victims involved and the offending occurred between 2014 and January 2015. [REDACTED] has some previous convictions mostly consisting of burglaries and dishonesty offences.
2. [REDACTED] has a statutory release date of [REDACTED] 2028 leaving just under five years remaining on his sentence. He has a RoC\*RoI of 0.67942 and an ASRS of 3.
3. On [REDACTED] sentence plan is the STU:ASO. [REDACTED] has had two previous attempts at this programme. Various issues have arisen during these courses which has meant he has not been able to complete them. [REDACTED] last appeared before a Board in August 2022 when a query about his mental health needs was raised and whether or not it would be appropriate for individual psychological sessions to be undertaken rather than a group programme.

4. That Board noted that a psychological report dated [REDACTED] assessed [REDACTED] as well above average risk of sexual re-offending. The two attempts at the Special Treatment Unit were noted and it was further noted that [REDACTED] had requested assistance with his mental health before he made another attempt to complete a sexual offender's programme. There was a recommendation for an estimated 10 sessions to potentially address responsivity issues and to then make an assessment as to the most appropriate pathway.
5. The Board also observed that [REDACTED] was motivated to do whatever was necessary but had not been able to deal with the stresses in the rehabilitative unit at the relevant times. At the time of that hearing [REDACTED] said he accepted the psychologist's recommendation but was not ready right then to start sessions.
6. Unfortunately, nothing has progressed for [REDACTED] in the interim (15 months later). His lawyer, Ms Hill, who was present today had forwarded written submissions which we did not have an opportunity to read immediately prior to the hearing. However, she went through those submissions and they are pertinent and to the point. She told the Board that [REDACTED] is not seeking parole today because he remains untreated. She further advised the Board that since his last appearance in August 2022 with the Board he has been transferred between prisons six times which she submitted negatively impacts his ability to settle and work towards engaging in productive treatment.
7. Ms Hill summarised [REDACTED] situation to present a balanced view about his pathway as compared to the PAR. The PAR contains comments such as: "[REDACTED] has remained unsettled throughout his sentence and his behaviour, attitude and compliance has been inconsistent." Ms Hill felt it necessary to provide a balance, and the Board is appreciative she has done so.
8. Ms Hill told the Board that [REDACTED] was transferred to the Auckland South Corrections Facility during October 2022. During that move the bulk of his property was lost to the extent that he had virtually no clothing or footwear for his arrival at Auckland South. This was extremely distressing to say the least.
9. In March of 2023 he was pressured into holding contraband for another prisoner. He handed this over to staff which subsequently placed his safety at risk. [REDACTED] was urgently transferred to Spring Hill because of this and placed on directed protective custody. He was then transferred to Waikeria where he was seriously assaulted in retaliation for narking and he was then returned to Spring Hill. He was then rapidly transferred to Whanganui, Rimutaka and finally the Hawkes Bay Prison. This has all occurred very recently.

10. On looking at [REDACTED] prison transfer records he has had six prison transfers since March 2023 that is in the last eight months, and 22 prison transfers since he has been on this sentence (2016).
11. Ms Hill fairly submitted that [REDACTED] has been unable to settle into any routine or develop relationships due to these constant transfers. She further told the Board that the writer of the PAR is not his present Case Manager and he has only met his present Case Manager on one occasion.
12. Ms Hill also addressed the misconducts which were noted in the PAR. It is suggested to read her submissions at paragraph 6 as to the explanation for those misconducts. She notes that the parole assessment report says he's been subject to three misconducts, one of these was withdrawn and she submits should not be treated as one.
13. [REDACTED] instructs that he received a caution for the second misconduct and four days loss of privileges for the third misconduct.
14. It has become clear through the information on file, and also to the reference made by the previous Board in August 2022, that [REDACTED] has mental health needs. Ms Hill submitted that [REDACTED] has had no access to mental health help in the past year. With her assistance [REDACTED] will be lodging an ACC sensitive claim to access counselling for his childhood abuse. This has not be facilitated by any of his Case Managers within the prison environment.
15. [REDACTED] is now on voluntarily segregation which makes him feel much safer and, therefore, hopefully more settled. He has now been approved as a unit painter and it is expected that work will begin reasonably soon.
16. At the end of the day the individual psychological sessions which were recommended in August 2022 have not started. He is not waitlisted for these sessions. There is no start date on the horizon. Although [REDACTED] was not ready to start those sessions immediately when first recommended, he has been motivated for some time since then. It seems because of his constant transfers between prisons he has not had an ability to develop meaningful relationships with a case manager or others who can assist him (mental health staff). It appears he has been overlooked in all ways.
17. Ms Hill submitted he remains willing to engage with the psychologist and will commit to further treatment. However, because of the assaults he has suffered he continues to fear for his safety in a mainstream unit and this seems to be a very reasonable concern.
18. Ms Hill also submitted that [REDACTED] has left his gang associates and is focusing on a prosocial network.

19. Ms Hill summarised by saying that [REDACTED] short-term goals are clear and that is to start his one-on-one treatment, to reduce his classification and to become IDU free. Ultimately in the long-term he wishes to partake in an STU programme on a segregated basis.
20. [REDACTED] spoke with the Board and said he had not seen anyone from Psychological Services. He talked about the problems he has had within the prison and his feelings of insecurity.
21. His present Case Manager was spoken to and was asked if he had read the psychologist's report recommending one-on-one sessions prior to engaging in either group or individual treatment. His present Case Manager had not read the recommendations of the psychologist and simply said there is a long waitlist for any psychological services.
22. [REDACTED] himself told the Board that he had been in youth homes since he was 12 years old. He very much wants to be able to lead a normal life. He appreciates he has messed up badly and he wants to get onto treatment and be able to start resumption of a more normal life. He told the Board that he is very willing to do programmes but felt a need to do them in the safest way possible because of the previous transfers, assaults and problems within the multiple prison environments. He had felt unable to complete programmes because of his mental health and insecurity issues. He said he had been assaulted, stood over and undergone highly stressful situations in a number of the prisons and simply couldn't focus on partaking in programmes or meaningful rehabilitation.
23. The SCO present today said he was a model prisoner and there have been no issues with him. He said he had an excellent work ethic and gets on with everyone. He said it was important to keep him safe. His SCO today said he deserves a good opportunity to progress and overall gave him an excellent report.
24. On further discussion with his present Case Manager, he did not seem overall very helpful. He simply said that he was unaware of the psychological reports and recommendations and that [REDACTED] will have to go to mainstream if he wanted to do a sex offenders programme. The Board understands that sex offender's adult programmes are mainstream but child sex offender's programmes can be segregated. As [REDACTED] has offended against children and adults it seems unclear to this Board why he cannot partake in a segregated sex offenders programme. The Board is also concerned that his previous case manager, prior to his most recent transfer, also had not read the psychological assessment.
25. The Case Manager was questioned closely as to who was making the decisions relating to what will next happen but it appeared from the hearing today that the current Case

Manager was not very focused or up-to-date with [REDACTED] recommendations and/or progress.

26. The Board have considerable concerns with [REDACTED] progress through the criminal justice system. He has been bounced around prisons. No one appears to be taking full responsibility for his progress. He has had recommendations made which his current Case Manager is not currently aware of and is emphatic that there is no segregated course possible. The Board understand this is not correct and believe that [REDACTED] should be assessed as to whether he is eligible for a Child Sex Offender Programme since he has offended against children and whether that can be done in a segregated environment and when that would be available.
27. It is also of concern that in August 2022 the Parole Board advocated for the individual sessions to address responsivity issues and appropriate treatment and nothing has been done to start this. Apparently, [REDACTED] has not even made a waitlist for this to occur. Essentially there seems to be a paralysis within the system in regards to [REDACTED] and this must be addressed.
28. Parole today is declined. His risk remains undue as he still has to receive some form of treatment prior to considering release.
29. In considering all of the above, the Board invokes section 21A(b) and specifies that [REDACTED] is to undergo sexual offending treatment which is most appropriate to meet his mental health needs. This will need to be attended to relatively quickly but the Board considers this is an extremely unfortunate example of someone slipping through the cracks and simply nothing happening. [REDACTED] has also been subject to multiple transfers and subject to highly stressful situations during his time of imprisonment leaving little room to development meaningful relationships with prison staff.
30. [REDACTED] will be seen again during December 2024 with the expectation that the section 21A request will have been met.



Ms S Bailey  
Panel Convenor



Parole Hearing  
Under section 21(2) of the Parole Act 2002

[REDACTED]

**Hearing:** 10 June 2021  
at Auckland Prison

**Members of the Board:** Sir Ron Young (Chairman)  
Ms M Kleist  
Assoc Prof K Quince

**Counsel:** Ms E Ward

**In Attendance:** Ms N Finlayson (Case Manager)

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#### DECISION OF THE BOARD

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1. [REDACTED] was sentenced to two years and one-month imprisonment for burglary and theft. He has a final release date of November 2022 and a Roc\*RoI of 0.46. His security classification is high; more on the basis on which that was assessed later in this decision. He has previous convictions involving dishonesty. In 2019, he was sentenced to one year's imprisonment for property offending. The offending arose in August 2018.
2. On 4 February, no doubt not long after he was released from prison, he was sentenced for burglary, theft and other dishonesty to the two years one-month imprisonment. That offending occurred, it seems, beginning in June 2019 and through until October 2020.
3. [REDACTED] is described as a good prisoner. He is described as compliant and his conduct has been excellent. He is to do the MIRP and the DTP, both of which appropriate rehabilitation programmes for him.
4. [REDACTED] has an outstanding charge of burglary. He denies it. His co-offender elected trial by jury and so [REDACTED] is effectively stuck with that election. The chances of him being tried in the next 12 months is low. He may be tried within two years but that might be the best result.

5. We were told today that, because of ██████'s current security classification of high was essentially because he had an outstanding charge. Otherwise, his behaviour would have had him in a much lower category. It is difficult to understand the rationale for this. Security classification is about managing risk in prison. There is nothing about the fact that ██████ has pleaded not guilty to a charge of burglary that is relevant to risk in prison. Secondly, the fact that his classification is high limits his eligibility for programmes. That means that classification in our view, puts improper pressure on ██████ to change his plea even when he doesn't accept the rightness of the charges against him because a change of plea to guilty will be a way of him reducing his security classification and starting rehabilitation programmes. This approach in our view is quite unfair.
6. We asked when ██████'s security classification would be reassessed. We understand it will be in August 2021, six months past his entry into the prison in February 2021. We asked when the rehabilitation programmes could be provided to him. Some can be provided to him while he is still on high classification. We were told that the rehabilitation programme organisers might not be very interested in providing a programme for ██████ given he has an outstanding charge. Once again, that creates an unfair dilemma for ██████. The fact that he has outstanding charges, in this situation, will, in our assessment, have nothing to do with his eligibility for a programme. He has a history of property offending which will be significantly advantaged as to risk by attending both the DTP and the MIRP. Whether he is or isn't convicted of the burglary will have no effect on the value of that programme. Again, the fact that he can't do such a programme, or is unlikely to get on such a programme because of his outstanding charge, puts improper pressure on ██████ to plead guilty when he says he is not. All of this is extremely concerning.
7. We hope that ██████ can get his security classification reduced in August so that he can commence programmes and we hope that, in the meantime, he could be allocated programmes for those who are at high security classification. In the meantime, he remains an undue risk. We will see him again by the end of February 2022.



Sir Ron Young  
Chairperson



In the matter of an application under section  
26 of the Parole Act 2002 by

[REDACTED]

to be considered for parole (earlier than currently scheduled)

Application considered on 24 July 2017 at the New Zealand Parole Board Head Office,  
Wellington

**Panel Convenor**

**Alan Ritchie**

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**DECISION OF THE PANEL CONVENOR**

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1. [REDACTED] 29, has applied for a hearing for the further consideration of parole earlier than that to be scheduled for him in November 2017.
2. He is serving a sentence of two years nine months for wounding with intent to injure.
3. The prison security classification is minimum, the [REDACTED] and the sentence expiry date is 29 November 2018.
4. On 19 April 2017, the Board supported the obtaining of a psychological assessment report and, if recommended by that report, the completion of the Medium Intensity Rehabilitation Programme. The low RoC\*RoI had apparently been a barrier to the Medium Intensity Rehabilitation Programme.
5. [REDACTED] has provided a report from a consultant forensic psychiatrist who was independently instructed.
6. The report confirms that [REDACTED] does not currently suffer from a psychiatric disorder.
7. It assesses his risk at low/moderate. It says a programme likely to have a lasting impact would be the Medium Intensity Rehabilitation Programme but that it might not be available given the risk assessment. It suggests an anger management programme in the community along with, "individual or group counselling."

8. Whether all that takes things much further is a moot point. At least it provides support for the likely benefit of the Medium Intensity Rehabilitation Programme.
9. For its part, the Department seems to think that the last Board specified relevant activities under section 21A of the Parole Act 2002 and says that [REDACTED] has completed those activities. That is wrong on both counts.
10. The Department says [REDACTED]'s psychiatric report says that he is, "thought not to be a suitable candidate for the Medium Intensity Rehabilitation Programme because of his low risk status." That is not correct either. The psychiatrist was clear that the Medium Intensity Rehabilitation Programme was, "likely to have a lasting impact," and merely recorded an earlier departmental view that he may not be considered, by the Department, to be a suitable candidate.
11. Notwithstanding that advice from the psychiatrist, the Department appears to have given no further consideration to the matter.
12. The situation is somewhat unfortunate for [REDACTED] but there is not a sufficient basis for adjusting the Board's view of when the next hearing should be, i.e. in November 2017.
13. The application is declined.



Alan Ritchie  
Panel Convenor



Parole Hearing  
Under section 21(2) of the Parole Act 2002

[REDACTED]

**Hearing:** 16 October 2023  
at Auckland South Corrections Facility via Ms Teams

**Members of the Board:** Ms K Snook – Panel Convenor  
Mr C Roberts  
Dr S Davis

**Counsel:** Ms H Kim

**In Attendance:** Ms K Tachiona - Case Manager

**Support Persons:** [REDACTED]

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### DECISION OF THE BOARD

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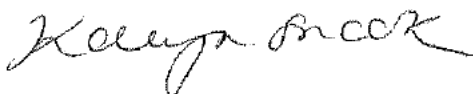
1. [REDACTED] 49, appeared for the further consideration of parole or for the setting of his conditions for release at his statutory release date. He is serving a sentence of two years five months and two weeks' imprisonment for wounding with intent to injure and assault with intent to injure. He has a serious history of violent offending, especially against women. There are numerous breaches of protection orders as well.
2. [REDACTED] has a [REDACTED], he is on a low/medium prison security classification, and he has a statutory release date of 6 December 2023.
3. [REDACTED] saw the Board last on 16 May 2023. That Board noted that he was originally assessed as suitable for the STU:VO. When time got short, he was then assessed as appropriate for the Short Violence Prevention Programme. Neither of those programmes have been possible for [REDACTED] for a variety of reasons. He remains waitlisted for one-to-one treatment with a psychologist. At the time he saw the Board last he had completed five sessions with a private psychologist. The Board had an assessment on file from that psychologist, Dr Thompson, dated 8 May 2023. The Board noted that [REDACTED] had planned to engage with Respect and had accommodation with the Grace Foundation.

4. The Board declined parole. It found that [REDACTED] was largely untreated with a significant offending history. It scheduled him to be seen again and hoped that he would have been able to participate in one-to-one treatment with a psychologist in prison, was able to provide the Board with a relapse plan, and that the bed with the Grace Foundation remained on the table.
5. Unfortunately, [REDACTED] remains on the waitlist for one-to-one treatment in prison. We were told today that he is number 4 on the list. It does appear unlikely that he will be seen in any substantive way prior to release.
6. [REDACTED] has participated in 12 one-hour sessions of the Living Without Violence Programme via Respect. Today he was looking for release to his partner [REDACTED]. They have been in a relationship for around four years but have not lived together for any significant period of time. [REDACTED] said today that the longest period they have spent living together in the community is around a month.
7. Even [REDACTED]'s own report from his private psychologist from May 2023 says that he remains "overly confident" in his ability to manage conflict with his partner in a non-violent manner, despite having never lived together. In that assessment, the psychologist says that she tended to agree with the description of the relationship as "untested".
8. We spent some time today talking to [REDACTED] about the treatment he has completed. He had some frustration about the Parole Assessment Report and what he said were the inaccuracies in it. He contests that he is at high risk of re-offending. He said he is not a Head Hunter and is a former member of Black Power and the Nomads. He has support lined up in the community, including not only his partner. He is linked into Respect in an ongoing way, will return to ACC counselling, and he and his partner plan to undertake a couples communications course. There was a whānau hui on 26 September 2023 and we have seen the notes from that meeting.
9. [REDACTED] was seeking release on parole. We acknowledge the treatment that he has organised, with the assistance of his partner, while he has been in prison. However, we have to have regard to his high static risk score and the fact that he has not completed the intensive programmes that were originally scheduled for him. We are also concerned about him being released directly to live with [REDACTED] given his history of offending in intimate relationships. We note, too, that [REDACTED] has previously been on medication, both for PTSD and severe pain issues. At the moment he is not medicated because the prison is no longer providing it to him. [REDACTED] said she has organised a GP enrolment for [REDACTED] immediately on release, and we think that this will be important.
10. Overall, we are not satisfied that [REDACTED] no longer poses an undue risk. Parole is declined. [REDACTED] will be released on his statutory release date on the conditions that are in the Parole Assessment Report. We are not imposing a partial residential restrictions curfew. He will

have reached the end of his sentence. We are inclined to agree that if he is released to live with his partner, then he will need to be able to leave the property if tensions rise. We do not support that as an initial release proposal so have left the special condition relating to the address as a generic one, requiring that [REDACTED] be released to an approved address.

11. We strongly support [REDACTED] participating in some psychological treatment in prison prior to release and support that continuing in the community.
12. All conditions remain in place for six months following [REDACTED]'s statutory release date of 6 December 2023.
13. The special conditions are:
  - (1) Not to have contact or otherwise associate, with any victim of your offending, including previous offending, directly or indirectly, unless you have the prior written approval of a Probation Officer.
  - (2) To attend a psychological assessment and attend, participate in and complete any recommended treatment as directed by a Probation Officer.
  - (3) To attend an alcohol and drug assessment, and attend, participate in and complete any treatment or counselling directed by a Probation Officer.
  - (4) Not to possess, use, or consume alcohol, controlled drugs or psychoactive substances except controlled drugs prescribed for you by a health professional.
  - (5) To disclose to a Probation Officer, at the earliest opportunity, details of any intimate relationship which commences, resumes, or terminates.
  - (6) To reside at an address approved in writing by a Probation Officer, and not move from that address unless you have the prior written approval of a Probation Officer.

*Please note: you may be required to undergo a drug or alcohol test and or submit to drug or alcohol monitoring.*



Ms K Snook  
Panel Convenor



02 April 2024

C179272

Sophie Wood  
sophie@emmapriest.co.nz

Tēnā koe Sophie

Thank you for your email of 8 March 2024 to the Department of Corrections – Ara Poutama Aotearoa, requesting an updated PDF of all courses and programmes available in prisons. Your request has been considered under the Official Information Act 1982 (OIA).

You requested:

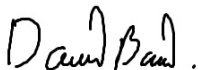
*Could I please be sent the most up to date PDF on the courses/programmes available in the prisons.*

Please see the attached 'Department of Corrections Parole Board Programmes Information', February 2024.

Please note that this response may be published on Corrections' website. Typically, responses are published quarterly, or as otherwise determined. Your personal information including name and contact details will be removed for publication.

I trust the information provided is of assistance. I encourage you to raise any concerns about this response with Corrections. Alternatively, you are advised of your right to also raise any concerns with the Office of the Ombudsman. Contact details are: Office of the Ombudsman, PO Box 10152, Wellington 6143.

Ngā mihi



David Baird  
Principal Adviser Ministerial Services  
People and Capability

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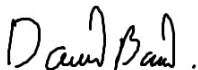
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Ngā mihi



David Baird  
Principal Adviser Ministerial Services  
People and Capability

**Department of Corrections  
Parole Board Programmes Information**

**February 2024**

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## **Course Attendance**

Programme attendance is secured and provided to men and women who not only meet the entry criteria for that course but show they are motivated to attend and can work well within a group environment. Programmes are run either in the current unit they are in or may involve moving to a specific site or location to complete that rehabilitative programme.

## **Barriers to Attendance**

Barriers to attending programmes include low motivation to attend, refusal to acknowledge offending and the need for engagement in rehabilitation for that offending as well as current/ recent behavioural issues or misconducts. Custodial staff and programme providers looking to offer places to men and women in their therapeutic focused units must maintain a safe environment for the participants and staff alike to achieve the best results for those in attendance.

## **Exits**

To maintain the effective environments the staff of each unit act upon unsafe behaviour or activity within these units. This aids the programme intakes to remain successful and ensure the best possible outcomes for those in attendance. In general, across all programmes, the reasons for someone to be removed from a rehabilitation programme will fall into the following categories.

- Dangerous or unsafe behaviour towards others (stand overs, physical violence)
- Unmotivated or disruptive behaviour (failure to complete and engage with course work, acting out in class)
- Contraband found or used. Positive drug tests.
- Harassment (mental, physical/ sexual)
- Exceeding the number of permitted absences

## **Scheduling**

Scheduling of programmes is largely undertaken by individual sites and is the responsibility of the regions.

# Medium Intensity Rehabilitation Programmes

## Mauri Tū Pae (MTP) at Te Tirohanga and NRCF

This is a bicultural rehabilitation programme and is considered an equivalent to the Medium Intensity Rehabilitation Programme. This programme includes a specific Māori cultural perspective and builds on a foundation provided by the kaupapa of the Te Tirohanga Units and Tikanga Māori educational programmes. Mauri Tū Pae is offered as phase two of Te Tirohanga located in units at Tongariro Prison, Waikeria Prison, Whanganui Prison, Hawkes Bay Regional Corrections Facility and Rimutaka Prison. It is also offered as a standalone programme at Northland Region Corrections Facility (NRCF).

The objective of this programme is to assist tāne to understand how their thoughts, attitudes and behaviours led to their offending and assist them to develop strategies for maintaining any positive change. It includes constructing an offence map, challenging attitudes and thinking that support offending, managing emotions, managing relationships and managing conflicts, as well as developing safety plans. This is done with a Māori cultural lens.

The key factors targeted for change by the programme are:

- violence propensity
- anti-social attitudes
- offence related, problem thinking and feelings
- criminal associates
- poor self-control and impulsivity
- self-management and problem-solving skills
- alcohol and drugs, as both a rehabilitation need and a health issue
- Interpersonal skill deficits and relationship difficulties.

## TARGET GROUP

Mauri Tū Pae is a group-based programme, delivered by Māori service providers, for men with a range of offending needs.

## ELIGIBILITY CRITERIA

- Age – Any
- Gender – Male
- Culture – open to all cultures and nationalities

## SECURITY CLASSIFICATION

- Minimum to Low Medium at Waikeria, Hawkes Bay, Whanganui, NRCF and Rimutaka

- Minimum to Low at Tongariro for those on segregation

## **LOCATIONS AVAILABLE**

**Prison:** Mauri Tū Pae is offered as phase two of Te Tirohanga located in units at Tongariro Prison, Waikeria Prison, Whanganui Prison, Hawkes Bay Regional Corrections Facility and Rimutaka Prisons. It is also offered as a standalone programme at Northland Region Corrections Facility (NRCF).

## **DURATION**

- Mainstream - 55 sessions @ 2.5 hours; a total of 137.5 hours
- Segregated - 55 sessions @ 2.5 hours; a total of 137.5 hours

# Mauri Tū Pae Maintenance Programme (MTPMP)

Mauri Tū Pae and its Maintenance Programme are based upon a bicultural foundation guided by the cycle principles of Mauri:

**Mauri Noho** (Languishing Mauri), **Mauri Tū** (Restoring Mauri), **Mauri Oho** (Flourishing Mauri), **Mauri Tū Pae** (Fully Restored, Flourishing and Maintained Mauri) (M Durie).

The overarching goal of the programme is to increase wellbeing and reduce re-offending.

**These are achieved through three ngā whāinga/goals:**

1. **Whakaohooho:** To help tāne maintain their motivation to change/remain in Mauri Tū Pae.
2. **Arotake me Whakapakari:** To help tāne review and consolidate skills and mātauranga learnt on the programme by applying them to situations in their life post-programme. Practicing and applying skills will support Mauri Tū Pae and wellbeing.
3. **Taunaki:** To help tāne needs they may continue to have post-programme and identify further support networks or skills which may help them manage these needs.

The Maintenance Programme is delivered within prisons with follow up sessions in the community. It consists of:

1. Monthly 1.5-hour group sessions to be facilitated at sites that deliver Mauri Tū Pae. The number of sessions attended remains flexible for individuals based on their offender plan. These sessions are optional but may be subject to recommendations to engage in sessions. Be aware that not all graduates will have the availability to this service.
2. Three required individual sessions. These are to be delivered in the community once released. However, the first of the three sessions may be delivered directly prior to release. These sessions are a compulsory component of the programme and required in order to complete the Programme. The sessions may involve whānau and can be delivered virtually or in-person, and at non-corrections community sites (e.g., marae, home, etc.).

## TARGET GROUP

Mauri Tū Pae Maintenance Programme use group, individual and whānau-based sessions both in prison and in the community. It is delivered by Māori service providers, for men who have completed Mauri Tū Pae programme on the current sentence.

## ELIGIBILITY CRITERIA

To be eligible for placement on the Mauri Tū Pae Maintenance Programme, individuals must have successfully completed a Mauri Tū Pae Programme on their current sentence. If an approved override was made to attend the Mauri Tū Pae Programme this remains in effect for Mauri Tū Pae Maintenance Programme.

**Note:**

- Occasionally participants can complete Mauri Tū Pae but are then further recommended other programmes or treatment on the same sentence. In the case that they repeat a Medium Intensity Programme, or are referred to psychologists (e.g., to complete an STU programme), they may no longer be eligible/appropriate for MTPMP.
- Those who started but did not finish Mauri Tū Pae are not eligible (e.g., exited).
- Individuals who have completed a Mauri Tū Pae programme on a previous sentence are not eligible for referral to Mauri Tū Pae Maintenance unless the full programme is undertaken again.

- Individuals who have completed a rehabilitation programme other than the Mauri Tū Pae (e.g. Medium Intensity Rehabilitation Programme – MIRP; Sailsi Matagi; Special Treatment Unit for Tāne with Violent Offending – STU:VO) are not eligible for this programme.
- Individuals who have completed stand-alone alcohol and other drug programmes (e.g., the Intensive Treatment Programme - ITP; Drug Treatment Programme – DTP; or Tāmaua te Koronga Youth Focused AOD programme) but not Mauri Tū Pae are not eligible for this programme.
- Individuals who are located in the Te Tirohanga units but have not yet completed the Mauri Tū Pae programme are not eligible for this programme.

## COMPLETION CRITERIA – IMPORTANT

In order to complete the programme, **only the individual community sessions are compulsory**. All graduates have access to community sessions, whereas some prison graduates may not have access to prison-based sessions due to availability, movements, etc.

## ENTRY CRITERIA - PRISON

- Have signed the consent form agreeing to complete the Mauri Tū Pae Maintenance Programme.
- Have the appropriate security classification for the facility the programme is delivered in.
- **Are able to access the unit or site where the group maintenance is delivered. Note:** Some participants may move to prisons which do not have MTPMP, or to units within a prison (e.g., high security) where movements are not possible. Therefore, not all graduates of MTP will be able to access MTPMP in prison (but all can access it in the community).

## LOCATIONS AVAILABLE

- **Prison:** Each graduate will be automatically opted into a rolling group MTPMP delivered monthly at the sites which deliver Mauri Tū Pae programme. They are **not required**, so people can opt out, or be unable to attend (e.g., at a different site).
- **Community:** Each graduate will be referred for three individual maintenance sessions in the community with MTP providers. These are **required for completion**. More sessions are possible on a case-by-case basis. All participants return to the provider who delivered their MTP programme. In some cases, this may mean remote delivery.

## DURATION

- **In prison:** No minimum or maximum amount. Monthly sessions to be offered at sites which deliver Mauri Tū Pae programme (only).
- **In community:** Three individual maintenance sessions. These can include whānau and be delivered via technology or kanohi ki te kanohi (face to face). More sessions available on request.

## TIMING

- Tāne are referred to prison monthly sessions after programme completion.
- Tāne are referred to community sessions on release.

# Tikanga Māori Motivational Programme

The Tikanga Māori Motivational programme offers a range of culturally-responsive motivational programmes for people in the Corrections' care who identify as Māori. The programme is designed to motivate participants to fully engage in rehabilitation programmes by supporting them to understand their cultural identity and encouraging them to embody the kaupapa and tikanga of their tipuna. It is based on common Tikanga values (manaakitanga, whānaungatanga, rangatiratanga and wairuatanga) but gives providers flexibility to deliver programme content that reflects local customs and culture.

## **TARGET OFFENDER GROUP**

The Tikanga Māori Motivational Programme is a kaupapa Māori base programme focused on offenders who identify as Māori and whose motivation has been identified as low or a potential barrier that could prevent them from pursuing further rehabilitative programmes.

## **ELIGIBILITY CRITERIA**

- Age – Any
- Gender – Male and Female
- Culture – Māori

## **SECURITY CLASSIFICATION**

Minimum to Low Medium

## **LOCATIONS AVAILABLE**

All prison and community sites

## **DURATION**

4 days

# Short Rehabilitation Programme for Men

The Short Rehabilitation Programme for Men (SRP- M) assists men to alter the thoughts, attitudes and behaviour that led to their offending, and aids them to develop strategies for maintaining any positive changes.

The programme content is responsive to the cultural needs of Māori tāne. This includes the use of Te Whare Tapa Whā model of balance and well-being.

The key factors targeted for change by the programme are:

- violence propensity
- anti-social attitudes
- offence related, problem thinking and feelings
- criminal associates
- poor self-control and impulsivity
- self-management and problem-solving skills
- alcohol and drugs, as both a rehabilitation need and a health issue
- interpersonal skill deficits and relationship difficulties.

## TARGET GROUP

The SRP- M is a small group programme for males aged 20 years and above with a medium risk of re-offending and identified rehabilitation needs.

Men should only be referred for a SRP- M when they are in locations where the Medium Intensity Rehabilitation Programme (MIRP) is unable to be provided, or there are barriers which would preclude them from attending a MIRP e.g. insufficient time remaining on their sentence. The programme is run in small groups of no more than four participants.

## ELIGIBILITY CRITERIA

- Age – 20 years of age or older
- Gender – Male
- Medium risk of re-offending following the sentence being imposed (RoC\*RoI 0.3 to <0.7)

## SECURITY CLASSIFICATION

Appropriate to the facility where the programme is held, excluding men with a maximum-security classification.

## LOCATIONS AVAILABLE

Prison (All sites) and community.

## **DURATION & TIMING**

- 24 sessions of 2.5 hours 2 to 4 days a week

In prison:

- If the prisoner's sentence is under two years attendance at the programme should finish prior to their Statutory Release Date (SRD).
- Prisoners who have not yet reached their parole eligibility date (PED) are considered eligible for this programme.

# Te Whare Hāpai Tangata

*Te Whare Hāpai Tangata is a consolidation of the Department's medium intensity youth programmes, Mauri Toa Rangatahi and the WHARE Programmes, both of which were being phased out between Dec 2020 and June 2021 and replaced with Te Whare Hāpai Tangata.*

Te Whare Hāpai Tangata means 'the house which uplifts people'. It is a strengths-based and holistic offence-focussed rehabilitation programme designed specially to engage young adults.

The programme weaves together Western psychological tools and principles (Cognitive Behavioural Therapy) with Te Ao Māori approaches to identity and wellbeing (e.g., Te Tuakiri o te Tangata, pūrākau, Te Whare Tapa Whā etc). Te Whare Hāpai Tangata consists of six modules, each consisting of group sessions, individual sessions, experiential learning activities, and support sessions or whānau hui.

As part of the programme, a wrap-around support/reintegration mentor works intensively with each participant to ensure that needs such as accommodation, whānau support, and employment etc are identified and worked on while the participants are on the programme. This support/reintegration service runs throughout the programme and continues post-programme (3 months post-programme for community-based participants, and 6 months post-release for prison-based participants).

## TARGET GROUP

Te Whare Hāpai Tangata targets young men 24 years and under with medium risk of re-offending and any offence type except for sexual offending.

The programme is run in prisons and in the community.

It combines both rehabilitation and reintegration and so is suitable for young men who need additional support post-programme.

## ELIGIBILITY CRITERIA

- Age: 24 and under
- Gender: Male
- Risk: Medium risk of re-offending following sentencing – those who have a RoC\*RoI 0.15 to <0.69 are assessed for suitability
- Open to all offence types, with the exception of sexual offending.
- Willingness to engage
- Sentence length: Must have sufficient length of sentence to complete the rehabilitation component of the programme (i.e., approximately 14 weeks).

## SECURITY CLASSIFICATION

Minimum to high, and appropriate to the facility where the programme will be held

## **LOCATIONS AVAILABLE**

The programme will be available in Northland Region Corrections Facility, Otago Corrections Facility, Waikeria Prison, Hawkes Bay Regional Prison, Rimutaka Prison and Christchurch Men's Prison. In the community, the programme is being offered in Wellington, Auckland, Hamilton, Southland, Christchurch and Hawkes Bay.

# Medium Intensity Rehabilitation Programme (MIRP)

The Medium Intensity Rehabilitation Programme (MIRP) assists males to alter the thoughts, attitudes and behaviour that led to their offending, and aids them to develop strategies for maintaining any positive changes.

The key factors targeted for change by the programme are:

- violence propensity
- anti-social attitudes
- offence related, problem thinking and feelings
- criminal associates
- poor self-control and impulsivity
- self-management and problem-solving skills
- alcohol and drugs, as both a rehabilitation need and a health issue
- interpersonal skill deficits and relationship difficulties.

## TARGET GROUP

The MIRP is a group-based programme for males aged 20 years and above with a medium risk of re-offending and identified rehabilitation needs. Any offence type (excludes index offending that is sexual)

## ELIGIBILITY CRITERIA

- Age: 20 years or older at the start of the programme
- Gender: Male
- Risk: Medium risk of re-offending following the sentence being imposed (RoC\*RoI 0.3 to <0.7)

### Specific eligibility:

- Individuals with an index offence of domestic violence and a RoC\*RoI between 0.5-0.69 should be referred to MIRP rather than the Family Violence Programme.
- Individuals serving a custodial sentence who are on an Indeterminate Life Sentence (but not Preventive Detention) and meet the eligibility criteria require a psychologist's assessment to assess their suitability for referral to this programme.
- Individuals serving a custodial sentence of Preventive Detention are not eligible for the Medium Intensity Suite of Programmes and need to be referred to Psychological Services for intervention.
- Individuals who have an index sexual offence are not normally eligible for entry into the programme however; those with sexual convictions may be accepted into the programme on a case-by-case basis, in consultation with Psychological Services.
- Individuals with (non-sexual) offences against children will be considered on a case-by-case basis and requires consultation with Psychological Services.
- Individuals whose index offending is for 3rd or subsequent Alcohol and Drug related driving offences with a RoC\*RoI below 0.3 are automatically eligible for an over-ride into the medium risk band.

## **SECURITY CLASSIFICATION**

Minimum to High, and appropriate to the facility where the programme is held.

## **LOCATIONS AVAILABLE**

All Prison and some community sites.

## **DURATION**

14 weeks, 53 sessions, 4 times a week for 2.5 hours

# Saili Matagi

Saili Matagi assists men to identify and change beliefs, attitudes and behaviours that have resulted in violent offending. The programme aims to reduce intergenerational violence and the likelihood of re-offending. The programme is based on the Pacific nations' cultural principles and delivered through a "proverbial language" approach. The therapeutic approach incorporates Pasifika Matua within the delivery of group sessions to transfer the cultural values, beliefs and concepts that are familiar to men of Pasifika cultures.

The key factors targeted for change by the programme are:

- violence propensity
- anti-social attitudes
- offence related, problem thinking and feelings
- criminal associates
- poor self-control and impulsivity
- self-management and problem-solving skills
- alcohol and drugs as a rehabilitation need
- interpersonal skill deficits and relationship difficulties

## TARGET GROUP

Saili Matagi is a group-based programme for men who identify as being of Pacific descent.

## ELIGIBILITY CRITERIA

- Age: 20 and over
- Gender: Male
- Risk: Medium risk of re-offending following the sentence being imposed (RoC\*RoI 0.3 to <0.7)

Specific Eligibility:

- Individuals serving Preventative Detention sentences are not eligible and need to be referred to Psychological Services for intervention.
- Those with sexual offences are not normally eligible for entry into the programme. However, offenders with historical sexual convictions may be accepted into the programme on a case-by-case basis in consultation with Psychological Services.
- Offenders whose index offending is for 3rd or subsequent Alcohol and or Drug related driving offences with a RoC\*RoI below 0.3 are automatically eligible for override into the medium risk band.

## SECURITY CLASSIFICATION

Minimum to Low Medium

## LOCATIONS AVAILABLE

Spring Hill Corrections Facility – Pacific Focus Unit

**DURATION**

17 weeks, 55 sessions, 4 times a week for 2.5 hours.

# Short Rehabilitation Programme for Women

The programme helps participants examine the cause of their offending and develop specific skills to reduce the likelihood of them re-offending. The programme content incorporates a relational approach, taking into account the different ways that women relate to others and form attachments.

Other factors considered are the abuse and victimisation of the women themselves, and substance abuse as it relates to the offence process. However, when these issues are identified as needs, the women are referred to specialist services.

The key factors targeted for change by the programme are:

- violence propensity
- anti-social attitudes
- thinking and feelings
- criminal associates
- poor self-control and impulsivity
- self-management and problem-solving skills
- alcohol and drugs, as both a rehabilitative need and a health issue
- relationship difficulties

## TARGET GROUP

The Short Rehabilitation Programme for Women is a rehabilitation programme that targets females. The programme is run in a small group of no more than four participants. Wāhine should only be referred for a SRP-W when they are in locations where a Kōwhiritanga programme is unable to be provided, or where there are barriers which would preclude them from attending a Kōwhiritanga programme e.g. insufficient time remaining on their sentence to complete a Kōwhiritanga programme, or inability to work in a large group setting.

## ELIGIBILITY CRITERIA

- Age: Any
- Gender: Female
- Risk: Women under 0.5 RoC\*RoI are considered automatically eligible.
- For women above 0.5 RoC\*RoI referral for psychological assessment is required. Only those recommended as suitable by the psychologist will be considered eligible to attend.

### Specific criteria:

- Individuals serving a custodial sentence who are on an Indeterminate Life Sentence (but not Preventive Detention) and meet the eligibility criteria require a psychologist's assessment to assess their suitability for referral to this programme. Persons serving Preventive Detention are not eligible for the Medium Intensity Suite of Programmes and will continue to be referred to Psychological Services for intervention.
- Women convicted of sexual are not normally eligible for entry into the programme. However, women with historical sexual convictions may be accepted into the programme on a case-by-case basis in consultation with Psychological Services.

- Women with (non-sexual) offences against children will be considered on a case-by-case basis and require consultation with Psychological Services.
- Women whose index offending is for 3rd or subsequent Alcohol and or Drug related driving offences with a RoC\*RoI below 0.3 are eligible for override into the medium risk band.

## **SECURITY CLASSIFICATION**

Appropriate to the facility the programme is delivered in.

## **LOCATIONS AVAILABLE**

Prison and Community Probation sites.

## **DURATION**

24 sessions of 2.5 hours 2 to 4 days a week

# Kōwhiritanga

Key factors targeted for change by the programme are:

- violence propensity
- anti-social attitudes
- offence related/ problem thinking and feelings
- criminal associates
- poor self-control and impulsivity
- self-management and problem-solving skills
- alcohol and drugs, as both a rehabilitation need and a health issue
- relationship difficulties

The programme incorporates a relational approach to delivery, which takes into account the different ways that women relate to others and form attachments. Other factors considered are the abuse and victimisation of the women themselves, and substance abuse as they relate to the offence process. However, when these issues are identified as needs, the women are referred to specialist services.

## TARGET OFFENDER GROUP

Kōwhiritanga is a group-based programme for female participants with identified rehabilitation needs.

## ELIGIBILITY CRITERIA

- Age: Any
- Gender: Female.
- Risk: Women under 0.5 RoC\*RoI are considered automatically eligible.
- For women above 0.5 RoC\*RoI referral for psychological assessment is required. Only those recommended as suitable by the psychologist will be considered eligible to attend. When a psychologist and a facilitator co-deliver Kōwhiritanga women of all risk bands are considered eligible.
- When Kōwhiritanga is delivered by two facilitators, only women under 0.5 RoC\*RoI will be considered automatically eligible.

### Specific criteria:

- Individuals serving a custodial sentence who are on an Indeterminate Life Sentence (but not Preventive Detention) and meet the eligibility criteria require a psychologist's assessment to assess their suitability for referral to this programme.
- Individuals serving a custodial sentence of Preventive Detention are not eligible for the Medium Intensity Suite of Programmes and need to be referred to Psychological Services for intervention.
- Women convicted of sexual offences are not normally eligible for entry into the programme. However, those with historical sexual convictions may be accepted into the programme on a case-by-case basis in consultation with Psychological Services.
- Women with (non-sexual) offences against children will be considered on a case-by-case basis and require consultation with Psychological Services.
- Women whose index offending is for 3rd or subsequent Alcohol and or Drug related driving offences with a RoC\*RoI below 0.3 are eligible for override into the medium risk band.

## **SECURITY CLASSIFICATION**

Appropriate to the facility where the programme is held.

## **LOCATIONS AVAILABLE**

All women's prisons and community. *Please note if an adequate cohort for Kōwhiritanga is unable to be brought together then a SRP-W will be run to meet their treatment needs.*

## **DURATION**

- Community: 10 weeks, 40 sessions of 2.5 hours for 4 times per week in the community
- Prison: 15 weeks, 56 sessions of 2.5 hours for 4 times per week

# Short Motivational Programme - Revised

The Short Motivational Programme (SMP) is designed to enhance the offenders' motivation to understand their offending and assist them to learn how to make positive changes in their attitudes and behaviour.

In particular, the programme includes components to increase offenders' problem awareness and recognition, reduce ambivalence, address cognitive distortions, consider options and formulate goals. It focuses on increasing offenders' commitment/motivation to change rather than teaching them how to change.

The expected outcomes for offenders who complete the SMP are:

- to recognise the behaviours that contribute to their offending.
- be motivated to address the factors that contribute towards their offending.
- be able to formulate goals which will assist them to become offence free.
- be motivated and prepared to participate in other rehabilitation programmes /supports in prison or in the community, which address the factors that contribute towards their offending.

## TARGET GROUP

Men and women who display low motivation to address their offending behaviour/attend rehabilitative programmes.

## ELIGIBILITY CRITERIA

- Age: Any
- Gender: Male and Female
- Risk: Men and women with a RoC\*RoI up to 0.69 not serving current sentence for sexual offences. **Note:** Men and women with historical sexual convictions may be accepted into the programme on a case-by-case basis. The override process is managed regionally. Men and women with a RoC\*RoI 0.7 and above or an index sexual offence should be referred to Psychological Services with the SMP-R identified as the reason for referral. Note: the local Manager Psychological Services should be consulted prior to the referral to discuss the suitability of the referral.

## LOCATIONS AVAILABLE

All Prison and Community sites.

## SECURITY CLASSIFICATION

Any.

## DURATION

5 structured sessions, 1 per week, each session approximately 1 hour.

# Head Start

Head Start is a brief group intervention designed to help participants develop basic skills and coping mechanisms that can enhance an individual's wellbeing and support them in identifying positive changes they can make to their lives. It will assist participants to manage difficult emotions, behaviours and thoughts; improve relationship skills; and enhance decision making skills. Head Start was previously called Behavioural Skills Programme.

While the programme *does not* focus on offending, it does provide participants with the opportunity to develop basic skills and coping mechanisms that can be used to navigate life both in prison and in the community. The programme aims to support/enhance treatment readiness and target barriers to engagement in higher intensity, offence focused treatment. Such barriers may include behaviours that maintain a higher level of security classification and hinder progression, and concerns about working in a group environment. The programme can prepare participants for engagement in more targeted, offence focused treatment such as the Medium Intensity Rehabilitation Programme. However, the programme *does not* target motivation and commitment to engage in offence focused treatment.

## TARGET GROUP

Men.

## ELIGIBILITY CRITERIA

- Age: 17 and over.
- Gender: Male/located in a men's prison.
- Risk: Men with a RoC\*RoI 0.3 to 0.69 not serving a current sentence for sexual offences. **Note:** Men and women with historical sexual convictions may be accepted into the programme on a case-by-case basis.

## LOCATIONS AVAILABLE

Christchurch Men's Prison, with others on occasion dependent on resource and need.

## SECURITY CLASSIFICATION

Any.

## DURATION

11 group sessions, 2.5 hours long, 3 to 4 times per week.

# Psychology Programmes

## SPECIAL TREATMENT UNIT PROGRAMMES – PRISON (OVERVIEW)

The key function of Special Treatment Units (STUs) is to provide specialist treatment programmes to men serving prison sentences who meet the eligibility criteria. The selection of candidates to attend STU treatment is based on a targeting process involving the following:

- Current business rules, which determine the critical eligibility criteria and priority rules for treatment at STUs. These rules prioritise individuals who are considered to be at a high risk of re-offending, have one or more treatment needs, and meet responsivity criteria.
- A comprehensive COBRA report, which provides most of the information to identify individuals who meet the eligibility criteria as determined by the business rules. The report provides information on the following criteria:
  - Age
  - Static risk rating
  - Offence and victim type
  - Relevant previous offences
  - Qualifying sentence length
  - Time left in sentence
  - Security rating.

### TARGET GROUP

- Men who have a repetitive pattern of violent offending behaviour and high risk/needs (STU VO see below). These individuals often have multiple and complex rehabilitative needs and responsivity issues that cannot be adequately addressed in less intensive treatment programmes or interventions. Targeting specialist STU input to the higher risk group matches the risk principle. The needs of this group are addressed at Karaka (Waikeria Prison), Puna Tatari (Springhill Prison), Matapuna (Christchurch Men's Prison), and Te Whare Manaakitanga (Rimutaka Prison) Special Treatment Units. Those with community-based sentences can access treatment through Tai Aroha Special Treatment Unit (Hamilton).
- Men who have sexually offended against adult victims (STU AO see below) who have been assessed as high risk and have multiple treatment needs. Assessment and treatment of men who have sexually offended against adult victims is a specialist area. This programme is run periodically at Karaka (Waikeria Prison), Puna Tatari (Springhill Corrections Facility), and Matapuna (Christchurch Men's Prison) STUs. Matapuna is going to be piloting a Medium Intensity Programme (~150 hours of group therapy) for people assessed as average/medium risk with a moderate number of treatment needs.

- Men who have sexually offended against child victims (STU CSO see Sexual Offending section). Assessment and treatment of men who have sexually offended against children is a specialist area. Two programmes are offered at Te Piriti at Auckland Prison and Kia Marama at Rolleston Prison to accommodate a range of risk and need level. The High Intensity Programme (~300 hours of group therapy) is offered to people assessed as high risk and who have a number of treatment needs. The Medium Intensity Programme (~150 hours of group therapy) is for people assessed as average or medium risk with a moderate number of treatment needs. The Short Intervention Programme previously offered at Auckland Prison and Rolleston Prison will be discontinued. The needs of men with lower risk/needs are best met through traditional case management processes, providing reintegration strategies and support.
- Ad hoc requests:
  - Ad hoc requests will be identified by the requesting agency and will be subject to the approval of the STU Manager Psychological Services.

# Sexual Offending

## Short Intervention Programme for Child Sexual Offending (SIP CSO) now discontinued

Rationale: People assessed in the lowest risk bands will not derive measurable benefit from offence-focused interventions. The 5-year sexual recidivism rate for people assessed as Level I-very low risk is 1.9% (ASRS-R of -3) and the rate for those assessed as Level II-below average risk is 3.7% (ASRS-R of -1 and -2). That means for every 100 people assessed as level I, 98.1% of them will not reoffend within five years on release. For those assessed as level II, 96.3% of that cohort will not reoffend within five years on release. The rate of sexual reoffending is so low for these two groups that they will derive no measurable benefit from offence-focused interventions.<sup>1</sup> Several researchers<sup>2 3</sup> have suggested that interventions for those assessed as low risk should focus on resettlement and reintegration, noting as well that these goals are also more in line with the strengths-based approaches and are more consistent with Te Ao Māori worldview.

Furthermore, the research suggests that people at the lowest risk band are at no greater risk than “spontaneous first-time offending for people without a criminal record”<sup>4</sup>. As such, there would be no greater rationale to offer sex offence specific treatment to those with non-sexual offending than there would to those in the lowest risk band for sexual offending. Those falling in the next lowest risk band (i.e., Level II), still have a below average risk for sexual reoffending. By virtue of their assessed risk and need, people in this group have only one or two criminogenic needs but likewise would not require an offence-focused psychological intervention. “The most appropriate strategy for working with Level II people is simple, traditional case management to monitor compliance ... the focus should be on short-term interventions with an emphasis on problem solving and assistance in accessing community services.”<sup>5</sup>

Case Managers have undergone training to support them to use the strategies and tools they already use with other types of offending, to work with people who have sexual offending against children and are assessed as lower risk.

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<sup>1</sup> Hanson, K. & Yates, P.M. (2013). Psychological Treatment of Sex Offenders. *Current Psychiatry Reports*. 15:348. doi: 10.1007/s11920-012-0348-x

<sup>2</sup> Hanson, R.K., Bourgon, G., Helmus, L., & Hodgson, S. (2009). The principles of effective correctional treatment apply to sexual offenders: A meta-analysis. *Criminal Justice and Behaviour*, 36 (9), 865-891. doi: 10.1177/0093854809338545

<sup>3</sup> Wakeling, H.C., Mann, R.E. and Carter A.J. (2012). Do low-risk sexual offenders need treatment? *Howard Journal of Criminal Justice*, 51(3), 286-299. 10.1111/j.1486-2311.2012.00718.x

<sup>4</sup> Hanson, R. K., Bourgon, G., McGrath, R. K., Kroner, D., D’Amora, D. A., Thomas, S. S., & Tavaréz, L. P. (2017). *A five-level risk and needs system: Maximizing assessment results in corrections through the development of a common language*. New York, NY: The Council of State Governments Justice Center.

<sup>5</sup> Ibid

## Special Treatment Unit: Medium Intensity Programme for Sexual Offending.

The Medium Intensity Programme (MIP) for sexual offending provides a group-based intervention for people with harmful sexual behaviour who have been assessed with moderate risk and need. We are piloting the programme across two STU's for sexual offending against children and one STU for sexual offending against adults.

The programme is delivered by therapists from the Kia Marama, Te Piriti and Matapuna STUs within independent prison units. These units operate as community of change environments.

This intervention is approximately 6-7 months in duration, and this includes 4-weeks for a comprehensive psychological assessment, 150 hours (5 months) of group-based treatment intervention and 4-weeks for post-treatment psychological report preparation. Within the group-based intervention the men will have an opportunity to develop insight into their offending through the preparation of an offence

Where psychological assessment indicates a higher level of recidivism risk (above average to well above average) an override to the high intensity STU CSO programme will be undertaken.

### TARGET GROUP AND SELECTION PROCESS

- The Department holds a national service list of individuals identified as eligible for the MIP (while in pilot phase this is a manual function).
- Te Piriti and Kia Marama Managers Psychological Service are responsible scheduling individuals to undertake the Medium Intensity Programme in a fair and timely manner. Those who have exceeded, or within 6 months of their PED, are considered a priority.
- If the programme for people who offend against adults is expanded following the pilot, the same process will be undertaken by Matapuna, Karaka and Puna Tatari STUs.
- If assessed as suitable (e.g., motivated to attend, accepting responsibility for their offending, able to work in a group setting), individuals are allocated to a programme.
- Case managers and schedulers are notified of the treatment start by the STU staff, and this information is uploaded into IOMS and onto the Offender Plan.
- The STU staff will request for the individual to be transferred by Prison Services to the unit concerned as necessary.

#### **Please note:**

- Case managers and psychologists are encouraged to send advice about individuals they identify as suitable for possible selection, to the psychologist managing the scheduling or the Manager Psychological Service concerned.

### ELIGIBILITY CRITERIA

- Age: 20 years and over (18–19-year-olds are considered on a case-by-case basis)
- Gender: Male/housed within men's prison
- Assessed as average risk of sexual reoffending (e.g., an ASRS-R score 0, 1 or 2 or through psychological assessment override). Individuals who have an ASRS-R score of 3 and who psychologists assess as **not** requiring a high intensity treatment programme will also be considered.
- Child sexual offending - At least one conviction for a child sexual offence or admits to child sexual offending (male or female victims).
- Adult sexual offending – At least once conviction for sexual offending against an adult (female), no child sexual offending.

- Individuals with a sentence of Preventive Detention or a Life sentence would be considered on a case-by-case basis for the MIP programme.
- Must have enough time remaining on their sentence to complete the programme which would likely be at least twelve months to allow for triage, scheduling, transfer, assessment, programme completion and post-treatment report.

## **SECURITY CLASSIFICATION**

Minimum to low-medium.

## **LOCATIONS AVAILABLE**

Available in prison only: CSO at Rolleston Prison and Auckland Prison. ASO at Matapuna (currently)

## **DURATION**

The length of the entire intervention is approximately 7 months.

## Special Treatment Unit: High Intensity Programme - Child Sexual Offending

The two Special Treatment Units (STUs) for child sexual offending are: Kia Marama at Rolleston Prison and Te Piriti at Auckland Prison. They are both high-intensity programmes that deliver group-based treatment within a therapeutic environment for men with convictions for sexual offences against children (male or female). Their aim is to reduce re-offending by:

- motivating men to want to change by addressing the risks and effects of their individual offending.
- reducing the recidivism risk of men who have sexually offended against children, using intensive group treatment that targets risk factors associated with re-offending.
- increasing the safety for children in society by providing the participants with life-long skills that will assist them to manage their risk factors.

The programme includes constructing an offence map, challenging attitudes and thinking that support offending, managing emotions, managing relationships and managing conflicts, as well as developing safety plans. The programme helps participants to understand their offending, while motivating them to take full responsibility for addressing and managing their offending patterns and the problems linked with their offending. Each participant therefore has an individually formulated treatment plan that identifies all offence related factors, some of which may be addressed in individual treatment. Behavioural interventions are also used within the structured community of change environments in these units.

### TARGET GROUP

Those convicted of, or have admitted to, one or more sexual offences against someone under the age of 16, or offences related to child sexual abuse images and are assessed as having high treatment needs and at least moderate-high risk of reoffending.

### ELIGIBILITY CRITERIA

- Age: 20 years and over (18-19 year-olds are considered on a case-by-case basis)
- Gender: Male/those housed in men's prison
- Considered to be at least above average or well above average risk of reoffending or as requiring high intensity treatment (e.g., ASRS-R score of 3 or higher or through psychological assessment override).
- All men with relevant convictions on indeterminate sentences (i.e. life or preventive detention) should be automatically waitlisted regardless of their RoC\*RoI or ASRS-R. Further screening/assessment will determine the most appropriate treatment pathway for each individual.
- At least one conviction for a child sexual offence or offences related to child sexual abuse images (index or prior history) (male or female victims).
- Other considerations:
  - The individual should have at least moderate-high rehabilitative needs as indicated by a psychological assessment.
  - The individual must undergo assessment by STU psychologists over a 4-week period once they are scheduled for a treatment programme.

- At times a potential participant may have significant responsivity barriers (e.g., acute mental health issues, physical limitations, motivational deficits or major mental health issues significantly affecting their functioning, etc.) which may need to be addressed or managed prior to engagement in the programme.
- Adapted programmes are infrequently run for those with intellectual difficulties.
- Prison sentence length sufficient to complete the treatment programme (approximately 2 years or more).
- If re-referred to the programme, the individual needs to be considered 'ready' to undertake the programme, including that the reasons for their previous non-completion have been addressed.

## **SECURITY CLASSIFICATION**

Minimum to low-medium.

## **LOCATIONS AVAILABLE**

The programme is delivered internally at two STUs for Child Sexual Offending:

- Kia Marama at Rolleston Prison
- Te Piriti at Auckland Prison

Note: an adapted version of the programme is available for those whose cognitive functioning and responsivity issues indicate that they would benefit from a more experiential learning environment with reduced literacy demands

## **DURATION**

Each group contains 10 participants, who meet for 2.5-hour sessions, 3 times a week for 35 weeks (95 sessions total) in addition to other therapeutic community activities. The entire programme takes approximately 9-12 months, as it includes an intensive pre- and post-treatment assessment period. Reintegration and safety planning are included as part of the programme.

## Special Treatment Unit: Adult Sexual Offending

The STU ASO is designed for male prisoners who have are considered to be at a high risk of re-offending, and have convictions for sexual offences against adults. The programme is a group-based programme that involves individuals actively learning the skills necessary to live without further offending.

The programme includes constructing an offence map, challenging attitudes and thinking that support offending, managing emotions, managing relationships and managing conflicts, as well as developing safety plans. The programme helps men to understand their offending, while motivating them to take full responsibility for addressing and managing their offending patterns and the problems linked with their offending. Each participant therefore has an individually formulated treatment plan that identifies all offence related factors, some of which may be addressed in individual treatment. Behavioural interventions are also used within the structured community of change environments in these units.

### TARGET GROUP

People with sexual offences against an adult female.

### ELIGIBILITY AND ENTRY CRITERIA

- Age: 20 years and over (18 to 19 year-olds are considered on a case-by-case basis)
- Gender: Male/those housed in men's prison.
- Considered to be at least above average or well above average risk of reoffending or as requiring high intensity treatment (e.g., ASRS-R score of 3 or higher, or through psychological assessment override).
- At least one index or previous conviction for an adult sexual offence.
- All men with relevant convictions on indeterminate sentences (i.e. life or preventive detention) should be automatically waitlisted regardless of their RoC\*RoI or ASRS-R score. Further screening/assessment will determine the most appropriate treatment pathway for each individual.
- Medium to high rehabilitative needs
- Other considerations:
  - Sentenced to more than 2 years.
  - At times a potential participant may have significant responsivity barriers (e.g., acute mental health issues significantly affecting their functioning, etc.) which may need to be addressed or managed prior to engagement in the programme.
  - Sufficient time to complete the programme.
- Motivated to attend the programme and be honest about their offending and open to changing problematic patterns of behaviour.

### SECURITY CLASSIFICATION

Minimum to Low Medium

## **LOCATIONS AVAILABLE**

One treatment group a year is run at their Special Treatment Units situated at three male prison facilities:

- Karaka Unit at Waikeria Prison
- Puna Tatari at Spring Hill Corrections Facility
- Matapuna at Christchurch Men's Prison

To participate in this intervention, men will transfer to the designated site to attend the programme.

## **DURATION**

Approximately 8 months: 3 times a week for 82 sessions of 2.5 hours, plus other therapeutic community activities. Taking account preparation phase of the programme and of pre- and post-treatment assessment requirements, a minimum of one year is usually required to complete the core treatment.

## Special Treatment Unit: Violent Offending

The STU VO is divided into four phases broadly based on Livesley's integrated framework for the treatment of personality disorders. The phases include: safety and containment (12 sessions); control and regulation (12 sessions); exploration and change (45 sessions); and, integration and synthesis (12 sessions).

The programme includes constructing an offence map, challenging attitudes and thinking that support offending especially violence propensity, managing emotions, managing relationships and managing conflicts, as well as developing safety plans. The programme helps individuals to understand their offending, while motivating them to take full responsibility for addressing and managing their offending patterns and the problems linked with their offending. Each participant therefore has an individually formulated treatment plan that identifies all offence related factors, some of which may be addressed in individual treatment. Behavioural interventions are also used within the structured community of change environments in these units.

### ELIGIBILITY CRITERIA

- Age: 20 years or older (18–19-year-olds can be considered on a case-by-case basis).
- Gender: Male/housed in the men's prison.
- Considered to be at a high risk of reoffending or as requiring high intensity treatment (e.g., RoC\*RoI 0.7 or above or through psychological assessment override).
- Index or previous sentence/s for violent offending.
- All men with relevant convictions on indeterminate sentences (i.e., life or preventive detention) should be automatically waitlisted regardless of their RoC\*RoI. Further screening/assessment will determine the most appropriate treatment pathway for each individual.
- Individuals with historical sexual convictions *may* be accepted into the programme on a case-by-case basis in consultation with Psychological Services. However, the violent offending is currently prioritised for treatment.
- High rehabilitative need for violence.
- Prison sentence length sufficient to complete the treatment programme (approximately 2 years or more).

**Other considerations:** Undergo an extensive assessment by the therapy team at the unit. At times a potential participant may have significant responsivity barriers (e.g., acute mental health issues significantly affecting their functioning, etc.) which may need to be addressed or managed prior to engagement in the programme. Adapted programmes are infrequently run for those with significant intellectual difficulties.

### SECURITY CLASSIFICATION

Minimum to Low-Medium.

### LOCATIONS AVAILABLE

The programme is delivered by Psychological Services and located in Special Treatment Units at four prisons for men:

- Karaka at Waikeria Prison
- Puna Tatari at Spring Hill Corrections Facility
- Te Whare Manaakitanga at Rimutaka Prison
- Matapuna at Christchurch Men's Prison

To participate in this intervention, individuals will need to transfer to the programme location where scheduled.

## **DURATION**

Group: Approximately 84 sessions – 2.5 hours, 3 days a week, plus other therapeutic community activities.

Taking into account the preparation phase of the programme and of the pre- and post-treatment assessment requirements, a minimum of one year is usually required to complete the core treatment.

## Special Treatment Unit: Violent Offending - Tai Aroha – Community

Tai Aroha is a tikanga based high intensity Special Treatment Unit in central Hamilton offering a 16-week violence prevention programme, for up to 10 participants at any time. It offers a residential therapeutic community for men of all cultures and nationalities, providing residents with an intensive therapeutic programme. The participants also have access to mental health clinicians, health and wellbeing activities, education, and planning for employment.

Target participants are male, considered to be at a high risk of committing further violence, and serving community sentences of Home Detention or Intensive Supervision, who have multiple treatment needs related to violent and non-violent offending. Men who are serving custodial sentences of less than two years, and who have Leave to Apply for Home Detention, will also be considered.

The programme includes constructing an offence map, challenging attitudes and thinking that support offending especially violence propensity, managing emotions, managing relationships and managing conflicts, as well as developing safety plans. The programme helps men to understand their offending, while motivating them to take full responsibility for addressing and managing their offending patterns and the problems linked with their offending. Each participant therefore has an individually formulated treatment plan that identifies all offence related factors, some of which may be addressed in individual treatment. Behavioural interventions are also used within the structured community of change environments in these units.

The programme aims to provide a culturally responsive rehabilitation experience, in particular for Māori participants, by respecting and incorporating Tikanga Māori. However, the programme is not exclusively for Māori. Whānau or other support people can play an important role. Participants are followed up and supported after the programme by the team to help facilitate a smoother integration back into the community.

The programme is delivered in an 'open rolling format'. This means participants will be joining the programme at different times and as a placement becomes available. The open rolling format means that participants may be at different stages of the programme at any given time. The programme comprises four phases: assessment and orientation; core group treatment; treatment progression and access to approved activities outside Tai Aroha; graduation and reintegration support.

### ELIGIBILITY CRITERIA

- Age: 20-40 years (18–19-year-olds can be considered on a case-by-case basis)
- Gender: Male
- Considered to be at a high risk of reoffending or as requiring high intensity treatment (e.g., RoC\*RoI 0.7 or above or through psychological assessment) override.
- Violent index, previous sentences for violent offending, or undetected history of violence.
- Individuals with historical sexual convictions *may* be accepted into the programme on a case-by-case basis in consultation with Psychological Services. However, the violent offending is currently prioritised for treatment.
- Men serving sentences of Home Detention or Intensive Supervision in the community. Men serving short custodial sentence (less than two years) who have Leave to Apply for Home Detention will also be considered.

- Eligible individuals will have at least four months left on their Home Detention or Intensive Supervision sentences at the time of programme commencement.
- **Other considerations:** Undergo an extensive assessment by the therapy team at the unit. At times a potential participant may have significant responsivity barriers (e.g., acute mental health issues significantly affecting their functioning, etc.) which may need to be addressed or managed prior to engagement in the programme. Adapted programmes are infrequently run for those with significant intellectual difficulties.

## SECURITY CLASSIFICATION

N/A

## LOCATIONS AVAILABLE

- Hamilton

## DURATION

Group: 16 weeks intensive, 4 days a week, plus additional therapeutic community activities.

## Short Violence Prevention Programme (SVPP) Group/Individual

The SVPP was designed by the Department of Corrections psychologists to support men with high risk/needs and who are serving short prison sentences or have limited time left on their sentence. The aim is to explore unhelpful patterns of thinking, responding, and behaving in order to break their cycle of re-imprisonment.

The importance of providing interventions to individuals who present with a high risk of reoffending has been well documented (e.g., Andrews & Bonta, 2016), and the STU VO is the Department's current flagship rehabilitative programme for these individuals. The STU VO applies an intensive therapeutic framework to addressing the complex offence-focused needs of men serving prison sentences. However, as a minimum of nine months is usually required for men to complete the core treatment components of the STU VO, access to this programme is restricted to those serving a sentence of more than two years. Consequently, the STU VO is not an accessible rehabilitation pathway for men serving sentences of less than two years.

### TARGET GROUP

The SVPP is a 26-session group-based treatment that targets the criminogenic needs of men with high risk/needs serving short sentences of imprisonment.

### ELIGIBILITY CRITERIA

- Age: 18 or older
- Gender: Male/housed in a men's prison
- Considered to be at a high risk of reoffending or as requiring high intensity treatment (e.g., RoC\*RoI 0.7 or above or through psychological assessment override).
- Index or previous sentence/s for violent offending.
- Individuals with historical sexual convictions *may* be accepted into the programme on a case-by-case basis in consultation with Psychological Services. However, the violent offending is currently prioritised for treatment.
- Sentence length of less than 2 years. Those with sentences over 2 years can be considered case-by-case if they no longer have enough time to complete STU VO, or they are currently high security and will not have time to reduce their classification and attend a STU VO.
- Sufficient sentence length remaining to complete the treatment programme, approximately four months or more of imprisonment remaining prior to SRD.

### SECURITY CLASSIFICATION

Mixed security classifications: Minimum to High.

### LOCATIONS AVAILABLE

Currently available at Otago Corrections Facility, Waikeria and Rimutaka Prison.  
Also being rolled out in additional locations, with Auckland prison in the near future.

## **DURATION**

- 4 months, which includes pre-programme assessment and preparation, core treatment (26 sessions – 3 hours, 3 days a week), and post-programme assessment
- Individual sessions will be used to support delivery of the core programme content and to address any treatment barriers.

During the context of COVID-19 restrictions and custodial staff shortages the Group-based programme was amended to be delivered on an individual basis.

## Kimihia (Women's Violent Offending Programme)

The Kimihia programme is designed to meet the needs of high-risk/high-need women who are: serving a sentence of imprisonment for index violence offending, and/or have a prior history of persistent violent behaviour, and/or have engaged in violence during incarceration. Women who have offended and who have high-risk/need profiles are typically individuals from significantly disadvantaged, often abusive, backgrounds with higher rates of psychological problems than the general population. In order to account for the unique pathways to offending taken by women, and the identification of distinct risk and protective factors, gender responsive approaches to treatment are recommended. Therefore, both criminogenic and non-criminogenic risk factors relating the aetiology of women's offending are considered in the Kimihia Programme, to understand risk patterns for both assessment and treatment approaches.

The Kimihia Programme forms part of the Department of Corrections Women's Strategy and Action Plan. The programme is currently available at Auckland Region Women's Corrections Facility. The Kimihia Programme is sequential and consists of four phases, with group treatment being part of a wide programme and located in the second phase of the programme. The placement of participants into the programme is part of a tailored approach to meet the needs of each participant and their specific circumstances.

The group component is four months duration. The remainder of the programme is individualised and varies depending on length of sentence and each of the participants need. The programme has been designed to be facilitated by two female psychologists, with a maximum of ten participants per programme.

### **TARGET GROUP**

High-risk/high-need women who are serving a sentence of imprisonment for index violence offending, and/or have a prior history of persistent violent behaviour, and/or have engaged in violence during incarceration.

### **ELIGIBILITY CRITERIA**

- Age: 20 or older
- Gender: Female/housed in the women's prison
- Considered to be at a high risk of reoffending or as requiring high intensity treatment (e.g., RoC\*RoI 0.5 or above or through psychological assessment).
- Index violence conviction and/or a prior history of persistent violent behaviour and/or have engaged in violence during incarceration.
- Women sentenced to imprisonment.
- High-risk/High-need women.

### **SECURITY CLASSIFICATION**

All security classifications.

### **LOCATIONS AVAILABLE**



Auckland Region Women's Corrections Facility.

## **DURATION**

Group phase of 4 months. The remainder of the programme is individualised and varies depending on length of sentence:

- 4 phases (Responsivity, Group, Maintenance and Release)
- Individual participation option for those with serious barriers to group participation.

## Young Adults' Intervention (YAI)

*\*Please note that the YAI has replaced the SHIP-YA which was closed at the end of June 2021.*

This framework is designed to provide young adult males (aged 18-24 years), who are assessed as high risk of reoffending or as requiring high intensity treatment, the opportunity to engage in an evidence-based, therapeutic and culturally responsive intervention. It can be delivered individually or in group format. Participants will develop skills to manage attitudes, thoughts, emotions, and behaviour that lead to offending and disruptive prison behaviour.

The individual version of the YAI is tailored to the client's specific needs/responsivity barriers and location. Young adults will be supported to continue with their appropriate rehabilitation pathway beyond the individual engagement either in prison or the community. As such it is flexible and responsive to the young adult's availability, and particular responsivity barriers such as reducing security classification.

### TARGET GROUP

The programme is designed to provide treatment for young men (aged 18-24 years), who are at a high risk of acquisitive, general, sexual or violent reoffending<sup>6</sup>.

### ELIGIBILITY CRITERIA

- Age: 18-24 years of age (25–27-year-olds on a case-by-case basis)
- Gender: Male/housed in a men's prison.
- Assessed at high risk of reoffending or requiring high intensity treatment (e.g., RoC\*RoI 0.7 or above or through psychological assessment override).
- Not eligible for the STU-VO or SVPP, and/or require preliminary intervention to enhance readiness to attend these programmes.
- Prison sentence length sufficient to complete the treatment programme (approximately 14 weeks [depending on risk and need] remaining before SRD).

### SECURITY CLASSIFICATION

YAI (individual) can be delivered from minimum to maximum security.

### LOCATIONS AVAILABLE

The YAI will be available in all prisons in the near future.

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<sup>6</sup> Note: we have included young men with violent convictions if they do not meet the criteria/threshold for the STU:VO or the SVPP, or STU:ASO in the case of sexual offending.

## **DURATION**

The individual intervention may vary in duration on a case-by-case basis, depending on treatment goals and needs, so no time constraints apply.

### **NOTE:**

When demand and availability allow, the YAI can be delivered in a group format. The Young Adults Group Intervention (YAGI) is a rolling group programme with no fixed start dates, beginning in prison and transitioning men into the community phase.

Groups may be composed based on operational viability and clinical need of participants (e.g., sexual, violent, acquisitive, adapted etc). In prison, the YAGI involves up to 4 weeks pre-treatment assessment phase and approximately 12 weeks core treatment (depending on risk and need). Ideally, they have a minimum of 14 weeks remaining before SRD.

## High Risk Personality Programme-Revised

The High Risk Personality Programme - Revised (HRPP-R) was designed to address a gap in rehabilitative programmes for men housed in maximum security (Auckland Prison) and high security (previously Christchurch Men's Prison) units with significant and ongoing behavioural difficulties, which may be linked with challenging personality characteristics. The programme provides a flexible, intensive, rehabilitative treatment option for men who have remained at maximum or high security classifications for lengthy periods and are having difficulties reducing their classification due to ongoing concerns about their behaviour management. Specific goals of the programme include:

- Engaging and motivating men classified as high/maximum security, and who are at high risk of reoffending, in meaningful rehabilitative activities.
- Providing participants with the insight and skills to reduce their rate of violent misconduct and disruptive behaviours.
- Enabling a greater opportunity for participants to develop a stable history of institutional behaviour to allow justifiable reductions in their classification.
- Assisting participants to identify meaningful and achievable pathways out of high and maximum-security environments and into other rehabilitative and re-integrative opportunities during their imprisonment.

### TARGET GROUP

Males housed in maximum security (Auckland Prison) with significant and ongoing behavioural difficulties, which may be linked with challenging personality characteristics.

### ELIGIBILITY CRITERIA

- Age: 20 or older (18–19-year-olds can be considered on a case-by-case basis).
- Considered to be at a high risk of reoffending or as requiring high intensity treatment (e.g., RoC\*RoI 0.7 or above or through psychological assessment override).
- High or maximum-security classification.
  - Lower security individuals (e.g., low-medium classification) who are housed in a high security environment due to behavioural management issues may be considered for the HRPP-R if they are likely to remain in the higher security environment for the duration of the programme/Phase.
- Men who are expected to be available to attend the programme for **at least Phase One (three months)** of the three-phase programme (which is approx. 11 months in total).
- Other considerations:
  - Auckland runs groups of maximum 5 participants due to room capacity.
  - Christchurch runs programmes of maximum 10 participants.

### SECURITY CLASSIFICATION

High to Maximum

## **LOCATIONS AVAILABLE**

Christchurch and Auckland Prisons

## **DURATION**

The full programme is three phases of approximately 3-4 months per phase - 2.5 hours, 3 days a week, plus 1-hour individual therapy per week. However, most participants need to complete only Phase 1 or 2 before being able to lower their security classification and/or improve their institutional behaviour. Hence, typically treatment is 3 – 6 months and then participants can be referred to other applicable treatment in lower security settings (e.g., STU VO), when applicable.

## Harmful Sexual Behaviour Against Children (community-based)

The aim of the programme is to help individuals reflect on their harmful sexual behaviour and develop a lifestyle away from such behaviour in the future. The programme provides individual, group and family counselling and support, as well as advice for partners and/or whānau/family members.

Treatment length and type will depend on the individual's assessed risk and needs. Typically, the length of treatment is approximately 6-12 months. For higher risk individuals, youth, and individuals with learning disabilities/low cognitive functioning; a longer period of treatment may be recommended.

Individuals will also periodically undertake system reviews. System reviews provide whānau and other supports an opportunity to give feedback on the individual's progress, risks and other issues. It is expected that Probation Officers will participate and contribute actively to system reviews.

### TARGET GROUP

- Men. (Females are accepted on a case-by-case basis with approval from Senior Advisor HSB)
- Low/low moderate risk: ASRS-R between -3 and 2 and/or assessed by a Departmental psychologist to be at low or low-moderate risk of sexually re-offending.
- Must have a conviction for a sexual offence against a child (victim under 16-years old). This includes both contact and non-contact offending – i.e., online offending and child sexual exploitation material.
- Exclusions:
  - Clients on an Extended Supervision Order (ESO) or Public Protection Order (PPO). These clients will need to be referred to their local Corrections Psychologist Office.
  - Clients who have satisfactorily completed their recommended treatment already. An override form will need to be completed if the individual has undertaken prior treatment with a Department of Corrections psychologist (i.e., individual psychological treatment, Kia Marama, Te Piriti or the Short Intervention Programme).

### LOCATIONS AVAILABLE

The three providers deliver services in the following locations:

- Safe Network (Kaitia, Whangarei, Waitemata, Auckland, Manukau, Hamilton, and Tauranga)
- WellStop (Wellington, Palmerston North, Taranaki and Napier)
- STOP (Christchurch, Dunedin and Nelson)

When treatment is unavailable in your location (and the individual is unable to travel) alternative options should be discussed with Senior Advisor, Harmful Sexual Behaviour (HSB) at National Office ([hsb@corrections.govt.nz](mailto:hsb@corrections.govt.nz))

## **DURATION**

- Individuals must have sufficient time left on community-based sentence to enable completion of assessment and treatment (a typical programme takes 6-12 months).

# Alcohol and Other Drug Programmes

## Tāmaua Te Koronga (Youth AOD)

Tāmaua te Koronga ('to hold on fast with the end goal in mind') is a kaupapa Māori alcohol and other drug (AOD) programme originally designed for rangatahi in prison, however has now been adapted to also support those in the community.

Adolescent and youth substance use differs from that of adult users. Young people are developmentally different to adults, have shorter histories of use, are more likely to be poly-drug users, and more likely to have external pressures to undertake treatment. Given the prevalence of adverse childhood events the programme takes a trauma informed approach, cognisant of issues related to neurodiversity and is primarily focussed on addressing participants' AOD needs. The programme delivery also acknowledges coexisting mental health conditions and the need to strengthen recovery capital.

N.B. This programme is not currently running in the prison due to numbers on site not sufficient to create a viable cohort. It is currently only being offered in the community at Hastings Community Corrections site.

### **TARGET OFFENDER GROUP**

Offenders under the age of 25.

### **ELIGIBILITY CRITERIA**

- ASIST score of 16+ for any substance (non-cumulative)
- Age under 25 at the start of the programme.
- Sentenced or remand convicted with sufficient time remaining to complete for prison programme.
- Community-based sentence or order with sufficient time remaining to complete the programme in the community.

### **SECURITY CLASSIFICATION**

Minimum to High.

### **LOCATIONS AVAILABLE**

Hawkes Bay Region.

## **DURATION**

- 8 Weeks, new intake of a maximum of 12 for each programme with Programmes delivered alternately in the main prison and the community.

## **Te Ira Wāhine (Gender Responsive AOD)**

Te Ira Wāhine ('the female element') is a kaupapa Māori intensive alcohol and other drug (AOD) programme designed specifically for wāhine in prison. Te Ira Wāhine is delivered by experienced AOD practitioners employed by a contracted iwi Māori provider Te Ha Oranga. This kaupapa model is founded the importance of mana, mauri, tapu, whanaungatanga and whakapapa to the wellbeing of whanau and self, thus the importance of growing cultural capital as a path to growing recovery and social capital. It honours the essence (life principle) and the mana (authority) of what it means to be a Woman, and in particular, a Māori Wāhine in Aotearoa. The programme is whānau dynamic, oranga focused and utilises mātauranga Maori to address AOD related risk and needs. By necessity the programme takes a trauma-informed approach and is responsive to coexisting mental health conditions. As well as group therapy, participants of Te Ira Wahine will also engage in other activities such as 1:1 counselling, toiora and activities to whakaoho mauri e.g. waiata.

## **TARGET OFFENDER GROUP**

All Wāhine over the age of 18.

## **ELIGIBILITY CRITERIA**

- ASIST score of 16+ for any substance (non-cumulative).
- Age: 18 years and over
- Sentenced or remand convicted for any offence (including sexual offences) with sufficient time remaining to complete

## **SECURITY CLASSIFICATION**

High Security.

## **LOCATIONS AVAILABLE**

Auckland Regional Women's Corrections Facility.

## **DURATION**

- 8 Weeks

- 12 participants per intake, 10 new participants will join each new intake alongside two graduates from the previous intake. The two graduates are tuakana who support the new participants through the programme.

## Intensive Alcohol and Other Drug Treatment Programme (ITP)

The current Intensive Alcohol and Other Drug Treatment Programme (ITP) is an eight-week recovery focused group programme that includes a comprehensive assessment process to individualise the programme based on needs, and strengths. The programmes are based in best practice and effectiveness literature gleaned from experience from the community and correctional contexts, and aftercare is seen as an important component. The key goal is to provide participants with the knowledge, attitudes and skills required to address their substance use. As part of the AOD Aftercare Worker service, graduates of the service will receive ongoing support for six to twelve months from an AOD Aftercare Worker to reduce the likelihood of relapse and support recovery.

### TARGET OFFENDER GROUP

Unable to attend a more intensive Programme due to having insufficient time left on sentence Or their ASIST score indicates they do not necessarily need a more intensive programme.

### ELIGIBILITY CRITERIA

- ASIST score of 16 or higher for any substance (non-cumulative). If an individual has no ASIST score available, case managers must administer the ASIST and enter the score into IOMS;
- Age: be 18 years and over
- Sentenced or remand convicted for any offence with sufficient time remaining on sentence to allow for completion of the programme; but access to a Drug Treatment Programme is unlikely within the sentence time frame.

### SECURITY CLASSIFICATION

Minimum to High.

### LOCATIONS AVAILABLE

Programme is delivered at Auckland Region Women's Corrections Facility (ARWCF), Spring Hill Corrections Facility, Manawatu Prison, Christchurch Women's Prison and Northern Regional Corrections Facility (NRCF).

**Note:** The participation of sex offenders in the Programme is to be considered on a case-by-case basis, and at the discretion of the lead case worker. The upcoming AOD service at Rolleston Prison will address this limitation. This new programme is due to open in April 2023.

## DURATION

- 8 weeks
- Participants should receive between 12 and 26 hours of contact time with programme delivery staff per week (contact time includes activities, including therapeutic, cultural and recreational activities)
- Individual sessions will occur on a monthly basis at a minimum. Individual sessions will also be available to programme participants where a specific need is identified (e.g. catch up sessions due to illness, or to overcome responsivity barriers). Some participants may require more frequent contact, such as weekly sessions;
- 6 to 12 months AOD aftercare worker support for programme graduates (optional).

## ACCESS TO AFTERCARE SERVICES

- Graduates have the opportunity to access the AOD Aftercare Service
- AOD aftercare workers are responsible for providing on-going support and guidance to graduates

## SUPPORT WORKERS AS PART OF ITP

Peer Support Worker

- Based on the concept that people who have had a lived experience of mental illness and/or addiction and/or incarceration and have experienced recovery, with specialised training, can act as 'recovery coaches' to others (peers) and can intentionally engender hope by role-modelling recovery in a way that others without experience of mental illness and/or addiction and/or incarceration cannot. Peer Support Workers are members of the multi-disciplinary team (MDT).
- This role is unique, with specific training and workforce infrastructure, including supervision and on-going professional development.

## He Waka Tōtika Te Ao Oranga (AOD)

He Waka Tōtika, facilitated by Waihōpai Hauora, is an intensive Kaupapa Māori whanau centred alcohol and other drug (AOD) treatment programme for all genders. The programme aims to address recidivism and problematic AOD use.

## TARGET OFFENDER GROUP

The service is suitable for people with AOD treatment needs in Corrections' care and management and who have offended more than once or have a high risk of reoffending.

## ELIGIBILITY CRITERIA

- ASIST score of 10+ for any substance (non-cumulative).
- Age: 18 years and over
- Be subject to any custodial or community-based sentence or order (this includes being remanded in custody) for any offence. Any sexual or serious violence offending will be considered on a case-by-case basis.

## SECURITY CLASSIFICATION

Any.

## LOCATIONS AVAILABLE

The Department has a contract with Waihopai Hauora to deliver He Waka Tōtika in the Invercargill area including Invercargill Prison.

## DURATION

- 8 Weeks – 12 months
- 12 participants per intake

## Te Ara Tiaho – Rolleston Prison only

The change to Rolleston's prison population presented an opportunity to consider a flexible and more accessible pathway of care for people identified and assessed as having an AOD need. The programme is only available to Rolleston prisoners. It is subject to a continuous improvement plan to ensure that any changes required are effected immediately thus reducing any disruption to service delivery improving wellbeing (oranga) outcomes.

Te Ara Tiaho is a programme specifically designed to offer treatment based on the person's assessed need. Dependent on need, a person may be directed toward a day programme of 10 weeks' duration, or a brief intervention programme of 6 weeks' duration.

Te Ara Tiaho also offers aftercare for those men who have already completed a drug treatment programme or an intensive treatment programme.

Uniquely, Te Ara Tiaho also works with the whanau of men participating in the day programme as part of the continuum of care.

## ELIGIBILITY

Brief Intervention Group (subject to pre-assessment)

- Aged 18 years and over
- Have an ASIST score under 14
- Serving a prison-based sentence where the Parole Eligibility Date (PED) and or Sentence Release Date (SRD) is at least 12 months from the start of a programme and no more than 3 years before a person's PED or SRD.

Day Programme (subject to pre-assessment)

- Aged 18 years and over
- Have an ASIST score over 14
- Serving a prison-based sentence where the Parole Eligibility Date (PED) and or Sentence Release Date (SRD) is at least 12 months from the start of a programme and no more than 3 years before a person's PED or SRD

Note that for both programmes, the assessment process can override ASIST scores on recommendation of the AOD clinician.

## Drug Treatment Programmes (DTPs)

AOD services and programmes in prison offer an opportunity to improve wellbeing, address responsivity, enhance desistance and reduce recidivism. The current Drug Treatment Programmes (DTPs) were originally designed to provide people intensive alcohol and other drug (AOD) treatment utilising the therapeutic community approach of community as method, "right living" and a recovery focus. .

These programmes typically are delivered by AOD practitioners and allied workforces employed by providers contracted by the Department. The primary focus of these programmes is on supporting participants to understand the part substance use and coexisting conditions play in their lifestyle choices and for them to make different self-managing decisions and lifestyle choices. These in turn will contribute to a reduction of substance use related harms and recidivism.. This includes addressing any links between AOD use and offending as well as the impact on their whānau.

These programmes provide participants with the opportunity to build recovery capital, social support and improve their emotional self regulation, coping skills, communication and relationship skills. Before they graduate, participants will develop a plan to address relapse prevention and support their recovery.

### **TARGET OFFENDER GROUP**

These programme are intended for people with a moderate to high or high level of AOD treatment need. Potential participants should have an ASIST score of 16 or higher for any substance (i.e. not a cumulative score of 16 or higher across all substances). If an individual has no ASIST score available, case managers must administer the ASIST and enter the score into IOMs. The higher the score the more appropriate this intervention in our suite of interventions is.

### **ELIGIBILITY CRITERIA**

- Age: 18 years and over
- Gender: Any
- Offences: Serving a prison sentence for any offence (including sex offences, on an opioid substitution treatment programme or an IDU)

- RoC\*RoI: Any
- Motivation: ideally motivated to engage in AOD treatment and willing to participate in all aspects of the programme
- 
- AOD Withdrawal status: No longer be physiologically dependent on alcohol or other drugs prior to entry..
- Cognition & Literacy: Have sufficient cognitive abilities and literacy to fully participate in the programme. Be able to cope in a group treatment setting.
- Psychiatric comorbidity: Be free from any major active (and poorly or untreated) psychiatric illness or severe neurological injury that would prevent them benefiting from the programme.
- Sentence End Date: Have sufficient length of sentence still to serve to enable completion of the programme and ideally close to release to make the most of aftercare services). The unit's PCO and the Programme clinical manager will consider short serving prisoners (i.e. those with less than 6 months to serve on their sentence) on a case by case basis when no suitable alternative AOD treatment is available.
- Overrides: If an individual does not meet the eligibility criteria, case managers can propose an override to their Principal Case Manager (PCM).
- With PCM support for the rationale, a signed override form can be submitted to [AODinterventions@corrections.govt.nz](mailto:AODinterventions@corrections.govt.nz) for approval. Once approved, the National scheduler will be notified, the individual waitlisted, and the case manager informed of the approval.

## SCHEDULING

- A person can attend a programme more than once but the decision to do this within or across sentences, will be dependent on individual need and requires consultation between the prisoner, case manager, and clinical manager.

## SEQUENCING

1. **Sequencing of AOD intensive interventions and STU**
2. If an individual is eligible and suitable for both an AOD intensive intervention and a STU, the case manager should determine whether their AOD use is related to their offending or not.

It is preferable for the AOD intervention to have been completed prior to an STU

### **Sequencing of the DTP and MIRP**

If an offender is eligible and suitable for both the AOD intensive interventions and a MIRP they can be completed sequentially.

## SECURITY CLASSIFICATION

Intensive AOD programmes are unavailable to people with a maximum security classification. See table below.

## LOCATIONS AVAILABLE

<b>Prison</b>	<b>DTP Phase 1 (Treatment)</b>	<b>DTP Phase 2 (Maintenance)</b>	<b>Total DTP Length</b>
Auckland Regional Women's Prison *Due to open in April 2023	3 months	3 months	6 months
Auckland Men's Prison (segregated) (Low – Min)	3 months	3 months	6 months
Waikeria Prison (Min – Low Med)	3 months	3 months	6 months
Hawkes Bay Regional Prison – segregated (Low Med)	3 months	3 months	6 months
Hawkes Bay Regional Prison – non-segregated (Min - Low Med)	6 months	6 months	12 months
Whanganui Prison (Min – Low Med)	3 months	3 months	6 months
Rimutaka Prison – segregated (High Sec only) * Currently suspended due to custodial staffing constraints	3 months	3 months	6 months
Rimutaka Prison – non-segregated (High Sec only) * Currently suspended due to custodial staffing constraints	3 months	3 months	6 months
Tongariro Prison – segregated (Min – Low Med)	3 months	3 months	6 months
Christchurch Men's Prison (Min – Low Med)	3 months	3 months	6 months
Otago Corrections Facility (Min – Low Med)	3 months	3 months	6 months

## DURATION

As part of aftercare some graduates of programmes will be supported to stay on to provide a tuakana-teinamentoring role. These 'graduates will continue to engage with the aftercare or continuing care component, also. having access to other education, rehabilitation, training, and employment opportunities as required.

With limited staff and resources Corrections staff will need to carefully manage participant expectations on the likelihood of their selection for mentor roles. .

## ACCESS TO AFTERCARE SERVICES

- Graduates have the opportunity to access the AOD Aftercare Service

- AOD aftercare workers are responsible for providing on-going support and guidance to graduates of the AOD programme as part of their transition back into a mainstream unit and/or following their release into the community.
- Aftercare workers, who are based in prisons, will begin to engage participants as people are nearing completion of either their intensive drug treatment (Phase 1) or maintenance phase (Phase 2).

## **ALLIED HEALTH AND SOCIAL SUPPORT WORKERS**

### Peer Support Worker

- Based on the concept that people who have had a lived experience of mental illness and/or addiction and/or incarceration and have experienced recovery, with specialised training, can act as 'recovery coaches' to others (peers) and can intentionally engender hope by role-modelling recovery in a way that others without experience of mental illness and/or addiction and/or incarceration cannot. Peer Support Workers are members of the multi-disciplinary team (MDT).
- This role is unique, with specific training and workforce infrastructure, including supervision and on-going professional development.

### Cultural Support Worker

- The role is to enhance and protect the Mana of the Provider to deliver a culturally responsive programme. The Cultural Support worker will support the clinical team to meet the Māori Responsive Requirements by supporting staff competency, providing training, mentoring and development for personnel, supporting the programme participants to enhance their own cultural identity and mana, monitoring and maintaining cultural integrity of the cultural concepts, frameworks and competencies used in the programme and supporting reflective practice from a cultural perspective.

## **Te Ira Tangata**

Te Ira Tangata, facilitated by Te Hā Oranga, is a community-based intensive kaupapa Māori trauma informed alcohol and other drug (AOD) treatment programme for all genders. The programme aims to address recidivism and substance misuse related harms.

## **TARGET OFFENDER GROUP**

The service is suitable for people with AOD treatment needs in Corrections' care and management and who have offended more than once or have a high risk of re-offending.

## **ELIGIBILITY CRITERIA**

- ASIST score of 10+
- Age: 18 years and over
- Community-based sentence or order with sufficient time remaining to complete the programme and have been sentenced to more than one offence or be at a high risk of re-offending

## **LOCATIONS AVAILABLE**

The Department has a contract with Te Hā Oranga to deliver Te Ira Tangata in the Auckland region. Possible venues will be in West Auckland, Central Auckland and South Auckland.

## **DURATION**

- 12 weeks, delivered in groups, with individual sessions available. It will be delivered for a minimum of three days a week with an additional one day per week allocated to one-on-one support.
- Participants will receive between 12-26 hours of contact time with programme delivery staff per week (contact time includes treatment as well as other activities, including cultural and recreational activities).
- Individual sessions will occur on a weekly basis with a minimum monthly requirement for each participant. Individual sessions will also be available to programme participants where a specific need is identified (e.g. catch up sessions due to illness, or to overcome responsivity barriers).

## **Community Residential AOD Treatment Programme (Packages of Care - PoC)**

The Community Residential Alcohol and Other Drug (AOD) Treatment Initiative aims to ensure access to and choice of community based AOD resources to address problematic alcohol and other drug use. People accessing this service may be serving a community-based sentence, or be in prison and be subject to Parole, or Release on Conditions. The service also allows referrals of eligible individuals to be made at the pre-sentence stage.

A PoC is made up of three components: withdrawal management, residential treatment and continuing care. A 'complete' is defined as a participant who completes the residential treatment component as negotiated and agreed in their treatment plan and is transitioned into continuing care.

## **TARGET OFFENDER GROUP**

People accessing this service will have a high AOD treatment need, a high risk of dependence, and probably be experiencing health, social, financial, legal and relationship problems as a result of their AOD use

## **ELIGIBILITY CRITERIA**

- ASIST score of 16+ for any substance except tobacco
- Age: 18 years and over
- If subject to a community-based sentence or order: individuals must have a special condition to complete an AOD treatment or intervention and have sufficient length left on sentence still to serve, to enable completion of community residential AOD treatment programme. Individuals must have completed their community work hours, or have their community work sentence suspended, or be in the process of applying to have their community work sentence suspended

- If at the pre-sentence stage: individuals must have a possible sentencing outcome of a community-based sentence of at least 12 months, or a short term of imprisonment (less than 2 years)
- Individuals referred must be willing and able to move into a community residential AOD treatment facility and give their informed consent to the sharing of their information with community providers for both their full assessment and treatment.

## **WORK AND INCOME REQUIREMENTS**

Before being accepted into the community residential AOD treatment programme the individual must be on a Work and Income benefit, or willing to privately pay the additional costs involved per week. The probation officer/case manager must ensure the people are aware of this commitment. They may need to support the individual in making the appropriate arrangements prior to treatment start.

## **LOCATIONS AVAILABLE**

Kaitaia – Te Whare Ruruhau o Meri – (Hope House) (2 PoC)  
Whangarei – Salvation Army (2 PoC)  
Whangarei – Ngati Hine Health Trust (1 PoC)  
Auckland City – Salvation Army (2 PoC)  
Auckland (Waitakere) – Higher Ground (4 PoC)  
Rotorua - Manaaki Ora Trust (2 PoC)  
Hamilton – Salvation Army (2 PoC)  
Hawke’s Bay - MASH Trust (1 PoC)  
Wellington – Salvation Army (2 PoC)  
Blenheim – St Marks (1 PoC)  
Christchurch – He Waka Tapu (1 PoC)  
Christchurch – Odyssey House Christchurch (1 PoC)  
Dunedin – Moana House (4 PoC)

## **DURATION**

- Varies between providers, ranging from 8 to 39 weeks.
- The residential treatment and continuing care length will be determined by the Provider based on their assessment of the referred individual.

## **HE KETE ORANGA O TE MANA WĀHINE (HE KETE)**

He Kete is an 11 bed residential facility in Motukarara, located outside Christchurch. It provides a 16 week alcohol and other drug residential programme for women on bail, on parole, those who are seeking leave to apply for home detention or are currently subject to a community-based sentence or order. He Kete aims to create and embed lasting change for the participants and their whānau.

Any woman who has an alcohol and/or other drug harm related need and who is awaiting a bail hearing, applying for electronically monitored bail (EM bail), seeking leave to apply for home detention, preparing their release proposal for an upcoming parole hearing or currently subject to a community-based sentence or order (Intensive Supervision, Court Imposed Conditions of Release or Parole), may be eligible for the services provided by He Kete. However, priority will be given to women who are facing a remand in custody or who are applying for parole.

Eligible candidates will be women aged 18 years and older, who reside in Christchurch or the wider South Island, or are preparing a release proposal to reside in the South Island. Women from other areas may be considered on a case-by-case basis. Eligible candidates will meet some or all of the following criteria:

- Have a history of alcohol or drug misuse and or disorder
- Self motivated to complete treatment to address needs
- Intoxicated at time of offence and/or alcohol/drug related offending
- Previous attempt(s) at treatment

## **Te Whare Waimairiri – Recovery House (Te Whare)**

Te Whare is an 8 bed residential facility co-located in Christchurch with Odyssey House Christchurch Trust's men's residential facility. Best described as continuing care, Te Whare expands on the AOD rehabilitation service delivered by He Kete and includes a support programme as women transition back into the community. The service provides flexible arrangements that includes closer whanau contact (e.g. overnight stays for children), structure around study and/or work and respite for women who are already equipped with tools to address their addiction, but are struggling with challenges in the community. Women are strongly encouraged to stay connected to their community and whanau

### **ELIGIBILITY CRITERIA**

- Aged 18 years and over
- Identify as female
- Have completed alcohol or other drug therapeutic treatment (although priority is given to women who have completed the He Kete programme)
- Intend to live in the South Island when leaving
- Have a confirmed course of study (or enrolment onto a course of study) or work plan in place.

### **DURATION**

Length of stay can range from two to sixteen weeks and is based on each woman's needs and goals.



DEPARTMENT OF  
**CORRECTIONS**  
ARA POUTAMA AOTEAROA