

Summary

A residential treatment unit for child sex offenders at Auckland Prison. The programme has strong Maori content with a specific focus on promoting a therapeutic environment within a tikanga Maori framework.

Type of intervention

Prison, individual work, group work

Target groups, level of prevention and subgroups

(Potential) Offenders | Tertiary prevention | Adults (21+ years) | Men aged 18-20 can be considered on a case-by-case basis | Male | Prison, group work, individual work | English

Target population

The Te Piriti Special Treatment Unit at Auckland Regional Prison houses adult males who have been convicted of sexual offences against children.

Te Piriti was set up in 1994 and is closely modelled on the Kia Marama programme.

Delivery organisation

Department of Corrections (Statutory body), New Zealand.

Mode and context of delivery

The Te Piriti Special Treatment Unit specialises in the treatment of men who have been convicted of child sex offences. The key function of the Department's special treatment units is to provide specialist high intensity treatment programmes to men serving prison sentences who meet the eligibility criteria for the STU. Units operate as a therapeutic "community of change" environment.

The Child Sexual Offending Treatment Programme that is delivered at Te Piriti is a high-intensity psychological group programme that was designed based on international best practice principles in the treatment of men convicted of sexual offences against children.

Level/nature of staff expertise required

Te Piriti is staffed by psychologists, programme facilitators, reintegration co-ordinators, and custodial staff. Psychologists and programme facilitators are responsible for assessing a man's suitability for the programme, delivering treatment, and monitoring an individual's therapeutic progress. Reintegration coordinators work with participants to identify a reintegration pathway, address potential barriers to transitioning into the community, and preparing for release. Custodial staff support the unit to operate in accordance with the principles of a therapeutic community. Te Pirit staff have access to a cultural supervisor who provides guidance in bicultural clinical practices and cultural processes.

Intensity/extent of engagement with target group(s)

Te Piriti is a closed programme that runs for approximately 40 weeks. Group sessions are 3 hours in duration and are held three times per week. Each programme contains up to 10 men.

In addition to treatment-related activities, residents are expected to engage in meaningful communal tasks, participate in community meetings, and take responsibility for the unit. Some men may also engage in work within the unit or within the prison grounds (e.g., in the kitchen or garden).

Description of intervention

The Child Sexual Offending Treatment Programme is a highly structured intensive treatment programme that aims to support men to develop the knowledge, tools, and resources necessary to manage their risk of future sexual offending. During the programme men learn that their offending is the outcome of linked steps of thoughts and behaviour. It offers skills and strategies for breaking these links, and provides opportunities for men to begin making positive life and behavioural changes throughout the end-to-end pathway of the programme.

The programme views sexual offending through a relapse prevention framework based on cognitive and behavioural principles. It is considered that this treatment framework provides a robust approach to treating men who are at higher risk of sexual reoffending by:

- Encouraging the participant to view his offending as the outcome of a series of identifiable links in a chain of problematic behaviour, rather than as a random or spontaneous event
- Empowering participants to recognise that future sexual offending is preventable and that they can take a range of actions to disrupt or end the behaviour chain (such as through escaping or avoiding or active management of problematic sexual drives)
- Helping the participant to understand that while he may not always be responsible for the factors that increase his risk of reoffending, he is responsible for managing those factors appropriately.
- Providing a personalised framework for understanding his high risk emotions, thoughts, situations, relationships, and environments and the actions that will help to manage his risk of sexual offending over the long term.

Assessment

The programme consists of a four week assessment period that includes clinical interview and the administration of psychometrics designed to assess an individual's cognitive, emotional, and personality functioning; sexual functioning and characteristics; treatment and relevant clinical needs; and risk of sexual reoffending. The individual's sexual offending risk factors and most likely offending pathways are formulated in order to ensure that treatment is relevant to their needs.

Treatment

The programme is based on a best practice approach for group treatment for men who have sexually offended. The modules involve the application of cognitive behavioural interventions designed to target specific factors and adhere to the principles of effective correctional intervention (i.e., the Risk, Needs, and Responsivity model; Andrews and Bonta, 2017).

The first phase of the programme involves the development of insight into offence related patterns of thinking and behaviour that contributed to offending, while the second phase focuses on requisite skill development in order to manage future risk of re-offending.

Evaluation

In a 2003 evaluation, Nathan, Wilson and Hillman compared 201 Te Piriti graduates (who were released from prison before May 2000) against a group of 284 men with convictions for child sex offences who were released from prison without completing an STU programme. This control group had previously been used in a 1998 evaluation of the Kia Marama programme. Results from this study found that the sexual recidivism rate for Te Piriti graduates was 5.47 percent compared to the sexual recidivism rate of 22 percent in the control group. When recidivism rates were analysed separately based on ethnicity, Māori men who completed the Te Piriti programme had lower rates of sexual reoffending overall than Māori men who graduated from the Kia Marama programme. Due to Te Piriti's stronger focus on Māori content at the time this study was completed, it was considered that these findings added support to the view that programmes are more effective in reducing sexual recidivism when the design and implementation are attuned to the cultural needs of the participants

References

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RATING: *Promising*

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