

AUCKLAND  
HOMELESS  
STEERING  
GROUP

A REPORT ON THE PROGRESS OF TE  
KOOTI O TIMATANGA HOU - THE  
COURT OF NEW BEGINNINGS

Alex Woodley  
Point Research Ltd  
Drawing on work from Positive Thinking  
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## Executive Summary

### Progress Report

- This document provides a progress report on the Te Kooti o Timatanga Hou - the Court of New Beginnings (TKTH or NBC<sup>1</sup>).
- The report looks at the current processes as well as providing an indication on the outcomes for participants<sup>2</sup>.
- TKTH was established in October 2010, following advocacy to the Chief District Court Judge by Lifewise, an agency working with inner-city homelessness.
- The Chief Judge appointed Judge Fitzgerald in March 2010 to lead the establishment of the new court.
- Funding for a Co-ordinator/Programme Manager position was provided as a two-year pilot by the Auckland Homeless Steering Group.
- The aim was to respond to recidivist low-level public offending by homeless people in Central Auckland.

### Background

- Auckland City Mission estimates that there are approximately 100-150 people sleeping rough in the Auckland Central Business District.
- The cycle of homelessness is linked to the cycle of offending.
- TKTH is designed to address the underlying issues associated with offending
- A client-focussed plan is coordinated, implemented, and monitored by TKTH.
- Between October 2010 and August 2012 a total of 54 people were referred to TKTH.

### Method

- The agencies involved in the initiative provided data on service utilisation patterns for all 21 of TKTH participants eligible for enrolment up until 31 August 2011, for the six months prior to the programme, while on the programme, and six months after exiting the programme;
- Stakeholder interviews and focus groups were undertaken with 27 professionals, including operational staff and strategic stakeholders;
- A Kaumatua was interviewed about how TKTH was responding to the cultural needs of Māori participants;
- Short interviews were undertaken with fifteen court participants engaged with TKTH, and the partner of a court participant.

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<sup>1</sup> Some participants refer to the Court as the New Beginnings Court or NBC.

<sup>2</sup> Outcome evaluations that highlight the progress of participants would normally take place after a therapeutic court has been operating for at least two years (Peters 1996). The outcome results for this court are therefore an indication and may not fully capture exact outcomes for participants.

## Outcomes

### *Arrests (n=21)*

- The number of arrests dropped by two-thirds during participation, which was sustained in the six months following participation.
- The number of people arrested fell by one quarter (26 per cent) during participation and by 42 per cent in the six months following the programme.
- Of those who had been arrested, the number of times they were arrested fell from an average of 7.7 times prior to participation, to 2.6 times during and after the programme.
- This fall in offending was commented on by both operational staff and court participants as having been influenced by TKTH process.

### *Prison(n=21)*

Bed nights in prison reduced by:

- 78 per cent during participation
- 60 per cent in the six months following participation.

### *Health*

Interviewees report that court participants:

- Lead a healthier lifestyle
- Are dealing with substance abuse issues
- Have higher self-regard.

Emergency Department visits (n=21) reduced by:

- 16 per cent during participation
- 57 per cent in the six months following participation.

### *Housing*

- The number of participants known to be rough-sleeping decreased from sixteen to six.
- The number of Housing New Zealand Corporation tenancies for participants increased from zero to six. All tenancies remain current.
- The total bed nights for participants with HNZC tenancies increased from zero to 1185 (n=21).

### *Finances*

- A number of participants interviewed commented that TKTH had helped them receive a Work and Income benefit and manage their finances.

### *Social support*

- Some participants have reported better relationships and more frequent contact with family.
- Where appropriate, respondents had been introduced to organisations that could support them to reconnect with loved ones and their community.

### *Sustainability*

- The data suggests that the changes that the participants have made have been largely sustained, at least in the six months following graduation.

### **Service delivery - What is working well**

- The court process appears to make participants feel more involved in planning and proceedings than in the District Court and leads to a better understanding the court process.
- Participants found the 'round table' approach of TKTH friendlier and more engaging.
- TKTH felt more culturally welcoming to participants.
- Some participants observed that having other people care about them and see their potential had allowed them to see their own potential.
- A number of participants felt that the compulsory aspects of the programme only worked because TKTH helped cultivate a much more positive attitude amongst the participants than traditional court processes. It promotes confidence in the court.

### *Programme Manager*

- The role of the Programme Manager was seen as critical to the success of the court.
- The Programme Manager has kept agencies and participants engaged, focused on the plan, and provided the participants with practical support.

### *Collaboration*

- In general the collaborative approach works well, however there are gaps that need to be addressed.
- Staff and participants believe that this team approach leads to a greater understanding of the issues of homelessness amongst the agencies, which in turns leads to better solutions.
- The 'therapeutic alliance' is seen as an innovative and effective way of addressing the issues underlying homelessness.
- The relational way in which TKTH works means that communication with other agencies is improved.
- Some staff specialise in working with homeless offenders, which, from their perspective, results in more effective working relationships with their clients.

### **Service delivery - What is not working well**

#### *The challenges*

- There is debate about how strictly the entry criteria should be enforced.
- The role of the Programme Manager needs to be clarified to ensure it is not a social work role and duplicating services.
- Some stakeholders observed that wait lists and delays in service provision mean agencies are not always able to deliver the services that the Judge prescribes, so the Programme Manager has done more 'social work' than anticipated.

- Stakeholders feel that there have been a lower than expected number of mental health referrals. Some questioned whether there might be issues with the screening process.

### ***Critical Issues***

- Delays in access to some services are hampering the efficacy of TKTH.
- In addition to committing resources to support the work of TKTH, accommodation options (for up to 10 people), and dedicated alcohol and other drug treatment beds (for at least one person), are immediately needed.
- There is a call for new treatment options to help people with solvent-abuse issues.
- Some stakeholders perceive a lack of buy-in from key agencies. In part this is attributed to agencies being unsure of TKTH's role and the role of agencies in the court process.
- Managerial buy-in from the participating agencies and the commitment of resources to enable the work required by TKTH to be undertaken, are seen as necessary to support operational staff.
- There is potential to further strengthen the cultural framework practices of TKTH by working more closely with Kaumatua and Kuia, developing stronger partnerships with Māori service providers, and most importantly, supporting Māori participants to reconnect with hapu and iwi to build their identities and reconnect with their histories, culture, and tikanga.

### **Cost benefits**

- The cost benefits of Homeless Courts are difficult to assess. It would appear, however, that TKTH provides a cost benefit to the criminal justice system. The funding for TKTH required one new full-time employee. The cost for this has been met by the agencies involved in the project. This is likely to be covered by a reduction in the number of arrests and prison bed nights. It is noted, however, that there may be an increase in costs to other agencies, such as HNZA.



## 1. Introduction

*"This programme gives you a future. You can see something at the end of the tunnel other than just bars. You see your potential."*

***Court participant***

This report, commissioned by the Auckland Homeless Taskforce is a progress report of the Te Kooti o Timatanga Hou - the Court of New Beginnings (TKTH). The report, written by Point Research combines findings from Positive Thinking, an independent evaluation company contracted by Lifewise to undertake interviews with stakeholders and court participants, and Point Research, an independent research company contracted by the Auckland District Health Board to monitor the data and undertake interviews with previous court participants who were being tracked in the data.

TKTH was established in October 2010 following advocacy to the Chief District Court Judge by Lifewise, an agency working with inner-city homelessness. Funding for a Co-ordinator/Programme Manager position was provided as a two-year pilot by the Auckland Homeless Steering Group to respond to recidivist low-level public offending by homeless people in Central Auckland. It was part of a broader inter-sectoral initiative to move people out of homelessness and into long-term permanent accommodation (see Appendix 1).

The primary objective of the report is to determine both progress to date, and the impact of the programme across three areas:

- Outcomes for participants, particularly in relation to reoffending, housing, health, and financial stability;
- Service delivery effectiveness;
- Cost effectiveness.

## 2. Background

### 2.1 The issue of homelessness in Auckland's CBD

The homeless are difficult to enumerate. Auckland City Mission estimates that there are approximately 100-150 people sleeping rough in the Auckland Central Business District (Auckland City Mission, 2009). Around 70 per cent of these rough-sleeping clients are Māori.

Since many homeless people live in public spaces, this is their home and the place in which they drink, urinate, and socialise. Poverty means that many homeless people undertake activities such as begging, to buy food, pay for shelter, and to support their alcohol and drug-related problems.

Their behaviour and actions are more likely to draw the attention of law enforcement agencies (Midgley 2005). Walsh (2004), for example, found that the offences most commonly committed by homeless people included public order offences, such as begging, public nuisance, and trespass associated with squatting, and drug-related offences. The cycle of homelessness was linked to the cycle of offending.

The international literature suggests too, that people experiencing homelessness often fail to appear in court. Many are not in a position to fight the procedural or substantive issues a case presents. They are also aware, for example, that traditional courts require a decent appearance and not wanting to make a bad first impression, some homeless people with poor hygiene or without a place to store their belongings, choose not to appear in court at all. Moreover they may be reluctant to attend court due to the uncertainty of court proceedings and the possible threat of custody. When they do appear, the traditional courts are ill-equipped to deal with the issues of homelessness, as the defendants are unable to obtain bail as they have no address to be bailed to and may fail to receive court correspondence due to having no permanent address (Midgley, 2005).

Mental health and other disabilities, alcohol and other drug abuse, poor literacy, and limited resources can also contribute to a situation where legal issues compound, further entrenching them in homelessness. These unresolved legal issues and the threat of custody then continue to present barriers to homeless people accessing the services they require, such as employment, housing and treatment programmes. There is a prevalent feeling that the system does not work in their interests (Forell, McCarron and Scetzer, 2005).

TKTH is not unique. Internationally, homeless courts have been established to divert people away from the criminal justice system and link people to appropriate services and supports. The philosophy of these courts mirrors that of drug and mental health courts, in that they apply the principles of therapeutic jurisprudence.

Literature looking at best practice responses to chronic public space offending by those who are homeless and who have co-morbid complex mental health and/or addiction needs, has found that that neither a law enforcement, nor a rehabilitative approach on its own is successful in addressing the low-level, repeat offending by homeless people. In other jurisdictions, a solutions-focused approach, combining both law enforcement and rehabilitative measures, has been formalised through the establishment of special purpose or special circumstance courts. These courts adopt a case-management approach to dealing with chronically-homeless offenders, bringing together the

agencies responsible for managing the legal and rehabilitative responses to offending under one coordinated management plan, and incorporating the offender's views.

Evaluations have shown this approach to be more effective in dealing with the underlying issues of homelessness, giving a much greater opportunity for reducing future offending.

### **3. Establishing TKTH**

When the Court was established – drawing on the success of similar courts internationally – an interagency agreement was formalised to work together with homeless offenders to address underlying behavioural and lifestyle issues that contribute to the offending.

Specifically, it aimed to do this by:

- Providing a mechanism of coordinated service delivery by multiple Government and non-Government agencies;
- Facilitating the creation of formalised rehabilitation plans by health professionals for offenders appearing before TKTHs;
- Monitoring service delivery by all agencies and providing a forum to discuss and resolve any problems;
- Providing the opportunity for chronic reoffenders to address their behaviour and lifestyle;
- Providing a means for identifying resource requirements and best practice when dealing with chronic public-space offenders.

#### **3.1 The Court Process**

##### **3.1.1 Interagency support**

The court supports participants to access local resources through Governmental and non-Governmental agencies that can assist them with their rehabilitation.

These include:

- Work and Income New Zealand
- The Auckland City Mission
- The Salvation Army
- Lifewise
- The Police
- Auckland Council
- Department of Corrections
- Disability Services
- Waitemata District Health Board
- Auckland District Health Board
- Te Puni Kokiri
- Housing New Zealand
- Odyssey House
- CADS
- St John
- Ministry of Justice
- Department of Corrections.

A client-focussed plan is implemented and monitored by TKTH and case managed by the Programme Manager. It allows participants the opportunity to discuss their rehabilitation plan with the Judge

and the legal support team. Participants are required to report to the court on a regular basis so that updates can be given and their progress monitored.

### **3.1.2 Eligibility**

Participation is voluntary and a participant can withdraw from the programme at any time. To be eligible for the TKTH court process, the defendant must:

- Have committed on-going, low-level reoffending within Auckland's inner city and;
- Be 17 years or over;
- Be homeless and/or have no fixed address;
- Be affected by mental health concerns and/or intellectual disability;
- Be affected by chronic alcohol and/or substance abuse issues;
- Plead guilty or not contest charges.

In addition, the person must agree to engage fully in the programme put in place for them.

The criteria for eligibility are generally enforced, with a few exceptions, which were discussed with the team before acceptance. Offences of a serious nature, such as serious drug offences, sexual offences, or serious offences of personal violence, are disqualifying offences. Participants can also be excluded if they breach community-based sentences.

### **3.1.3 Assessment**

The client goes through an assessment programme undertaken by the Programme Manager to determine their suitability for the alternative court process and whether they meet the criteria.

In general, most clients are well known to services so that information on mental health concerns and alcohol substance issues is readily available. If concerns are highlighted, a more intensive screening or assessment is carried out by a mental health team or alcohol and addiction services.

A therapeutic plan is proposed, and services and funding to implement the plan are made available. Consultation is required between the Programme Manager and the external agencies prior to the court's acceptance. Agreement and support from all key professionals involved in the therapeutic plan is recommended.

### **3.1.4 How it works**

TKTH operates for one half-day each month. The person with special circumstances is assessed for eligibility and suitability, and then separated out from regular District Court cases. After a guilty plea has been entered, a plan is developed to address any victim-related and accountability issues. A treatment plan is also developed to address any mental health, addiction, or intellectual impairment issues. The person may then be accepted into the Court to monitor his/her compliance, responses, progress, and rehabilitation in light of specialty services provided over the period of the plan, including the treatment plan.

The approach is non-adversarial and based on the principles of jurisprudence. The Programme Manager helps to facilitate the inter-agency response from the team. TKTH oversees and monitors the provision of services for that person, as well as the person's progress with his/her plan. Information between agencies is expected to be shared efficiently and appropriately.

An appropriate therapeutic plan is proposed and services to implement the plan are made available prior to the court's acceptance. Agreement and support from all the key professionals involved in the therapeutic plan is recommended.

### **3.1.5 TKTH participants**

As of 31 August 2012, a total of 54 people had been referred to TKTH. Of these:

- 48 were eligible for the programme
- Two had an assessment pending
- Four did not meet the criteria, e.g. due to the nature of the offences.

## 4. Method

### 4.1 Methodology

The review was undertaken in three parts:

1. Monitoring service utilisation by TKTH participants;
2. Interviews and focus groups with operational staff and stakeholders;
3. Interviews with TKTH participants.

#### 4.1.1 Part One: Service utilisation

This part of the review covers all 21 court participants eligible to enrol in TKTH up until 31<sup>st</sup> August 2011. Hence the sample comprised the total population of court participants over this period. This timeframe was selected as it allowed the researchers to monitor participants six months prior to the programme, while on the programme, and six months after exiting the programme.

#### *About the Participants*

The 21 participants covered in this part of the review ranged in age from 24 to 53 years of age.

Of the 21 participants, nine (43%) identified as European, nine as Māori (43%), one as European/Māori, and one as Pasifika. Eighteen of the participants were referred to TKTH by their duty lawyer, two by a NGO, and one self-referred.

Although it is noted that all participants were eligible to enrol in the court, not all participants completed the programme. Eight of the participants remained involved in the programme, eight were court-removed from the programme for low or only-partial engagement, two had graduated, two had not engaged, and one had withdrawn. All, however, have been included in this part of the review regardless of their status.

It is noted that two of the participants are now deceased. One passed away at the end of the review period and one subsequent to the review.

#### *Data tracking and monitoring*

The agencies involved in the initiative provided data on service utilisation patterns for all 21 of TKTH covered in the review. The agencies shared anonymised administrative data on each of the 21 participants with the researchers. This included:

- Emergency Department utilisation rates on each participant, provided by the Auckland District Health Board;
- Receipt of Work and Income benefits for each participant, provided by the Ministry of Social Development;
- The number of bed nights in HMZC tenancies for each participant, provided by Housing New Zealand Corporation;
- The number of arrests for each participant, provided by the New Zealand Police;
- The number of bed nights each participant spent in prison, provided by the Department of Corrections.

#### **4.1.2 Part Two: Interviews and focus groups with operational staff and stakeholders**

Positive Thinking undertook stakeholder interviews and focus groups with 27 professionals associated with the work of TKTH, including operational staff and strategic stakeholders. This included representatives from the New Zealand Police, Housing New Zealand, Auckland Council, Auckland City Mission, the Auckland District Health Board, New Zealand Police, Work and Income New Zealand, Salvation Army, Odyssey House, the Community Alcohol and Drug Service, the Ministry of Justice, Department of Corrections, and Lifewise.

Operational staff and stakeholders identified by Lifewise and Auckland Council as undertaking a key operational or strategic role in TKTH, such as the Judge, were asked if they would agree to be interviewed. Others were invited to participate in focus groups convened by Auckland Council.

Interviewees and focus group participants were asked a series of open-ended questions, such as what they considered to be the most and least helpful parts of the court, how it compared with the District Court process, whether they thought it had affected the participants' health, accommodation, financial, and social situation, whether it had affected relationships with support agencies, whether they thought it had changed the way agencies viewed issues for homeless people, and what, if anything, they would change about TKTH. (See Appendix Two for the interview schedules).

Interviews and focus groups took between one and two hours and were recorded in notes and, in the focus groups, both in notes and on the whiteboard.

A Māori Health staff member at Auckland District Health Board undertook an additional interview with a Kaumatua to find out how TKTH was responding to the cultural needs of Māori participants.

#### **4.1.3 Part Three: Interviews with court participants**

Short interviews were undertaken by Positive Thinking with nine TKTH participants, and the partner of a TKTH participant.

The sample was augmented by a further five interviews, undertaken by a Māori interviewer from Point Research. Although the same questionnaire was used, the aim of the additional interviews was to better understand the views of Māori TKTH participants.

Interviewees were sourced by the Programme Manager through routine contact or through local homeless services, such as at the drop-in centre at the Auckland City Mission, or via a notice on the window at Auckland City Mission. Only those clients who were reasonably contactable or were in a stable situation to be interviewed were included. Hence the sample did not include any participants in residential mental health services or addiction crisis services.

The interviews were held at the Auckland City Mission, Lifewise Hub, or in a public place such as a café.

To thank the participants, interviews were incentivised with a \$20 Warehouse voucher.



The interviews used a semi-structured interview schedule and asked participants what they considered to be the most and least helpful parts of the court, how it compared with the District Court process, whether they thought it had affected their health, accommodation, financial, and social situation, whether it had affected relationships with support agencies, whether they would recommend TKTH to other homeless people, and what if anything they would change about TKTH. (See Appendix Two for the interview schedules).

The interviews by Positive Thinking were recorded in notes (rather than audio recorded).<sup>3</sup> The interviews by Point Research were audiotaped and transcribed.

#### **4.1.4 Analysis**

The data on service utilisation was provided by agencies in a standardised format over the three time periods: in the six month period prior to enrolment; during enrolment; and in the six months following enrolment. The data was compared across the timeframes, reported, and significance tested. It is noted that the size of the sample is small, so the results may not be generalisable, even where significant differences exist.

A thematic analysis of the interviews was undertaken and the interview data was systematically searched to identify recurrent themes. An inductive approach was used, allowing themes to emerge. Quotations relating to the themes have been used heavily throughout the report to contextualise and illustrate the meaning of each of the themes.

#### **4.2 Ethics**

To ensure the project complied with ethical standards, the qualitative interviewing phase of the project was successfully reviewed by both the Justice Sector Review Research Group (Ministry of Justice) and the New Zealand Health and Disability Ethics Committee (Ministry of Health).

#### **4.3 Limitations**

This report draws on the different parts of the evaluation, some of which have been separately reported.

The quantitative data is limited in scope and in some places incomplete. It has, for example, been possible to track Emergency Department visits, but not whether these visits were avoidable.

The qualitative data reflects the observations and views of how well TKTH is working. Whilst attempts have been made to triangulate the data, it was not always possible to confirm the views of interviewees about programme outcomes.

It is also noted that although the views of 15 court participants were sought, those interviewed were largely self-selected or approached for interview at TKTH, or at a place where they might be found, such as at the Auckland City Mission. Their views are important and necessarily inform the findings of this review, however may not represent the views of all TKTH participants.

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<sup>3</sup> Budget did not cover audio recording and transcription.

# Results

## 5. Outcomes

*"If it wasn't for TKTH I don't know where I'd be, I'd hate to think I'd end up in jail or dead."*

**Court participant**

### 5.1 Offending and reoffending

#### Arrests

There was a marked decrease in the number of people arrested, the number of arrests, and the average number of times each participant was arrested, both during and after participation in TKTH programme.

- The number of arrests dropped by two-thirds during participation, which was sustained in the six months following participation.
- The number of people arrested fell by one quarter (26 per cent) during participation and by 42 per cent in the six months following the programme.<sup>4</sup>
- Of those who had been arrested, the number of times they were arrested fell from an average of 7.7 times prior to participation, to 2.6 times during and after the programme. The median times arrested fell from three times, to twice and then once over the same period.<sup>5</sup>
- This fall in offending was commented on by both operational staff and court participants as having been influenced by TKTH process.

#### Imprisonment

There was a sustained decrease in the number of nights participants spent in prison both during and after participation. Bed nights in prison reduced by:

- 78 per cent during participation
- 60 per cent in the six months following participation.

One participant commented that it was the longest time he had ever been out of jail.

#### 5.1.1. Overall fall in offending

There was a substantial reduction in offending while participants were enrolled with TKTH, and in the six months following graduation. This was reflected in data pertaining to:

- The number of arrests;

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<sup>4</sup> The difference is significant,  $p < 0.05$

<sup>5</sup>  $p < 0.05$

- The number of participants arrested;
- The number of times participants were arrested; and
- The average number of bed nights the participants spent in prison.

This fall in offending was commented on by both staff and court participants.

*“I think that the cases may take longer to resolve but the defendants will be less likely to reoffend.”*

**Operational staff**

*“I think it’s made me less likely to reoffend.”*

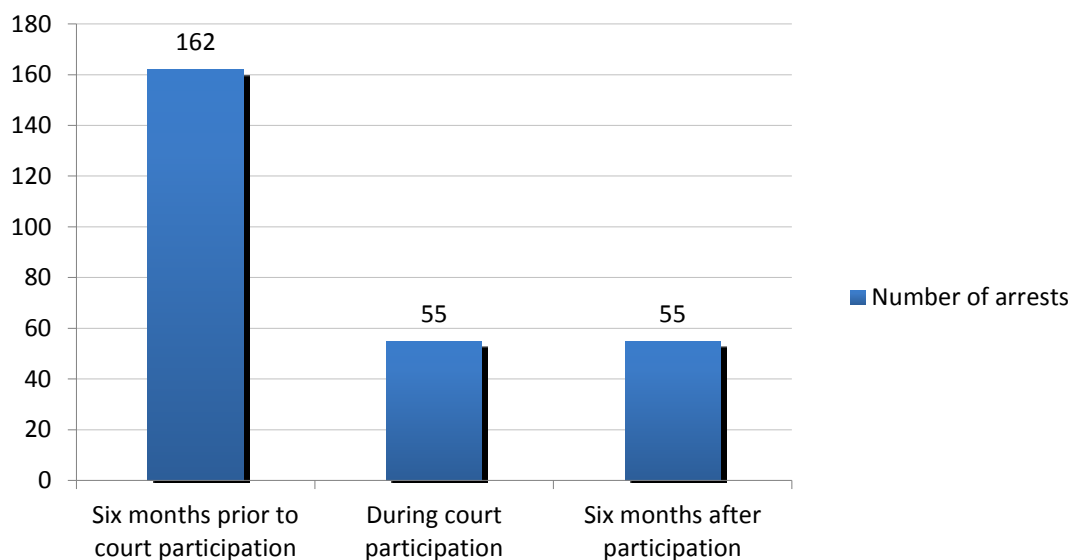
**Court participant**

## 5.1.2 Arrests

### *The number of arrests*

There was a substantial reduction in the number of arrests. In the six months prior to participation, the participants were arrested a total of 162 times. Arrests fell by two-thirds (66 per cent) to 55 while participants undertook TKTH programme, which was sustained in the six months following participation.<sup>6</sup>

**Figure 1: Overall number of arrests (n=21)**



Source: NZ Police, 2012

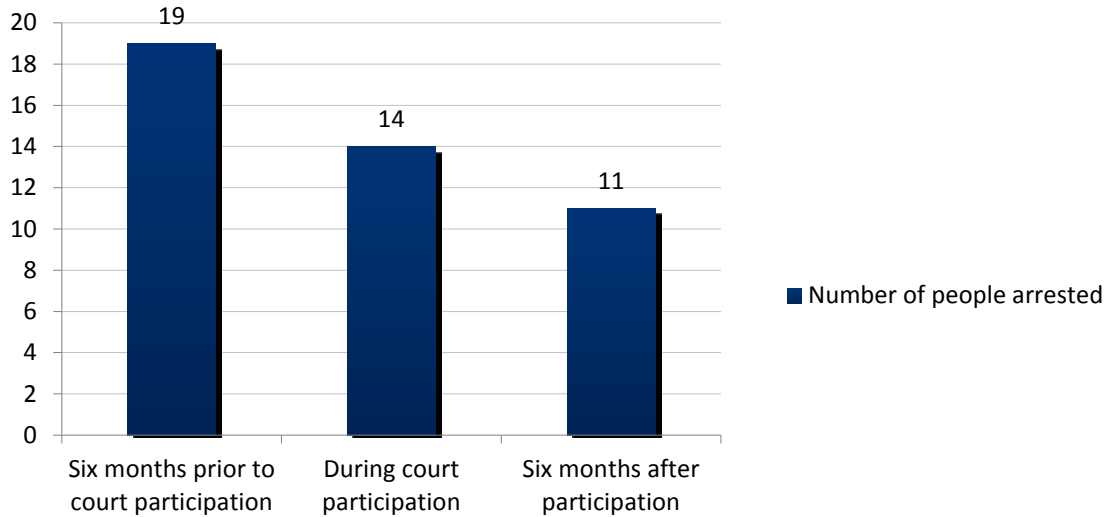
### *The number of participants arrested*

Over all there was a decrease in the number of participants arrested both during and following their participation in TKTH programme.

<sup>6</sup> Significance testing is not a robust measure due to the percentage of cells with an expected count less than 5 (93.3%).

The number of people arrested fell by one-quarter (26 per cent), from 19 to 14, during participation in TKTH programme. In the six months following the programme, 11 participants were arrested, a drop of 42 per cent from pre-course arrest figures.<sup>7</sup>

**Figure 2: Number of participants arrested (n=21)**



n=21

Source: NZ Police, 2012

### *The number of times arrested*

In the six months prior to participation, nineteen of the participants had been arrested between one and 43 times. The number of arrests per participant arrested averaged 8.5 times. Five participants had been arrested ten or more times.

While participating in TKTH programme, the average number of arrests fell to 3.9 times per arrested participant, with none arrested more than seven times.

In the six months following participation, eleven participants were arrested between one and twenty-two times, with the average number of arrests being five. It is noted, however, that one of the participants was arrested 22 times during this period. If this case was excluded, the average arrests per participant arrested drops to 3.3.<sup>8</sup>

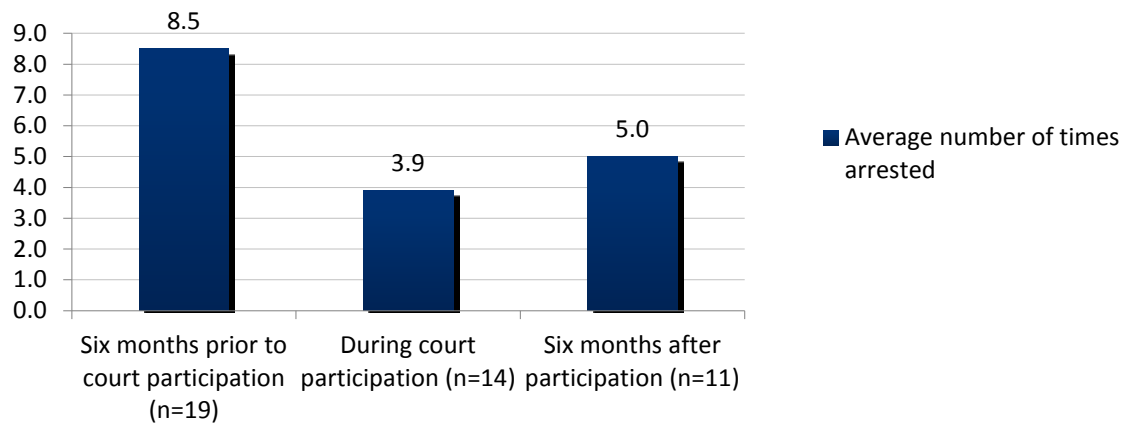
The median times arrested fell from three times, to twice, and then once, and the mode, or most common number of times arrested (mode), from three to zero and zero over the same timeframes.

One participant interviewed attributed the reduced rate in his offending to participation in TKTH.

<sup>7</sup> As the sample size is small, the results should be viewed with caution, however the differences are significant,  $p < 0.05$

<sup>8</sup> Again, due to the sample size, the results need to be viewed with caution, however the differences between the means are significant,  $p < 0.05$

Figure 3: Average number of times arrested



Source: NZ Police, 2012

## 5.2 Imprisonment

### 5.2.1 Bed nights in prison

There was a sustained decrease in nights in prison both during and after participation. Bed nights in prison reduced by:

- 78 per cent during participation
- 60 per cent in the six months following participation

Both during, and following, the programme, there was a marked reduction in the number of nights participants spent in prison. In the six months prior to enrolment in the programme (the baseline), four of the participants spent a total of 457 nights in prison. During the period of enrolment this figure decreased by 78 per cent. Only one participant was imprisoned during this time, spending 101 bed nights in prison. In the six months following completion of the programme, three participants were imprisoned, spending a total of 184 bed nights in prison.<sup>9</sup> Although this was an increase from the participation period, it remained 60 per cent below the baseline.

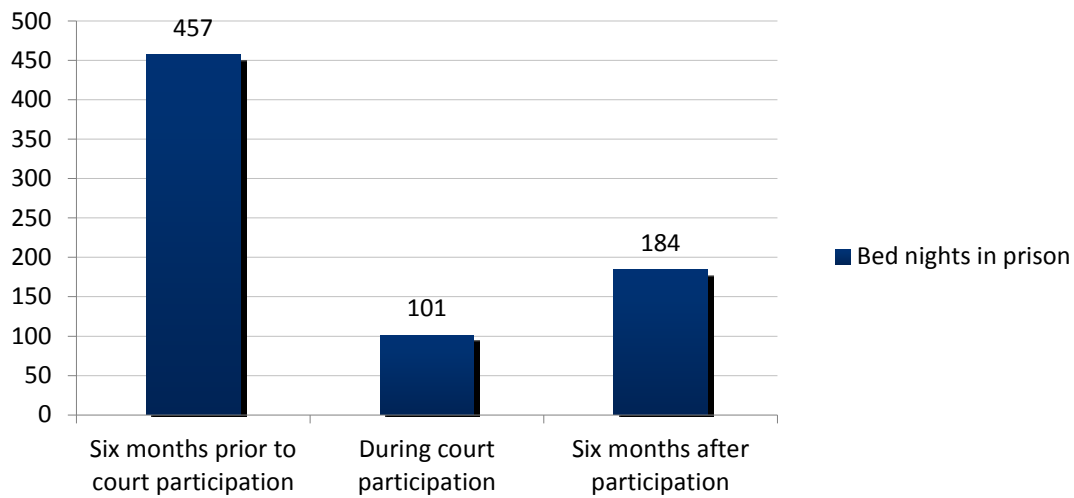
One participant interviewed commented that the programme had helped to keep him out of prison.

*"It's the longest I've stayed out of jail in 30 years. It's kept me out of trouble."*

**Court participant**

<sup>9</sup> Significance testing is not a robust measure as 24 (89.9%) of cells with an expected count less than 5.

Figure 4: Bed nights in prison (n=21)



Source: Corrections Department NZ, 2012

## 5.3 Life changes

All TKTH participants spoken to could identify positive life changes attributable to their involvement with TKTH.

### 5.3.1 Health

#### Reported improvements

Both operational staff and court participants commented on the improvements that they had seen in health and wellbeing. These included:

- Leading a healthier lifestyle
- Dealing with substance abuse issues
- Having higher self-regard.

#### Emergency Department utilisation rates

There was a sustained decrease in the utilisation of ADHB's Emergency Department (ED) during and after participation in the programme. ED visits reduced by:

- 16 per cent during participation
- 57 per cent in the six months following participation.

There was a decrease in:

- The number of participants using ED services
- The average number of visits per participant using ED services.

### 5.3.2 Reported health improvements

Some participants interviewed commented on improvements to their health and wellbeing. One indicated that, with Work and Income support, he was leading a healthier lifestyle.

*“Just developing you into a routine, that’s healthier. And now I’ve got the green prescription from WINZ (Work and Income), so I’ve been going to the gym.”*

**Court participant**

Several participants said that they were now dealing with substance abuse issues, and noted the positive effects.

*“I’m booked into Pittman House detox, then Federal Street for another two weeks, then the Bridge for eight more. By that time I’ll have sorted out accommodation or a support house. AOD [Alcohol and Other Drugs] services, they give you a filter for it. Giving up drinking has changed my whole lifestyle, and my friends and associates.”*

**Court participant**

*“I went to CADS almost straight away. I see them once a week, plus two sessions at Higher Ground. I’m pretty busy.”*

**Court participant**

*“I’m healthier, not so skinny. When I come back to town it’s really hard, smelling glue, but CADS talk me through it.”*

**Court participant**

A number of court participants and operational staff commented that the positive attitude of the TKTH team, such as treating participants respectfully, had promoted wellbeing and positive mental health improvements in court participants.

*“To know you people do care about me helped a lot. Before I thought everyone hated me.”*

**Court participant**

*“I’m starting to feel good about myself.”*

**Court participant**

*“There are people I’m seeing who respond positively to the unconditional positive regard.”*

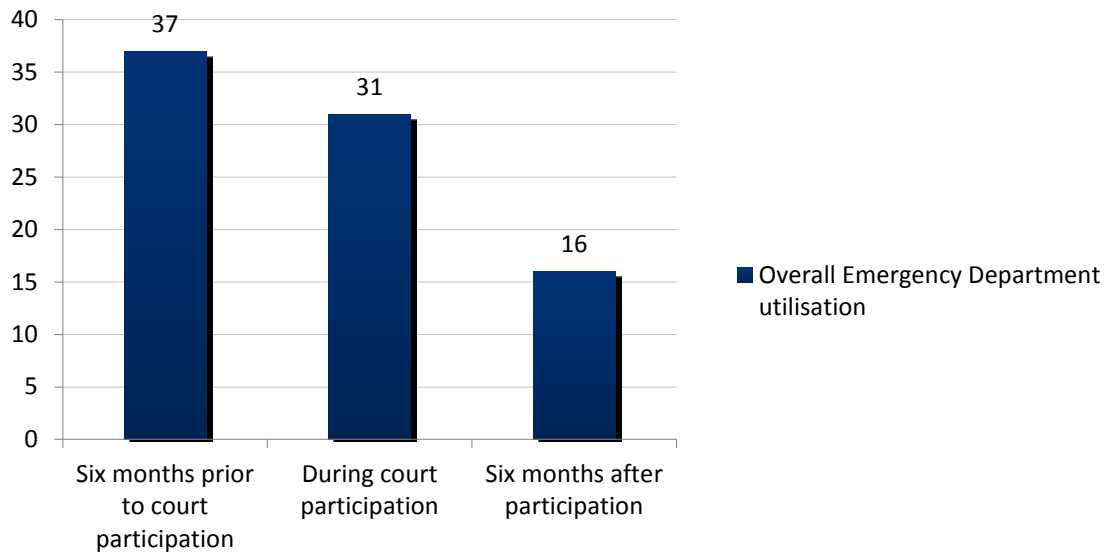
**Operational staff**

### 5.3.3 Emergency Department utilisation

People who do not have access to safe, affordable, housing experience far more health problems than the general population (Okin, Boccari, Azocar, Shumway, O’Brien, Gleb, Kohn, Harding, & Wachsmith, 2002). Analyses of supported housing and the use of acute healthcare services by homeless people, suggest that they are high users and that housing placement can significantly reduce the use of emergency department visits and inpatient services, particularly amongst those with psychiatric and substance-use disorders (Martinez and Burt, 2006).

There was a sustained decrease in the utilisation of ADHB’s Emergency Department (ED) during and after participation. The total number of ED visits was 37 prior to the programme. This fell by 16 per cent to 31 times during the programme, and by 57 per cent, to 16 visits, in the six months following the programme.

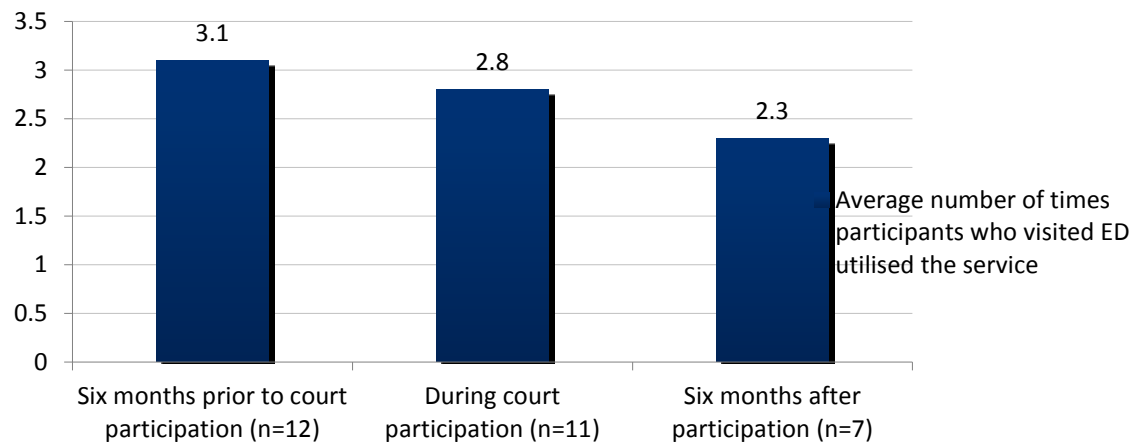
Figure 5: Overall number of times the Emergency Department utilised (n=21)



Source: Auckland District Health Board, 2012

Prior to the programme, twelve of the participant utilised the ED between one and seven times, or an average of 3.1 times each. Four participants accessed the services five or more times over this period. While on the programme, eleven participants visited the ED an average of 2.8 times, with all but one participant utilising the service three times or fewer. This figure dropped further following the programme, with seven participants utilising the ED an average of 2.3 times each. Moreover, the maximum number of ED visits was three.

Figure 6: Average number of visits per participant



Source: Auckland District Health Board, 2012



## 5.4 Housing

Before and after the programme:

- Participants interviewed commented that they had experienced improvements in their housing situation as a result of the participating in the programme.
- The number of participants known to be rough sleeping decreased from sixteen to six.
- The number of Housing New Zealand Corporation tenancies for participants increased from zero to six.
- All tenancies remain current.
- The total bed nights for participants with HNZC tenancies increased from zero to 1185.

### 5.4.1 Housing security

TKTH appears to have had an impact on housing outcomes, which has been welcomed by the participants. A number of participants commented that they had experienced improvements to their housing situation and linked this to their enrolment with TKTH and the activities of the Programme Manager.

*"They found me accommodation within three days."*

**Court participant**

*"When I first started, I didn't have anywhere to stay. I found somewhere by myself first, but Jo [the Programme Manager] made the ball roll, made it all happen quick. So I'm in Epsom Lodge now and on the Housing NZ A-list."*

**Court participant**

*"I got accommodation through Jo's help."*

**Court participant**

The housing status of the 21 participants has been categorised as:

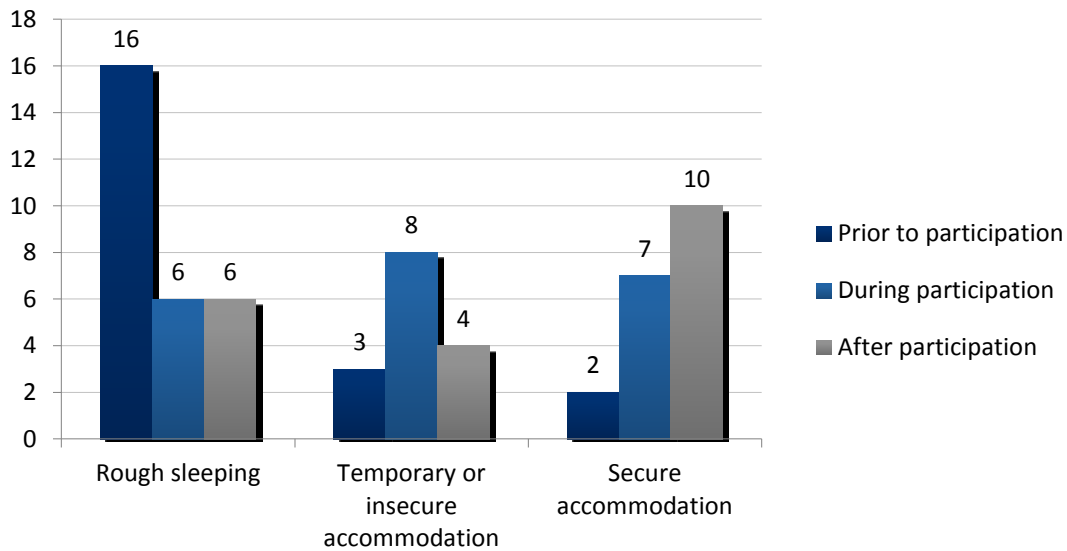
- Rough sleeping
- Temporary or insecure housing, such as using hostels, sofa-surfing, or staying with friends or care givers
- Secure housing, such as tenancies in Housing New Zealand properties.

Prior to the programme, sixteen of the participants were known to be rough sleeping (homeless). During the programme only three participants were known to be rough sleeping and six months after the programme, this had reduced to two.<sup>10</sup>

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<sup>10</sup> The differences are significant ( $p < 0.05$ ) but due to the sample size this should be treated with caution.

Figure 7: Housing status of participants (n=21. Note: One passed away at the end of the review period.)



n=11

Source: Programme Manager, 2012

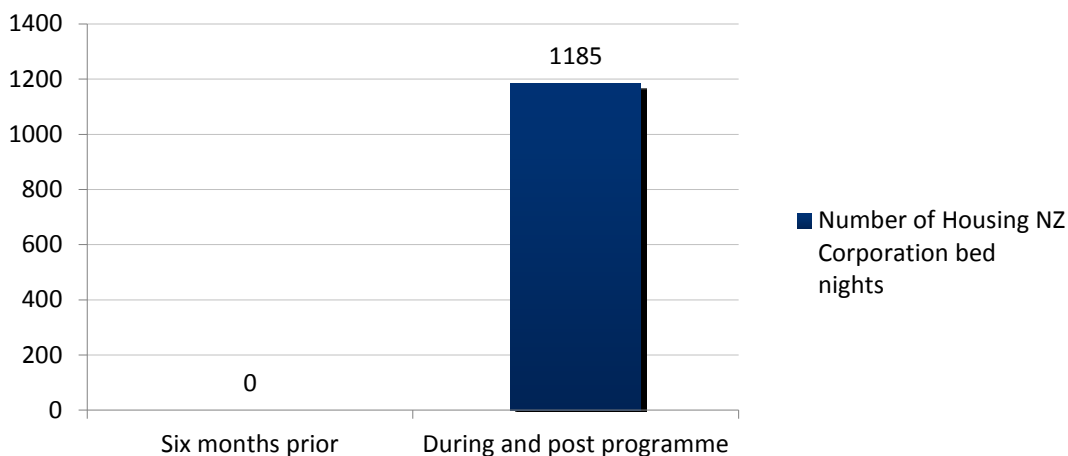
### 5.4.2 Housing New Zealand Corporation bed nights

Housing New Zealand Corporation rental accommodation is allocated to people on the basis of need. Priority is given to people who can't get into, or stay in, housing that they can afford.

Since being accepted into the programme, five of the 21 participants have received Housing New Zealand accommodation and all of these tenancies remain current.

The average length of bed nights for the five tenants is 237, totalling 1185 bed nights.

Figure 8: Number of Housing NZ bed nights (n=21)



n=5

Source: Housing New Zealand Corporation, 2012

## 5.5 Finances

- A number of participants interviewed commented that TKTH helped them receive a Work and Income benefit and manage their finances.
- One commented that TKTH was helping them with employment prospects.
- The high number of participants receiving Work and Income benefits remained largely unchanged before, during, and following participation in the programme (n=21).

New Zealand has a universal welfare system implemented by the Government whereby people who cannot find work, or are unable to work, may be eligible for some form of benefit or income support.

Almost all of the participants were entitled to income support and received it.

Several of the participants interviewed mentioned that enrolment in TKTH had helped them to access their Work and Income benefits.

*"I'm onto a benefit now. It's the first thing they do. They have connections. I couldn't get the dole because I'd quit the job, but they sorted it out there and then."*

**Court participant**

*"They put me onto the Bridge, who sorted out my sickness benefit and manage my finances. Jo's helping with employment prospects."*

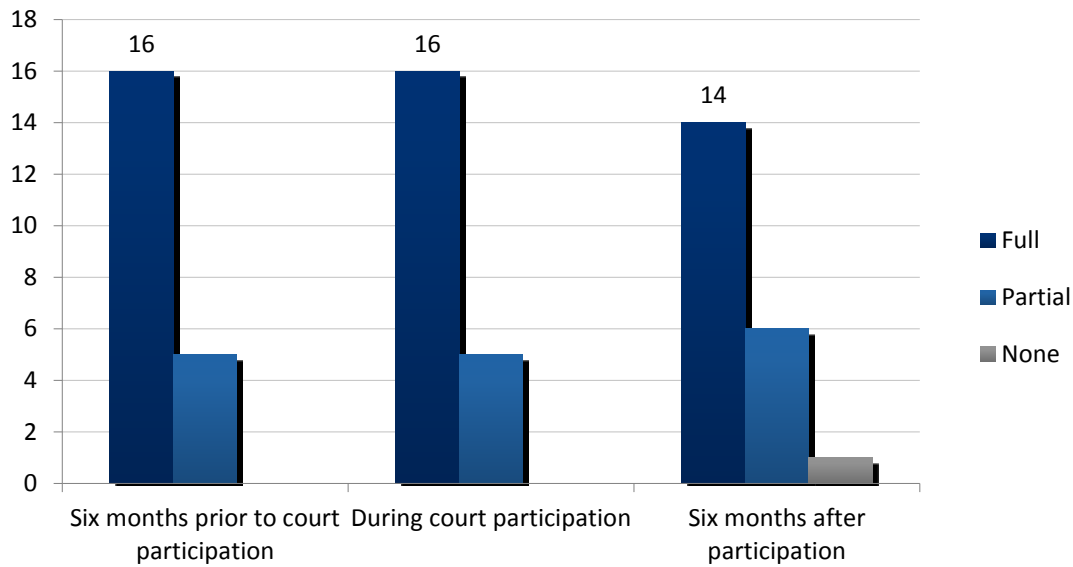
**Court participant**

All 21 participants tracked received a Work and Income benefit for the duration of the project. There was little change in the number of participants receiving benefit entitlements during all of the period (full) or part of the period (partial). Note that the participant who did not receive a benefit was imprisoned and not entitled to payment. Of those who received partial benefits for only some of the time, (three prior to the programme and three following the programme), all spent some time in prison, so may not have been entitled to full benefit payments over that period.<sup>11</sup>

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<sup>11</sup> The differences were not significant (p >0.05)

Figure 9: Benefits (n=21)



n=11

Source: Ministry of Social Development, 2012

## 5.6 Social support

Before and after the programme:

- Some participants reported better relationships and more frequent contact with family.
- Where appropriate, respondents were introduced to organisations that could support them to reconnect with loved ones and their community.

Social isolation and low levels of social support and social functioning are associated with poorer outcomes amongst homeless people. Hwang et al (2009) argue that these findings highlight the need for services that encourage the integration of homeless individuals into social networks, and the building of social support within networks.

While some homeless are known to have community with one another, not all homeless support networks are positive.

*“Jo’s introduced me to good people, church people, not old homeless friends with drugs.”*

**Court participant**

Some of the interviewees mentioned that enrolment in TKTH process had resulted in social benefits, such as better relationships or more contact with family.

*“It’s helped. I’ve been staying with my brother. We didn’t use to get on, but now we’re talking like brothers.”*

**Court participant**

*"I'm keeping more in contact with family now."*

**Court participant**

They had also been introduced to organisations that could support them in their relationships and socially.

*"We've been having couples' counselling, hooked up through [TKTH]. It's helped us out a lot. The first one was real hard, I don't like to be vulnerable and show weakness. It is helping with our relationship, and we get six sessions so the motivation to go is, if you miss one, that's one used up."*

**Court participant**

## **5.7 Sustainability of the changes**

The data suggests that changes participants have made have been largely sustained, at least in the six months following graduation.

All TKTH participants interviewed were still involved with the programme and felt that the positive changes were sustainable.

*"My friends, a few of them have graduated, and they seem to be doing alright."*

**Court participant**

*"You get a certificate and you'll always look back on that and think, 'man, I know what I did to get that.' And it'll keep you on that path."*

**Court participant**

Several court participants and stakeholders mentioned the value of keeping in contact with TKTH after graduating, so there is some on-going support if required.

*"It lasts for about three months, the programme, but as long as I can come back and speak to Jo in a year – for example if I have a job offer, I can just wander in and speak to Jo and she can tell me what I'll need to do."*

**Court participant**

*"Post-graduation support is important – maybe a follow up call."*

**Operational staff**

## 6. The Court Process and service delivery

### 6.1 What is working well

#### What is working well

Interviewees felt that the TKTH process and approach works well.

Participants said that they:

- Felt more involved in planning and proceedings than in the District Court;
- Better understood the process;
- Found the approach of TKTH friendlier and more engaging;
- Found the court to be more culturally welcoming to participants;
- Felt that having other people care about them and see their potential had allowed them to see their own potential;
- Felt that the compulsory aspects of the programme only worked because TKTH helped cultivate a much more positive attitude amongst the participants than traditional court processes;
- Felt that overall the approach appears to promote confidence in the court system.

Interviewees said:

- The role of the Programme Manager is seen as critical to the success of TKTH.
- The Programme Manager has kept agencies and participants engaged, focused on the plan, and provided the participants with practical support.
- In general the collaborative approach works well.
- Staff and participants believe that the team approach leads to a greater understanding of the issues of homelessness, which leads to better solutions.
- The 'therapeutic alliance' is seen as an innovative and effective.
- The relational way in which TKTH works means that communication with other agencies has improved.
- Some staff are specialising in working with homeless offenders, which from their perspective, results in more effective working relationships with clients.

#### 6.1.1 TKTH process and approach

##### *District Court process*

Operational staff interviewed felt that the traditional court process did not work well for homeless people, as:

- There are issues with bailing people with no address, and they cannot be bailed to shelters;
- Homeless people, for a wide range of reasons, tend not to attend court dates;

- Homeless people often have myriad complex and long-standing problems that contribute to their offending behaviour that are not being addressed;
- The complexity of their problems was more likely to require a multi-agency and sustained approach rather than a “quick fix”.

Moreover, the outcomes typically include:

- Court fines that homeless people tend not to pay, which accrue over time, or
- A prison sentence for more serious crimes and when crimes reach a certain threshold.

Those who do not attend court and receive a prison sentence, could then be issued with a warrant for their arrest.

It was widely acknowledged by interviewees and participants that remedies available and commonly utilised by the District Court, such as fines and imprisonment, were not addressing the issues underlying the offending, such as problem drinking or mental health issues.

*“In the regular District Court, we’re setting impossible bail – telling drinkers to stop, setting people up to fail. You might as well have the blind and lame come in and order them to see and walk.”*

**Operational staff**

According to interviewees, this was compounded by homeless people, a population identified by services as having high and complex needs, not getting the services they needed, or, for a wide range of reasons, falling through the gaps in services. According to interviewees, reasons for this included the offenders not knowing what services they could access, not knowing whether they were entitled to services, not knowing whether there were costs associated with them or if they met the criteria, not knowing how to access services, being too unwell to access services or recognise that they needed support, not receiving letters about appointments and entitlements, being unable to read or understand the letters they did receive, missing appointments, or being excluded from services for problem behaviours in the past. They may also have had poor experiences with services and felt distrustful towards any help that was offered or available. And for those agencies delivering services, the homeless, although widely recognised as a vulnerable group requiring services, are considered difficult to access or provide with services.

*“They [offenders] are nobody’s problem ... since Carrington [inpatient mental health facility] closed (they) had nowhere to go. They just fell between the cracks.”*

**Operational staff**

This resulted in participants being arrested and rearrested for minor crimes on a regular basis. Operational staff described traditional court processes as dehumanising and a pathway to imprisonment.

*“It’s just a process to get people in and out of court, it’s dehumanising and people graduate to prison.”*

**Operational staff**

TKTH participants interviewed tended to agree, describing their experiences of the District Court as confusing, a revolving door, and punishing.

*"I'd been to the District Court five times. I had no idea what was going on."*

**Court participant**

*"I was 15 when I first started going through the District Court – it was a revolving door. No programmes to sort you out. It was just, punish you and see what happens."*

**Court participant**

### ***The process and approach of TKTH***

Both the approach and process of TKTH differs from that of traditional courts.

Rather than standing before a Judge with lawyers speaking and acting on their behalf, TKTH participants are actively involved in the process. The participants said that they felt more involved in planning and proceedings than in the District Court and described how this involvement enabled them to better understand the process and what is happening.

*"The Judge talks to you like an actual person, asks what you're achieving. It's more hands-on."*

**Court participant**

The therapeutic approach appears to promote confidence and a restoration of trust in the court system as TKTH is seen by the participants as there to help support them, rather than punish them.

The Judge is the leader of the team, rather than a dispassionate arbiter, and takes a problem-solving, rather than punitive, approach. The participants have input into the programme designed to best meet their needs and are consulted.

Participants found the approach of TKTH friendlier and more engaging. They appear to appreciate being listened to and treated with respect.

*"It's my third court session today and I've never seen anyone abusive there. They treat you as a human, not as a product."*

**Court participant**

*"Jo, the police, lawyers, the Judge, they're all different. All smiles. Go to Court One [in the District Court]... everyone's head is down."*

**Court participant**

*"The Judge says 'hello, how are you?' and communicates – and even the prosecution too."*

**Court participant**

It is also more culturally welcoming to participants.

*"At TKTH you get to sit up the front. There's a karakia from the Judge."*

**Court participant**

The positive attitude of staff appears to have had a motivating effect on participants to do well.

*"Having five people in the room is motivating for applicants – you don't want to disappoint five people."*

**Operational staff**

Some participants observed that having other people care about them and see their potential had allowed them to see their own potential.



*"You've got to be willing to make the change, otherwise it's all pointless. I think Jo and Sharon help you get in that mind-set. She cares so you care."*

**Court participant**

Both stakeholders and court participants felt that TKTH had changed their attitude towards courts in general.

*"It's changed what I think about TKTH system. It's caring, the Judge cares. He's not just reading from a piece of paper. I leave a [TKTH] court session and I feel like I've achieved something."*

**Court participant**

One participant noted, however, that help provided should be more forthcoming for people before they get arrested:

*"I needed the help while I was out there. It is a funny thing that now I'm getting the help just 'cos the cops picked me up."*

**Court participant**

### **The legal status of TKTH**

It is noted that the operational and strategic staff considered the legal context and pressure provided by TKTH to be important, as it motivated and enabled participants to access services they may not have otherwise accessed. Enrolment, for example, requires the participants to commit to the treatment plan.

Although the atmosphere of TKTH may be perceived by the participants as more friendly and inclusionary than that of more traditional courts, it remains a statutory process with a Judge making determinations and having the ability to enforce compliance. Bail conditions, for example, can underlie treatment plans, and sentences can be imposed.

*"It is helpful to participate in TKTH process, recommending realistic treatment goals that become part of the client's sentence and then being able to utilise the legal pressure in a motivational way."*

**Operational staff**

*"It's a statutory requirement, so there's more force behind it. e.g. people are ordered to go to detox, and they may not have come in otherwise. We've had them through, it's happening. There are mixed outcomes: we can only really cope with one or two at a time, but it's a good example of TKTH getting people into services they wouldn't otherwise access."*

**Strategic stakeholder**

*"You can't force somebody to take on board the deeper, more long-term ideas – ways of behaving and being. But if you do compel somebody to be in somebody's presence, it gives them an opportunity to experience MH [mental health] people in a different way over a long term. It won't change their attitude in the first month, but after a long period they might see MH staff differently, this is an experience they might not have if they weren't compelled."*

**Strategic stakeholder**

A number of participants felt that the compulsory aspects of the programme only worked because TKTH helped cultivate a much more positive attitude amongst the participants than traditional court processes.

*“Someone who’s nice to you, how can you tell them to get stuffed?”*

**Court participant**

*“I think it’s just really motivating being surrounded by positive people that treat you well. They don’t judge straight away, they give you a chance to prove yourself and then judge.”*

**Partner of court participant**

*“To know you people do care about me helped a lot. Before I thought everyone hated me, so I took drugs, alcohol, glue. Having people care, I don’t need the drugs. That’s after eight years, never getting help.”*

**Court participant**

### 6.1.2 The role of the TKTH Programme Manager

The role of the Programme Manager was seen as essential to the success of TKTH. The treatment plans are overseen by the Programme Manager, who is responsible for working with offenders to ensure the plans are implemented. The Programme Manager has kept agencies and participants engaged, focused on the plan, and provided the participants with practical support.

*“They give you bus passes, a diary so you can keep track of what you’re doing.”*

**Court participant**

One court participant described how the Programme Manager could provide interim support when other services were not immediately available.

*“I had to wait two weeks until I could go to detox. My interest didn’t wane though, and I still got good feedback from Jo in that period. She’d say, ‘you don’t have to stop drinking, but slow down, and drink in a safe place, not in public’. Eventually I got to detox, and then on to the Bridge programme. Without them I’d still be out there doing it.”*

**Court participant**

*“It’s mainly clients that have already been on our books. The difference is the Programme Manager has a smaller caseload, so that’s a good role. In the short- to medium-term there’s concentrated effort on them.”*

**Strategic stakeholder**

### 6.1.3 Collaboration between agencies and organisations

#### **The team approach**

TKTH is encouraging new ways of working amongst the agencies and organisations providing social support services. The aim is not just to house the homeless, but to address any underlying conditions and social challenges they face. This is understood to require a multi-agency approach. Hence a wide range of organisations and agencies sit at the table, focusing on how to provide timely and effective assistance to improve the wellbeing of TKTH’s participants.

Those interviewed felt that the agencies connected to TKTH generally functioned as a cohesive team, however they noted that there were still important gaps in services – in particular housing and mental health – that needed to be addressed.

Both staff and participants believe that this team approach leads to a greater understanding of the issues of homelessness amongst the agencies, which in turns leads to better solutions.

*"It's patently obvious why it works. Working as a team works better. It inevitably produces better results. [TKTH]– it's a meeting of equals – strength in the team and confidence in the services we can offer."*

**Operational staff**

### **Therapeutic alliances – engaging with a team**

The 'therapeutic alliance' between agencies, and the round-table approach, were seen by interviewees as an innovative and effective ways of addressing the issues underlying homelessness.

*"It's kind of a round table. They have a WINZ (Work and Income) officer that comes to TKTH and works with you. I'd had a longstanding debt with WINZ since the '90s. I'd always disputed it to no end, and boom she sorted it out just like that."*

**Court participant**

*"They follow up. They can ring you every day and see you. Jo's really nice, and the services like CADS and Lifewise and the GP, they stay in touch and will support you as much as they can... and every month they have a meeting to look at what's going on so he [the Judge] knows how you're doing."*

**Court participant**

Participants recognised that TKTH knew more about their situation, which in turn led to the participants having a better understanding of how to meet their goals.

*"They know where you're at, what you're up to. That's different to the District Court. I think you know where you stand better too. The Judge tells you what you've got to do and you have a better understanding of how to achieve your goals."*

**Court participant**

A number of court participants said that they were now engaging with services they had never tried before, finding new value in services they had tried, and/or receiving more timely support.

*"It's made me more focused. I've always wanted the same goals, but Jo's introduced me to people who can help me find courses I didn't know about before. I've got a good relationship with my social worker. I hadn't really seen social workers before."*

**Court participant**

*"I wasn't using any services before engaging with [TKTH]. Now I'm seeing CADS, Social Detox, and I've got a HNZ application."*

**Court participant**

*"Was going to Social Detox anyway, Jo got me in faster."*

**Court participant**

### **Better communication and sharing of information**

The monthly meetings, which bring the services together, were seen as facilitating more effective communication between agencies. This allowed them to combine their perspectives and efforts to achieve better outcomes.

*"It brings services together. We can all work together now; it's short-circuited the system. Recommendations can be made, it's supportive, [and] can now offer psychological help."*

**Operational staff**

There was a willingness amongst staff to see things from different perspectives and to search for solutions. This was seen as improving both the quality of the discussions and information used to make decisions.

*"A strength of TKTH is the morning meeting, where there are those different perspectives at the table, the whole mix. It's the quality of the information – the voices at the table – rather than a superficial report that can't be discussed."*

**Operational Staff**

Moreover, the agencies felt that they could discuss cases more openly and with greater depth with the Judge, who whilst still making the final determination, was responsive to their input and ideas.

*"The Judge is open-minded, interested, and will ask the group of providers – 'tell me if I'm off track or am being too light'."*

**Operational staff**

*"Having that opportunity to talk to the Judge is very useful. Usually in a court it's very difficult for services to become part of the dialogue – in [TKTH] you can have a much more sophisticated conversation about what the solution is. Also he's very committed, and approachable."*

**Operational staff**

Stakeholders also noted that the relational way in which TKTH worked meant that communication with other agencies had improved.

*"Not all signatories are as visible as others, but those who are it's really easy for us to know who to talk to at court, CADS, and the missions because of the monthly meetings."*

**Operational staff**

Some noted, however, that some key information was not always available to the Judge.

*"We need to educate the Judge on what services do and don't do – for example, he ordered someone to get treatment for video gaming. That doesn't exist!"*

**Operational staff**

### **Improved accessibility**

Support services are now being taken out of offices and into the community. Probation officers, for example, work at other locations, e.g. in cafes, which makes them more accessible to clients. This in turn has enabled them to meet more frequently with their clients and improved the information available to TKTH.

*"Central locations are easier for offenders to get to, so we're seeing them more often. Why put up barriers when there's no need for them? Bring the mountain to Mohammed. Our officers now know their clients better, and can advise court more effectively."*

**Operational staff**

*"Probation can meet clients at [an accessible location], and don't expect them to make it to Boston Road. They're working with the offender, not the sentence."*

**Operational staff**

## ***Growing the knowledge base of how to work with homeless.***

Interviewees considered the homeless to be a unique group with high and complex issues that require specialist knowledge and skills.

One stakeholder agreed there was a shift in how agencies view and work with homeless people, and credited Auckland's social work agencies, as much as TKTH itself, with bringing about this shift.

*"I think there are a number of things that have helped agencies better understand the issues for homeless people – [TKTH] is one of them but again, I would also argue that Auckland City Mission and Lifewise have also equally assisted in either challenging agencies or working with them to get better outcomes for those who are homeless."*

***Strategic stakeholder***

One agency, for example, noted an increase in staff understanding of homeless issues, support services and solutions, along with greater collegial support for the officers who work with court participants. Regular visits to other agencies have led to stronger working relationships with Community Alcohol and Drug Services (CADS), accommodation services, and social workers.

Probation officers working with TKTH have now developed specialist skills in working with homeless offenders, which, from their perspective, results in more effective working relationships with their clients.

*"The one-size-fits-all approach meant you spread the expertise thinly, so there was a knowledge gap amongst some of our officers about homelessness. Now probation officers who have the appropriate understanding and interest in working with this group do so, which results in more effective solutions to clients' issues."*

***Operational staff***

*"When I first started going through courts, probation back then was too formal. You'd stand in front of the officer and your job was to hate them, and their job was to give their spiel. The whole system's been turned around now, it's about ending crime."*

***Court participant***

The TKTH Programme Manager has attended staff meetings to explain how the Court operates, however currently only a few officers hold specialist knowledge about homelessness. It is expected that this knowledge will be further shared through professional development training.

## **6.2 Challenges**

### **Challenges**

- There is debate about how strictly the entry criteria should be enforced.
- The role of the Programme Manager needs to be clarified to ensure it is not a social work role and duplicating services. It is noted, however, that services the judge prescribed are not always delivered, so the Programme Manager has done more work than anticipated
- Stakeholders feel that there have been a lower than expected number of mental health referrals. Some questioned whether there might be issues with the screening process.

### 6.2.1 Entry criteria

Although the entry criteria are established, there is debate about how strictly this should be enforced. Some felt that there needed to be some flexibility in the entry criteria, as issues may be suspected rather than apparent in the initial screening. Although the criteria is reasonable strictly enforced, a few participants have not met the criteria and been accepted onto the programme.

The assessment process is designed to filter out people unlikely to fully engage.

*"If they don't qualify or tell me to [stop], it ends there. If they do qualify, we set up a day to meet within about one week. If they DNA (do not attend) they get remanded back to mainstream court."*

**Operational staff**

Some felt that criteria should be more strictly enforced, as they did not want to work with people ordered to do something, charged with serious crimes, or living out of the inner city. There was concern, for example, that offenders charged with more serious crimes were being admitted to the programme.

*"[It] Works better for 'rats and mice' victimless crimes – the type [of offending] is getting higher/more serious – 'should be in jail' [major offending and out of area so why [are they] on the programme? [TKTH] is not intended for serious crime."*

**Operational staff**

*"This court is supposed to be about participants with low level offending. It's not helpful if someone is accepted onto TKTH and they have serious charges, like a large number of burglary charges. It's also not helpful if the client is housed outside of the central city. It makes it really difficult if you need to travel to see/transport clients who are based in other areas of Auckland."*

**Operational staff**

One of the participants who had benefitted from this flexible approach was thankful to have been given this opportunity and reported high levels of engagement.

*"Jo took a chance with me, because my charges were more serious. I was lucky. I'm here to get my life on track. The Judge didn't compel me to see these services – that was a plan I worked out with my social worker. The Judge just gave me expectations. It's the push in the right direction."*

**Court participant**

There was general agreement, however, that the criteria for staying on the programme worked well. Some interviewed had been concerned that it would be an easy alternative to the District Court process and overly tolerant. They no longer considered this to be the case.

*"When I first came on board, I thought this could be seen as just an easy way out. But now I see that they have to actually work."*

**Operational staff**

*"If they don't attend their courses, and they have no valid reason, they'll get thrown out quickly."*

**Operational Staff**

The interviewees, including TKTH participants, appeared to think that the balance between tolerance and firmness worked well. Court participants described TKTH as more tolerant than the District Court but saw this tolerance as having clear limits.

*"Jo is very tolerant, she gives me a kick in the backside now and again and I need it."*

**Court participant**

*"They take chances with you. I failed the first time, kept going back to my alcohol days and street life. Now I've got in my head that I'm a better person and can do better."*

**Court participant**

### 6.2.2 Role clarification

The Programme Manager treads a fine line between making sure things happen for the participants and not undertaking a social work role. Some felt that there needed to be greater clarity on the role of the Programme Manager, and a clearer demarcation between a coordination and social work role.

*"The Programme Manager has wound up doing a lot more case work than we – and probably she – anticipated."*

**Strategic stakeholder**

Some felt that this lack of clarity led to a duplication of roles and services, and some tension in working relationships.

*"There is some treading on toes and replication, don't produce a plan when there's already one in place."*

**Operational staff**

However, it was pointed out that the support the Judge prescribes for participants is not always carried out and the court has struggled to find appropriate referrals for participants. Some saw this as a resourcing issue, whereas others felt that it may be a lack of clarity around what agencies are able to respond to and provide.

*"The intent was that the signatories were to prioritise [TKTH] clients, but it doesn't work – it only works in bits and pieces, and the services need extra people, accommodation, programmes, funding."*

**Operational Staff**

*"My observation is that the Coordinator has to run around and continually find the support the participants need, and be very creative. While that's always going to be part of the role, she shouldn't have to chase up the basic things, the predictable things that participants need. I thought the other organisations would come forward and be more proactive. Some have been superb, but others didn't seem to understand, or [didn't] want to understand, the value of TKTH."*

**Strategic stakeholder**

*"The Coordinator also has to deal with complacency and lethargy from the other agencies – 'too busy', 'tried for years with so and so' ..."*

**Strategic stakeholder**

One stakeholder observed that this meant that a mix of coordination and case management was necessary if the support and resources required were to be put in place.

*“Reducing the role to just coordinating, without the case management, would risk losing the client group. Most of them already know where to go. They know CADS is there etc., but it’s about motivating them to actually take it up and making sure they do.”*

**Operational staff**

Most agreed that, ideally, the Programme Manager role would not involve so much legwork – e.g. finding housing for people. They felt that the role should instead focus on locating and coordinating other services on behalf of the participant, then helping the participant report back to TKTH.

There was no clear agreement on what should happen when the services are not provided as planned. Some stakeholders suggested that the Judge could step in and order agencies to act or that the management of agencies could intervene. Others felt that formal reporting to the agencies involved was required, as this would make them aware of the issues and enable them to respond.

Several agreed that it required a response from the management of the stakeholder agencies.

*“I’d like to see social work providers with allocated hours/staff to work alongside the Coordinator role, rather than just placement in the general pool of clients.”*

**Operational staff**

*“Sometimes it’s simply down to unrealistic expectations of each other for what is possible. This is where leadership is required from organisations. I’d expect managers to be checking how those relationships are going, and if they’re not going well, how do we proactively make sure they do?”*

**Strategic Stakeholder**

This is an area of tension that requires further attention to determine how it can be resolved.

### 6.2.3 The representation of agencies

Some service providers attend the court regularly, while others are not always represented at the monthly meetings or court sessions. Interviewees felt that when key agencies were not at the table this limited the ability of TKTH to provide the participants with a seamless multi-agency response and the services both needed and prescribed. One interviewee noted that making referrals that didn’t ‘pan out’ not only disadvantaged the client but undermined the credibility of the programme.

Those agencies considered key to be around the table at monthly meetings included the DHB, Housing New Zealand, and those providing AOD (Alcohol or Other Drug) and mental health services. Some also felt that having a Kaumatua working alongside the court would provide important cultural support for Māori participants.

The attendance of service providers at TKTH appears to be affected by a range of factors, including operational resourcing issues and competing commitments. Staff turn-over may also contribute to this.

One interviewee, for example, saw great value in a court team approach, but had not known about the regular meetings until very recently.



*“Joint assessments are ideal. Those monthly meetings would be perfect. Now that we know about them, we’re committed to attending. We could take the referral there and then, or else at Lifewise or City Mission if required.”*

**Operational staff**

## 6.2.4 Mental health screening

If homeless people are vulnerable to a mental health issue, they are more likely to have a close association with the health care, social services, and justice systems than other homeless populations (Kushel, Hahn, Evans, Bangsberg, & Moss, 2005). Stakeholders feel that there have been a lower than expected number of mental health referrals. Some questioned whether there might be issues with the screening process.

*“Mental health says they’re surprised at the lack of mental health issues, but I think we’re just not screening well enough. When they did this for youth they found many weren’t even fit to stand trial. If you look for it, you’ll find it.”*

**Operational staff**

*“Most people in front of TKTH are AOD (Alcohol or Other Drug) cases. We’re not having many of them referred to us, and we’re not having many of our clients going through TKTH. Is that because there’s an access issue? A screening issue? Are mental health issues not getting picked up? Also how are intellectual disability issues involved? Are they not getting picked up as well?”*

**Operational staff**

One stakeholder wondered if participants with both AOD (alcohol or other drug) and mental health issues were able to access support for both through TKTH:

*“There’s often a split between Mental Health and AOD about whether a person with both issues is a client of an addictions pathway or Mental Health, and that’s a tricky boundary. I would hope that they’re being involved wherever possible, rather than walking away when they’ve decided that the addictions issues are more prominent.”*

**Strategic stakeholder**

## 6.3 Critical issues

### Critical Issues

- Addressing delays in access to services could improve the effectiveness of the court.
- More effective access to accommodation options were viewed as potentially beneficial.
- There is a call for new treatment options to help homeless with solvent abuse issues.
- Some stakeholders perceive a lack of buy-in from key agencies. In part this was attributed to agencies being unsure of TKTH’s role and their role in the court process.
- A commitment of resources would enable the work of the Court to be better undertaken
- Those respondents who did not attend monthly meetings wanted greater clarity about the other supports court referrals had in place.
- Maori participants are heavily over-represented amongst TKTH participants
- There is acknowledgement of the need to address cultural factors for Maori clients
- Stakeholders feel that resolving homelessness in the Maori population is not just about

finding appropriate housing or providing Maori with services, but about getting homeless Maori connected back into the whanau, hapu, and iwi they have lost touch with.

- Where this is happening, Maori participants appear to be building their identities and re-connecting with their histories, culture, and tikanga, and finding this valuable.
- As not all Maori participants are receiving support from Maori services, there may be further potential for TKTH to build on this.

### 6.3.1 Housing and health services

The therapeutic model on which TKTH is based, depends on referrals to agencies. Operational staff interviewed felt that the current TKTH process often fails to deliver support effectively and that delays in service delivery were hampering the efficacy of TKTH.

It was noted that while the agencies had committed to providing services to support the work of the court, the current provisioning of housing and health services comes with long waiting lists. There are typical waiting times of two months for Housing NZ assessments and six weeks for AOD service provider assessments.

For the participants, this impacts on their motivation to access services whilst living in the circumstances that contribute to and exacerbate their situation. For operational staff, this affects the implementation of the services planned.

*“That lag time means that the motivation of the individual can lapse as well. People end up back on the streets, albeit with a social worker.”*

**Operational staff**

*“What’s missing is accommodation, somewhere safe and appropriate so people can start getting well, rather than back on the streets. When HNZ (Housing NZ) is at the table it works well. And there’s also a lack of treatment options – waiting lists, no focus on solvents and meths.”*

**Operational staff**

A number of solutions were proposed to achieve greater follow-through for participants’ housing and health needs. These solutions can be divided into three categories: resourcing, buy-in, and communication.

#### Resourcing

Some interviewees felt there was a resourcing issue.

*“Put some money into it. For it to really define its effectiveness, it needs to be resourced – the staff need more time, and there needs to be money for accommodation. It was grass-roots, so it wasn’t resourced from the start, but now’s the time.”*

**Operational staff**

*“Given that half-a-dozen agencies signed up to an MOU, which included a commitment to support the court, it would be good to see some proactive leadership coming from some of those*

*government agencies about the resource requirements needed to sustain the court's success."*

**Strategic stakeholder**

*"The intent was that the signatories were to prioritise [TKTH] clients, but it doesn't work – it only works in bits and pieces – and the services need extra people, accommodation, programmes, funding."*

**Operational staff**

One provider noted that the system is currently overloaded by the high volume of clients coming from prison and felt that an ideal solution was for the Ministry of Justice to purchase a house for prison referrals.

There was a general consensus that accommodation options (for up to 10 people) and dedicated detox beds (for at least one person) were needed. Some stakeholders had heard talk of six housing units being purchased for TKTH and this too was supported.

There was also a call for new treatment options to help people with solvent-abuse issues.

*"Solvent abusers are not candidates for existing treatment programmes in town, largely because they're considered to lack the cognitive function and social skills to be in groups, at least in the early stages while still detoxing. What's needed is some resource that provides accommodation with treatment and then as that begins to have affect, some transition into accommodation with life skills attached to it."*

**Strategic stakeholder**

It was noted that a proposal to the DHB from participating organisations, to fund a small, residential treatment programme for TKTH participants dealing with solvent abuse, had yet to be progressed. It was suggested that long-term benefits could be achieved with short-term resourcing.

*"It would be good to see [the initiative] reactivated ... We know we've got a problem of six to ten solvent abusers regularly appearing in the court. We can probably name them, but we haven't got traction as a group in terms of supporting them to change. A programme that lasts for two years would stop the problem persisting into the future."*

**Strategic stakeholder**

**Buy-in**

Some stakeholders perceived a lack of buy-in from key agencies. In part this was attributed to agencies being unsure of TKTH's role and their organisation's role in the court process. Again, this may have been compounded by issues such as staff turnover.

*"Because of staff turnover, we don't actually know what our role is. I've been playing phone tag with (the court) for the past month, because I want to get clear on what's expected of us and what we can realistically offer."*

**Operational staff**

Many of the stakeholders felt that greater buy-in at managerial level was important if resources were to be prioritised to support court referrals.

*"There's energy at operational and lower governance level, but do the agencies behind these people commit? Have other resources been created to support them? Probably not."*

**Operational staff**

*“The problem isn't that people at the frontline haven't tried. Continued success of the court is going to require some ownership by the health and housing authorities to make that resource available.”*

**Strategic stakeholder**

### **Communication**

Respondents from both housing and AOD service providers wanted greater clarity about the other supports that court referrals had in place.

*“We need to know the contingency plan: if we can't help, where do they go? Legally, if someone arrives homeless, they can leave and return to the street, but we feel this is unethical. What are the court's expectations? Bail conditions? Do we contact them if the client leaves?”*

**Operational staff**

It was noted that these services, however, were often absent from TKTH regular operational meetings, which were considered by regular attendees to be a highly effective forum for communication about court participants.

*“A strength of [TKTH] is the morning meeting, where there are those different perspectives at the table. It's the whole mix, though ironically housing and health can be missing and we struggle when they're not there.”*

**Operational staff**

### **Providing culturally responsive services**

Indigenous peoples world-wide are disproportionately represented in the homeless population. Māori represent 15 per cent of the population, but between 70 to 80 per cent of the homeless population. Similarly Canadian aboriginal and Australian aboriginal people are overrepresented in homelessness figures in those countries. The historical treatment of indigenous people is recognised as impacting on their contemporary community participation and belonging. There are links between landlessness and homelessness, and the loss of the physical and spiritual connections with whanau, hapu, and iwi (Richards, 2008).

Some TKTH stakeholders were concerned that the disparity between Māori and non-Māori required closer attention by THTH and agencies working with homeless Māori.

The Interagency Response to End Rough Sleeping in Auckland City recommended working with, iwi/hapu to end homeless amongst Māori and recognised the need to address cultural factors for Māori clients (Auckland Homeless Steering Group, 2009).

The way TKTH works with Māori participants was seen by stakeholders as a critically-important issue if the Court is to maximise its impact with this population.

There was acknowledgement that TKTH is more culturally welcoming to Māori clients, opening with karakia and greetings. The intention, however, was to have Kaumatua and Kuia working alongside TKTH. That has not yet happened as planned.

Stakeholders see potential to further strengthen the cultural framework practices of TKTH. Developing stronger partnerships with Māori service providers and those providing culturally

appropriate services, was seen as potentially increasing the impact of the work of the Court with Māori clients.

Stakeholders feel, however, that resolving homelessness in the Māori population is not just about finding appropriate housing or providing Māori with services, but about getting homeless Māori connected back into the whanau, hapu, and iwi they have lost touch with. It is felt to be critically important that Māori participants work with hapu and iwi to build their identities and re-connect with their histories, culture, and tikanga.

*“Somehow along the journey they lost their mana, lost their need to connect with their culture...”*

**Strategic stakeholder**

*“It’s about whakapapa and connectedness... it is about understanding their histories and what happened to them.”*

**Strategic stakeholder**

*“The korero is if everything is done well in the back and you deal with all the issues, the journey forward will be made much earlier ... so give them [their] identify back, give them that turangawaewae back, give them their mana back.”*

**Strategic stakeholder**

Some participants too felt that they had lost these connections.

*“Because I been brought up in a white man’s world I lost everything when I was little so I don’t know much about Māori.”*

**Court participant**

It is acknowledged that some court participants may have poor experiences of their immediate families that have contributed to their homelessness. Others had lost these connections with whanau, iwi, and their culture.

*“[My family haven’t been involved] as everybody is in the same trouble.”*

**Court participant**

*“Sometimes with the family they drink and do drugs so then I wanted to change, so I decided to come to Auckland to start a new life. I wasn’t happy, it wasn’t very good living down there.”*

**Court participant**

*“It’s just no family support me ... I just come down here by myself ... no family support ...you’re stuck here, you can’t move forward, you can’t go backwards, you can go sideways.”*

**Court participant**

But according to those interviewed, it is about finding and connecting with the ‘good parts’ of family.

*“Get the family involved...If it had been done that way with me I wouldn’t be getting in trouble. I would be out of here. I would be out of Auckland in a place called (edited for confidentiality).”*

**Court participant**

Some of the court participants had been connected up with Māori health services and taken to marae, which they felt was helping to restore their mana, connections, and identity. They recommended this to other Māori participants.

*"It takes you back to home when you go back on the marae .... You get to see the old people and get to talk."*

***Court participant***

*"Knowing who I am and where I came from has made a difference. It has been finding out ... it's like I'm learning Māori that I had no idea about."*

***Court participant***

As not all Māori participants are receiving support from Māori services, there may be further potential for TKTH to build on this.

In addition to the focus on early intervention and cross sector collaboration, it was suggested that TKTH look at whānau ora and develop both the concept and an action plan for the homeless.

## 7. Cost Benefits

The costs and benefits have not been calculated. In general, however, the main costs are:

- The cost of one FTE
- The costs of housing and access to treatment programmes (AOD, mental health services, PHO services and other support services).

The main financial benefits included:

- Court and police time associated with 214 fewer arrests
- 629 fewer prison bed nights
- A reduction in Emergency Department visits

A primary benefit is that one of the most vulnerable groups in our community is now getting access to the services they require.

### 7.1 Assessment of costs and benefits

Services utilisation research, along with associated cost-benefit analyses, hold the promise of enabling organisations to more fully understand the costs to services and the allocation of resources.

The cost-benefits of homeless courts, however, are difficult to assess. Such analyses tend to be unreliable, as the homeless are often 'invisible' to agencies and organisations, at least in part, as agencies do not record housing status (Culhane, 2008). Moreover, where data is recorded, costs such as reduction of visits to the emergency department, are often transferred or shifted to the costs of providing mental health services, secure housing, or GP visits. An underutilisation of services by homeless people may mean too that there are fewer costs to offset as the result of an intervention (Culhane, 2008). Hence the issue of homelessness is often situated in a broader ethical discussion about how we treat our most vulnerable community, and the toll that homelessness exacts both on those who experience and it and our broader community.

The difficulty calculating the cost-benefit to TKTH is compounded by the sample size, which does not carry the reliability of a larger sample. Future evaluations may need to look at this more closely. Nevertheless it would appear that TKTH provides a cost-benefit to the criminal justice system.

The funding for TKTH required one new full-time employee. The cost for this has been met by the agencies involved in the project.

#### 7.1.1 Corrections

The Department of Corrections figures estimate that the average cost of housing a prisoner each day during the 2010-2011 financial year was \$372 a day for women and \$248 a day for men.<sup>12</sup> During

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<sup>12</sup> Figures released by the Department of Corrections under the Official Information Act for the 2010-2011 financial year, 19/02/2012 cited in Stuff.co.nz <http://www.stuff.co.nz/national/6443330/Women-prisoners-cost-much-more-to-lock-up>

enrolment, and in the six months following enrolment with TKTH, there were a total of 629 fewer prison bed nights than before enrolment.<sup>13</sup>

Moreover, staff noted that TKTH seemed more efficient than the District Court.

*"[TKTH] it's pretty quick – with the District Court you can be here all day. And it's a waste of time, even the Judges get upset as it's a waste of time and money."*

**Operational staff**

### 7.1.2 NZ Police

Similarly, there were a total of 214 fewer arrests during enrolment and following graduation from TKTH.<sup>14</sup> Although the arrest costs have not been quantified, two senior members of the police involved with TKTH felt this represented a significant saving in time.<sup>15</sup>

*"When you look at the cost to the police and the public sector, TKTH readily justifies the continuation. There's the cost of the behaviour to the police of [an] average 10 hours, through arresting officers, custody staff, file preparation, prosecutor, and file preparation for further hearings, and these are savings even if they get a pre-charge warning."*

**Operational staff**

*"We've seen a major reduction in arrest rates for the 15 or so offenders that have graduated. It's a small cohort, but this group of offenders cost an inordinate amount in the old revolving-door court system. [TKTH] does it right the first time, deals with the problem rather than perpetuating the problem."*

**Operational staff**

### 7.1.3 Emergency Department visits

There were a total of 16 fewer Emergency Department visits during enrolment and following graduation from TKTH. The cost of an outpatient ED visit varies considerably, but is estimated at \$300.00.<sup>16</sup>

It is noted that costs of admissions or referrals to mental health services have not been calculated. Moreover other health costs, such as the cost of accessing PHO services, have not been calculated.

### 7.1.4 Housing New Zealand Corporation

Five participants were housed in HNZN tenancies. For those on low incomes, the rent on tenancies is charged at no more than 25 per cent of income, so is subsidised. The most paid for a HNZN tenancy is market rent. Although the cost of housing TKTH participants is unknown, it is noted that in July

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<sup>13</sup> This estimate has been calculated using *bed nights* in prison in the six month baseline prior to enrolment in the Court programme, and subtracting the number of bed nights in prison during enrolment and in the six months following graduation from the programme.

<sup>14</sup> Similarly, this estimate has been calculated using *arrest numbers* in the six month baseline prior to enrolment in the Court programme, and subtracting the number of arrests during enrolment and in the six months following graduation from the programme.

<sup>15</sup> The average remuneration of a police officer in their fourth year including salary, superannuation, life insurance etc is around \$74,000. A reduction of 214 arrests at 10 hours per arrest represents a saving of 2140 police hours. This is more than the hours worked by a fulltime time staff member (a 40 hour week for 52 weeks with no holidays is calculated at 2080 hours).

<sup>16</sup> Communication with ADHB and estimated only.



2012 the average market rent of a lower quartile one-bedroom house in central Auckland was \$250 per week.<sup>17</sup>

### 7.1.5 Comments

Many of the stakeholders commented on the costs and benefits of TKTH.

Law enforcement and court staff focused on how court is saving them time and money, as well as using available resources more effectively:

*"The level of reoffending is lower, so that's less work for police, courts, lawyers."*

**Operational staff**

*"It's a very powerful thing, the conversation with a Judge, but it costs the courts nothing."*

**Operational staff**

Frontline social workers, however, noted an increase in workload due to court referrals.

*"[TKTH] means more work for us and the other agencies. It's not sitting well, but this was a project we committed to from the start."*

**Operational staff**

*"For housing and AOD services, it's just more clients with greater problems. [It] adds to their workload."*

**Operational staff**

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<sup>17</sup> The average rent of a lower-quartile one bedroom flat in Auckland Central (the Grafton, Newton area) is \$250 per week or \$13,000 per year. See Ministry of Business, Innovation and Employment, Tenancy Bonds database, 01/02.2012 – 31/07/2012 downloaded 10 August, 2012  
<http://www.dbh.govt.nz/Utilities/marketrent/market-rent.aspx?CategoryId=258&SubCatId=6&SubCat1Id=63&SubCat2Id=71&SubCat3Id=72&ArticleId=53&Version=1.2&TLA=Auckland&RegionId=2>

## 8. Future vision

Court participants, stakeholders, and operational staff were positive about TKTH and support its continuation.

Some felt that they would like to see TKTH convene more regularly and be rolled out across the Auckland Region, with the ultimate goal of being in every District Court.

*“Maybe more than once a month would be good – there’s a lot of people to see the Judge at one particular time and also it’s a long time to wait. I just really want to graduate.”*

**Court participant**

Some felt that it needed more staff, such as an Agency Coordinator to meet chief executives quarterly, or more dedicated social workers to help support clients.

One felt that the having stronger relationships with Māori service providers was of key importance.

*“Have more Māori recognition and collaborative relationships with Māori service providers.”*

**Operational staff**

One felt that much of the rats-and-mice offending could bypass the court altogether and be dealt with in a restorative justice setting.

*“There’s a precedent, as 80 per cent of youth crime doesn’t see court. At the moment though, it still needs the benefit of ‘authority effect’ but it’s not really a justice issue.”*

**Strategic stakeholder**

Several interviewees felt that there was the opportunity to promote the court to other homeless people, the public, and central Government as a good news story and to further leverage the work of the court.

## 9. Conclusion

TKTH is part of a wider initiative, designed to end rough sleeping in Auckland City. The intention was to streamline processes and practices so that homeless people could be placed in long-term accommodation with effective support services to maintain them in their homes.

TKTH is therapeutic, rather than punitive, in its approach, and the emphasis is on providing appropriate referrals designed to address the underlying issues of homeless.

It would appear that the participants involved in this review and many of the interviewees, believe that the Court's case management approach had an impact on homeless outcomes. Amongst those tracked, the number of arrests, the number of those arrested, and the number of times participants have been arrested, have fallen markedly during enrolment in the court and in the six months following. There has been a similar reduction in the number of nights the participants have spent in prison.

The Court's hearing process is markedly different to that in the District Court and is experienced as such by the participants. The approach of the TKTH provides a less intimidating court experience for the vulnerable people coming before it.

Homelessness amongst the Court's participants has reduced markedly. And to perhaps dispel the myth that homelessness is a choice, all TKTH participants placed in housing have maintained their tenancies.

The Court has been supported by both agencies and participants. It has been observed, however, that the Court could be more effective with a stronger commitment from the agencies involved – housing and health in particular. It appears that agencies providing therapeutic services are working within existing resources but with a greater workload. Currently delays in service provision required by the Court are being compensated for by the Programme Manager. This is resulting in a duplication of services and plans.

The work of the Court has also highlighted gaps in the housing options available to the homeless, and access to addiction services. Currently the Court orders issues to be addressed, but there are insufficient options, particularly in housing and AOD services, to fulfil these plans. Delays in accessing these services are seen as compromising the efficacy of TKTH. Interviewees would like the agencies involved in TKTH to further explore ways of ensuring that the participants get the services they require. In addition to working with agencies to address these issues, it has been suggested that a proposal to establish a residential housing and detox programme is revisited. This initiative is seen as potentially relieving pressure on existing services.

The issue of homelessness is complex. Nonetheless, there are early indications that TKTH, with its case management approach and commitment to ending rough sleeping and homelessness, may be having a positive impact on the homeless court participants covered in this review. It has been identified by at least some of the participants as a catalyst in addressing the issues underpinning their offending.

Although the court has only been operating for a short time, the approach appears to be promising in addressing the underlying causes of offending behaviour and reducing homelessness.

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## Appendix 1: Background to the Court

In 2007 street homelessness became a policy priority in Auckland City. Auckland City Council was becoming increasingly aware of growing public concern with homelessness. A survey on perceptions of public safety in Auckland's CBD, commissioned by the Police, found that some respondents were concerned by the number of homeless and their behaviour, which they felt was intimidating and threatening (Casey and Crothers, 2005). Publicity about the issues was leading to an increased public awareness of the problem, which was "at odds with the regeneration of the CBD and its role as a magnet for leisure, shopping, employment and tourist activities" (Davidson, 2004, p.19). Moreover, it was noted that homeless people themselves often felt unsafe and harassed by police and other security staff (Davidson, C. 2004, cited in Casey and Crothers, 2005, p.36).

There was recognition that addressing the problem of inner-city homelessness required a collective effort from a range of organisations experienced in addressing the complex needs of this population. In response, Auckland City Council developed a Homeless Action Plan 2008-2013, to move people out of homelessness and into long-term permanent accommodation, and provide new initiatives designed to streamline the process for homeless placement. The plan was designed to streamline processes and practices of the partnership organisations. Strand Five of the action plan was to end rough sleeping in Auckland City.

The Auckland Homeless Steering group was established to provide governance and strategic direction for central and non-government agencies, and advocates for improvements in homeless outcomes. It comprised senior representatives from central, local, and non-government agencies.

They, in turn, set up a multi-sector Homeless Taskforce.

In 2010 an inter-agency approach for ending rough sleeping in Auckland City culminated in the signing of a Memorandum of Understanding. It recommended that the agencies coordinate and support the initiatives of central, local, and non-government agencies, iwi/hapu, community and business groups who are involved in ending homelessness (Auckland Homeless Steering Group, 2009). The recommendation was to develop and use common casework methodologies across all agencies. There was recognition of the need to address cultural factors for Māori and Pacific Island homeless clients, in particular the social and economic factors that negatively impact on the client group.

### The Court

In 2007, the General Manager of Lifewise, and the Manager of its homeless services, travelled to Brisbane to look at a range of homeless initiatives. While there they visited a 'specialist circumstances Court' at the Brisbane Magistrates Court. The Court list, based on an existing model in Melbourne, was established to find an alternative way of dealing with defendants charged with public order-type offences, who had impaired capacity at the time of the offence as a result of mental illness or intellectual disability, and were homeless. It provided an alternative to mainstream court process and sentencing outcomes.

An evaluation had concluded that the Court's case management approach had been effective in ensuring that sentencing practice both reflected the needs of those before it and addressed the

causes of their offending behaviour. Moreover, it had provided a less intimidating court experience for the vulnerable people coming before it.

Encouraged by the approach and more appropriate sentencing outcomes, Lifewise decided to explore the possibility of establishing a Special Circumstances Court in Auckland.

Aware that the police and some judges had already had preliminary but positive discussions about such a court, Lifewise wrote to Judge Johnson in 2009 offering to host a meeting about establishing the court. Specialist courts can be established by the Judiciary (a Judge) or the Ministry of Justice. The Chief Judge determined that a Homeless Court should be established and informed the Ministry of Justice of his intentions.

A multi-agency steering group led by the Police was established to assist with the preparation phase.

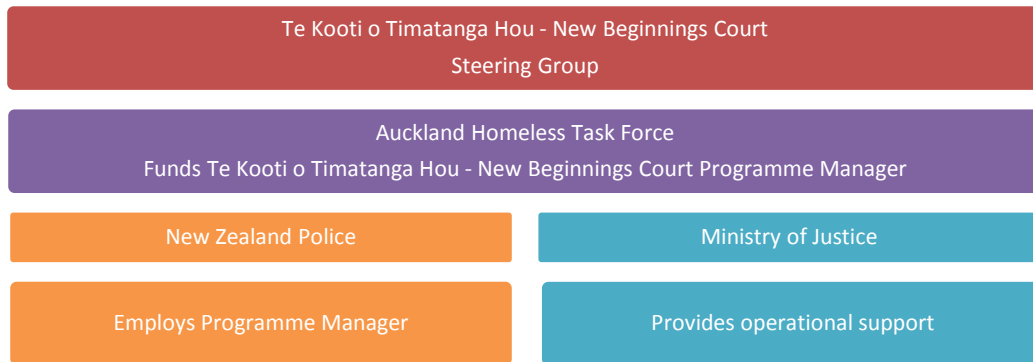
In 2010, an operating charter, defining TKTH and how it worked, was signed by the parties.

**Figure 10: Steering Group**



The Auckland Homeless Taskforce funded the TKTH Programme Manager, who was employed by the New Zealand Police. The Ministry of Justice provides the operational support for TKTH. Te Kooti o Timatanga Hou – the Court of New Beginnings – operates as follows:

Figure 11: The Operation of the Court



## The Process

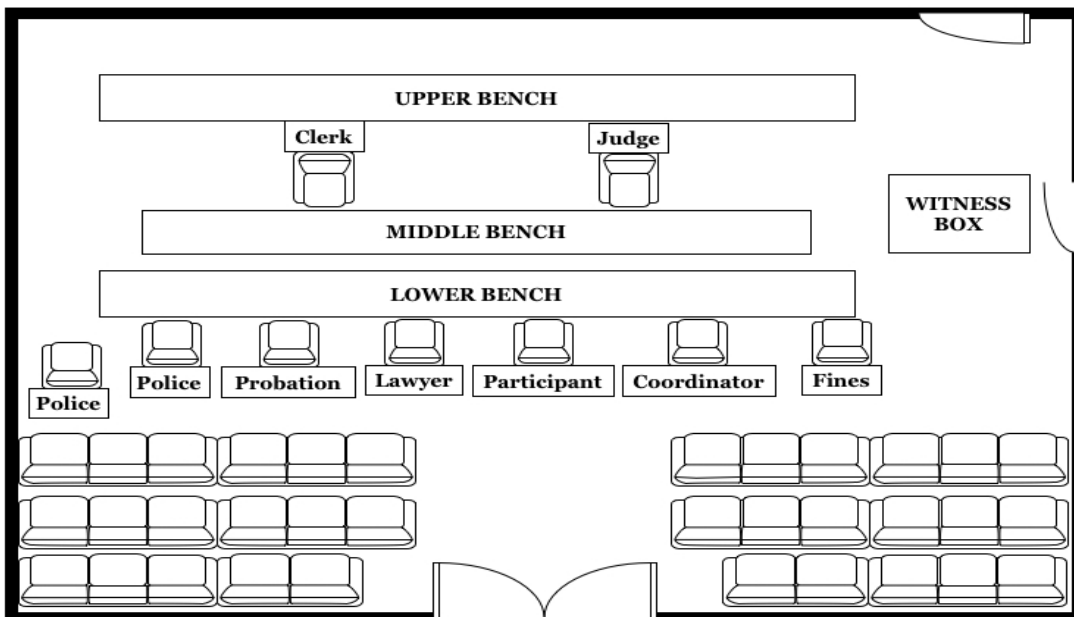
- An arrest is made of a person who, it is thought, may qualify for TKTH.
- The duty lawyer interviews the person, takes initial instructions on plea and completes an initial screen using the standard form provided to assess eligibility.
- If the initial screen indicates the person may be eligible for TKTH, the person is referred to the Programme Manager for an eligibility assessment and preliminary suitability assessment. The manager may consult with any agency involved with the person, so as to see any necessary assessments completed.
- The Programme Manager liaises with the police, the person's lawyer, probation, and others as necessary, including victim's advisors, in order to prepare bail terms to be presented to the Court for consideration. The aim is to connect the person with appropriate wrap-around support services at the first appearance or as soon as possible after.
- If, at the very first appearance, the manager has assessed a person as eligible and suitable, and a plea of guilty has been entered, then the remand can be directly through to the next TKTH date.
- If a remand without plea is needed for advice and/or if the eligibility and suitability assessments cannot be completed on the first day, then a remand to another appearance in the No.1 Court is done for an appropriate period.
- Once a plea of guilty has been entered (or after a person has been found guilty) and the eligibility and suitability assessments have been completed and indicate the person is eligible and suitable, he/she is remanded to the next available TKTH date. A fines report is ordered if there are outstanding fines. A referral is made to the restorative justice provider (unless to do so would serve no useful purpose).
- Before TKTH date, the manager liaises with the appropriate services and support agencies about a treatment plan and makes any necessary referrals. A case coordination meeting is held to bring together a therapeutic plan addressing the person's homelessness, health, cultural needs and personal goals.
- The restorative justice meeting is held before the court appearance to bring together a plan addressing the victims' issues, accountability and options for resolving outstanding fines. It is intended the restorative justice meeting be held even if the victim elects not to attend.
- In cases where the Court has ordered assessment reports, either as to alcohol or other drug issues, or mental health, intellectual disability, or brain or neurological disorder, such reports will be provided to the Court by the agencies concerned within three weeks of being ordered.



- Once those steps have all been taken, the plans (as to accountability, victim’s issues, fines and the therapeutic plan) are considered by the Court and, if in order, approved. In the event of a dispute about the person’s suitability for TKTH or any aspect of a plan, the Court will hear submissions and rule on the matter. Those people found eligible and suitable can then be accepted into TKTH to monitor the delivery of services to be provided under the plan and the person’s compliance with all aspects of the plan.
- It is possible for a person who is found guilty following a defended hearing, and otherwise meets the eligibility and suitability criteria, to be accepted into TKTH. In such cases, the same process as set out above applies after the finding of guilt, as it would after the entering of a guilty plea.
- Once the person has been accepted into TKTH there will be unbroken continuity of involvement of a Judge (and wherever possible the same Judge) in monitoring progress of the person with his/her plan. Participation requires continued commitment by the person to give his/her best efforts to carrying out the requirements of the plan. Failure to comply/commit means return to usual court process and the sanctions available there.
- There will generally be case co-ordination meetings held between the person’s court appearances organised by the manager .

TKTH is less formal than traditional courts. The lay-out of TKTH, with the Judge close to the participant and able to engage with stakeholders, and the participant (rather than defendant) surrounded by the support agencies, is depicted.

Figure 12: TKTH Lay-out



## Appendix 2: Interview Schedules

Below are the semi-structured interview questions for court participants and operational and strategic professionals:

### Interview Schedule: Court Participants

1. Please describe how you have participated in the NBC?
2. What is most/least helpful part of participating in the NBC? How does it compare with the usual District Court – better/worse/different?
3. How do you feel participating in the NBC has affected your:
  - a. Health – has your physical/mental health (inc. substance use) improved?
  - b. Accommodation – has your housing situation (safe & secure housing) improved?
  - c. Financial – has your money situation (benefits, debts) improved?
  - d. Social – has social situation (family/whanau, friends/relationships, community) improved?
4. Do you think you have better and more effective relationships with support agencies because of participating in the NBC?
5. Do you think you'll be less likely to offend again because of participating in the NBC?
6. Would you recommend the NBC to people you know who participated in the District Court?
7. If you could change one thing about NBC what would it be?
8. Any other comments?

### Interview Schedule: Key Operational Staff & Stakeholders

1. Please describe your connection to the NBC?
2. What is most/least helpful part of the NBC?
3. How does it compare with the usual District Court – better/worse/different?
4. How do you think the NBC affects peoples situation – health, accommodation, financial, social?
5. Do you think people participating in the NBC have better and more effective relationships with support agencies?
6. Do you think the NBC has changed the way agencies view the issues for homeless people and best to work with homeless people?
7. Do you think people participating in the NBC are less likely to offend again?
8. If you could change one thing about NBC what would it be?
9. What would the NBC look like in 1, 3 and 5 years time – what would be the same/different?
10. Any other comments?

## Appendix 3: Information Sheet

This is the draft information sheet for participants of Te Kooti o Timatanga Hou - the New Beginnings Court

### *Introduction*

This is an information sheet about the evaluation of Te Kooti o Timatanga Hou - the New Beginnings Court

Thank you for taking the time to read this and considering whether you'd like to take part. If you have any questions about this evaluation, please contact the Positive Thinking Project Manager (details are at the end of this information sheet).

You are invited to take part in the evaluation by participating in an interview to talk about your experience with the New Beginnings Court.

If you do decide to take part in this evaluation your participation is entirely voluntary - it is your own choice. If you choose not to take part you will not be disadvantaged in anyway. You can participate and choose to answer only the questions that you are comfortable with.

### *What to Expect*

If you choose to take part in an interview you will be asked to sign a consent form.

- The interview may take up to 30 minutes.
- At the interview, we would like to discuss with you:
  - The most and least helpful part of participating in the New Beginnings Court
  - How the New Beginnings Court compares with the usual District Court
  - The impact participating in the New Beginnings Court has had on your offending
  - The impact of participating in the New Beginnings Court has had on other areas of your life, such as your health, housing, financial and social situation
  - The impact participating in the New Beginnings Court has had on how you deal with other organisations and support services
  - How you think the New Beginnings Court could be improved
- The interviewer will take written notes during the interview
- The interviewer will ask for your ethnicity, age and gender

### *Confidentiality*

What you talk about in the interview will be treated as confidential. This means that your name will not be linked to your comments in the evaluation report.

The interviewer will share with the appropriate agency anything you mention in the interview that threatens your safety or the safety of someone else.

### ***Evaluation Details***

The evaluation will address the following key questions:

1. Has the court reduced chronic public space offending in Auckland's inner city?
2. Has the court improved the overall wellbeing of those who participate in the Court process?
3. Is the service delivery model of the Court appropriate and effective?
4. Does the court provide value for money?

### ***About Positive Thinking***

Positive Thinking is a private company that carries out evaluations. We focus on identifying and building on strengths to improve services and outcomes for service users in the mental health, addictions and homelessness sectors.

### ***Consent Form***

If you agree to participate in an interview for the evaluation of the New Beginnings Court, please sign the consent form provided on the day.

### ***Contact Person***

If you have any questions about this evaluation please contact the Project Manager:

Graham Panther

Phone: 022 694 2279

Email: [graham@positivethinking.co.nz](mailto:graham@positivethinking.co.nz)

## Appendix C – Consent Form

This is the consent form for participants of the evaluation of Te Kooti o Timatanga Hou - the New Beginnings Court

Please read the following statements about carefully and sign your name if you agree with each one.

- I agree to take part in the evaluation of the New Beginnings Court and:
- I have been given an information Sheet on the evaluation of the New Beginnings Court and understand what the evaluation is about.
- I have had the opportunity to discuss this evaluation. I am satisfied with the answers I have been given.
- I understand that the interviewer will take written notes during the interview and will write down my ethnicity, age and gender
- I understand that taking part in this evaluation is voluntary (my choice) and that I may decline to answer any questions. Also I may withdraw from the evaluation at any time up to the point at which the analysis starts. If I choose to withdraw this will not in any way affect any future services.
- I understand that my comments will not be identified and my name will be listed as a participant in the evaluation report
- I understand that the interviewer will contact the appropriate agency if I mention something that threatens the safety of myself or someone else or is about offending you have committed or planned to commit
- I have had time to consider whether to take part.
- I know who to contact if I have any questions about the evaluation.

I, ----- (my full name) hereby consent to take part in this study. I will be given a copy of the consent form to keep if I so wish.

Date: / / 2010

Signature:

## Contact Person

If you have any questions about this evaluation please contact the Project Manager:

Graham Panther

Phone: 022 694 2279

Email: [graham@positivethinking.co.nz](mailto:graham@positivethinking.co.nz)