



December 08, 2022

Committee Secretary  
Parliamentary Joint Committee on Law Enforcement  
PO Box 6100  
Parliament House  
Canberra, ACT 2600

### Submission 1 – Drug Free Australia

Thank you for inviting Drug Free Australia to submit evidence to support the Inquiry into Drug Policy and Law in Australia. We will be forwarding a more detailed submission prior to the due date, but feel that the information provided herein, is so important as to warrant early and specific attention.

Please find attached CRYPAR-Final Report by Chief Investigator: Professor Lorraine Mazerolle for The University of Queensland. We believe this to be a very constructive addition to the evidence you are collecting.

CRYPAR (Coordinated Response to Young People At Risk) was a program run in Queensland and has shown that the local Government services can communicate and integrate with early intervention programs for Australian children at risk of drug use.

Importantly, it enabled police to refer young people who are at risk, to an appropriate support service. With the consent of the young person and their parent/guardian the officer will complete simple a one-page referral form and then fax it to the nominated agency.

The services involved signed an agreement to contact the young person within 48 hours and make an appointment to see them within 7 days

The significance of this is that the Research has shown that police may come in contact with children, young people or families "at risk", **up to 12 months before anyone else is aware there may be a problem.** CRYPAR trains police to identify individual issues when coming in contact with children/young people and directly refer them to one of the 15 partners.

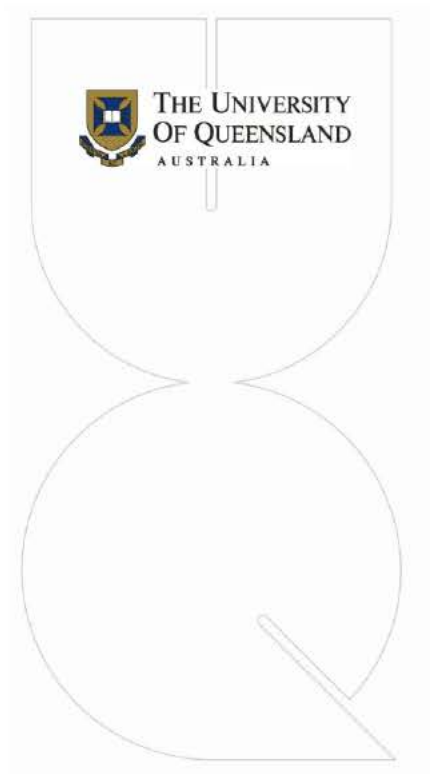
Of relevance and importance is that CRYPAR does not require a great deal of additional resources, but, for the mostpart, enables a more efficient use of existing resources.

Kind Regards

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Executive Director

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Enc.



## **An Assessment of the Coordinated Response to Young People at Risk (CRYPAR) Program**

### **FINAL REPORT**

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Institute for Social Science Research

### **Acknowledgements**

ISSR would like to thank Assistant Commissioner Peter Martin and Inspector Bruce Graydon of the QPS for their support in facilitating this research. We also acknowledge the significant support received from the team at QPS Statistical Services and CRYPAR staff. Not least we would like to thank the research participants, young people, their parents and agency stakeholders who gave freely of their time to take part in the research process.

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## EXECUTIVE SUMMARY

The Coordinated Response to Young People at Risk Program (CRYPAR) was initiated by the Queensland Police Service (QPS) in 2006 in the North Brisbane and Pine Rivers Policing Districts, and later expanded to include Logan and Rockhampton. It recognised that mainstream policing approaches - with their focus on criminal offenders and victims - did not adequately support 'at risk' youth in the community. CRYPAR was designed as a whole-of-government initiative which aimed to assist young people who are risk of developing criminal and self-harming tendencies and anti-social behaviour. To achieve this, the program brought together the Queensland Police Service, Queensland Government, and non-government agencies to assist youth in the community who were most at risk.

The original CRYPAR faxback referral program was subsumed into Support Link in 2010, which has allowed for a more efficient and accountable e-referrals process. The joining of CRYPAR and Support Link took place as the assessment of CRYPAR was underway, but because the programs had the same intent and overall methodology from the outset, a number of the findings in this report should be considered in the context of Support Link. In fact, the Support Link program improved upon many of the features of the original CRYPAR model, not least by changing from a paper-based to an electronic referrals system. This has significantly simplified the process for police officers and agencies alike and made it easier to track data.

At the time that data were supplied for this report, more than 1200 young people had been referred through the CRYPAR system from Metropolitan North, Logan, and Rockhampton police regions. According to QPS data (QPS CRYPAR Business Case, 2008), in its first two years of operation, in excess of 700 CRYPAR referrals were made in North Brisbane and Pine Rivers Police Districts. Of the total number of individuals referred, 85% had not had adverse contact with police, and of those who had a history of offending, 66% had not offended over this two year period.

This report follows on from a detailed Business Case developed by QPS in 2008, and seeks to provide a thorough overview of the CRYPAR system. Firstly, the database of CRYPAR participants is examined to provide a description of the people referred through CRYPAR,

their presenting issues, and the agencies to which they were referred. The second part of this report delves deeper into the workings of the CRYPAR referral process through a series of interviews and focus groups with CRYPAR participants, their parents, partner agencies, police and CRYPAR staff to summarise what works, and what could be improved upon. The third part of the report compares the data in the CRYPAR database with records of reported offences to give a statistical analysis of the effects of CRYPAR on the numbers of records.

## 1. PROJECT BACKGROUND

This report examines the Queensland Police Service (QPS) Coordinated Response to Youth at Risk (CRYPAR) initiative. CRYPAR acknowledged that there are a significant group of young people in the community who are deemed at risk but who are not yet offenders or victims. These people may have significant issues in their lives which, if left unaddressed, may contribute to their criminality in the future. Young people who come into contact with the police, and their families, can have very diverse needs and may need the assistance of a number of specialised services. Unfortunately, a young person's problems can remain unidentified until they come into contact with the juvenile justice system.

In addition to the known risk of an intergenerational transmission of deviant behaviours within families, research also suggests that problems within at risk families tend to increase in complexity due to unmet needs in relation to underlying issues. As such, the range of social issues these families often face leads to increased demand for a diverse range of support mechanisms, involving both governmental and non-governmental agencies. When delivered independently of each other, the interventions offered by different support agencies are often ineffective in addressing the needs of high risk families, many of which have a history of prior unsuccessful interventions and a record of disengagement. To address and regulate the needs and behaviours of high risk families, a more holistic approach, combining regulatory and rehabilitative support mechanisms is required.

CRYPAR recognised that police typically see at risk young people much earlier than other services, and that police officers are therefore in a unique position to facilitate early intervention. In fact, research has shown that police officers may come into contact with young people who are at risk of juvenile offending and risk-taking behaviours up to 12

months before any other services become aware of their issues (QPS Business Case, 2008). As an early intervention initiative, CRYPAR was designed to assist police officers to identify at risk youth and connect them to appropriate social service agencies at the time of contact in order to try to head-off issues which are associated with future criminality and anti-social behaviour. CRYPAR had three main objectives:

- To provide a mechanism that allows police officers to refer young people and families at risk to agencies who are committed to promptly addressing issues;
- To actively engage in a service delivery framework that is informed and underpinned by principles of prevention and early intervention; and
- To build and maintain sustainable partnerships with services / departments identified as appropriate to the young person's needs.

The CRYPAR referral system was aimed at overcoming some of the many challenges law enforcement agencies face when dealing with at risk youth, by assisting them and their families gain access to community service providers who are better equipped to address long term, underlying issues that result in offending behaviour. The simple CRYPAR referral process, allowed police officers in the field to make one page faxed referrals to appropriate support agencies on the behalf of young people, with their consent and the consent of their parent/guardian. Agencies involved with the CRYPAR process agreed to respond to these referrals within 48 hours.

This study reports on the CRYPAR program including the CRYPAR referral process, and the direct outcomes of CRYPAR in terms of anticipated reduced offending and recidivism of participants.

Specifically, this report seeks to answer the following questions:

- What kinds of people are referred through the CRYPAR system?
- What are the strengths of the CRYPAR systems, and what improvements can be made?
- What effect, if any, does CRYPAR have on subsequent offending?



## 1.1 OVERVIEW OF THE ORIGINAL CRYPAR REFERRAL PROCESS

The CRYPAR and Support Link processes have been diagrammatically represented by QPS<sup>1</sup> as follows:

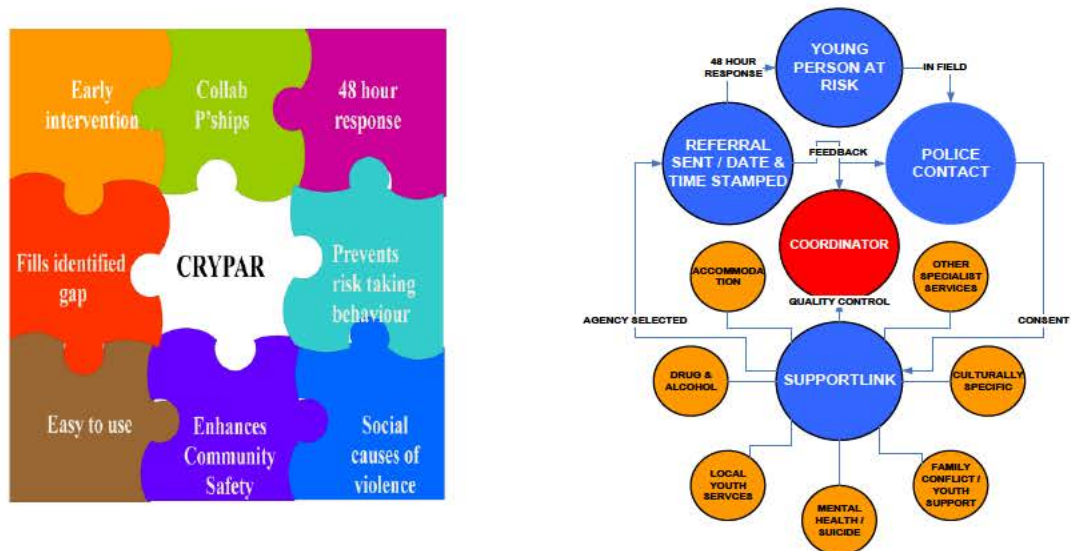


FIGURE 1. Overview of CRYPAR and Support Link Processes.

The diagram overleaf gives a brief overview of a typical CRYPAR referral process prior to its merging with Support Link.

<sup>1</sup> QPS (2008) Coordinated Response to Young People at Risk Business Case.

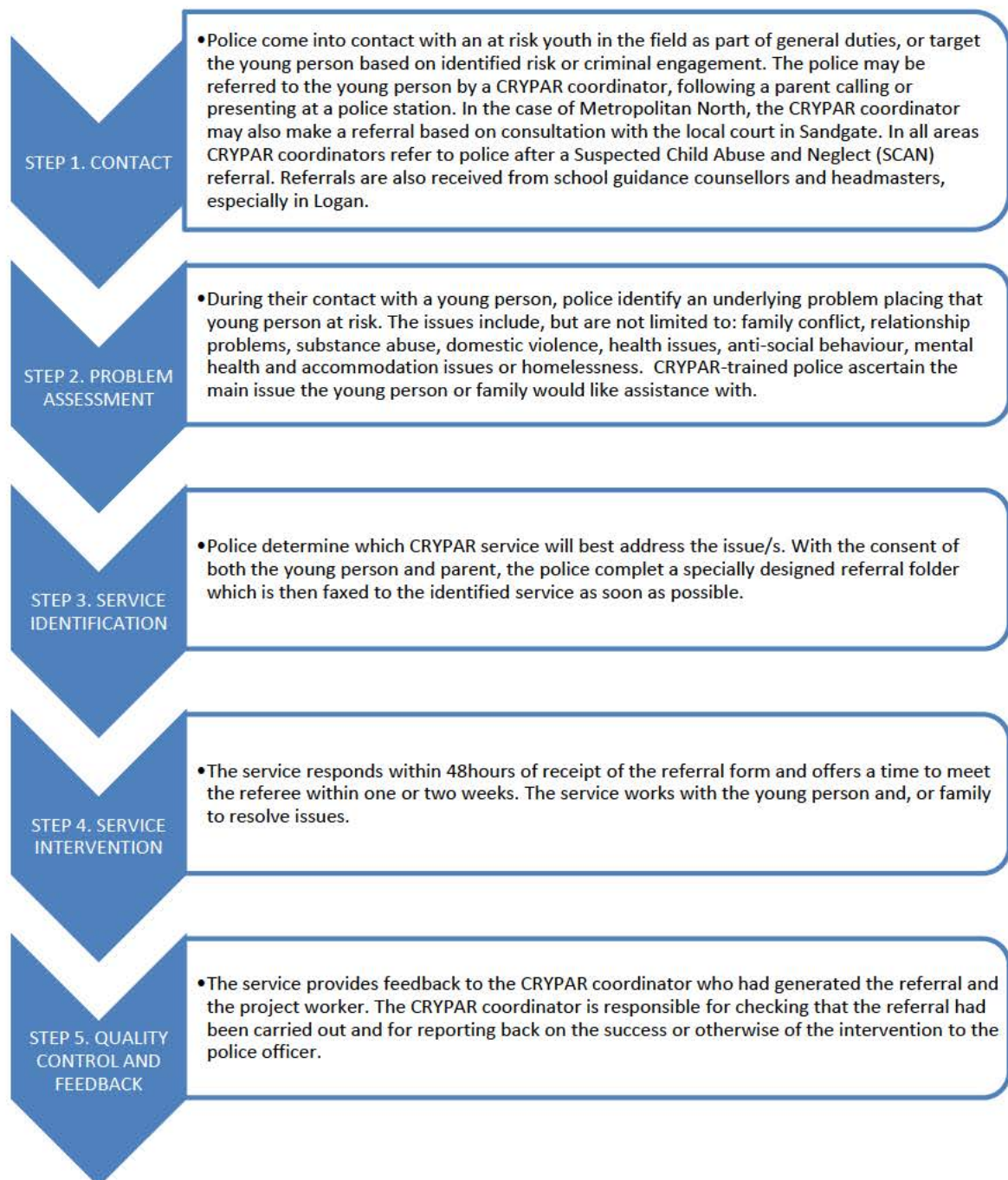


Figure 2. A Generic CRYPAR Referral Process

## 2. STUDY METHODOLOGY

The objective of this report is to provide an overview of the CRYPAR referral program that was implemented first in the Metropolitan North Policing Region (including primarily the Pine Rivers and North Brisbane Districts), and subsequently in Rockhampton and Logan Districts. This study is in line with QPS' commitment to encourage evidence-based decision-making and deployment of resources. The review of government funded programs such as CRYPAR – which examine the effectiveness, equity, and probity of the program – goes some way to ensuring that programs that are delivered by governmental agencies can most successfully tackle social problems.

The first part of this report comprises a statistical overview of CRYPAR referrals, including descriptive data of CRYPAR participants. The overview was based on data provided by the Statistical Services Department of the QPS, including the database of individuals referred through CRYPAR, and the records of their contacts with police for offending behaviour.

The second part of the report outlines the qualitative stage of the research and provides a comprehensive account of a series of interviews and focus groups with key informants, including CRYPAR participants, their family members, service providers, police officers, and CRYPAR staff. It provides a more in-depth examination of the strengths of the CRYPAR system, and identifies areas where improvements could be made. The following research activities were conducted as a part of this qualitative analysis:

- Five individual face to face interviews with young people who were referred through the CRYPAR system.
- Ten individual telephone interviews with parents/guardians of CRYPAR participants.
- Three separate focus groups with:
  - Representatives of CRYPAR partner agencies (5 participants).
  - Police officers from three different CRYPAR police districts (6 participants).
  - Specialised CRYPAR staff, including district coordinators from Logan, Brisbane North, Pine Rivers and Rockhampton, and two police officers who had held special roles in CRYPAR (6 participants).

The third part of the study comprises a brief analysis of risk of offending following the CRYPAR intervention, as well as a description of a survival analysis of the potential impact of CRYPAR on offending. This analysis was conducted utilising data provided by the Statistical Services Department of the QPS, including the database of individuals referred through CRYPAR, and the QPRIME (Queensland Police Records and Information Management Exchange) database of recorded offences.

### 3. STATISTICAL OVERVIEW OF CRYPAR PARTICIPANTS

A statistical analysis of the CRYPAR referral system was conducted in order to examine the demographic characteristics of the people being referred through CRYPAR, the agencies that they were being referred to, and their presenting issues. The aim of these analyses was to examine the participants in the CRYPAR system.

#### 3.1 DATA

For the statistical analyses, two de-identified data files were pulled from official records by Queensland Police Service Statistical Services. The first data file included details of all CRYPAR referrals between 1<sup>st</sup> June 2006 and 31<sup>st</sup> March 2010. This produced 1289 unique individuals who had been referred through the CRYPAR system, and 1540 total CRYPAR referrals. As CRYPAR was initially implemented only in the Metropolitan North Policing Region, the majority of participants were referred in this region (n = 1112, 86.3%), which included North Brisbane (n = 635), Pine Rivers (n = 461), Brisbane Central (n = 12) and Brisbane West (n = 4) policing districts. Almost 10% of referrals (9.9%, n = 127) came from Logan District, while 3.9% (n = 50) came from Rockhampton District.

A second data file was pulled from the QPRIME system, and included details of reported offences for all CRYPAR participants that were reported between 1<sup>st</sup> July 1995 and 30<sup>th</sup> June 2011. Of the CRYPAR participants, 536 had at least one recorded entry in the QPRIME system, with a total of 6571 entries, with 526 (6455 entries) individuals falling in the 10 to 25 years age range.

The number of reported offences per CRYPAR participant ranged between 1 and 161 reported offences (for reported offenders: Mean = 12.26; Median = 5.50; Mode = 1).



### 3.2. DEMOGRAPHICS

Tables 1 and 2 and Figures 1 and 2 show the basic demographic details of the CRYPAR participants. There was a roughly even split of males and females referred through CRYPAR (see Table 1 and Figure 3). A majority of participants (59.2%) were aged between 12 and 15 years at the time of their first CRYPAR referral, with 39% of referrals made for young people under the age of 14 years (see Table 2 and Figure 4). A one-way independent groups ANOVA indicated that there were no significant differences in the average age of participants across the three policing regions,  $F(2, 1276) = 2.64, p = .072$ .

Table 1. Gender of CRYPAR participants – regional breakdown.

	Metro North		Logan		Rockhampton		TOTAL	
	n	%	n	%	n	%	n	%
<b>Gender</b>								
Male	596	53.6	72	56.7	26	52	694	53.8
Female	516	46.4	53	41.7	24	48	593	46.0
Missing	-	-	2	1.6	-	-	2	0.2
<b>TOTAL</b>	<b>1112</b>	<b>86.3</b>	<b>127</b>	<b>9.9</b>	<b>50</b>	<b>3.9</b>	<b>1289</b>	<b>100</b>

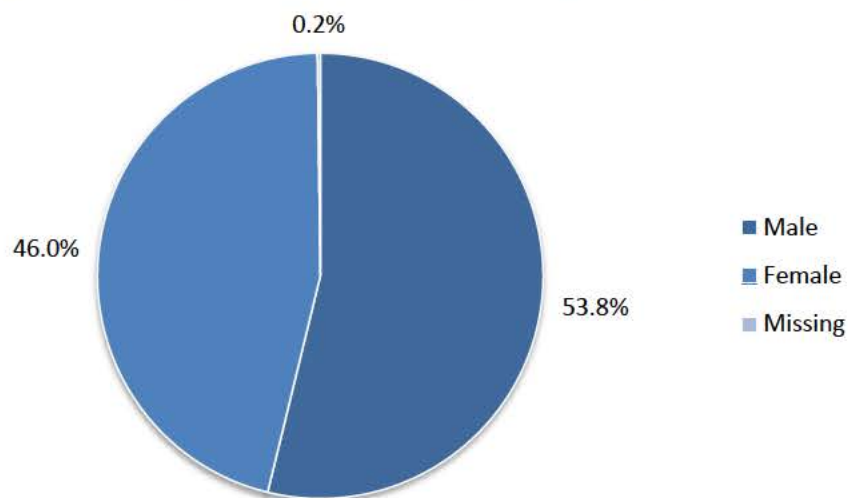
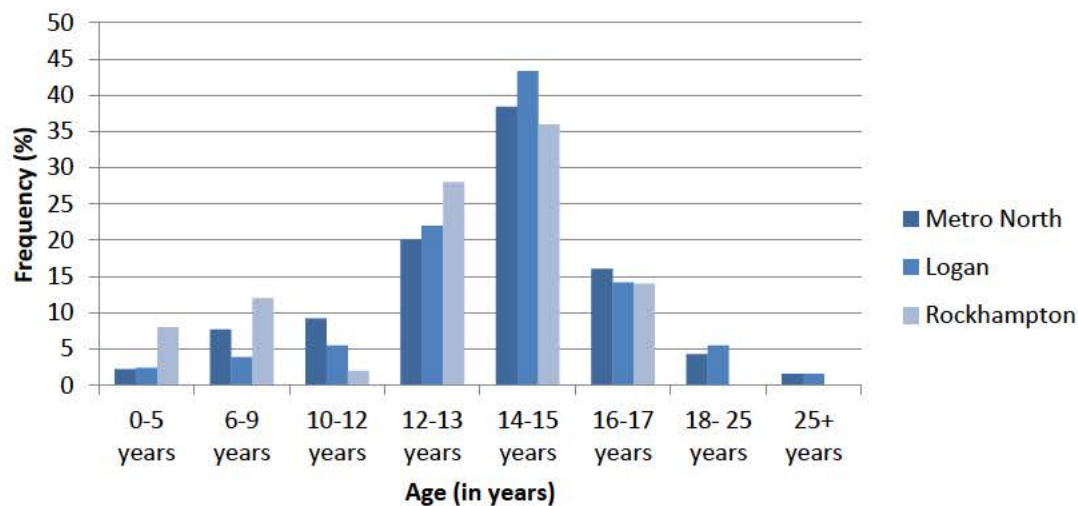


Figure 3. Gender breakdown of all CRYPAR participants.

**Table 2. CRYPAR participant age at first referral – regional breakdown.**

	Metro North		Logan		Rockhampton		TOTAL	
	n	%	n	%	n	%	n	%
<b>Age at First Referral</b>								
0-5 years	24	2.2	3	2.4	4	8	31	2.4
6-9 years	86	7.7	5	3.9	6	12	97	7.5
10-12 years	102	9.2	7	5.5	1	2	110	8.5
12-13 years	224	20.1	28	22.0	14	28	266	20.6
14-15 years	424	38.4	55	43.3	18	36	497	38.6
16-17 years	178	16.1	18	14.2	7	14	203	15.7
18- 25 years	48	4.3	7	5.5	-	-	55	4.3
25+ years	18	1.6	2	1.6	-	-	20	1.6
Missing	8	0.7	2	1.6	-	-	10	0.8
Average (years)	14.35		14.79		13.17		14.35	
Standard Deviation (SD)	4.24		4.14		3.39		4.20	



**Figure 4. Frequencies (percent of sample within each region) of CRYPAR participants' age at first referral – regional breakdown**

### 3.3 REFERRALS

The core component of the CRYPAR system involved the referral of young people to agencies identified to assist them in resolving issues that have been identified as contributing to the person's potential to engage in anti-social behaviour or their chance of future victimisation.

Table 3 shows the number of referrals as broken down by year. As the program was not implemented in Logan and Rockhampton until 2009, there were far fewer referrals from

these regions. Almost half of all referrals (47.4%) were made in Metropolitan North prior to the implementation of the program in Logan and Rockhampton, providing the substantive reasoning for the choice of the sample for the survival analysis described in Section 5.

**Table 2. Breakdown of CRYPAR referrals by year by policing region.**

	Metro North		Logan		Rockhampton		TOTAL	
	n	%	n	%	n	%	n	%
<b>Referrals (all) by Year*</b>								
2006 (from 01/06/06)	23	1.7	-	-	-	-	23	1.5
2007	195	14.3	-	-	-	-	195	12.7
2008	511	37.6	-	-	-	-	511	33.2
2009	540	39.8	53	40.2	6	12	599	38.9
2010 (to 31/03/10)	89	6.6	79	59.8	44	88	212	13.8
Total	1358	100	132	100	50	100	1540	100

\* Because some individuals were referred through CRYPAR more than once, these referrals add to more than the total number of individuals in the CRYPAR sample.

### 3.3.1 PRESENTING ISSUES

The presenting issues recorded through the CRYPAR system reflected multiple and complex issues for many CRYPAR participants. Table 4 shows the types of issues recorded through the CRYPAR database as the primary presenting problem and Figure 5 shows the percentages of referrals in each region for each type of referral issue.

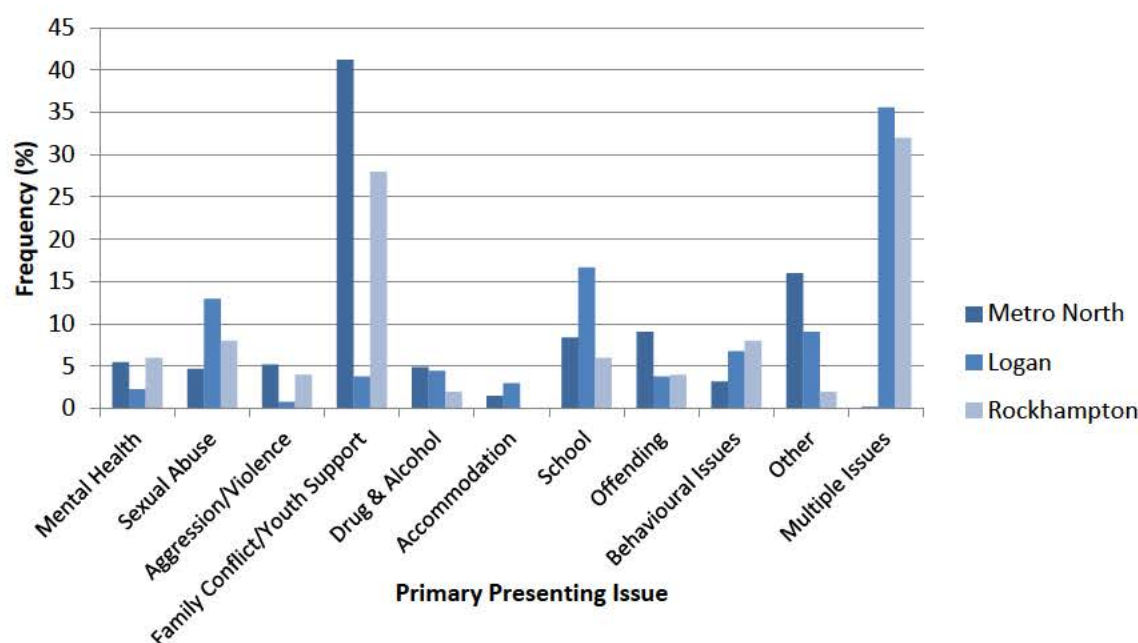
A pervasive problem throughout this analysis was the inconsistency in the way that these issues were recorded across different policing districts. This can clearly be seen by the large numbers of 'Family conflict/Youth support' entries within Metropolitan North (representing more than 40% of issues presented), compared to the small numbers using this category in the Logan District (less than 5% of issues). Entries from Logan were more likely to have been coded with multiple presenting issues, and were likely to provide more information to the referral agency. This, however makes it more difficult to determine the actual primary reason for the CRYPAR referral.



**Table 3. Primary presenting issue for CRYPAR referrals – region breakdown.**

Primary Presenting Issue <sup>1</sup>	Metro North		Logan		Rockhampton		TOTAL	
	n	%	n	%	n	%	n	%
Mental Health	75	5.5	3	2.3	3	6	81	5.3
Sexual Abuse	64	4.7	17	13.0	4	8	85	5.5
Aggression/Violence	70	5.2	1	0.8	2	4	73	4.7
Family Conflict/Youth Support	560	41.2	5	3.8	14	28	579	37.6
Drug & Alcohol	67	4.9	6	4.5	1	2	74	4.8
Accommodation	21	1.5	4	3.0	-	-	25	1.6
School (e.g., truancy)	114	8.4	22	16.7	3	6	139	9.0
Offending	123	9.1	5	3.8	2	4	130	8.4
Behavioural Issues	44	3.2	9	6.8	4	8	57	3.7
Other	217	16.0	12	9.1	1	2	230	14.9
Multiple Issues	3	0.2	47	35.6	16	32	66	4.3
Missing	-	-	1	0.8	-	-	1	0.1

<sup>1</sup>Because some individuals were referred through CRYPAR more than once, these referrals add to more than the total number of individuals in the CRYPAR sample.

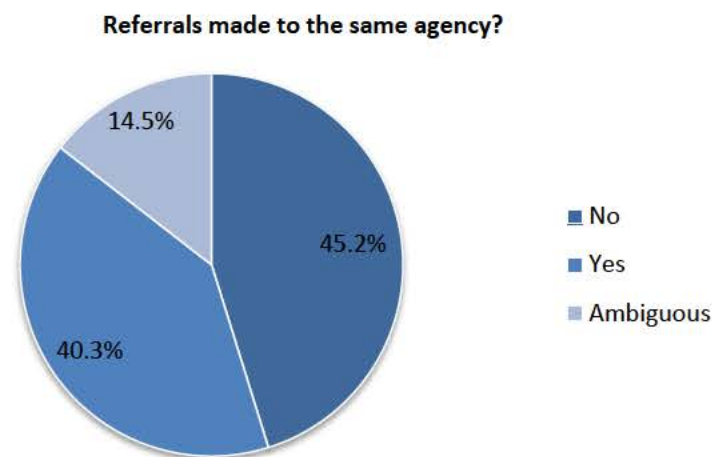


**Figure 5. Frequency (percent of sample within each region) of presenting issues.**

Of the CRYPAR participants, 186 (12.1%) were entered into the referral system more than once. No repeat referrals were made in Rockhampton, and only five repeats were made in Logan. Seventy six per cent of participants who received more than one referral through



CRYPAR (n = 142; 11.0% of total sample) received two referrals; however 44 participants received between 3 and 6 referrals within the CRYPAR system on separate dates. The average number of days between referrals was 148.40 (approximately 5 months), though this ranged from 1 day to 906 days (approximately 2 and a half years). When multiple referrals were made for the same CRYPAR participant, in 40.3% of cases (n = 75; 5.8% of total sample) the referral was made to the same agency the participant had already been referred to (see Figure 6). 'Double referrals' were also noted as a problem by agencies, who felt it was a waste of scarce resources.



Note: 'Ambiguous' represents cases where the first or a subsequent referral agency was recorded as 'Other'.

**Figure 6. Breakdown of CRYPAR participants with multiple CRYPAR referrals whose referrals were made to the same agency across referrals.**

### 3.3.2 AGENCIES

Table 5 shows the agencies included in each of the Agency Group categories. These groupings were created by examining the aims and mission statements of the named agencies within the CRYPAR database to heuristically group agencies by their purpose. Table 6 and Figure 5 show the breakdown of CRYPAR referrals to these groups of agencies across the three CRYPAR regions. Figure 7, in particular, shows the clear differences between regions in the issues dealt with by the different agencies.

**Table 4. Agencies included in CRYPAR database by Agency Group.**

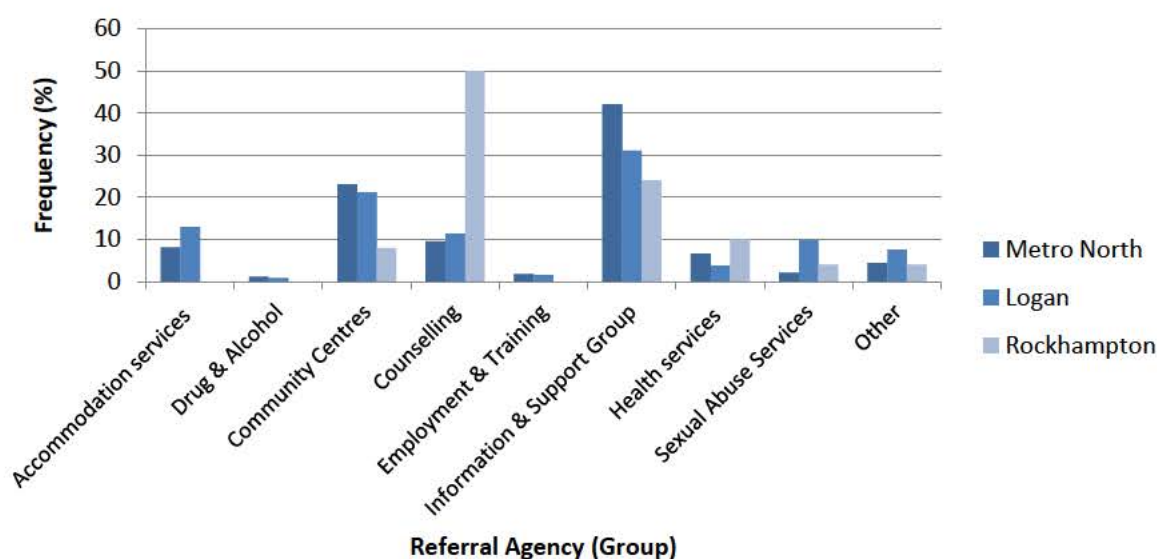
Agency Group	Agencies Included
<b>Accommodation Services</b>	<ul style="list-style-type: none"> <li>▪ Bridges Reconnect</li> <li>▪ Mission Australia – Night Spot</li> <li>▪ Youth Emergency Service</li> <li>▪ Youth Outreach Service</li> </ul>
<b>Drug &amp; Alcohol</b>	<ul style="list-style-type: none"> <li>▪ Alcohol, Tobacco and Other Drugs Service</li> <li>▪ Drug Arm</li> </ul>
<b>Community Centres</b>	<ul style="list-style-type: none"> <li>• Anglicare</li> <li>• Beaucare</li> <li>• Boystown Logan</li> <li>• Jabiru Community Youth Service</li> <li>• Kurbingui Youth Development</li> <li>• Logan East Community Neighbourhood Centre</li> <li>• Multilink</li> <li>• Pine Rivers Neighbourhood Centre</li> <li>• Project Circuit Breaker</li> <li>• The Spot Community Services - The Spot 4 Kidz</li> <li>• Zig Zag</li> </ul>
<b>Counselling</b>	<ul style="list-style-type: none"> <li>▪ Intercept Youth and Family Service</li> <li>▪ Lifeline Family Relationships Centre</li> <li>▪ Phoenix Living Solutions</li> <li>▪ Relationships Australia</li> <li>▪ Strengthening Family Connections</li> <li>▪ Victim Counselling and Support Service</li> <li>▪ Wahroonga Counselling</li> <li>▪ Youth Pathways</li> </ul>
<b>Employment &amp; Training</b>	<ul style="list-style-type: none"> <li>▪ DET</li> <li>▪ Epic Community Services</li> </ul>
<b>Information &amp; Support Group</b>	<ul style="list-style-type: none"> <li>▪ Youth &amp; Family Support Service</li> <li>▪ Family Support Services</li> <li>▪ Girls Time Out</li> <li>▪ Men's Information and Support Services</li> <li>▪ Open Doors</li> <li>▪ Victory Community Services</li> <li>▪ Women Against Violence Support Service Inc</li> <li>▪ YMCA - Y-Care (South-East Queensland)</li> <li>▪ Youth Connections</li> <li>▪ Disability Services QLD</li> <li>▪ Young Parents Program</li> <li>▪ Red Cross under 8s</li> <li>▪ Women Working Alongside Women With Intellectual Disabilities (WWILD)</li> </ul>
<b>Health Services</b>	<ul style="list-style-type: none"> <li>▪ Child &amp; Youth Mental Health</li> <li>▪ Women's Health Centre</li> <li>▪ Private Practice</li> <li>▪ Chermside Indigenous Health Program</li> <li>▪ Child Advocacy Service Royal Children's Hospital</li> </ul>
<b>Sexual Abuse Services</b>	<ul style="list-style-type: none"> <li>▪ Bravehearts</li> <li>▪ Brisbane Sexual Assault Service</li> <li>▪ Centre Against Sexual Violence</li> <li>▪ SCAN</li> </ul>
<b>Other</b>	<ul style="list-style-type: none"> <li>▪ CRYPAR Coordinator</li> <li>▪ CQU</li> <li>▪ QDIP</li> <li>▪ YABAGAR</li> </ul>

**Table 5. Primary referral agency (grouped) for all CRYPAR referrals – regional breakdown.**

	Metro North		Logan		Rockhampton		TOTAL	
	n	%	n	%	n	%	n	%
<b>Referral Agency 1 (Group)<sup>1</sup></b>								
Accommodation services	124	8.1	17	12.9	-	-	141	9.2
Drug & Alcohol	15	1.1	1	0.8	-	-	16	1.0
Community Centres	314	23.1	28	21.2	4	8	346	22.5
Counselling	130	9.6	15	11.4	25	50	170	11.0
Employment & Training	24	1.8	2	1.5	-	-	26	1.7
Information & Support Group	572	42.1	41	31.1	12	24	625	40.6
Health services	90	6.6	5	3.8	5	10	100	6.5
Sexual Abuse Services	29	2.1	13	9.8	2	4	44	2.9
Other	60	4.4	10	7.6	2	4	72	4.7

<sup>1</sup>Because some individuals were referred through CRYPAR more than once, these referrals add to more than the total number of individuals in the CRYPAR sample.

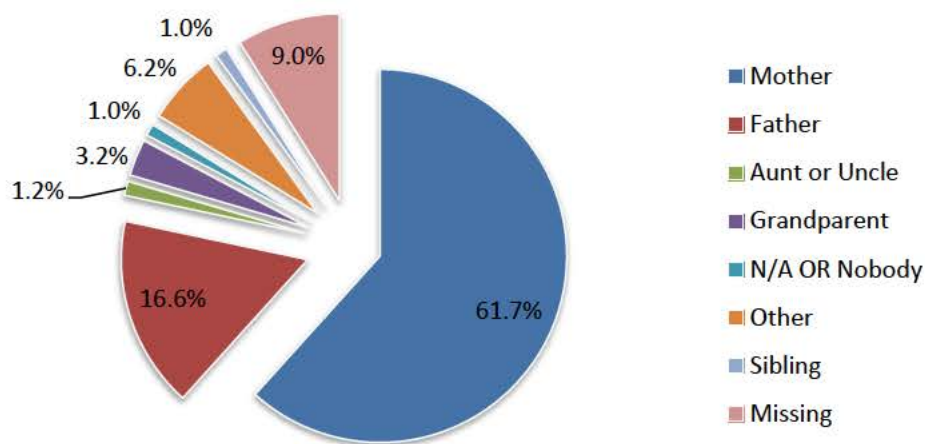
As shown in Figure 5 (and represented in Table 6), half of all participants (50%, n = 25) in Rockhampton were referred to a counselling service, whereas the majority of participants within Metropolitan North and Logan were referred to Information and Support Groups, or Community Centres. This trend in referrals is likely due to the complex issues that face many individuals; the availability of a larger variety of information and resources accessible through the Information and Support Groups and Community Centres may act as a gateway to more specialised services. For instance, Youth and Family Support Services (YFSS) caseworkers often engage young people and their families to identify issues of concern and then refer them on to other services to assist them to resolve their concerns and conflicts.



**Figure 7. Frequency (percent of sample within each region) of referrals to each agency group.**



CRYPAR referrals for participants under the age of 16 were typically made with the consent of a responsible adult. Figure 8 shows the relationship of CRYPAR participants to the responsible adult giving permission for the referral. The majority of participants (n = 950, 61.7%) were referred with permission of their mother. The category N/A or Nobody largely represents participants who did not require a responsible adult (i.e. because they were over the age of 18); however, eight referrals of people under the age of 18 were also made without a referring adult. A substantial proportion of cases (n = 138, 9.0%) were missing data for the relationship between the adult involved in the referral process and the CRYPAR participant, though the majority of these (n = 82) were participants over the age of 18.



NOTE: This incorporates all referrals (N = 1540) including multiple referrals for some CRYPAR participants.

**Figure 8. Percentage breakdown of relationship of CRYPAR participant to responsible adult.**

### 3.3.3 OFFICERS

The CRYPAR referral system required the cooperation of police officers who came into contact with individuals they assessed as requiring additional assistance. Two hundred and ninety five officers made referrals through CRYPAR. The number of referrals per officer ranged from 1 to 105 referrals (Average = 5 referrals, SD = 11.7; median = 2; mode = 1). However, 58.9% of all referrals (n = 907) were made by just 10% of officers (n = 28).

Approximately 50% of officers (n = 143) who made a referral through CRYPAR made only one referral.

Figure 9 shows the work unit of officers making referrals through CRYPAR. Most referrals were made by officers in the Child Protection and Investigation Unit (58.7%; n = 904) and General Duties officers (21.8%; n = 336). A large proportion of work unit entries were coded as 'Other' (7.1%; n = 109) and 'Missing' (11.4%; n = 176).

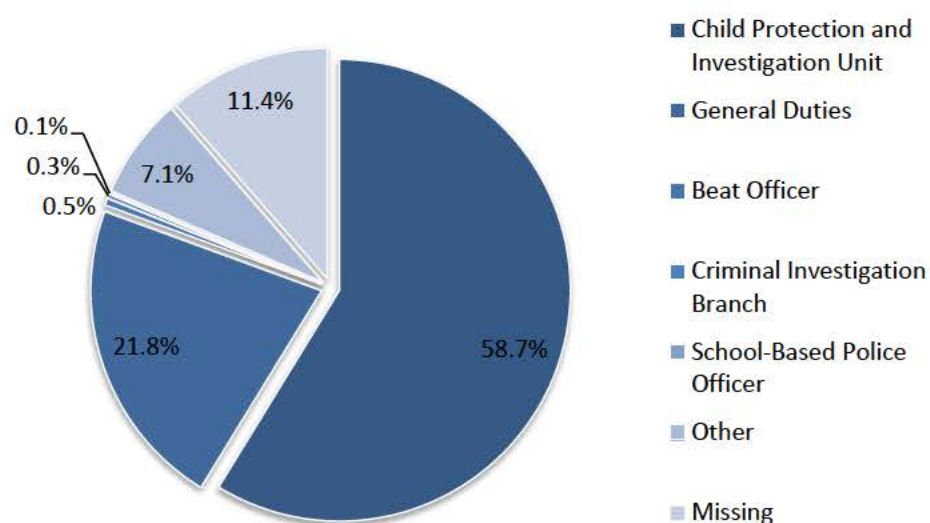


Figure 9. All referrals by officer type.

### 3.4 OFFENCE RECORDS

Given the aim of the CRYPAR system to reduce the risk of young people engaging in anti-social behaviour, an analysis of the contact with the police in terms of reported offending behaviour was conducted. Although a number of other key indicators of the achievements of the CRYPAR system would be beneficial (e.g. school/work engagement, pro-social activities etc.), data on these factors for the whole CRYPAR sample were unavailable to the research team.

In total, 536 of the CRYPAR participants (41.6%) had offence records within the QPRIME system. Table 7 shows the gender breakdown of CRYPAR participants with recorded offences, and the number of reported cases broken down by age at first CRYPAR referral is

reported in Table 8. Percentages in Table 7 and 8 represent percent of the entire sample of CRYPAR participants. Almost half (48.8%; n = 61) of all CRYPAR participants from Logan had at least one recorded offence in QPRIME, while a smaller proportion (26.0%, n = 13) of participants from Rockhampton had recorded offences. Four hundred and sixty two (41.8%) participants from Metropolitan North region had a recorded offence.

As with the trend of ages of CRYPAR participants, most participants who had recorded offences were between 12 and 15 years old when referred through CRYPAR. However, a larger proportion of male CRYPAR participants had recorded offences than female CRYPAR participants,  $\chi^2(1) = 30.9$ ,  $p < .001$ . That is, males were 2.6 times more likely to have recorded offences than females.

**Table 6. Gender breakdown of CRYPAR participants with reported offences recorded in QPRIME.**

	Metro North		Logan		Rockhampton		TOTAL	
	n	%	n	%	n	%	n	%
<b>Gender</b>								
Male	291	26.2%	41	32.8%	6	12.0%	338	26.3%
Female	171	15.3%	20	16.0%	7	14.0%	198	15.3%

% = percentage of total participants from that region/total sample who had a record.

**Table 7. Individuals with reported offences by age at first CRYPAR referral.**

	Metro North		Logan		Rockhampton		TOTAL	
	n	%	n	%	n	%	n	%
<b>Age at First Referral</b>								
0-5 years	-	-	-	-	-	-	-	-
6-9 years	5 <sup>1</sup>	0.5%	-	-	-	-	5 <sup>1</sup>	0.4%
10-12 years	26	2.4%	-	-	-	-	26	2.0%
12-13 years	100	9.1%	10	8.0%	5	10.0%	115	8.9%
14-15 years	215	19.5%	34	27.2%	6	12.0%	255	19.8%
16-17 years	86	7.8%	11	8.8%	2	4.0%	99	7.7%
18- 25 years	25	2.3%	6	4.8%	-	-	31	2.4%
25+ years	5	0.5%	-	-	-	-	5	0.4%
Total Individuals	462	41.8%	61	48.8%	13	26.0%	536	41.6%

<sup>1</sup>Under Queensland law, children under the age of 10 cannot be held criminally responsible for reported offences. The age group represents the age at which the CRYPAR participants were referred through CRYPAR, however, these 5 participants had recorded reported offences *after* their referral (and therefore after they had reached responsible age).

### 3.4.1 PRESENTING ISSUES

Table 9 and Figure 10 show the proportion of individuals in each region by recorded primary presenting issue at the time of their first CRYPAR referral. Despite the intentions of CRYPAR

as an early intervention program, almost 15% of cases (5.7% of all participants) were referred through CRYPAR for offending behaviour.

**Table 8. Breakdown of cases by their primary presenting issue.**

	Metro North		Logan		Rockhampton		TOTAL	
	n	%	n	%	n	%	n	% with reported offences
<b>Primary Presenting Issue (first referral only)</b>								
Mental Health	21	4.5%	1	1.7%	1	7.7%	23	4.3%
Sexual Abuse	8	1.7%	4	6.7%	1	7.7%	13	2.4%
Aggression/Violence	21	4.5%	1	1.7%	2	15.4%	24	4.5%
Family Conflict/Youth Support	177	38.3%	-	-	2	15.4%	179	33.5%
Drug & Alcohol	26	5.6%	5	8.3%	-	-	31	5.8%
Accommodation	8	1.7%	3	5.0%	1	7.7%	11	2.1%
School	41	8.9%	11	18.3%	2	15.4%	53	9.9%
Offending	71	15.4%	1	1.7%	-	-	74	13.8%
Behavioural Issues	8	1.7%	2	3.3%	-	-	10	1.9%
Other	79	17.1%	8	13.3%	4	30.8%	87	16.3%
Multiple Issues	2	0.4%	24	40.0%	1	7.7%	30	5.6%

Table 10 and Figure 10 show the comparison of those with reported offences and those without reported offences by their primary presenting issue. Those with reported offences were slightly more likely to be referred through CRYPAR for issues relating to Drug and Alcohol, School, Offending, and Other issues, and less likely to be referred for Sexual Abuse related issues than those without reported offences.

**Table 9. Individuals with and without reported offences – Primary Presenting Issue (First Referral).**

	No reported offence		Reported offence	
	n	%	n	%
<b>Primary Presenting Issue (first referral only)</b>				
Mental Health	41	5.4%	23	4.3%
Sexual Abuse	59	7.8%	13	2.4%
Aggression/Violence	32	4.2%	24	4.5%
Family Conflict/Youth Support	309	41.0%	179	33.4%
Drug & Alcohol	30	4.0%	31	5.8%
Accommodation	8	1.1%	11	2.1%
School	59	7.8%	53	9.9%
Offending	34	4.5%	74	13.8%
Behavioural Issues	40	5.3%	10	1.9%
Other	108	14.3%	87	16.2%
Multiple Issues	33	4.4%	30	5.6%
Missing	-	-	1	0.2%



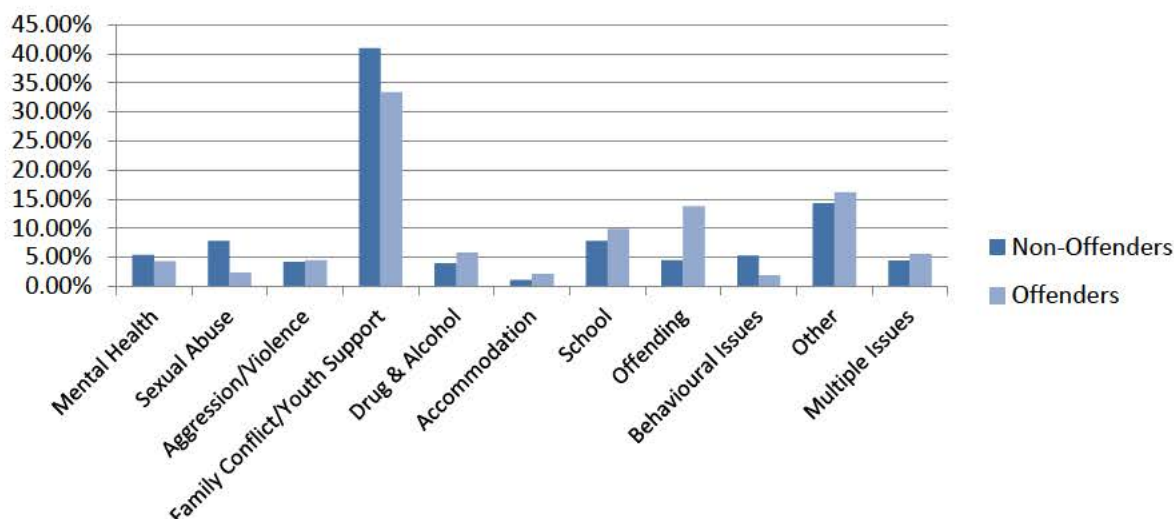


Figure 10. Percent of those with and without reported offences by each presenting issue.

### 3.4.2 NUMBER OF REPORTED OFFENCES

The total number of reported offences for each individual ranged from 1 ( $n = 95$ , 17.7% of all cases; 7.4% of all CRYPAR participants) to 161 reported offences ( $n = 1$ ), resulting in a total number of 6571 reported offences recorded for these 526 CRYPAR participants. The average number of reported offences per individual was 12.26 ( $SD = 18.80$ , median = 5.5 reported offences). Fifty percent of all cases ( $n = 268$ ) had between 1 and 5 reported offences recorded.



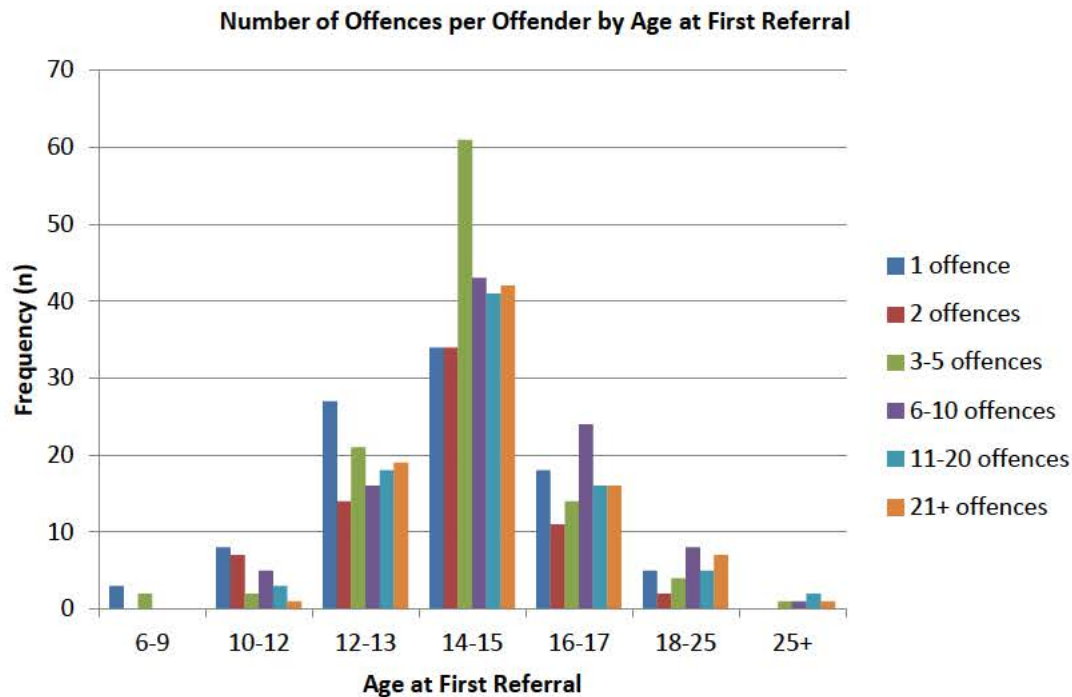


Figure 11. Number of reported offences by age at first CRYPAR referral.

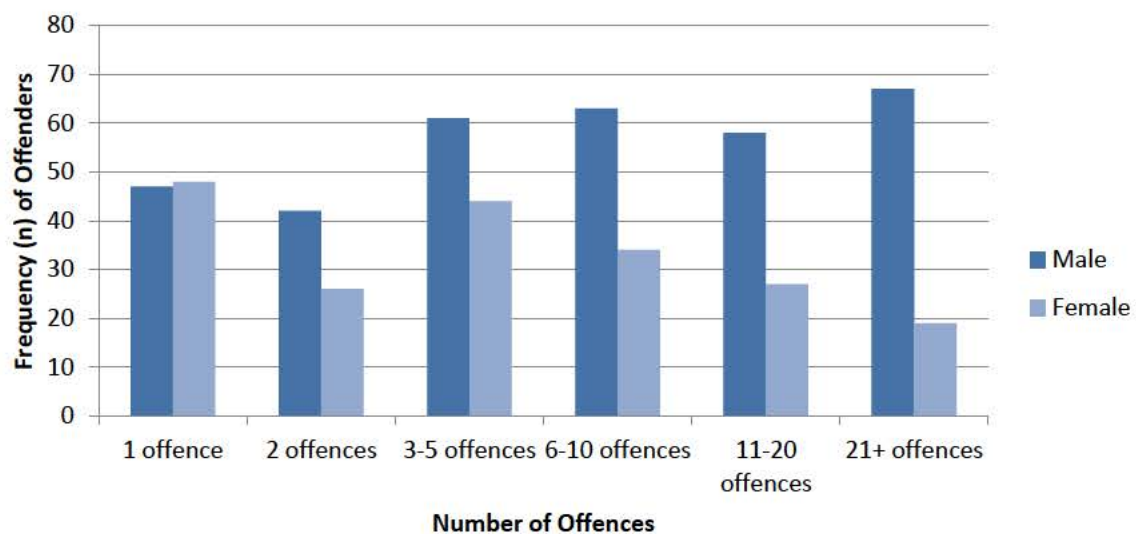
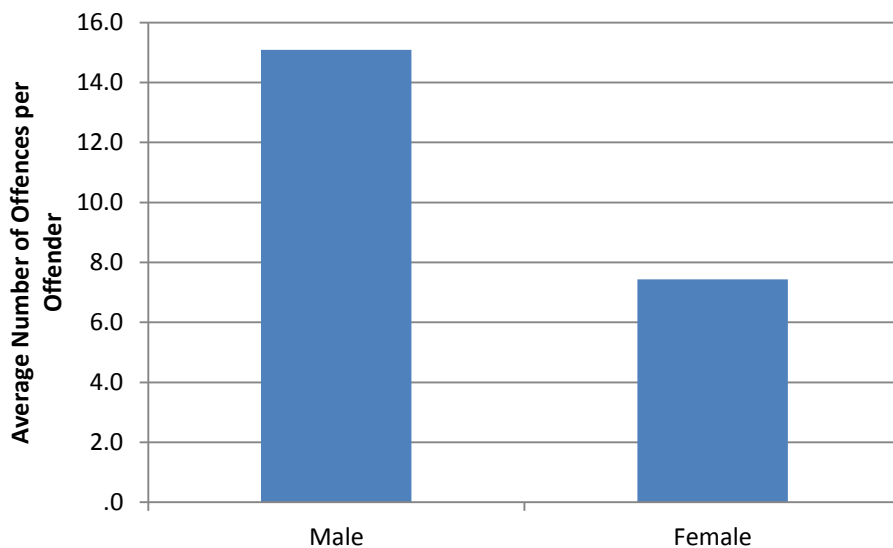


Figure 12. Number of Reported offences by Gender.

An independent groups t-test on all CRYPAR participants (including those with no reported offences recorded) showed that, on average, males were significantly more likely to have a higher number of reported offences, (Average = 7.35 reported offences, SD = 17.18) than females (Average = 2.48 reported offences, SD = 6.37),  $t(906.145) = -6.92$ ,  $p < .001$ . This

discrepancy between males and females was even greater when only the CRYPAR participants with reported offences were included in the analysis (see figure 13); male average = 15.09 reported offences, female average = 7.43 reported offences,  $t(492) = 5.58$ ,  $p < .001$ .



**Figure 13. Average number of reported offences for male and female CRYPAR participants with reported offences.**

### 3.4.3 TYPES OF REPORTED OFFENCES

Figures 14 and 15 and Table 11, give a breakdown of the types of reported offences and their outcomes. As shown in Figure 14, the majority of reported offences (63.9%,  $n = 4201$ ) recorded for CRYPAR participants were offences against property. Of reported offences against property, stealing was the most common type of offence ( $n = 1849$ , 28.1% of all reported offences), followed by burglary and graffiti (see Table 11).

Other Reported Offences made up 27.1% of all reported offences ( $n = 1779$ ), with public nuisance and drug and alcohol offences being most common. Reported offences against persons were least common, making up only 9% of reported offences, largely made up of assaults ( $n = 374$ , 6% of all reported offences).

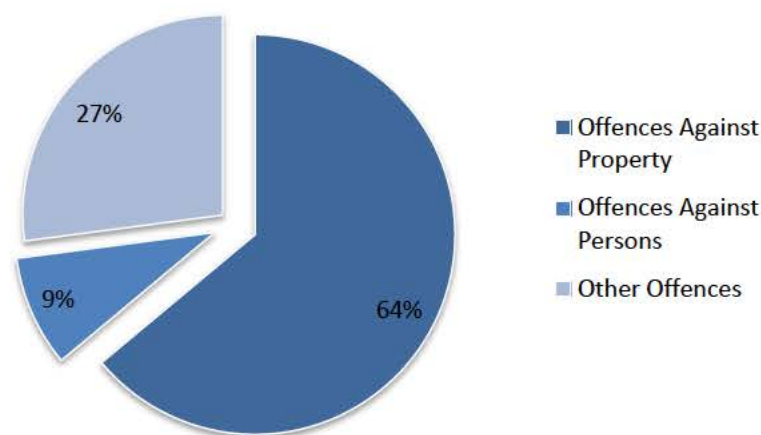
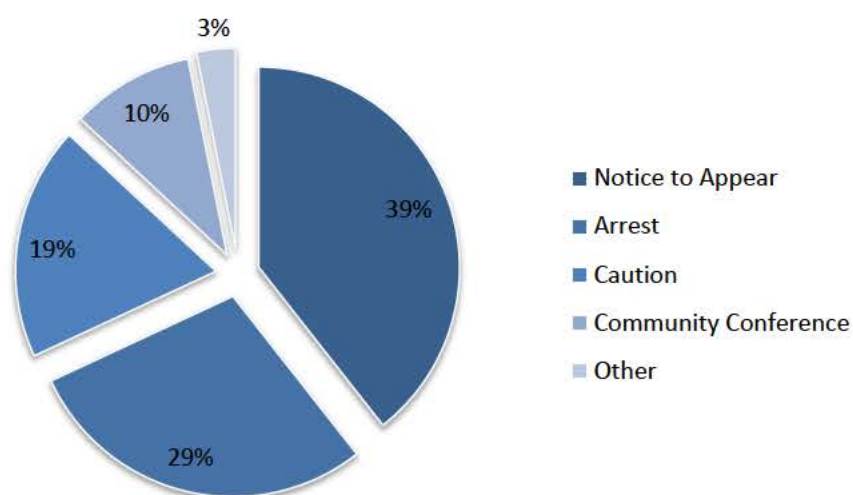


Figure 14. Breakdown of reported offences by category.

Table 10. Types of reported offences by offence category.

REPORTED OFFENCES AGAINST PROPERTY	n	% of Reported offences Against Property	% of Total Reported offences
Stealing	1849	44.0%	28.1%
Burglary/Enter with intent	796	18.9%	12.1%
Graffiti	795	18.9%	12.1%
Wilful damage (incl. arson)	480	11.4%	7.3%
Vehicle Theft	213	5.1%	3.2%
Fraud	68	1.6%	1.0%
<b>Total</b>	<b>4201</b>	<b>100%</b>	<b>63.9%</b>
REPORTED OFFENCES AGAINST PERSONS	n	% of Reported offences Against Persons	% of Total Reported offences
Assault	374	63.3%	5.7%
Robbery	113	19.1%	1.7%
Other Reported offences Against Person	55	9.3%	0.8%
Sexual Assault	49	8.3%	0.7%
<b>Total</b>	<b>591</b>	<b>100%</b>	<b>9.0%</b>
OTHER REPORTED OFFENCES	n	% of Other Reported offences	% of Total Reported offences
Public Nuisance	562	31.6%	8.6%
Drug and alcohol reported offences	514	28.9%	7.8%
Unlawfully on premises/ Possession of things for unlawful entry	318	17.9%	4.8%
Other Reported offences	225	12.6%	3.4%
Driving Reported offences	113	6.4%	1.7%
Weapon Reported offences	47	2.6%	0.7%
<b>Total</b>	<b>1779</b>	<b>100%</b>	<b>27.1%</b>

Figure 15 reveals a breakdown of the actions arising for the reported offences recorded for CRYPAR participants. Most reported offences resulted in either a notice to appear (n = 2589) i.e. directing a person to appear at the Magistrate's court at a specified date, or a formal charge in the form of an arrest (n = 1884). However, more than a quarter of the reported offences (28.8%, n = 1892) resulted in a Caution or diversion to a Community Conference.



Note: Other action includes summons, warrants, and historical offences.

Figure 15. Actions from reported offences.

#### 4. QUALITATIVE ANALYSIS

Individual experiences with the CRYPAR program and its processes varied. In order to understand these experiences, a series of qualitative interviews and focus groups were conducted with a range of stakeholders in the CRYPAR initiative, including youth, parents and service providers. Data were compiled from key informants who had engaged with CRYPAR in the 18 months prior to the interviews. This part of the report reflects the outcomes from the second, qualitative stage of the research and provides a more in-depth examination of the strengths and weaknesses of the CRYPAR system.



The following research activities were conducted as a part of the qualitative analysis:

- Five individual face to face interviews with young people who were referred through the CRYPAR system (see Attachment A).
- Three separate focus groups:
  - Representatives of CRYPAR partner agencies (5 participants) (see Attachment B).
  - Police officers from three different CRYPAR police districts (6 participants) (see Attachment C).
  - Specialised CRYPAR staff, including district coordinators from Logan, Brisbane North, Pine Rivers and Rockhampton, and two police officers who had held special roles in CRYPAR (6 participants) (see Attachment D).
- A fourth focus group had been scheduled to capture the perceptions of referred children's' parents. However, as none of the parents were available to attend, individual telephone interviews with 10 parents from all four CRYPAR districts were conducted (see Attachment E).

#### 4.1 FACE TO FACE INTERVIEWS WITH YOUNG PEOPLE

##### 4.1.1 SAMPLE

The sample comprised five young persons who had been referred through CRYPAR (see Table 12). Three young people were referred through the Logan District; one through the Pine Rivers District; and one through the Brisbane North District. One referral was a direct police referral based on police contact with the young person in a public space. Two referrals were initiated by parents calling the local police station. One referral came through another agency (Youth Justice Services) and one through a private individual (the young person's boxing trainer). The original sample identified by QPS had included another two young people from the Logan District and another young person from the Pine Rivers District, but these potential participants failed to attend the scheduled interview on multiple occasions and were not included in the final sample. Another two young people had been identified for the Metro North region but they had decided against participating in the

interviews once they received further information about the logistics and topics to be covered.

**Table 12. Interview Sample of Young Persons**

	Male	Female	Total
Pine Rivers	1	0	1
Logan	2	1	3
North Brisbane	1	0	1
Rockhampton	0	0	0
<b>Total</b>	<b>4</b>	<b>1</b>	<b>5</b>

It should be noted that the data accessed in this component of the research is highly qualitative. Firstly, the interview findings are based on a convenience sample of past CRYPAR referrals identified by CRYPAR coordinators as *cooperative and easy to access*. It is reasonable to assume that the individuals who agreed to participate and attend an interview were also likely to be those who would be most willing to accept assistance from a referred service and participate fully in a prescribed intervention. Linked to this is the fact that only a small number of young people were interviewed ( $n = 5$ ) and no interviews were conducted with young participants from the Rockhampton District due to geographical constraints.

As such, while these interviewees provided in-depth information on their experiences with CRYPAR, summarised findings are limited to a small and heterogeneous sample of past referrals. The young participants may not be considered to be representative of the range of individuals involved in CRYPAR. Instead, they comprised a selected group of key informants.

#### 4.1.2 DATA COLLECTION AND ANALYSIS

All participants were identified by the relevant CRYPAR coordinator who informed them about the research and their opportunity to contribute some feedback on their experiences with CRYPAR. Young people who consented to being contacted by a UQ researcher were then phoned and given further information about the nature, purpose and logistics of the interview. All interviews were conducted face to face in a safe and convenient location for study participants. Interviews lasted between 14 and 27 minutes and followed a structured format but allowed interviewees to provide as much additional information as they felt was necessary to share their experiences and perceptions in full. Responses to the set questions

were audio-recorded by the researcher and transcribed by a professional transcription agency. Care was taken to ensure that specific individuals would not be identifiable in any subsequent reporting.

Interviews covered the following issues:

- the young person's situational circumstances prior to and since the CRYPAR referral,
- their perception of the referral and the intervention,
- their perception of how the coordinator/ police officer interacted with them, and
- Whether and how their situational circumstances have changed since the time of the referral.

ISSR coded the interview data thematically to identify key topics and themes. Open-coding was employed to identify similarities and differences in key themes across interviews. Identified themes were then matched against preconceived categories drawn from the interview schedule.

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#### 4.1.3. INITIAL FINDINGS – YOUNG PEOPLE

##### 1 Type of referral and information provided

- Young people generally lacked an understanding or knowledge of what CRYPAR was. They reported an awareness of having been referred to an agency by 'someone', but most were unsure of how they came to be referred. This was particularly the case where parents had initiated the police/ CRYPAR contact.
- In two cases, third parties who were already familiar with CRYPAR and the young person involved made the referral. In these cases, the young person had a better understanding of the referral process and CRYPAR.

##### 2 Presenting issues and situational circumstances at time of referral

- A number of the interviewees identified similar presenting issues including: school failure, truancy, lack of employment opportunities, lack of structured activities, and parental as well as intergenerational family conflict.

- Some young people also shared experiences of complex, serious and diverse underlying presenting issues, including mental health issues, anger issues, physical and sexual victimisation, running away from home, temporary homelessness and using substances as a form of coping.
- In most cases, CRYPAR coordinators were able to identify the issues correctly and make a suitable referral to support the young person and where applicable his/her family.
- All but one interviewee reported a positive change in presenting issues. However, most interviewees reported an improvement in 'obvious' presenting issues (e.g. school attendance) rather than improvements to underlying issues (e.g. including trauma, self-harming behaviour, suicidal ideation).
- This may indicate that CRYPAR referrals (based on the types of services provided by CRYPAR partner agencies), are more suitable to address practical needs, such as reconnecting young people with the educational system, rather than complex needs such as those which may require sophisticated interventions around trauma counselling, for example.

### **3 Satisfaction with information provided about 'voluntary referral' and 'voluntary participation'**

- Some young people reported no interaction with a CRYPAR coordinator, including no information about CRYPAR, how it could help, and what they needed to provide consent for. Some seemed to be under the impression that the agency they were referred to was CRYPAR, while others stated that the name CRYPAR did not sound familiar.
- Others remembered signing a consent form, but said they did not know what to expect until they had been contacted by the relevant agency. It was at the point of agency contact that they had been given additional information about CRYPAR and what type of support the agency would be able provide.
- A perceived lack of information provided to young people emerged in particular from interviews with young people where parents had initiated the contact with the police/CRYPAR. This is likely because, in these cases, the communication around how to support the young person and his/her family reportedly took place between the



parents and the police/ CRYPAR coordinator without too much involvement of the young person themselves.

- Notably, awareness of CRYPAR and the role of consent in the process appeared to have no bearing on the young person's perceptions of the helpfulness of the referral and the usefulness of the intervention. Regardless of the information they may have received from a police officer or CRYPAR coordinator prior to the referral, interviewees reported an overall satisfaction with having been referred/ linked in with an agency, *as long as they found the actual agency suitable for their needs*.

#### **4 Perception of helpfulness of CRYPAR referral**

- All but one young person described their overall experience with CRYPAR as helpful. While not all young people were able to cease their deviant behaviour altogether, following the intervention they were better able to reflect on their risk and protective factors as well as the situational circumstances around their deviant behaviour. They were also more aware of where to find support if needed in the future.
- As noted in Point 2 of this section, interviewees predominantly described CRYPAR as helpful where the intervention supported them in practical matters, including reconnecting them with the educational system, helping them rebuild stable living arrangements and pro-social family and peer ties.
- Young people considered the CRYPAR referral and the linked intervention as less helpful where the presenting issues were complex and included mental health issues. In these cases, the outcome was considered less helpful because the referral was made to a broader youth support service rather than a specific youth support service skilled in addressing underlying issues around mental health problems through counselling.
- Counselling referrals were more likely to be successful when the young person themselves had a clear vision of what types of underlying issues they needed to address, what type of support they were seeking, and whether they were willing to pay for part of the counselling out of their own resources.

## **5 Perception of suitability of CRYPAR agency intervention**

- Interviewees perception of the helpfulness of the intervention were strongly linked to their perceptions of the overall helpfulness of the referral partner agency since young people who perceived the intervention as suitable were also more likely to perceive the overall referral as helpful.
- Generally, interviewees reported a greater level of satisfaction with the suitability of the agency/ intervention they had been referred to where this agency/ intervention was specialised around their specific needs and was able to offer practical solutions (e.g. improving their literacy and numeracy skills, reconnecting them with the educational system, supporting them in their search for paid employment, and helping them find a solution around stable family or individual living arrangements (see also Point 2 and 4 of this section).

## **6 Outcomes of referral and situational circumstances since referral**

- Most reported improved situational circumstances since the time of the CRYPAR referral. These included:
  - Reconnection with the educational system;
  - Fewer days of absenteeism per week;
  - Improved literacy and numeracy skills;
  - Improved employment opportunities due to improved skill sets;
  - Lower levels of substance misuse;
  - Improved coping skills;
  - Improved conflict resolution skills; and
  - Improved/ stable living arrangements.
- Young people who reported a complex range of presenting issues prior to, and at the time of the CRYPAR referral, reported an improvement across some, but not all situational circumstances (e.g. school and, or work attendance had improved, while offending behaviour or mental health problems remained unresolved).
- Notably, even young people who reported limited impact of the referral and intervention, demonstrated an ability to reflect on why this was the case. They

indicated that they felt more able to identify what could be done to improve issues around family conflict, mental health, schooling, and unstructured social time.

- All interviewees indicated that since the CRYPAR referral they had a better understanding of where to find future support if needed.

## **7 Perception of elements of procedural justice i.e. fairness, respect, dignity, neutrality**

- Young people expressed a high level of satisfaction with the way they had been approached and treated by police officers, CRYPAR coordinators and agency staff. All young people felt they had been treated with respect and that people had been polite when talking to them and their families about possible solutions to their presenting issues. They also generally felt that they had been listened to regarding their needs and perceived problems.
- Two young people felt that the police and the coordinator seemed to listen more to what their parent(s) had to say than what they had to say themselves. Notably, these two cases were parent-initiated referrals and as a result the risk and needs assessment was most likely conducted in closer consultation with the parents, as active help-seekers, than with the young person at risk.

### **4.2. FOCUS GROUP: AGENCIES**

#### **4.2.1 SAMPLE**

The first focus group was held with five key informants from CRYPAR partner agencies. All participants were identified by the CRYPAR manager in collaboration with the CRYPAR coordinators. The manager informed all identified agencies about the study and invited them to contribute some feedback on their experiences with CRYPAR during a focus group interview.

The agencies represented were:

- Bridges Reconnect (targeting young people, 12-18yrs);
- Family Support Service, Relationships Australia (Strathpine) - targeting families w children under 18yrs;

- Lifeline Logan – Supporting Children After Separation (SCAS) - targeting young people, 3-17yrs;
- Project Circuit Breaker, Mission Australia, Brisbane North - targeting young people, 10-17yrs and families with children between 9-17yrs; and
- Edmund Rice Education Australia (flexible learning centre) - targeting young people, 12-15 yrs.

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#### 4.2.2 DATA COLLECTION AND ANALYSIS

The focus group took about an hour and was conducted face-to-face at the centralised CRYPAR office in Metropolitan North. The focus group followed a semi-structured format and allowed interviewees to provide as much additional information as they felt was necessary to share their experiences and perceptions around CRYPAR in full. The participants provided feedback on their experiences with CRYPAR, including:

- their perceptions around benefits and challenges of the CRYPAR program,
- their experiences of being a CRYPAR partner agency, and
- the type of referrals received and how these may have changed since the implementation of Support Link.

All responses were audio-recorded by a UQ researcher and transcribed by a professional transcription agency. Care was taken to ensure that specific individuals would not be identifiable in any subsequent reporting.

ISSR coded the interview data thematically to identify key topics and themes. Open-coding was employed to identify similarities and differences in key themes. Identified themes were then matched against preconceived categories drawn from the interview schedule.

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#### 4.2.3 INITIAL FINDINGS - AGENCIES

##### **1 Perceived benefits of CRYPAR**

- All five agency representatives provided positive feedback around the effectiveness of the CRYPAR program. Agency representatives felt that CRYPAR offered an avenue of

engaging with children at risk that might otherwise not be available to them until they had advanced further down the path to a deviant future. In other words a key benefit was the 'early intervention' focus of the initiative.

- Some agencies felt that CRYPAR offered an avenue to engage young people that could not access their services without a relevant referral.
- Notably, they generally felt that, as a police-led intervention, CRYPAR offered an opportunity for greater collaboration between law enforcement and community-based support agencies. This was a key objective of the CRYPAR initiative.

## **2 Perceived benefits of being a CRYPAR partner agency**

- Again, there was a general perception of strengthened police-community (agency) relations as a result of the CRYPAR-agency partnership (see Point 1).
- Some agency representatives stressed that CRYPAR referral facilitates access to agency support for young people and their families who may otherwise not know about the agency or may not be eligible for their services without the appropriate referral pathway.
- One agency representative reported a positive influence on future agency funding as a result of receiving a significant number of CRYPAR referrals – partly due to the increased number of clients, and partly due to being a partner agency in a police-led crime prevention program.

## **3 Perceived challenges around being a CRYPAR partner agency**

- One of the main challenges involved the issue of unsuitable referrals. All but one agency reported that they received a number of unsuitable referrals in the past although this number has declined since the implementation of Support Link. Smaller, more specific agencies seemed to generally receive suitable referrals while the larger services, offering a broader range of support or a general type of support often reported that while referrals seemed suitable at first glance they were often unsuitable once an intake screening had been conducted with the relevant clients. There was consensus among agency representatives that while the issue of unsuitable referrals

had already been reduced through the use of Support Link, it could be improved further through the use of a *standardised and more thorough risk assessment tool by the relevant CRYPAR coordinator*.

- One agency noted that unsuitable referrals create an unnecessary workload for the relevant agency because of the initial and follow-up paper work involved in taking in the referral, trying to establish contact, being unable to engage the client and *then having to finalise an 'open file' because the client has either disengaged due to the service being unsuitable or the client has been referred back to CRYPAR or on to another agency*. Another issue which was raised was that these 'open files' create a negative bias in their annual statistics since they are treated as an intake where no goals have been achieved.
- Some agency representatives felt that there was a problem with 'double referrals' where agencies try to engage a client before finding out that the relevant client has also been referred to another agency who has already engaged the family. While this may be necessary for some complex cases, some agencies felt that it was a waste of scarce resources if multiple agencies had to respond and try to engage the same client at the same time.
- One of the services raised the issue of an insufficient risk assessment by the CRYPAR coordinators creating a safety issue for their staff. For example, staff may go out to a family that has been referred for truancy or substance misuse issues without being informed about ongoing severe family conflict that may put the staff at risk when attending the family home for an intake visit.
- The interviewees representing agencies that offer a broad range of services to young people reported receiving up to 30 referrals per month. The perception was that their respective agencies are generally able to cope with this amount of referrals on a monthly basis due to their overall capacity and only between 25-50% of referrals engaging in an intervention. There was, however, a perception that referrals are entered into the system by police/ CRYPAR in bulk and sent through 'when possible', which can lead to a large number of referrals all at once. The agency representatives felt that their respective agencies would be able to address clients' needs better if they were referred on a one by one basis rather than in a bulk of up to 10 referrals in one

day. This would avoid delays in establishing contact with clients. *(It should be noted that this feedback was based on the agencies' perceptions that referrals accumulate at the police/ CRYPAR end before being processed and referred on. This cannot be substantiated. It may simply be the case that on some days the police comes in contact with up to 10 referrals that fit the eligibility criteria of one particular agency).*

#### **4 Perceived changes since the implementation of Support Link**

- Agencies reported increased satisfaction with the suitability of referrals since the implementation of Support Link. Agencies felt that more information was collected by officers and CRYPAR coordinators under the new computer-based referral system. The e-referral system not only reduced the number of referrals that were unsuitable for the types of services provided by the relevant agency, but also allowed for more detailed feedback. This made it easier to prepare for the intake meeting/ communication and prepare information around a suitable type of intervention for the young person (and his / her parents). Agencies noted that under the new system they received a more detailed information flow on key presenting issues as well as underlying issues that often remained unidentified under the old fax-back system.
- Agencies felt that police officers benefitted especially from the Support Link process because it facilitates the identification of applicable risks and needs through a drop down menu rather than having to identify them themselves. As a result, more detailed and accurate information is passed on to the relevant coordinators, which facilitates the identification of more suitable support agencies.

#### **5 Perceptions around CRYPAR and police-community agency collaboration in relation to crime prevention**

- Agencies differed somewhat in their perception of their role in crime prevention within their community. Some agencies clearly identified their services as a measure of crime prevention due to the early intervention component offered to young people at risk of engaging in offending behaviour. There was a consensus among these agencies that they contributed to crime prevention by addressing the needs of young people who

are at risk of engaging in offending behaviour or have already started to engage in youth-typical forms of deviance, including truancy, substance misuse, self-harm, minor property and violent reported offences. Their programs focus on building and maintaining protective factors, including the improvement of educational and occupational opportunities, creating stable living arrangements and strengthening individual conflict resolution skills.

- Two agency representatives felt that their services were an early intervention rather than a crime prevention measure. This observation is interesting as it reflects the differing perceptions of community-based agencies and their role in relation to risk and crime prevention. Notably, the perception of offering early intervention rather than crime prevention programs is likely to be a definitional issue because the agencies describing themselves as early intervention offered similar types of services to the ones who regarded their early intervention programs as a form of crime prevention. Their intervention programs and support services also focus on building protective factors that are crucial in preventing initial and future criminal engagement.

## **6 Suggestions for improved working relations and referral flow**

- Agencies would like to see a more thorough risk assessment at the front end of the referral (i.e. by the relevant CRYPAR coordinator) to ensure more suitable referrals to the relevant partner agencies and to facilitate the agency's risk management around staff safety, especially in cases of outreach support.
- Agencies would like to have more face-to-face collaboration with the CRYPAR coordinators to strengthen working relations and facilitate overall communication around aspects of the partnership agreement. This suggestion is in line with feedback provided by some of the CRYPAR coordinators who emphasised the importance of face-to-face contact with partner agencies and other community members in maintaining strong working relations.



## 4.3 FOCUS GROUP: POLICE

### 4.3.1 SAMPLE

The second focus group comprised six police officers from three different CRYPAR police districts (Logan, Brisbane North, and Pine Rivers). All six key informants were identified by the CRYPAR manager in collaboration with the CRYPAR coordinators. One police officer was a school-based officer, two were general duty officers and the remaining three were associated with a Child Protection Investigation Unit (CPIU). All focus group participants were experienced officers who were able to comment on their work around policing young persons prior to, and since the implementation of, the CRYPAR program.

### 4.3.2 DATA COLLECTION AND ANALYSIS

The focus group took about an hour and was conducted face-to-face at the centralised CRYPAR office in Metropolitan North. The focus group followed a semi-structured format and allowed interviewees to provide as much additional information as they felt was necessary to share their experiences and perceptions around CRYPAR in full. Officers were asked about:

- their knowledge of and feedback around their experience with CRYPAR,
- whether they saw any challenges and benefits prior to and since the implementation of Support Link, and
- whether they felt confident in selecting a suitable referral agency (prior to Support Link).

All responses were audio-recorded by a UQ researcher and transcribed by a professional transcription agency. Care was taken to ensure that specific individuals would not be identifiable in any subsequent reporting.

ISSR coded the interview data thematically to identify key topics and themes. Open-coding was employed to identify similarities and differences in key themes. Identified themes were then matched against preconceived categories drawn from the interview schedule.

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#### 4.3.3 INITIAL FINDINGS - POLICE

##### 1 Perceived benefits of CRYPAR

- Officers identified a range of perceived benefits of the CRYPAR program, including benefits for young people and their parents, benefits for the educational system and benefits for police officers coming in contact with young people at risk.
- All six officers welcomed the opportunity of having a referral pathway since the implementation of CRYPAR. Officers expressed their previous frustration around attending a call for service without being able to offer any kind of referral, support or intervention unless the incident proved to be a criminal matter that required a youth justice or criminal justice response (e.g. charging or arresting the alleged offender).
- Since the implementation of CRYPAR officers felt better about attending an incident that involved a young person and/or their parents because CRYPAR offered an opportunity to demonstrate that officers care and that the police have an interest in preventive strategies rather than relying on reactive strategies only.
- While officers reported difficulties in the early implementation stages around identifying a suitable type of service for the young person and/or their parents they were pleased with the fact that they were able to make a referral and ensure follow up support for the young person at risk.
- In addition to the benefits identified for officers themselves, the officers also felt that CRYPAR offered a range of benefits for young people and their parents. Officers reported that parents often mention not knowing where to seek support when encountering problems with their children or upon becoming aware of their children's deviant behaviour. As a result, parents would often call general support sources (e.g. Department of Child Safety) which is unable to provide the type of support parents seek in many instances.
- Officers stressed that CRYPAR not only offers the opportunity for officers to link parents and young people to agencies that can provide support specific to their needs, it also increases awareness of available community-based support services for young people at risk. This is beneficial to young people and their parents at the time of the

initial referral as well as in the long run if parents feel the need to seek subsequent support in the future.

- Officers also felt that CRYPAR offers a range of benefits to young people because it offers an (early) intervention pathway for young people who may otherwise receive no intervention after the initial police contact until such time that their deviant behaviour has manifested into criminal behaviour patterns that require reactive and often punitive criminal/ juvenile justice responses.
- Officers also raised benefits for the schools in the relevant districts. Officers reported that truancy has become a matter of increasing concern in their respective districts and that CRYPAR offered a way of reconnecting truant young people with the mainstream educational system through referrals to temporary alternative educational systems where young people could catch up on their educational gaps in a step-by-step reintegration process monitored and supported by a CRYPAR partner agency, before being reconnected with a mainstream school.
- The benefits raised in the focus group for different stakeholders involved in CRYPAR highlight the diversity of opportunities that can be created through CRYPAR. As one officer stated, CRYPAR is a 'win-win situation' for everyone.

## **2 Perceptions around suitability for different presenting issues/ different types of juveniles**

- There was overall consensus that CRYPAR was suitable for all young people regardless of ethnicity, gender and age.
- Some officers, however, raised limitations around the age variable since they reported a lack of available referral agencies in their district that deal with young people between the ages of 8yrs and 12 yrs. These officers had received feedback from CRYPAR coordinators that it is tricky to refer these young people to a suitable agency due to their age.
- In relation to the suitability for different types of presenting issues, officers felt that CRYPAR was able to offer benefits to young people with all types of risks and needs. Officers reported a perception of changes in presenting issues since the implementation of CRYPAR in 2006. There was consensus that behavioural problems

and offending behaviour had become more severe over time and that presenting issues had become more complex. Officers reported observing a strong trend towards encountering more young people with serious patterns of truancy, bullying (especially cyber-bullying), self-harm, other mental health issues, and different forms of family conflict and family breakdown.

- As such, while officers felt more confident in identifying a range of key and underlying issues over time, they found selecting the right type of support agency increasingly difficult with the increasing complexity of presenting issues. In this context, officers commented on the benefits of the Support Link system under which the onus of identifying the right type of support agency lies with the CRYPAR coordinator rather than the front line police officer. As a result, officers can focus on spending time to identify and detail the young person's risks and needs while leaving the agency selection process to the CRYPAR coordinator.
- None of the officers raised issues around limitations of the suitability of CRYPAR for ethnic minority young persons. While this emerged as a matter of concern from the CRYPAR staff focus group interview, officers felt that they were just as confident in utilising CRYPAR for young people from an ethnic minority background as they would be in utilising it when encountering non-Indigenous and non-immigrant Australian youths. Some officers further commented on the additional support in policing ethnic minority youths as they would be able to consult with the relevant Liaison Officer in their district to receive further advice prior to making a referral.

### **3 Utilisation of CRYPAR in addition to other juvenile justice responses**

- Some officers reported that a large number of their referrals are made in relation to offending behaviour rather than non-criminal forms of deviant or risky behaviour. One officer estimated that around 80% of referrals made in the relevant district are in relation to offending behaviour and often in addition to other criminal/ juvenile justice responses, including diversionary measures, criminal charges, etc.
- There was a general consensus that officers were more likely to identify CRYPAR referrals when being called to an incident rather than through coming across a young person at risk in a public space while being out on patrol. In addition, two of the

officers reported that every time a young person was charged with a criminal offence in their district, or referred to a youth justice conference as a diversionary measure, a CRYPAR referral would be made.

- These perceptions are interesting because the quantitative records of CRYPAR referrals made since 2006 show that just around 10% of referrals have a record of offending behaviour attached to them. One would therefore expect more referrals being made in relation to non-criminal deviant or risky behaviour. It is possible that officer perceptions of their referrals differ from their actual practical processes or that the referral practices of officers included in this focus group differed significantly from the practices employed by the broader police officer population in the relevant CRYPAR districts.
- There was confusion among some officers around the eligibility of a young person for a CRYPAR referral when receiving another criminal/ youth justice response for their detected or suspected offending behaviour. One officer believed that they could not utilise CRYPAR if the young person received a form of diversion, was charged or arrested. Another officer was also unsure whether the young person would be eligible for CRYPAR under such circumstances. This suggests that some officers did not utilise CRYPAR in those cases where other juvenile justice responses (e.g. cautioning, charging the alleged offender) became relevant.

#### **4 Officers' perception around conducting a 'risk assessment'**

- Officers were asked about their confidence in identifying young people 'at risk' and how 'at risk' can be defined. Overall, officers reported having received CRYPAR training at some point in time, which they felt equipped them with a general idea around risk and protective factors.
- However, some officers described the identification of risk and needs as difficult due to their limited training and specialisation in this area. One officer felt that unless trained in a counselling or psychology area it was impossible to identify all types of risk factors they may come across when encountering young people. There was a general consensus that past experiences offered a guide for dealing with future referrals if

officers received feedback around how suitable and accurate their assessment and recommendations were in the case of their past referrals.

- Overall, officers felt confident with identifying risk factors but reported that they often struggled to identify the right type of support agency due to a lack of awareness of all available support services. Officers appreciated the new system under Support Link where the onus of identifying the right type of agency is left with the CRYPAR coordinator instead of the front line officers. The new process allows officers to spend more time on determining the young person's risk and needs without having to invest time and resources in identifying the right type of support.
- Overall, officers reported that the limitations around determining key and underlying presenting issues accurately are associated with their time constraints rather than an inability to identify these factors. There was a consensus that officers only had a limited amount of time available when dealing with young people and trying to make a CRYPAR referral. As a result, they appreciated the facilitated process under the new computerised system.

## **5 Officers' perception on factors associated with the 'success' of CRYPAR**

- A number of factors were seen to contribute to the success of CRYPAR. These included officer personality, the ability to identify a young person's risks and needs, time constraints and an officer's ability to 'sell' CRYPAR to potential clients.
- Some officers felt that utilising CRYPAR required some 'marketing skills' that will generate the young person's interest in accepting some form of support and convince the young person (and where applicable his/her parents) to consent to the referral process.
- Some officers commented on how one needs to believe in the program to be able to convince a client to participate. In this context, officers raised the importance of officer personality on numerous occasions. Officers felt that the relevant officer attempting to make a referral needs to be able to relate to the young person regardless of socio-economic status or ethnicity and that the officer needs to demonstrate a genuine interest in helping the young person (or his/her parents).

- Some officers described colleagues who lack the passion around early intervention and crime prevention in relation to young people and who will, as a result, put little effort into 'selling' CRYPAR to the client. As a result, these officers may make no referral at all or obtain consent from a client that is neither well informed nor based on a conviction about the usefulness of the referral. As a result, these clients are likely to disengage as soon as the referral is received by the relevant partner agency because they provided consent without knowing what they were consenting to or without being convinced that the referral is in their best interest.
- Another factor raised in this context was the time constraints experienced by police officers. While some officers described colleagues with a limited amount of passion for helping young people at risk they also reiterated that due to time constraints it can be difficult to provide all the information one would like to provide and to 'market' CRYPAR appropriately. These officers did however feel that it should always be possible to relate to a client and demonstrate that the police have an interest in improving people's wellbeing by offering support and that this is a personality trait that strongly contributes to the success of a CRYPAR referral.
- Another issue was the ability to accurately identify a young person's risks and needs. As mentioned previously, this 'ability' was often influenced by the amount of time available to an officer when making a referral. However, officers shared a general attitude that an inability to identify key and underlying risk factors has a negative effect on the success of a CRYPAR referral because it increases the risk of selecting an unsuitable agency, which may lead to the disengagement of the client.

## **6 Benefits of Support Link**

- Interview participants shared the view that Support Link offers a great range of benefits to officers and the overall referral process. Officers felt that the new computerised process was time efficient and allowed a more streamlined approach to making CRYPAR referrals due to the standardised categories officers are requested to complete prior to referring a case on to the CRYPAR coordinator.
- There was consensus that having standardised drop-down menus to identify a young person's presenting issues made it easier to accurately identify the person's needs and

risks and allowed officers to process a referral in a shorter period of time than under the old fax-back system.

- Officers also said that the new system allowed more consistent feedback from agencies/ CRYPAR coordinators to officers about the referral process and outcome. Knowing whether the referral was suitable and that an agency was able to establish contact with the young person gave officers the confidence that they are able to accurately identify needs and risks and that the resources they invested in making the referral have led to a positive outcome.
- In addition, officers found that receiving feedback about where the young person had been referred to by the coordinator equipped them with a greater level of awareness of available support agencies than they may have previously been aware of.
- Officers greatly appreciated the fact that under Support Link they were only responsible for the risk identification while the CRYPAR coordinator was responsible for the selection of the right type of support agency. Officers felt that this saved them both time and 'stress' around worrying about whether they have identified and selected the right type of support agency to improve the chances of a successful referral outcome.

## **7 Challenges around Support Link**

- The limitations of Support Link raised by officers mainly related to the options and categories offered by the computer system when entering all the relevant client information. Officers felt that being able to select only two boxes (i.e. presenting issues) when making a referral limited the accuracy of their 'risk assessment' because they felt that most young people they come in contact with show a complex range of risk factors rather than one or two clear cut categories.
- Officers also felt that some of the categories are either not broad enough or not specific enough. I.e. some overarching categories do not include the applicable sub-categories. As an example, officers mentioned that self-harming behaviour cannot be chosen from the drop-down menu. While it could be included under 'mental health issues', officers felt that this was a common and rather specific form of mental health issue in young people they come across and should therefore be identifiable as a



separate category. Another example raised by some of the officers was the category of 'low level offending behaviour'. Officers felt that the majority of offending behaviour they deal with in relation to CRYPAR referrals is youth-typical, i.e. low level, and should therefore be broken down into common subcategories to provide more detailed information to the CRYPAR coordinator and referral agency. Officers' perceptions that more detail would be useful in this case is in line with feedback provided by partner agencies, which included the desire for more detailed information rather than receiving a description that states 'behavioural issues' or 'low level offending behaviour'.

- Another theme that emerged from the discussion around Support Link was the confusion among some officers about the differences between CRYPAR and Support Link. Some officers were under the impression that CRYPAR and Support Link were the same thing, i.e. that Support Link had replaced CRYPAR. As a result, these officers discussed their satisfaction with having a referral pathway for elderly people and victims of domestic violence while being under the impression that all these referrals were being dealt with by the CRYPAR coordinators. This confusion suggests that further information around Support Link and the different referral processes under the new computerised system need to be provided across police stations and districts.

## **8 Perception around CRYPAR and police-community collaboration**

- Officers shared a strong sense that CRYPAR built and strengthened community-police relations.
- While officers acknowledged that some of the presenting issues they encounter are by no means specific to any socio-economic group, they reported that the majority of referrals do come from socially marginalised individuals and communities. These individual and community perceptions of police are often negative due to the intergenerational transmission of negative attitudes towards governmental authority, reinforced by past encounters with police; often in relation to criminal behaviour. As a result, these high risk young people and their parents often share preconceived negative perceptions of the police. Officers therefore felt that being able to engage with these young people and their families in a positive and

supportive manner rather than a reactive and punitive context has the capacity to change public perceptions of the police and to build and maintain stronger and more positive community-police relations.

- Officers felt that CRYPAR was therefore not only beneficial at an individual level but also at the community level. The perception of the positive contribution of CRYPAR in building healthy police-community relations was particularly strong in the case of the participating Child Protection and Investigation Unit (CPIU) officers. This may partly be the result of their more frequent face-to-face interaction with the community at large and young people and their families at the individual level, due to their specific role in policing.

#### 4.4 FOCUS GROUP: CRYPAR STAFF

##### 4.4.1 SAMPLE

The third focus group comprised specialised CRYPAR staff, including all four district coordinators (Logan, Brisbane North, Pine Rivers and Rockhampton) along with two police officers who were either involved in the initial development of CRYPAR in 2006 or had acted as a CRYPAR coordinator at some point in the past. In the case of this focus group, all CRYPAR coordinators were asked to attend and the manager selected another two participants who had been involved in the CRYPAR program in a professional role at some point in the past.

##### 4.4.2 DATA COLLECTION AND ANALYSIS

The focus group took about an hour and was conducted face-to-face at the centralised CRYPAR office in Metropolitan North. The focus group followed a semi-structured format and allowed interviewees to provide as much additional information as they felt was necessary to share their experiences and perceptions around CRYPAR in full. Participants in the focus group were asked questions around:

- their perceptions of the benefits and challenges around CRYPAR,
- CRYPAR's suitability for different types of young people,
- the challenges around referring and engaging young people, and

- the changes – if any- that was noticeable since the implementation of Support Link.

All responses were audio-recorded by a UQ researcher and transcribed by a professional transcription agency. Care was taken to ensure that specific individuals would not be identifiable in any subsequent reporting.

ISSR coded the interview data thematically to identify key topics and themes. Open-coding was employed to identify similarities and differences in key themes. Identified themes were then matched against preconceived categories drawn from the interview schedule.

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#### 4.4.3. INITIAL FINDINGS – CRYPAR STAFF

### **1 Presenting issues and suitability of CRYPAR for different types of young people**

- A key emerging theme from the CRYPAR staff focus group was the increasing number of referrals with a complex range of presenting issues. Coordinators commented on how CRYPAR was initially developed and set up for young people with common (i.e. youth-typical) presenting issues, including truancy, minor types of offending behaviour and common types of family conflict arising out of the challenges of youth-typical behaviour (such as under-age drinking, violating household roles around staying out past curfew, or communication with parents in a disrespectful manner). Young people used to present with one or two common issues but these patterns have changed over time and young people increasingly tend to present with a complex range of issues, including minor ones as well as more serious problems such as witnessing, experiencing and perpetrating physical and sexual abuse, engaging in self-harming behaviour, being at risk of becoming homeless and being disconnected from the educational system. In this context, coordinators commented on the complexity of making a suitable referral for a young person with multiple presenting issues.
- This complexity of key and underlying issues has complicated the identification of issues at the police end, and leads to further complications when trying to identify a suitable type of support service throughout the referral process. This feedback is in line with limitations raised by agency representatives. Agency representatives reported an increasing number of complex referrals that they are unable to take on due to limited

scope of services or their limitations around specific types of services (e.g. trauma counselling).

- Nonetheless, CRYPAR staff generally felt that the program was suitable for all types of presenting issues. Complications were more likely to arise from the complexity of the problem rather than the referral.
- While police officers had raised some concerns around the limited availability of suitable referral programs for young people between 8-12 yrs of age, this concern did not emerge from the CRYPAR staff focus group.
- Some coordinators, however, raised the problem of referring young people of ethnic minority background. These concerns were mainly based on the weak community relations between police and ethnic minority groups as well as Indigenous communities. While coordinators felt that the CRYPAR program is able to address the needs of these specific groups they reported a reluctance by individuals in these communities to engage in a police-led program.
- Aside from the barriers associated with young people from ethnic minorities, CRYPAR staff felt there were no limitations regarding suitability of CRYPAR in relation to age or gender of the young person.

## **2 Perceived benefits of CRYPAR**

- CRYPAR staff shared similar perceptions around the program's benefits as those discussed by their partner agency representatives, including benefits for the larger community, benefits for the police and benefits for the individual clients.
- Notably, there was a general perception that CRYPAR offered an opportunity for police to strengthen police-community relations and to create more positive perceptions among the general public and individual community members through positive experiences and encounters with the police.
- CRYPAR staff felt that CRYPAR offered an opportunity to engage at risk young persons who would otherwise not be identified for early intervention programs until their deviant behaviour had manifested into more serious patterns that require official, traditional police responses.

- One point that was emphasised on numerous occasions was the benefits for parents. CRYPAR staff acknowledged that the program - initially designed to directly target young people - now often supports young people indirectly through offering support to their parents. Parents were said to contact the police/ CRYPAR after having exhausted the general support sources they were aware of (e.g. DoCS). In these cases CRYPAR could offer indirect support to the young person and develop a greater awareness among parents about available specialised youth and family support services in their community. CRYPAR has therefore broadened its spectrum over time with the shift from young persons to young persons *and* their parents.

### **3 Perceived limitation of CRYPAR**

- As stated above, some of the perceived limitations of CRYPAR involve the increasing complexity of presenting issues experienced by young people and the ethnic minority status of some potential clients.
- Aside from client-specific limitations, CRYPAR staff raised some limitations and challenges in their own roles and in relation to the role of police officers. Challenges experienced by CRYPAR coordinators are mainly related to time constraints. Coordinators report an increased workload in general, and in particular since the implementation of Support Link, and feel that they do not have the amount of time they need to thoroughly assess each referral. As a result, limited information is gathered and passed on to partner agencies in some cases, which in return leads to the frustration in the partner agency which receives inadequate background information on a referral or an unsuitable referral because not all underlying issues have been identified at the front end of the referral process.
- Another aspect associated with the referral choice and process was the limitation around referring young people that are already receiving some sort of Department of Communities support or intervention. Children who are named on a child protection order cannot be referred to any other agency that falls under the umbrella of the Department of Communities. This complicates coordinators' referral options significantly due to the broad range of partner agencies being funded by the Department of Communities. As a result these agencies are no longer a referral option.

CRYPAR staff felt that this limitation had a significant impact on their capacity to refer a young person to a suitable agency. Coordinators therefore felt that this restriction may need to be reviewed.

- Reported challenges around the role of police officers related to the perceived difficulty they have in accurately identifying the risks and needs of a young person. CRYPAR coordinators felt that although they invested a significant amount of time and resources into the training of front line officers, they would often receive referrals that contained very limited or inaccurate information on the young person's presenting issues. Coordinators acknowledged, however, that this problem has partly been resolved by the implementation of Support Link, which offers a tool to assist officers in making more detailed and accurate referrals. In this context it may be relevant to consider the officers' feedback on some of the limitations around selecting suitable items/ categories under the new computerised system in Section 4.3.

#### **4 Benefits around Support Link**

- A range of benefits were identified by participants, including a more streamlined approach, more accurate and suitable referrals, greater protection of client confidentiality and facilitated feedback around referrals for CRYPAR coordinators and police officers. Overall, this feedback is very similar to the feedback shared by the police officers.
- CRYPAR staff perceived the new referral process as time-saving in some regards because officers tend to enter more detailed and accurate background information into the system under the new referrals process. On the other hand staff also raised the issue that having to address *all* referrals that come through Support Link (since police officers no longer make direct referrals to the relevant agencies) now requires time and resources to contact every young person (and/or his/her parents) and to conduct a risk assessment on every individual case prior to selecting a suitable agency or intervention and completing the referral.
- In line with findings from the other two focus groups, CRYPAR staff report being able to make more suitable referrals based on the improved information received from officers under the new system.



- CRYPAR staff reported a feeling of greater protection of client confidentiality because the Support Link system ensures that referral information can and will only be accessed by authorised people, including front police officers, CRYPAR coordinators and relevant partner agencies. CRYPAR staff reported that under the fax back system there was always a risk that a referral may fall through the cracks or being accessed by an unauthorised person. Under the new system, coordinators feel that client information is more protected and will automatically reach the person it is intended for.
- The issue of a record of submission and processing of referrals was also raised by police officers who indicated that they would not receive any feedback under the old fax-back system and as a result could never be absolutely sure whether a referral had reached its intended destination.
- The new system facilitated feedback for all parties involved as the computer system automatically requests an update on the referrals process and generates a feedback message to the previous party in the referral process. As a result, both officers and coordinators reported feeling more confident that the referral they made was accurate and beneficial for all parties involved.

## **5 Challenges around Support Link**

- The main challenges identified by CRYPAR staff were the time restrictions and the increased workload experienced by coordinators due to having to identify underlying risks and needs in each case prior to completing the referral, forward the case to a partner agency and then follow up on each individual referral. There was consensus that more staff are needed to appropriately address the needs of clients and partner agencies.
- Another challenge raised by some coordinators was the loss of face-to-face interaction between CRYPAR coordinators, clients and partner agencies. Coordinators who had been involved in the early stages of CRYPAR reported that they would initially have more face-to-face interaction with clients, e.g. during first contact or when accompanying a client to the service s/he had been referred to. This facilitated a greater degree of client engagement and a more positive and successful outcome. In

addition, coordinators reported a greater level of grassroots interaction with key stakeholders which promoted strong working relations and support between CRYPAR and its partner agencies. Due to the increased workload since the implementation of Support Link, coordinators feel that they no longer have the resources to actively engage with community stakeholders, and this has the potential to create strain for some of the partnerships.

- Like some of the police officers, CRYPAR coordinators also felt that the centralisation of CRYPAR under Support Link has taken away their direct contact with referring police officers, especially those within the CPIUs that CRYPAR used to be based in. While coordinators reported that their absence from the initial scene had not had a negative impact on the number of officers used CRYPAR, a feeling of being 'disconnected' emerged from the discussions of the new system.

## **6 Views on CRYPAR/police - community collaboration in crime prevention**

- Overall, CRYPAR staff feel they play an important role in crime prevention through strengthening community-police relations and improving community perceptions of the police through positive interactions.
- However, as stated above, under the new arrangements, CRYPAR coordinators felt somewhat disconnected from front line officers and partner agencies, which may have had a negative impact on the working relations between police/ CRYPAR and community-based partner agencies. To address this issue, some coordinators suggested increasing the number of coordinators and creating a specific role for a coordinator that focuses on stakeholder engagement and community relations.

### **4.5 PHONE INTERVIEWS: PARENTS**

#### **4.5.1 SAMPLE**

As mentioned previously, the phone interviews replaced a planned focus group with parents that did not take place. The key informant parent sample comprised ten parents or guardians who agreed to participate in a telephone interview. The sample was identified from a list of 16 potential interviewees provided by CRYPAR coordinators from Pine Rivers,

Logan, North Brisbane and Rockhampton police districts. Of the original 16 phone numbers provided by CRYPAR coordinators 10 resulted in complete interviews, 2 were refusals and 4 numbers could not be reached. Table 13 provides the gender and district particulars of the final sample of parents.

**Table 13. Participants – Parent Telephone Interviews**

	Male	Female	Total
Pine Rivers	1	3	4
Logan	1	3	4
North Brisbane	0	1	1
Rockhampton	0	1	1
<b>Total</b>	<b>2</b>	<b>8</b>	<b>10</b>

The data derived from the parent key informant interviews is highly qualitative. The interview findings are based on a convenience sample of parents identified by CRYPAR facilitators as *cooperative and easy to access*. As such, while the interviews offer significant insight into the experiences of these parents, they should not be seen as representative of the views and experiences of the broader population of parents involved with CRYPAR since its inception in 2006.

#### 4.5.2 DATA COLLECTION AND ANALYSIS

All parent participants were interviewed by the researcher for between 20-35 minutes over the telephone. All interviews followed a structured format. Responses to the set questions were recorded by the researcher along with additional information offered by the interviewee. Care was taken to ensure that specific individuals would not be identifiable in any subsequent reporting.

The interview data were read by the researcher and coded thematically to identify key topics. Coding progressed in the style of a grounded theory approach to data analysis. Under this approach themes are drawn from the data as opposed to employing preconceived categories and forcing the data to fit.

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#### 4.5.3 INITIAL FINDINGS - PARENTS

##### 1 CRYPAR – Information provision

- As was the case with young people, in the case of parents, there was an apparent lack of knowledge about what CRYPAR is, the difference between CRYPAR coordinators and general duty police officers, and parents' and children's rights in terms of participation. Most respondents could name the person who they had dealt with, but could not identify whether they worked for the QPS or whether CRYPAR was managed by a separate agency.
- The majority of parents interviewed were aware that participation was voluntary although two were under the impression that CRYPAR was the alternative to police pursuing official charges.
- Notably, ambiguity surrounding the CRYPAR coordinator's affiliation with the QPS could be problematic in situations where participants or their family have had negative experiences with police. In the absence of a clear distinction between CRYPAR workers and police officers, negative perceptions of the police may carry over to the CRYPAR coordinator and undermine successful participation in the process. This negative view of QPS was evident in one parent interview:

*"The police have always acted negatively towards me. The police always pre-judge me. They are never interested in anything I have to say. I don't trust the police and will never go back to CRYPAR."* P03

- Whilst the parents reported receiving little information regarding who or what CRYPAR was, all interviewees said they were provided with a great deal of information regarding services and agencies in the local area that could assist their child.
- Many of the parents highlighted the approachability of the CRYPAR coordinators and their willingness to answer questions or queries about the different services various agencies could offer.

## 2 Treatment by Police

- Most parents had contact with general duties QPS officers at some time during the referral process, whether this contact was police or parent initiated. Nine of the ten interviewees reported that the attending police officers were polite and treated them and their child with respect. Most praised the officers' ability to communicate with their child, their willingness to assist, and the genuine interest the officers took in finding the best outcome for the family as a whole. One mother expressed:

*"I have nothing but praise for the officers that came to the house.....it is so good to know that I have police support." P08*

Another parent reported:

*".....they [the police] went out of their way to make sure that everyone was safe and happy before they left.....they were excellent with [my son].....they made me feel less guilty about calling the police on my own son." P15*

## 2 Contact with CRYPAR coordinator

- Parents reported that contact with the CRYPAR coordinators took place in person or over the phone. Most parents reported speaking with the coordinator 'several' times. In the majority of cases parents communicated with the CRYPAR coordinator in the absence of the child, while three parents reported meeting the CRYPAR coordinator with their child. One mother expressed concern that her son was not involved in the initial and ongoing contact with the CRYPAR coordinator and felt that he may have participated more fully had he spoken with the CRYPAR coordinator directly.
- Eight of the ten parents interviewed stated that the coordinator had engaged them at least once following initial referral to see how their child was progressing and to check that the referred agency had been in contact and secured an appointment. Most interviewees reported numerous contacts with the coordinator - both self and CRYPAR coordinator initiated. One parent reported that whilst the CRYPAR coordinator was

understanding, reassuring and supportive during the initial consultation, no further contact was made despite numerous phone calls. The interviewee stated that the family was not contacted by any support services and that calls to the coordinator were never returned.

- A number of interviewees expressed the need for longer-term follow up to ensure that the program or support service to which they had been referred is suitable and to check whether further assistance was required:

*"I think CRYPAR should have provided on-going support for [my son] to make sure that he finished the program at [Agency] or went to a more suitable program."* P15

- All interviewees felt the CRYPAR coordinators were respectful and trustworthy. The majority of parents praised the CRYPAR coordinators for their genuine support and interest in helping their family. A number of parents expressed their relief in finally having someone to talk to about their child's issues who was not judgmental and who understood their exasperation:

*"I felt they were the first people that really understood, and that I could be totally honest about how hard things were for me and my family.....I was shocked by how genuine [the CRYPAR coordinator] was and how quickly she got things done."* P10

*"I was surprised by the amount of help offered free of charge and the continual effort that the case worker [coordinator] put in."* P02

#### **4. Support Service / Agency appropriateness**

- Most of the parents interviewed felt that the agency to which they had been referred was appropriate for the needs of their child and their family. Overall experiences were very positive, with agencies reportedly providing appropriate support to the child at risk and the family as a whole. A number of parents reported that they are still in contact with the agency and continue to benefit from their support.



- Nevertheless, several interviewees reported that the agency did not follow-up for long enough or that their child refused to continue attending.

## 5 Youth behavioural outcomes

- The majority of parents described vast improvements in their child's behaviour, both at home and at school, since coming in contact with CRYPAR and participating in services offered by the agency to which they were referred.

*"CRYPAR should be available for all families....agencies offer quick support if you are referred by CRYPAR.....best thing that ever happened to me and my family." P10*

- Improved mood and communication were commonly reported as key outcomes impacting the family as a whole. A number of parents reported better school performance and a decreased incidence of a range of anti-social behaviours including truancy, drug and alcohol use, violence and self-harming.
- Two interviewed parents whose children refused to participate in the CRYPAR referral reported no change in their child's behaviour. Notably, however, they still expressed benefits of having support from the CRYPAR coordinator and the police for their own well being and that of the rest of their family:

*".....my son refused to be involved but it was good to have support.....talking with [the CRYPAR coordinator] was great for me." P11*

## 5 Points of improvement

- The most commonly cited limitation of CRYPAR identified by parents was the inability of the CRYPAR coordinator, parents or police to enforce participation. Several parents suggested that full and complete participation in the program to which they are referred should be compulsory for at risk youth. Two parents who could not convince their children to participate expressed their disappointment in the lack of power that CRYPAR possessed:

*“despite all the information about services I still couldn’t do anything to help my son or make him get help.” P11*

- A number of parents mentioned that a longer follow-up period would have been beneficial, although they expressed an understanding that resources were scarce.
- Several interviewees suggested that more communication is required between CRYPAR and the support agencies to ensure that the referral is followed through and that participation is complete. One parent suggested that CRYPAR should set clear outcomes prior to ending an intervention with a young person:

*“[My son] should have had to finish the program at [Agency] or go to a more suitable program.....CRYPAR should have had clear outcomes set out like making him go to school or get a job.” P15*

## 5 QUANTITATIVE ASSESSMENT OF THE IMPACT OF CRYPAR

The CRYPAR Data and QPRIME database were examined in order to undertake an analysis of the impact of the CRYPAR system on offending. In addition, a survival analysis was conducted on CRYPAR participants to more thoroughly investigate the impact of CRYPAR on subsequent offending, as recorded in the QPRIME database.

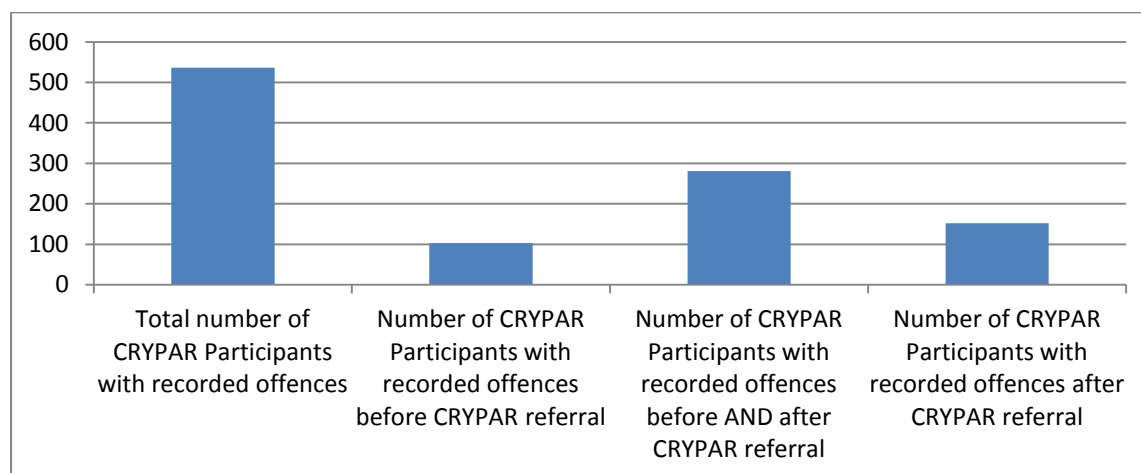
### 5.1 REPORTED OFFENCES BEFORE AND AFTER CRYPAR

Reported offences recorded before and after participants' first CRYPAR referral were compared (those with reported offences only) as a rudimentary test of the impact that the CRYPAR intervention had on offending behaviours.

Figure 16 shows the proportions of CRYPAR participants with recorded offences before, after, or both before and after their CRYPAR referral.

- 103 offenders (19.2% of all offenders; 8.0% of all CRYPAR participants) had offences recorded only BEFORE the CRYPAR intervention.
- 281 offenders (52.4% of all offenders; 21.8% of all CRYPAR participants) had offences recorded both before and after the CRYPAR intervention.

- 152 offenders (28.4% of all offenders; 11.8% of all CRYPAR participants) had offences recorded only AFTER the CRYPAR intervention.



**Figure 16. CRYPAR participants with recorded offences before and after CRYPAR referral.**

It is important to note that this analysis does not take into account the age or gender of the participant when they received their CRYPAR referral, or factors relating to time. To do this, a survival analysis was conducted.

## 5.2 SURVIVAL ANALYSIS

In order to conduct the survival analysis, all CRYPAR participants who were aged between 10 and 25 years when first referred through CRYPAR, whether they had a reported offence or not ( $n = 978$ ), and who lived in the Metropolitan North Policing District were selected. The reason for limiting the analysis to this group was due to differences in the way that the CRYPAR referral process was implemented in different policing regions. Additionally, the original intent of the CRYPAR program was aimed at young people of this age range as it was hoped this would be the time when these people were most 'at risk' of further victimisation or anti-social behaviour, and therefore were the target of the majority of referrals. Furthermore, due to legal definitions, persons under the age of 10 are not able to be charged with offences, and therefore could not appear in the QPRIME system as potential offenders. The sample used for the survival analysis included 978 of the 1289 CRYPAR participants (with 450 reported offenders). The average age of participants was 14.77 years ( $SD = 2.17$ ). There were 519 males and 459 females in the sample.

In order to assess the effectiveness of CRYPAR a Cox proportional hazards survival model is used stratified by gender and controlling for age. Survival models consist of two parts, a baseline hazard function, describing the hazard or probability associated with the time until an event occurs at baseline levels for covariates, and the relative risk component containing the covariates, i.e. gender or whether or not the individual has gone through the CRYPAR program. The covariates are assumed to have a proportional effect on the baseline hazard function, i.e. CRYPAR may halve the baseline risk function. The Cox proportional Hazard model is a specific case of a survival model where the covariate effects can be found without need to know or estimate the baseline hazard function. This allows us to estimate the proportional change in the survival function attributable to the covariates, i.e. CRYPAR.

ISSR fitted a Cox proportional hazards model to the data for all the 978 individuals in the sample, stratifying by gender to account for those differences (i.e., that females were likely to have less offending behaviour). It was found that females had a lower relative risk of re-offending than males (as evidenced by the hazard being approximately .2 lower). Controlling for age at first referral, results showed that participants had a statistically significantly higher risk (16%) of offending following CRYPAR,  $z = 4.65$ ,  $p < .001$ . Age also had a significant, but insubstantial ( $>.001\%$ ) effect on the risk of re-offending.

### 5.3 METHODOLOGICAL LIMITATIONS

A noteworthy issue with the quantitative data analysis provided above surrounds the lack of standardisation of the recording of information about CRYPAR participants. No standardised referral criteria were available, and whether or not an individual was considered 'at risk' and therefore able to be referred through the CRYPAR system was defined at each individual's discretion. This is problematic, as there were almost 300 different officers making referrals through CRYPAR.

In addition, the presenting issues were inconsistently recorded within and across different policing regions, as evidenced by the large numbers of 'Family conflict/Youth Support' issues recorded in Metropolitan North, and 'Multiple Issues' recorded in Logan.

Another important issue to note is that there is little information regarding whether CRYPAR participants remained in contact with the agency to which they were referred. This is an issue, as it would be assumed that those CRYPAR participants who actively engaged with their referred agency would likely have more positive outcomes than those who dropped out of contact with the agency after the initial referral contact.

In addition, without data on school or workforce engagement, absconding, or engagement with the agencies, it is difficult to draw many conclusions regarding the impact of CRYPAR, particularly for participants with no contact with the criminal justice system (which forms the majority of the CRYPAR sample).

Finally, as noted previously, limited conclusions can be drawn regarding the results of the survival model. Without a group of offenders who did not go through the CRYPAR system to compare with, it is unclear whether CRYPAR did in fact increase offending behaviour, or if CRYPAR participants remained on the same type of trajectory as non-CRYPAR participants. However, without consistent recording practices within the CRYAPR system, it was not possible to select a matching group for this kind of analysis.

## 6. DISCUSSION AND CONCLUSIONS

The CRYPAR referral system was initiated by the QPS in 2006 as an early intervention tool to assist “at risk” youths within the community through connecting them with agencies within the community that are able to provide them with assistance. The primary goal of CRYPAR was to intervene at an early stage, to prevent these vulnerable people from further progressing into anti-social behaviour or being victimised.

It has subsequently been subsumed into the Support Link system and modified from a fax-back system to utilising the e-referrals within the Support Link framework. Although this assessment covers only the initial phases of CRYPAR which utilised the fax-back system, many of the lessons learned from CRYPAR can still be valuable for Support Link in the future.

The statistical analysis of CRYPAR offered some important insights as to the participants that were referred and the types of issues that they faced. However, inconsistencies in recording

practices made it difficult to draw firm conclusions around the referral and the subsequent impact of the CRYPAR system.

One of the issues with CRYPAR was that risk factors were defined at the individual officer's discretion. Some 'risk assessment' may be based on detected criminal engagement, some based on 'risk indicators' detected during police general duties (e.g. coming across children that should be in school while on patrol; coming across children during domestic violence intervention, etc). In other words, there was no standard risk assessment tool used in the CRYPAR intervention prior to Support Link.

Without reliable data with which to create a clear referral metric for the participants within the existing CRYPAR system, it has not been possible to draw an equivalent, matched sample of young people who did not receive a CRYPAR referral, as was the original intent of this analysis. From the analysis conducted, however, it was apparent that for CRYPAR participants with reported offences, the initiation of the CRYPAR referral did not significantly reduce their offending following the intervention.

However, despite these limitations, the descriptive analysis also provided some interesting information regarding CRYPAR participants. From this data, it is clear that the people referred through the CRYPAR system exhibit multiple and complex issues, and the referrals made for these issues tended to be to agencies that endeavour to address complex issues, or at least refer on to more specified agencies.

Despite the limitations of the data available from within the CRYPAR system, presented, a number of key conclusions can be drawn for the available data:

- CRYPAR provides a significant *early intervention strategy*, since almost 40% of all referrals were made to young people under the age of 14.
- A wide variety of presenting issues were identified, and a large number of agencies partnered with the police and were utilised for referrals of CRYPAR participants. The description of presenting issues varied widely across policing regions.



- Notably, nearly 60% of the CRYPAR participants had no record of reported offences either before or after referral. Less than half of the CRYPAR participants (41.6%) had reported offences. However, for the 41.6% of CRYPAR participants with reported offences recorded (recorded either before or after the CRYPAR referral, or both before and after), the intervention through CRYPAR did not statistically significantly reduce the likelihood of offending post referral.

Despite inconclusive statistical data, the qualitative data is overwhelmingly positive about the CRYPAR program. While this may reflect the sampling approach adopted (key informant interviews with selected individuals and groups), many significant issues were raised during the discussions and suggestions for improvement were made by young people, parents, agencies police and CRYPAR staff. These suggestions could potentially be used to assess and improve the effectiveness of Support Link going forward.

Young people provided very positive feedback on the perceived usefulness of the CRYPAR referral and the suitability of the selected intervention. Interviewees were satisfied with the way police officers, CRYPAR coordinators and agency workers interacted with them. While the CRYPAR referral was only able to address some presenting issues where the young person was subject to a complex range of problems at the time of the referral, the young person still benefited through the development of an ability to reflect on their behaviour and an awareness of how to further reduce their risk of engaging in subsequent deviant behaviour. Those young people who continued to engage in a range of offending behaviours had developed an ability to reflect on the risk factors that contribute to their offending behaviour and how to minimise these over time. In addition, young people said that the referral and subsequent intervention had equipped them with an awareness of where to seek and find future support if need be.

Agencies also believed in the benefits of the CRYPAR program for young people at risk and their parents. Agencies felt it was important to be involved in a collaborative approach to early intervention with the police to engage with young people at risk and to strengthen ties between law enforcement and a range of community-based NGOs. The main limitations and shortcoming of the CRYPAR program highlighted by agencies were the referral flow, the

associated workload and the limited amount of risk assessment and screening conducted at the front end of the referral process. They felt that this led to unsuitable referrals and the agency having to turn referees away. Having said this, however, that there was consensus among interviewees that this shortcoming significantly improved since the implementation of Support Link.

Police officers also shared a great level of satisfaction with CRYPAR as an available referral tool. Officers also displayed a sense of pride in helping individuals and building stronger community-police relations through their utilisation of CRYPAR. All participating officers agreed that the implementation of Support Link had significantly improved the overall referral process and perceived referral quality. One thing officers regretted was that the centralisation of CRYPAR since the implementation of Support Link has taken away the face-to-face collaboration with the relevant coordinator in their district. Officers felt that the presence of the CRYPAR coordinator at their relevant police station/ within their CPIU added value to the overall program due to the opportunity of directly liaising with the coordinator about particular cases, feedback and overall decision-making processes.

Similar to the findings that emerged from the police and partner agency focus groups, findings from the discussions with CRYPAR staff demonstrate a strong belief in the effectiveness of the program. Other similarities emerged around the overall benefits of Support Link. While its implementation has created an increased workload for the existing number of coordinators it has improved the overall referral process for all parties concerned. Coordinators have raised some important issues relating to the new referral process. These should be reviewed to further improve the benefits of CRYPAR for individuals and the larger community.

Overall the parents who participated in the telephone interviews expressed very positive perceptions of their experience with CRYPAR. Nine of the ten interviewees reported that they would recommend CRYPAR to other parents whose children engage in risk-taking or anti-social behavior. Moreover, most of the interviewees stated they would contact CRYPAR if they experience further issues with their child and several expressed appreciation for the support that had CRYPAR offered their family.

In sum, CRYPAR offered a unique method for connecting 'at risk' youth to support agencies and community groups designed to address the needs of vulnerable members of society. Although the statistical analysis indicated no reduction in offending for those with official records, further conclusions about the efficacy of CRYPAR in terms of outcomes are unclear. Despite the limitations of the referral process, it appears as though there were positive outcomes for the CRYPAR participants and family members interviewed. With the implementation of Support Link to facilitate the CRYPAR process in the midst of this assessment, the lessons learned from CRYPAR should be kept in mind when considering this new incarnation of the referral process.

## ATTACHMENTS

### ATTACHMENT A: INTERVIEW GUIDE - INTERVIEWS WITH YOUNG PEOPLE

*Introduction: After asking you all these different tick box questions I would now like to hear a little more about how you experienced the overall CRYPAR program. Please keep in mind that when talking about the CRYPAR program, this involves the overall process, including your initial contact with the police, you agreeing to being contacted by an agency other than the police and you accepting the support or program this other agency offered you.*

*I will ask you a range of questions and you can answer them in your own words. Remember that you only have to talk about things you feel comfortable with so if there is a question you prefer not to answer, please let me know and we can skip that one.*

- 1) How would you describe your life during the time leading up to the CRYPAR program? Please think about how you got along with your parents at the time, whether you were attending school and whether you had contact with the police now and then even before the CRYPAR contact.
- 2) Do you remember who first talked to you about taking part in the CRYPAR program? This may have been a police officer you came in contact with or someone from your school. Please describe what this person told you about taking part in CRYPAR and why they thought it would be important for you to take part.
- 3) *Follow up to 4:* Do you remember where you had contact with ... (this person, e.g. teacher, police officer)? This may have been in a public space when coming in contact with the police or at a police station for example.
- 4) At the time you agreed to the CRYPAR referral, did you feel you knew what you said 'yes' to and that someone from an agency other than the police would give you a call to arrange some support for you. Please describe what type of information you had been given prior to saying 'yes' to the referrals and whether you felt that was all you needed to know at that time.
- 5) *Follow up to 7:* Did you feel like you had to say yes at any stage or would you say your participation in CRYPAR was completely voluntary (i.e. you were happy to take part)?
- 6) When thinking about the way ... (the person who informed you about CRYPAR and asked you for your consent) treated you and talked to you when informing you about CRYPAR and asking you to sign a consent form, would you say s/he:

- |  |     |    |
|--|-----|----|
| a. Treated you with respect?           | Yes | No |
| b. Seemed to be someone you can trust? | Yes | No |

c. Listened to what you had to say first before making a decision about what's best for you?

Yes

No

The next few questions focus on your experiences with the agency (*interviewer: name agency if known*) you have been in contact with as part of the CRYPAR program.

- 7) How would you describe the agency/ intervention program you were referred to as part of CRYPAR?
- 8) How would you describe the overall goal/ desired outcome of this intervention/ program? When answering this question, please think about any problems that you would have discussed with the police/ the CRYPAR coordinator as part of your referral.
- 9) *Follow up to 10:* If interviewee says something like 'to stay out of trouble', follow up to identify how/ what that actually means to them)
- 10) How satisfied were you with this type of program/ intervention? When answering this question, please think about whether you would describe the program as suitable for your needs/ expectations at that point in time (and if not, why?).
- 11) Did you see the agency/ a particular person working for the agency for as long as they felt it was necessary (e.g. a minimum number of visits, weeks, etc.)
- 12) *Follow up to 13:* If you did not complete the intervention/ stopped seeing someone at the agency before they decided you no longer needed to come, can you please tell me a little bit about what made you stop seeing them/ going there?
- 13) Would you say you achieved the goals defined by you and someone from the agency (e.g. regular school attendance, not getting into fights, getting along better with your parents, etc. – ***Interviewer: name the relevant presenting issue(s) initially identified by interviewee as reason for referral***)
- 14) Overall, would you say the CRYPAR program has been helpful and the issues leading to your referral have been resolved?
- 15) *Follow up to 16:* If yes, how? If no, why not?
- 16) If you think about your life just now (thinking of schooling, friends, your relationship with your parents, 'getting into trouble' with the police) would you say you are overall:
  - a. Happy with how things are
  - b. Satisfied but things could be better
  - c. A bit stressed about some things

- d. Quite worried about how things are going for you
- e. Generally angry/ in a bad mood because things aren't going well

17) Would you recommend the CRYPAR program to other young people in similar situations to the one you were in at the time you agreed to participate in the program?

18) *Follow up to 17: If yes, what do you see as the strengths of the program? If not, what do you see as the weaknesses of the program?*

19) Is there anything you think that could be improved about the CRYPAR program? This could be in relation to the information you received initially, the way the police or someone from the other agency treated you, the type of interventions you were expected to take part in).



## ATTACHMENT B: INTERVIEW GUIDE – FOCUS GROUP WITH AGENCIES

### **Third Party Interviews (representatives from CRYPAR partner agencies):**

- a. Third Parties' focus/ emphasis on crime control
- b. How partner request (i.e. request for 'Third Party Policing') was received internally
- c. Organizational structure and overall/ general involvement in Third Party Policing
- d. Perceptions of QPS expectations to engage in Third Party Policing
- e. Views on CRYPAR and its process: suitable, easy to use, undemanding, realistic, feasibility with normal workload.
- f. The policy environment each of these agencies operate in – history checks available, risk assessment, followup ability etc.
- g. The challenges experienced since implementation
- h. Approximate number of referrals / how often get referrals / time of day/week of most referrals and perception on reasons.
- i. Are referrals usually appropriate once child's issues are identified? Cultural considerations?
- j. Are agencies often required to refer on to other agency due to inappropriateness of referral (presenting issues) or due to lack of capacity?
- k. Success rate / retention rate etc of children referred to your program. Repeat referrals?
- l. Suggestions for program improvement

***The first set of questions focuses on getting a brief overview of the agencies represented and their organizational focus on crime control.***

1. Which agency do you represent?
  - a. What is your position within that agency?
2. Has your agency signed an MOU with CRYPAR?
3. Can you please briefly introduce the agency you are representing?
  - a. Is it a govt or non-govt agency?
  - b. What is the size of the agency (i.e. number of full- and part-time practitioners providing human services) you represent?
  - c. What is the scope of service of your agency?
4. Do you know how the partnership between your agency and the CRYPAR program was originally initiated?
  - a. How was your agency approached?
  - b. Do practitioners at your agency agree with the expectations placed on you as a partner agency in the CRYPAR program (i.e. crime prevention in the broader sense)?
5. Would you describe the general agenda of your agency aside from your involvement in CRYPAR as a form of crime prevention?
  - a. If yes, what area(s) of crime prevention (e.g. age, gender or crime specific for example) is your agency involved in?
  - b. If no, what is the main agenda of your agency (e.g. counselling, education, recreational activities for young people)
6. What is the key service area you provide for young people referred to you through CRYPAR?
7. How many referrals would you say you receive through CRYPAR per month?
  - a. Is this usually in line with your capacity?
  - b. If no, is your capacity greater or smaller than what you receive?
  - c. What happens to referrals you can't accept because your capacity is exhausted?

- d. Do you usually keep a certain capacity for potential CRYPAR referrals?
- 8. Would you say your agency is adequately equipped to address the needs of CRYPAR referrals in relation to:
  - a. Specialization of staff members? (Please provide detail on discrepancies where applicable.)
  - b. Capacity of staff members to take on new referrals in addition to general workload? (Please provide detail on discrepancies where applicable.)
- 9. In your experience, are the referrals your agency receives adequately suited for the types of services you provide?
  - a. If no, please describe the discrepancy between referral needs and service provision.
- 10. Do you solely rely on the presenting issues identified by the referring coordinator or police officer when receiving a CRYPAR referral?
  - a. If no, do you conduct a risk and needs assessment as part of your standard 'client intake' before deciding on the nature and length of intervention?
  - b. If you do your own risk and needs assessment, would you say the initial identification of the young person's main presenting issues is still accurate?
  - c. How often would you say you receive a referral that you need to refer elsewhere after conducting your own risk and needs assessment because you are unable to provide the services needed?
- 11. How often would you say you receive a referral that you need to refer elsewhere because you do not have the capacity to take on new cases?
- 12. Do young people referred through CRYPAR differ from your other clients with regards to:
  - a. Completing the intervention selected for them?
  - b. The 'success rate' of resolving presenting issues?
- 13. Have you come across young people that were referred to you through CRYPAR on more than one occasion (i.e. due to repeat police contact over time)?
  - a. If yes, would you say it is suitable for a young person to be referred to your agency repeatedly if the presenting issues could not be resolved the first time around?

***The following questions relate to your collaboration and communication with CRYPAR staff.***

- 14. Once a referral is received, do you provide feedback to the CRYPAR coordinator on whether:
  - a. the young person is suitable for the interventions you offer?
  - b. the young person commenced the selected intervention(s)?
  - c. the progress (including risk of disengagement) of the intervention (s)?
  - d. the young person completed the intervention?
  - e. If no to any of these aspects, please elaborate why not.
- 15. What would you say are the main challenges for agencies who agree to become a CRYPAR partner agency?
- 16. What would you say are the main benefits for agencies who agree to become a CRYPAR partner agency?
- 17. Do you have any suggestions to improve the referral process (i.e. ease of flow) between CRYPAR and your agency?

**ATTACHMENT C: INTERVIEW GUIDE – FOCUS GROUP WITH POLICE**

**Front line Police Officers acting in CRYPAR districts**

- a. Attitudes towards 'Third Party Policing'
- b. Their role within QPS (e.g. specialized unit, operating within unit that is under pressure to 'solve' recurrent problem of youth deviance)
- c. Their attitudes towards policing youths (i.e. punitive, rehabilitative)
- d. Their satisfaction with knowledge/ received information about CRYPAR
- e. What do they know about CRYPAR
- f. What are the perceptions of CRYPAR – regarding usefulness, efficiency in dealing with youth at risk, cultural appropriateness; etc.?
- g. How often do officers think of using CRYPAR / make referrals?
- h. What are the factors influencing the decision to make a referral?
- i. What criteria do officers usually apply when considering young person's suitability – cultural considerations, who is most suited, under what circumstances or type of incident/contact are more referrals made?
- j. Where / what type of contact / circumstance do most referrals come from? (e.g. mostly from street checks/ mostly from child protection calls etc.)
- k. What time of day / week do most contacts occur and are most referrals made? (e.g. Monday morning after many contacts over the weekend?) – or are referrals made immediately after contact since the fax back system/ SupportLink doesn't depend on 'office hours' of agencies?
- l. Perceptions of most common referral (who, where, why).
- m. Satisfaction with feedback/ lack of feedback.
- n. Suggestions for improvement.

***The first set of questions aims to identify each participant's role within QPS***

1. Could you please describe your rank and role within QPS
  - a. District?
  - b. Part of a specialized unit (e.g. CPIU)?
  - c. Rank and years of service?

***CRYPAR can be utilized for a broad range of 'risky' behaviors, including youth-typical forms of deviance like truancy, underage drinking or minor property offences as well as serious and violent types of crimes. The following questions focus on officers' perceptions of responses to anti-social behavior, including the suitability of CRYPAR and their collaboration with thirds parties.***

2. Would you describe anti-social behavior among young people as a significant problem in your police district?
  - a. Please provide a brief description of typical youth-related crime issues in your district.
  - b. Please provide a brief description of the demographics of young people you commonly encounter in your district for anti-social behavior.
3. Do you see police collaboration with community based agencies through referral processes as an effective way to address anti social behavior among young people?
  - c. Why/ why not? Please explain your view.
4. How would you describe the main goal of referring a young person you encounter through CRYPAR?
5. Do you think CRYPAR is suitable for all 'young people at risk', regardless of:
  - a. Age,
  - b. Gender,
  - c. Race, and
  - d. Presenting issues?

6. Are there any presenting issues you think cannot be addressed effectively through a CRYPAR referral?
  - a. If yes, what are they?
7. Would you refer a young person in addition to utilizing another youth justice responses (e.g. diversion, conference or court referral)?
  - a. Why/ why not? Please explain your decision.
8. Would you refer a young person if you did not believe in the effectiveness of CRYPAR for the relevant presenting issues?
  - a. Please explain why you would/ would not refer them?

***The following questions examine officers' views on their training, knowledge and confidence in utilizing CRYPAR within their district and everyday duties.***

9. Please describe the 'risk assessment' you used to conduct prior to SupportLink when encountering a young person to determine a suitable referral.
10. Do you feel you received sufficient information about CRYPAR to make an informed decision about a referral?
  - a. If no, what additional information would you like to receive in order to feel well informed?
11. How confident are you in selecting the 'right' agency that will meet the clients' needs based on your initial 'risk assessment'. (please note: this only applies to referrals prior to SupportLink and to Rockhampton referrals)

***The next set of questions focus on the nature of common referrals, including referral characteristics, timeframes and satisfaction with utilizing CRYPAR.***

12. Does the time of week and day influence your likelihood of making a referral?
  - a. I.e. are young people encountered outside of 'office hours' for referral agencies as likely to be referred through CRYPAR as those encountered between 9am and 5pm, Monday through to Friday?
  - b. If yes, how are 'out of office hour referrals' dealt with (i.e. when are they referred)?
  - c. If no, how do 'out of office hour referrals' differ from those encountered within office hours?
13. Please describe your most common referrals, i.e.
  - a. What are the most common presenting issues of young people you refer,
  - b. Where do you usually encounter these types of referrals (public places, private dwellings),
  - c. What time of the day and week do you usually encounter most of these referrals?
14. How satisfied are you with the feedback you receive for your referrals,
  - a. From the CRYPAR coordinator both prior to and since SupportLink?
  - b. From the agencies you used to refer to directly prior to SupportLink?
  - c. If not satisfied with feedback since SupportLink, please indicate how feedback can be improved when referring young people through SupportLink?
15. Overall, do you have any suggestions how CRYPAR could be utilized more effectively by officers in your district? Please provide detail.

## ATTACHMENT D: INTERVIEW GUIDE: FOCUS GROUP WITH CRYPAR STAFF

### **CRYPAR staff:** Key themes to be explored through FG interview

- a. Discuss program development.
- b. Any changes that have occurred since implementation – changes in process (supportlink), target group, stakeholders etc.
- c. Short comings of the process - agencies don't abide by MOU, lack of police referrals,.
- d. Ease of the process – e.g. before and after supportlink.
- e. Perceived risks and benefits relating to different types of referrals- risk assessment done, cultural appropriateness / consideration.
- f. Most common referral agency
- g. Feelings of satisfaction/ confidence about – which agency to refer to; the agency (ability/commitment), satisfaction with and implications of feedback/not from agencies.
- h. Perception of police commitment – police have enough knowledge about CRYPAR, police utilise CRYPAR etc.
- i. Most common referral agency / most common 'type' of referral (e.g. truant).

### ***The first questions are directed at those of you who have been involved in CRYPAR since the initial implementation phase:***

1. How would you describe the original need for the development and implementation of a coordinated response to young people at risk in Metro North in 2006?
2. Has your perception of the need for such a response changed since then?
  - a. If yes, how/ in what way?
3. Would you say the main goal of such a coordinated response program has changed since its initial implementation?
  - a. If yes, how/ in what way?
4. Would you say the target population has changed over the past 4 years in relation to demographics?
  - a. If yes, please describe how demographics have changed (e.g. shift in age, gender or race distribution).
  - b. If no, please describe the main demographics of the target population now and then.
5. Would you say the target population has changed over the past 4 years in relation to presenting issues?
  - a. If yes, please describe how presenting issues have changed.
  - b. If no, please describe the main presenting issues of the target population now and then.

### ***The following questions are directed at all FG participants.***

6. Who do you see as CRYPAR's most suitable target population in relation to
  - a. situational circumstances,
  - b. presenting issues,
  - c. chances to reduce future risk of anti-social behavior?

7. Who do you see as the target population least likely to benefit from a CRYPAR referral? Please explain why.

***The following questions focus on information around the process and the collaboration with relevant third parties and are directed at everyone participating in the focus group interview:***

8. How would you describe the referral process of CRYPAR (e.g. easy, user-friendly, time-consuming)?
  - a. Prior to SupportLink implementation in May 2010 and Rockhampton in general (note: Rockhampton has not implemented the computer-assisted referral process SupportLink).
  - b. Since SupportLink (only applicable for Logan and Metro North)
9. What factors influence the ease of the referral process?
  - a. Please do not comment on technical factors associated with the computer assisted referral process but rather on factors associated with risk assessment, time constraints, availability of suitable services, etc.
  - b. What factors can complicate the referral process?
10. Which agencies do you refer to most?
  - a. Why? (i.e. let them explain whether this has to do with capacity of partner agencies or the nature of predominant presenting issues for example)
11. What are the most common presenting issues you tend to identify in your referral population during the initial assessment?
12. Do you feel that the initial 'risk assessment' equips you with sufficient knowledge about the client's risk and needs to make an informed decision in relation to agency selection?
  - a. Has this changed since the implementation of SupportLink?
  - b. If yes, how has this changed?
13. How would you describe the commitment of police officers in your district to utilize CRYPAR when coming in contact with young people 'at risk'?
  - a. Do you feel that CRYPAR is utilized consistently and across the board in your district?
  - b. If no, what are the factors associated with inconsistent utilization of the program?
  - c. Officer-related factors?
  - d. Young person-related factors?

## ATTACHMENT E: INTERVIEW GUIDE – INTERVIEWS WITH PARENTS

### PARENT PHONE INTERVIEW

**INTRO.....Hi my name is .....I am calling from the University of Queensland. We are currently gathering some information about CRYPAR, the Coordinated Response to Youth at Risk referral program, led by the Queensland Police. This information will be used to evaluate the current program and explore ways in which the police can respond more effectively to youth issues. All information you provide is confidential.....**

**First I would like to ask you a few questions about your experience with the CRYPAR referral process.**

1. Before talking about the nature and circumstances of the referral I would like to know the approximate time of the referral (i.e. month and year). This information will be used to identify whether the referral was made using the initial fax-back process or the currently implemented computer-based referral process. Observer to record month and year of referral (not intervention onset or completion):\_\_\_\_\_
2. How would you describe the situation at home and your child's behavior, in general, during the months before your family came in contact with CRYPAR?
3. How is it that your child came in contact with CRYPAR? Did you contact the police or a CRYPAR coordinator? Or did the police come in contact with your son/daughter as part of their general duties?
  - a. Please describe the circumstances under which this happened (e.g. in a public place while truanting).
4. During the process of referral did you or your child have contact with front line police officers or did you only have contact with the CRYPAR coordinator (name coordinator if known)?
5. Did you ever have face to face contact with an officer or the CRYPAR coordinator or were you informed of the process over the phone?
6. Were you satisfied with the way the police officer/ CRYPAR coordinator treated you and your child?
  - a. Did you feel that the police officers/ CRYPAR coordinator treated you and your child with respect?
  - b. Did you feel that you could trust the officers/ CRYPAR coordinator?
  - c. Did s/he listen to your story before making decisions?
7. How satisfied were you with the information you received about the overall CRYPAR referral prior to providing consent (including the sharing of information and the expectations for your child to participate in an intervention)?
  - a. Did you feel you were able to ask questions?
  - b. Were you aware that participation was voluntary?
  - c. Were you asked to sign a consent form?
8. Did you feel that you were adequately involved in the referral process or did you feel that too much focus was on your child?



9. Did the coordinator follow up with you at a later stage to enquire about access to or suitability of the type of support they selected with/ for you?
10. Is there anything the coordinator (or police officer where there was no coordinator contact) could have done as part of the referral process that would have improved your experience with CRYPAR?
  - a. If yes, please explain how your experience could have been improved by the coordinator/ police officer.
11. Do you feel you can contact the police/ CRYPAR for further assistance in the future if need be?

***The following questions ask about your thoughts regarding the agency you and your child were referred to, your perceptions of the referral program and the overall outcomes of CRYPAR.***

12. What agency was your son/ daughter referred to through CRYPAR?
  - a. Did the agency contact you within 48 hours of the time the initial referral was made (i.e. the time you and/ or your child consented to the referral)?
  - b. Did the agency contact you directly or only engage with your child?
  - c. Did you find the selected agencies/ interventions suitable for your son/ daughter's needs?
  - d. Did you feel supported by the selected agency?
  - e. Were you involved in the intervention?
  - f. Did you find the selected agencies/ interventions suitable for your overall family needs (where applicable, i.e. where presenting issues affected family as a whole)?
  - g. Did you feel that you were able to contact the agency for additional support or information after your initial contact?
  - h. Would you contact the agency in the future if you or your child experienced similar problems?
13. Overall, how would you say the CRYPAR referral has influenced your son/ daughter's behavior?
14. Since CRYPAR would you say you are more aware of agencies and support services in the local area that can assist your family?
15. Would you recommend the CRYPAR program to other parents whose children engage in anti-social or risk-taking behavior?
  - a. If yes, how would you describe the benefits to other parents?
  - b. If no, please explain why you would not recommend the referral program to others.