The therapeutic framework of Te Whare Whakapiki Wairua/
The Alcohol and Other Drug Treatment Court

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Kotahi ano te kohao o te ngira
E kuhana ai te miro mà, te miro pango, te miro whero.
I muri i ahau, kia mau ki te aroha
ki te ture me te whakapono.

There is but one eye of the needle through which the white, black and red threads must pass.
After I am gone, hold fast to love, to the law, and to resolute faith.

Whakatauākī o Pōtatau Te Wherowhero
The first Māori King at his coronation, 1858.
Ngā whenu raranga metaphor

The use of the ngā whenu raranga/weaving strands metaphor has been adopted for use in this case study of Te Whare Whakapiki Wariua/The Alcohol and Other Drug Treatment Court.

The art of weaving is an ancient practice used by the earliest tūpuna (ancestors) who had to develop new and creative ways of adapting to their new environment. The fibres of plants such as harakeke (New Zealand flax) were used to plait or weave into kākahu (clothing), kete (basket), whariki (mat), taura (rope) and kupenga (net).

The making of a korowai (cloak) provides the metaphor for outlining the four strands in this report. The four strands are depicted in different colours, mirroring the four colour fibres used by Māori weavers. These include black extracted from the iron-tannins of Hīnau bark; yellow from the Raurēkau bark; reddish/brown from the Tānekaha bark; and the natural undyed appears white (Smitha & Te Kanawab, 2008). In this report, these colours have been used to represent each of the strands in this report: (1) Pango/black represents Law; (2) Kōwhai/yellow for U.S. Best Practice; (3) Mā/white for Recovery; and (4) Whero/red for the Lore.
Introduction

Ngā Whenu Raranga/Weaving strands: #1 is the first of four summary reports from our case study that aimed to explore the meaning and application of the term ‘therapeutic’ in Te Whare Whakapiki Wairua/The Alcohol and Other Drug Treatment Court (AODT Court). This report outlines four strands that, when carefully woven together, comprise the therapeutic framework of the AODT Court. These have been interpreted as four strands: (1) Pango/Law, (2) Kōwhai/U.S. Best Practice, (3) Mā/Recovery and (4) Whero/Lore. Drawing on interviews with AODT Court team members, courtroom observations, relevant documentation and international drug court best practice literature, this report describes each of the four strands. The next three reports will provide an illustration of the weaving of the four strands in action by focusing on the AODT Court processes, roles and challenges associated with the application of the therapeutic framework.

The therapeutic framework reported here is the result of an interpretative endeavour in that it draws on the perspectives of professionals in the field but also includes a detailed analysis by the researchers who inevitably bring their own lens to the research. The report describes the therapeutic framework of the AODT Court based on data collected by the researchers; it does not provide a critical analysis of the AODT Court or draw on all the international literature on drug courts. As the AODT Court pilot progresses, the benefits of, and challenges to, this therapeutic framework will evolve. The next three summary reports explore the therapeutic framework in its living form, recognising the weaving of the four strands in the AODT Court is simultaneously a philosophical and practical endeavour. It is intended that the reports provide a snapshot of the AODT Court. Further interpretations will be developed over time, grounding a longitudinal view of the AODT Court and comparisons to the international literature (See methodology summary at the end of this report for further details of this research programme).
INTRODUCTION

The AODT Court weaves together the separate sectors of justice, health and social services through a strong focus on recovery from addiction to reduce reoffending. This focus radically transforms the traditional role of the law, legal processes and the roles of legal professionals (the ‘law’ strand). The AODT Court is also strongly underpinned by existing best practice, largely from the United States, that provides the evidence base for many practices in the AODT Court (the ‘U.S. Best Practice’ strand). Simultaneously, the AODT Court shapes practices in relation to recovery in New Zealand by incorporating it into the criminal justice system and creating different demands of addiction professionals and services (the ‘recovery’ strand). To address the cultural needs of offenders, the AODT Court is endeavouring to actualise the principles of the Tiriti o Waitangi (Treaty of Waitangi) by weaving aspects of tikanga (traditional rules and customs of Māori) into the criminal justice system (the ‘Lore’ strand). This report interprets the four strands of Law, U.S. Best Practice, Recovery and Lore that are woven together to produce the therapeutic framework for the AODT Court. Each of the strands shape the other as the court team, participants and wider AODT Court community interact together.
The AODT Court originated as a judicial response to the repetitious manner in which AOD dependent people present within the criminal justice system. In discussing the rationale for the AODT Court, many of the legal professionals interviewed for this case study recounted stories of the same people recycling through the criminal justice system, despite being sentenced to harsh penalties, such as periods of incarceration:

“There is a case example of one of my clients in the drug court. I dealt with him as the duty lawyer over the years... many, many, many times... There he’d be, drunk again, offended again and it was just always the same cycle. He’d do his prison sentence and come out and a couple of months later would be back in again (AODT Court team #19).

For the AOD [alcohol and other drug] dependent user, definitely you see them repeatedly coming back. Not only do they come back but they come back on their fresh offending usually along with breaches of their last court order ... So they are people who are cycling and recycling through the system and obviously causing a lot of harm to the community and their own lives; they are very unwell (AODT Court team #37).

These observations of recidivism led many legal professionals to question the effectiveness of mainstream court processes in reducing reoffending. This prompted them to reflect on the wider causes of offending for this group of people, and seek alternative legal processes which could lead to long-lasting positive outcomes.

... When you look at the whole criminal justice system... What’s the purpose of it? What’s the real aim of it? What is it trying to achieve? To entirely focus on the behaviour of a person and the notion of punishment and retribution, which is the main aim of the criminal justice system, it doesn’t actually change anything; it doesn’t improve things. To look at the bigger picture and what’s the cause of that behaviour, what’s behind it, we can then maybe make long-term changes, not just for the individual but also for the families and for society in general, for the whole country (AODT Court team #12).

The AODT Court is a five year pilot established to assess the effectiveness of a pre-sentence drug court model in New Zealand. AODT Court is an abstinence based model that offers offenders whose offending is driven by addiction an alternative pathway from imprisonment. The court operates post-plea and pre-sentence whereby the sentence is deferred while the offender undertakes the treatment plan dictated and monitored by the court over a period of approximately 15-18 months. The AODT Court operates as a specialist court within the existing district court legislation. The criminal justice aims are to reduce reoffending and reduce the use of imprisonment (Ministry of Justice, 2014).
In their search for a more effective judicial system for offenders with addiction problems, AODT Court judges visited the United States and Australian drug courts and the National Association of Drug Court Professionals (NADCP) conferences. These New Zealand judges were deeply inspired by the innovative practices within the international courts:

I found it [attending the NADCP conference] quite a profound experience for two reasons. Firstly, I was enormously impressed in the quality of information that was disseminated at the conference. Secondly, I also attended a drug court over there ... and that was an amazing court. I was able to go to that court on three different days and it had an enormous impact on me. I really believed that I was seeing how those cases should best be dealt with and it was very different from our normal approach here (AODT Court #37).

After a lengthy campaign led by the AODT Court judges and other members of the judiciary, the AODT Court was implemented (see Thom, 2015 for elaboration on the development of the AODT Court). Immediate support was received for the AODT Court from key sections within the government responsible for health and Māori development, and non-governmental organisations (NGOs) providing addiction treatment. The Ministry of Justice also then came on board in a critical and comprehensive way.

Our argument was this: [addiction] is a health issue, it just manifests in my patch. You cannot expect me, in other words, as a judge in the district court, to assume complete responsibility for these behaviours when they are driven by addiction. They [Health, Māori development and NGOs] accepted that immediately and in fact the overwhelming response ... was preceded with the statements almost invariably “what has taken you so long?” (AODT Court #38)

The response from the health sector reflects New Zealand’s drug policy of harm reduction. Drug policy is underpinned by the principle of harm minimisation, or the understanding that harms from drug use are to be considered a health issue, and responded to accordingly (Inter-Agency on Drugs, 2015). Viewing addiction as primarily a health problem is central to the philosophy of the AODT Court.

Developing an AODT Court pilot in Auckland and Waitakere District Courts was later strengthened in 2011 when the New Zealand Law Commission produced a report entitled Controlling and regulating drugs: A review of the Misuse of Drugs Act 1975. After becoming aware of the AODT Court judges’ proposal to start an AODT Court, the New Zealand Law Commission recommended in their report the piloting of a drug court in New Zealand. The New Zealand Law Commission’s report suggested the most fundamental problem with the Misuse of Drugs Act 1975 is that it is poorly aligned with drug policy, and indicated “the use of drugs, even by those who are dependent on them, is treated as a matter solely for the criminal law rather than health policy”. The report concluded that “the abuse of drugs is both a health and criminal public policy problem and, as a matter of principle, drug laws should facilitate a multi-sectoral response designed to minimise drug-related harms” (para. 1.61 p. 51). The AODT Court aligns with the Law Commission’s ambition for drug laws; to facilitate multi-sectoral approaches to drug-related harm in a way that balances justice and health priorities.

The criminal justice aims of the AODT Court are to provide an alternative, non-adversarial approach for responding to criminal offending where it is driven by a dependency on alcohol or other drugs. The AODT Court practices this by using the sentencing process as a mechanism to facilitate positive outcomes for participants, eliminate or reduce their risk of reoffending and, increase public safety. The focus on participants’ wellbeing, therefore, is balanced by an emphasis on court rules, legal conditions, and accountability to victims and the community for offending:

So from a therapeutic angle you know that whilst, for example, rules, the court rules, the drug court rules, the bail conditions, while they can at times seem unreasonable to the participants, they have to be tailored in such a way for their [participants’] own benefit. From a therapeutic angle everything is designed...
to achieve that ultimate outcome of treating the addiction, addressing the reoffending and just making them productive members of the community. A lot of these participants, they are an absolute horrendous cost to the community whether it be through the justice system, the health system, the police, the welfare. All they do is they drain, they drain every resource, every imaginable resource from the community so one of the goals is to turn that around and to make them contribute to the community. You know, they go into the court, one of the rules is they must start doing voluntary community work. To graduate from the court they must have a job, a proper job... [so] they can slowly start giving back to the community that they've actually taken so much from (AODT Court team #20).

For one AODT Court judge, reducing reoffending goes to the heart of sentencing by addressing the offenders underlying issues that contribute to criminal behaviour:

... I think for me if there was a single purpose [to sentencing] it would be to reduce the risk of reoffending because the primary purpose would have to be about public protection and public safety... [In the AODT Court] What you are saying to your drug addicted offender is everything I will do with you leading up to sentence is going to be aimed at reducing the risk of you reoffending because if I can reduce the risk of you reoffending, the public is safer and I think that is what I am here to do as a judge (AODT Court team #38).

As already noted in the Law strand, the AODT Court is a pilot specialist court that operates within existing New Zealand legislation. Section 25 of the Sentencing Act 2002 allows for a judge to explicitly adjourn a sentencing matter to enable an offender to access rehabilitation. This can be contrasted with other jurisdictions, where special statutes may be developed for drug courts. The AODT Court, therefore, did not require amendments to the law, rather it places utmost importance on reducing reoffending through rehabilitation with accountability, not solely retribution.

Some of the legal professionals described the application of law and legal practice differently in this way, for example as a “healing approach” (AODT Court team #12), “holistic” (AODT Court team #38) or a “human approach” (AODT Court team #13). This different view of legal process and practice resonates strongly with the international scholarship that has been coined the ‘comprehensive law movement’. Daicoff (2000) used the term ‘comprehensive law movement’ to describe the collective of alternative non-adversarial approaches to law and legal practice that challenge the current legal system’s heavy reliance on the adversarial retributive model (Brookbanks, 2015). Vectors of this movement include therapeutic jurisprudence, restorative justice, preventative law, procedural justice, collaborative justice and holistic law (see glossary for descriptions of each vector). All of these vectors have influenced problem solving or solution focused courts internationally. Specifically, therapeutic jurisprudence, procedural justice, and restorative justice have significantly helped shape the New Zealand specialist court practices (Thom, 2015).

In conclusion, the Law strand has described the overarching acknowledgment by legal professionals that traditional court processes are not sufficiently effective and there was a need for change. It detailed how the AODT Court judges were inspired by international best practice on drug courts and how the definition of Law might be viewed differently as an emerging comprehensive law movement that introduces the concepts of health and therapy into its judicial system. In this way, the law allows for deeper problems to be addressed at both the individual (offender) and at the societal level by creating systems which have proven to build longer-lasting changes to reducing reoffending.
The second strand of the AODT Court therapeutic framework is the evidence provided from over 20 years of research on drug court practices. Specifically, the AODT Court functions according to this evidence-based U.S. best practice, which is represented in the drug court guide Defining Drug Courts: Ten Key Components (Ten Key Components, 1997) and Supplementary Adult Drug Court Best Practice Standards (Volume I & II).

The Ten Key Components (1997) can be succinctly summarised as expectations that drug courts:

1. Integrate alcohol and other drug treatment services within justice system case processing
2. Use a non-adversarial approach
3. Allow early and prompt intervention for eligible participants
4. Provide access to a continuum of treatment and rehabilitation services
5. Monitor participants via drug testing
6. Use a coordinated strategy to govern compliance
7. Use ongoing judicial interaction
8. Evaluate progress and effectiveness
9. Provide continuing interdisciplinary education for the team
10. Forge partnerships with agencies and community organisations.

We said to ourselves this is an evidence-based model, it has been demonstrated to work, there are ten key components... It is not a recent epiphany that we have come up with; this is an evidence-based model (AODT Court team #38).

Research has indicated that drug courts are more likely to reach their goals if they closely adhere to the Ten Key Components. Failure to apply the Ten Key Components has led to lower graduation rates, higher recidivism and lower cost savings. In fact, research suggests the effectiveness and cost-effectiveness of drug courts is lowered by as much as half (Carey et al., 2012; Guitierrez & Bourgon, 2012; Zweig et al., 2012).

The Adult Drug Court Best Practice Standards (Volumes I, 2013 & II, 2015) provide further guidance as to how to operationalise the Ten Key Components. Volume I (2013) of these of this operational guide directs attention to best practices in relation to: 1) target populations; 2) historically disadvantaged groups; 3) roles and responsibilities of the judge; 4) incentives, sanctions and therapeutic adjustments; and, 5) substance abuse treatment. During our courtroom observations it was common to observe these five standards working in practice. For example, in accordance with standard two, ‘historically disadvantaged groups’, during the determination hearings the AODT Court judge spoke of purposeful targeting and consideration of Māori applicants. This was in direct response policy priorities towards ‘drivers of crime’ and the gross overrepresentation of Māori in the criminal justice system.

Volume II (2015) continues with standards six to ten which focus on best practice approaches for successful AODT Courts. These are 6) complementary treatment and social services; 7) drug and alcohol testing; 8) the multidisciplinary team workings; 9) caseloads; 10) monitoring and evaluation. One example of the AODT Court attending to standard six is the employment of a Housing Coordinator as part of the wider AODT Court team. The housing coordinator’s role is to assist participants’ to secure tenancy, particularly in the third phase of the AODT Court treatment programme. The shaping of the New Zealand AODT Court practices according to U.S. best practice will be discussed in the next three summary reports. For now, see five examples in the box on the following page.
The New Zealand AODT Court adheres to the drug court model outlined in the Ten Key Components. Five examples of the AODT Court’s adherence to the US best practice are provided here. The next two reports will demonstrate the alignment to the Ten Key Components in greater detail:

- Best Practice example 1: The AODT Court coordinates an array of services to respond to offenders dependent on alcohol or other drugs (see diagram under ‘recovery’ strand), thereby integrating treatment services within criminal justice processing.

- Best Practice example 2: A non-adversarial approach is used that brings together the professional team including the AODT Court judges, court coordinators, case managers, defence counsel, and police prosecution, pou oranga (cultural advisor), probation officers and recovery-focused peer support workers.

- Best Practice example 3: Participants undertake a three-phased drug court programme characterised by a: 1) intensive treatment phase, 2) stabilisation phase, and a 3) transition phase. In the AODT Court phase 1 involves intensive treatment and rehabilitation, random drug testing and frequent appearances in court for judicial monitoring. Phases 2 and 3 continue to include treatment and rehabilitation, inclusive of trauma counselling and behavioural modification programmes, and drug testing, but with increasing intervals between court appearances and focus is placed on longer-term solutions including training, employment and working towards personal goals. Phase 3 also includes preparations for transitioning into living in the community in a relatively stable state of recovery. Participants exit the AODT Court by a formal graduation process following successful completion of the three phases or termination due to serious non-compliance.

- Best Practice example 4: Graduated incentives and sanctions are used throughout the three phases. Incentives may include encouragement or praise from the AODT Court judges, ceremonies to mark advancement through the three stages or decreased frequency of court appearances. Non-compliance to the AODT Court treatment programme may be met with the sanctions such as being called last in court, being ‘reprimanded’ with combinations of having to appear for more frequent monitoring, doing written work requiring reflection on the behaviours of concern, having to address open court about such matters, and/or reconsideration of bail conditions. If the behaviour is serious enough, an exit hearing will be held where the participant has to justify why they should be allowed to retain their place in the court; community service work, warnings from the AODT Court judge in open court, or in serious cases periods of incarceration.

- Best Practice example 5: The AODT Court is supported and assisted by the Community Advisory Group.
Recovery is a key strand of the therapeutic framework and influences many of the practices in the AODT Court. The Substance Abuse and Mental Health Services Administration (SAMHSA) defined recovery as being: “A process of change through which individuals improve their health and wellness, live a self-directed life, and strive to reach their full potential” (2011). This definition recognises the psychological, spiritual, and social dimensions of recovery and includes harm reduction inclusive of abstinence.

A particular form of recovery is practised in the AODT Court, characterised by its abstinence based model and shaped by the Twelve-Step Fellowship and the addiction-related services provided by the AODT Court Treatment Provider Network. The next two reports will explore in greater detail how the AODT Court professionals practise and shape the AODT Courts’ interpretation of recovery and the challenges this new interpretation brings. The focus of this report is to describe recovery as it is practiced in the AODT Court.

As with most drug court models internationally, the AODT Courts use ‘coerced treatment’ (NADCP, 2013). Legally coerced treatment aims to divert offenders from imprisonment where their offending is seen as strongly associated with substance use (Bright & Martire, 2013). As discussed in the law strand, by providing an alternative to traditional criminal justice processes the belief is that engagement in treatment will reduce drug-related harm and reoffending (Seddon, 2007). There is much debate to the justifiability of coerced treatment in the judicial context, with a particular focus on the moral basis of enforcement (Klag, O’Callaghan & Creed, 2005; Seddon, 2007). AODT Court team #3 reflected on this moral conflict, suggesting that public health approaches that emphasise recovery should be built on collaborative therapeutic relationships.

When someone comes into the court they already know that your goal is abstinence. It needs to be abstinence before you come to us actually, otherwise you are going to have to get on board with it really quickly! So your goal is abstinence and its going be treatment as directed by us, which is [the] antithesis of how we usually work with people...So it almost feels like recovery on our terms or our definition of recovery is the recovery that you’ll get (AODT Court team #3).

In many treatment services outside the AODT Court, therefore, there may be an expectation that people engage in treatment without coercion, on their own internal motivation alone.

Addiction-related treatment is determined by the AODT Court team led by the judge. The AODT Court team expect that the externally-driven direction to treatment allows participants the opportunity to internalise motivation to change. The ultimate goal is that this process of coercion creates long term positive change in the life of participants, and therefore their whānau and the community. An AODT Court lawyer described
this approach and provided an example of its effectiveness in one participant’s situation:

I think we have to accept with our participants that many of them are being forced to accept the treatment that they have been given and we say to them, “you’re not dictating what your treatment plan is going to be. So and so might have gone off to ‘Higher Ground’ and then done ‘One For the Road’ and gone to ‘CADs IOP’ [but] no you are not going to [Salvation Army’s] ‘90 days’ whether you like it or not! This is what your treatment plan is; we know what’s best for you, not you.’ I do remember one of my participants who is going to be graduating now at Higher Ground and in the early stage if you said to him, ‘how’s it going?’ He would have said, ‘I absolutely hate it’. But I said to him the other day, ‘I can actually see when you resigned yourself to it, let go and then all of a sudden there’s this almost physical change to you that you could actually see when you just surrendered to the programme.’ So it does, the therapeutic process does work in that sense (AODT Court team #11).

The external authority of the AODT Court is harassed by the incentive of an alternative pathway to imprisonment and the implementation of a range of approaches that compel the participant to comply with the programme.

The abstinence based model can be contrasted to a public health model that employs harm reduction. Harm reduction is defined as encompassing “the prevention and reduction of health, social and economic harms experienced by individuals, their families and friends, communities and society from AOD use.” (Inter-Agency Committee on Drugs, 2015, p. 3). There are many AOD clinicians who practice a harm reduction approach where the aim may be to limit problematic substance use (as in New Zealand’s National Drug Policy referenced in the ‘law’ strand). As AODT Court team #5 highlights, abstinence includes harm reduction for some people:

A lot [of] my background has been harm reduction, as opposed to total abstinence based and the harm reduction models ends with abstinence; it’s a goal of abstinence, it doesn’t rule that out but it does come more
from, “oh right let’s make it a realistic goal to reach abstinence” (AODT Court team #5).

Although some staff in the AODT Court treatment providers engage in harm-reduction interventions, it is important to note that abstinence is the clear objective that the AODT Court has for participants. However, in the course of an AODT Court participants’ journey, the AODT Court team recognises that lapses on the way to abstinence, are a reality of addiction. This view is reflected in the AODT Court Handbook:

As addiction is a chronic, relapsing condition, it is anticipated that there may be some lapses in AOD use while the participant is before the AODT Court, particularly at the early stage. Where such a lapse occurs, if the participant is meeting his/her proximal goals (more immediate) goals of attending court appearances, treatment and all other support programmes, the AODT Court would anticipate applying a treatment response to the lapse situation in the first instance (Ministry of Justice, 2014, p 15).

At a broader level, the AODT Court model was also conceptualised by one AODT Court judge as akin to a “chronic disease management model” used in health systems (AODT Court team #38). Addiction, in this sense, was understood by this judge, and some other professionals interviewed, as a disease. This way of thinking about addiction is comparable to drug courts in the United States which, according to American judges interviewed in Nolan’s research, have argued drug courts signify a move away from traditional justice paradigms that saw addiction as a choice between right and wrong, to seeing addiction as a biopsychosocial disease (2001, 133-134). Treatment of the disease, rather than punishment for moral failure became the focus of drug courts. An AODT Court lawyer explained this paradigm shift between addiction as a moral failing versus disease in the New Zealand context:

I guess the big part of the drug court is that it’s a treatment court. So treatment is the operative word and I really do think it sets it aside from all of the rest of the courts... In any other situation it wouldn’t be. So in [a mainstream] court you would be looking at maybe the remorse or whatever the issues are for the offender or the lack of remorse. Because it [the AODT Court] is so firmly focused on treatment we have to make decisions as a team.. So there’s tension between justice and health, but the focus, because it’s a treatment court, the focus is on treatment and we defer to treatment (AODT Court team #11).

The conceptualisation of addiction as a disease also aligns with the idea that abstinence is the only policy to ensure long-term positive change. The 12-step fellowship framework also underpins some of the treatment services that support the AODT Court (see glossary for description of different treatment services). This was evident in our observations of the AODT Court where the writings of the 12-step fellowship feature in the opening of pre-court meetings, as AODT Court team #20 explained:

Every Friday morning we always start with one of the readings from the book ‘Just for Today’ and all those sort of guiding principles that AA/NA have worked alongside for years and years. Those principles really come to play in the court (AODT Court team #20).

Likewise we observed the importance placed on the 12-Steps in the AODT Court. Firstly, participants are encouraged to “surrender” to the idea that they have no control over their addiction and will always be an "addict" or "alcoholic" and acknowledge that their “journey to recovery” from addiction was the primary goal above other happenings in their life. One AODT Court team member explained the tension that this therapeutic perspective has with people who use substances problematically:

That’s what a lot of addicts struggle with... Being able to relinquish that sense of control over your addiction and stuff and just surrendering to that whole idea that people, places and things, you can’t change them, you can only change yourself, which is a really important tenet of recovery (AODT Court team #30).

This therapeutic perspective is reinforced by the taonga (gift) on the wall of the AODT Court in Auckland and Waitakere (see next page). Created by Associate Professor Steve Gibbs of the Māori art institute, Toi Hou Kura, the taonga are composed of three panels of art symbolising the three stages of recovery – Serenity, Courage and Wisdom. These correspond to the Serenity Prayer used by the 12-step fellowship.
In the third phase of the programme, the participants begin to work with whānau to build relationships, gain employment or training, and there is also a strong focus to give back to the community. Some of this work is considered to illustrate participants’ remorse for the extent of harm they have caused. This phase is also a point at which participants’ begin to take ownership for their own lives and build a supportive long term community around them that is separate from the AODT Court. From this perspective, recovery is the participants’ responsibility, and the responsibility of their personal recovery team:

Our job should be to do ourselves out of a job really. If they’re still dependent on us at graduation then I don’t think it bodes particularly well for them really. Support shouldn’t even be the person at probation because that’s [only] another year, it should be the people’s ‘tight five’ or family members or whoever, it should be something else. So when something happens the phone call is to them, not to us (AODT Court team #3).

The 12-step fellowship, therefore, plays an important part in providing a supportive community for participants long term. Attendance at the 12-step fellowship meetings is strongly encouraged in the AODT Court, and is recognised by the judges as relevant to participants’ ability to continue in their recovery beyond the court.

Similarly, the AODT Court has experienced strong support from the 12-Step Fellowship. Individuals from the fellowship are present in open court each week in both courts. Referred to as “Friends of the Court” the 12-step members provide further support for participants and sometimes provide words of encouragement in the open court. One judge noted the significant contrast in court tradition that this practice has created:

That is unusual too, to have someone at the back of the court to stand up and say, ‘can I say something?’ I mean more often than not the judge [in usual court] is going to say, ‘absolutely not! Sit down and if you don’t sit down and be quiet you can leave the room.’ So you have
got input [in the AODT Court] from people in recovery and the participants almost always go thanks [to the Friends of the Court]... They are there every Friday and when they turn up in court there are these familiar faces. I get these guys with 22 page criminal histories, really tough, but as they are leaving court they are giving [Friends of the Court] a big hug or a big kiss. I watch it and I think this is extraordinary (AODT Court team #38).

Alongside the evidence base provided by the U.S. drug court movement, this strong and welcome involvement of 12-Step fellowship and participant attendance at 12-Step Fellowship meetings in New Zealand is considered a unique and promising aspect for enhancing success in reducing addiction-related offending:

In addition to being able to benefit from the 20 plus years of drug court best practice evidence from the United States, U.S. expert #1 has said we have the potential to be the best drug courts in the world because of our peer support, our determination to deliver a culturally appropriate model and our ability to direct them into the AA/NA meetings. Of course we can’t force them to attend these meetings but there is an expectation that they attend, and that works reasonably well. If they don’t attend, we take that very seriously as the whole purpose of attending these meetings is to build up strong pro-social links in the recovery community, which will endure long after they have completed the AODT Court programme (AODT Court team #38).

*U.S. expert #1 was instrumental to the development and implementation of the AODT Court pilot.

In conclusion, the recovery strand is key to the therapeutic framework of the AODT Court. The use of recovery reflects a change from traditional adversarial ‘moral-failure’ based approaches towards addiction as a disease that requires healthcare. The 12-steps guides the philosophical structure of recovery planning, which corresponds with the AODT Court’s requirement of abstinence from substances. The AODT Court’s interpretation of recovery focuses on long-term and deep rooted change, and, in this way, includes not only the participant and their courtroom interactions, but the participants’ recovery in the community. The AODT Court programme has been acknowledged internationally as strongly benefiting from the involvement of 12-step fellowship, and inclusion of peer support workers. The cultural responsiveness of the AODT Court programme has also been positively acknowledged, to which the report now describes under the fourth strand of Lore.
Although the AODT Court is modelled on similar courts operating in the United States, the interviews with AODT Court team members suggested that there are unique and important aspects within the New Zealand context that relate to cultural responsiveness and partnership with Māori. This section focuses on the final strand of Lore. Lore are diverse and living guidelines for living and interacting with others. These have been referred to as Māori customs, legal obligations and conditions (Kawharu & Henare, 2001). Described here is the cultural framework coined the ‘two house model’, which the pou oranga has developed alongside kaumātua from Ngāti Whātua and the AODT Court Māori cultural advisory group (composed of cultural advisors from each of the treatment providers, representatives of Hoani Waititi Marae and wider Māori service providers).

By the end of five years, my hope is that we have got an example, a model, that an iwi can trace their footsteps right back to here and that it’s working and that there’s commitment at that end and having their ones be of value there, there, and there. That’s a complete picture in my eyes because now we have provided a sustainable future where iwi are involved in the journey: iwi, hapū, whānau (AODT Court team #21).

The pou oranga role was established in October 2013. As with the role of all AODT Court professionals, the pou oranga role is developing as the pilot progresses. The person employed in the position brings knowledge of te reo, tikanga Māori and experience in providing cultural expertise in a treatment setting as well as extensive knowledge of addiction recovery and treatment issues. The role represents a strong commitment by the judiciary to the principles of the Tiriti o Waitangi and tikanga:

It is about partnership and about participation with Māori, not the court dictating to Māori what the court will be for Māori. We judges take seriously the concept of tikanga (sometimes referred to as Kupe’s laws) and also note it conceptualisation as a system of values and principles which have application in the AODT Court context (AODT Court team #37).

The two house model in itself is representative of weaving strands by mapping the traditional courtroom to Tumutumuwhenua, the tupuna whare on Ōrākei marae, while simultaneously relating to these two houses (courtroom and Tumutumuwhenua) to the three stages of recovery: serenity/te wairua mārie, courage/manawanui and wisdom/māramatanga. The two house model is still in development and recently additional concepts have been added that speak to four central pou (posts supporting the ridgepole of the Tumutumuwhenua) that symbolise the centre pillars that hold up participants and roof of the AODT Court. This also aligns with Takarangi Competency Framework (Matua Raki, 2010) used by practitioners in the addiction and mental health sectors. This section also provides a description of the four pou.

The intention of the two house model is to provide Māori structure to the AODT Court that are reflective of tikanga and kawa (processes) commonly practiced on marae throughout Aotearoa. It is acknowledged, however, by the pou oranga and wider AODT Court stakeholders that there is room for variation, which allows local manu whenua to express their unique tikanga and kawa practised in their takiwā (region). This section, for example, outlines the two house model specific to the Tumutumuwhenua and the Auckland AODT Court. Overall, the cultural framework within the AODT Court is dynamic in nature, therefore, this section uses still images in an attempt to illustrate this dynamism.

The pou oranga explained that the foundation for the two house model began with the taonga:

And so that (taonga) was up on the wall and brought about the weaving of the two houses; the similarity could be mapped (AODT Court team #21).
wisdom. The two house model has mapped these three stages of recovery onto the physical layout of the courtroom and Tumutumuwhenua on Ōrākei marae, thereby making connections between the two houses. This connecting of the two houses creates a guide for culturally meaningful and responsive practices in the AODT Court and treatment provision. The following outlines the house model, provides a highlight on the four pou, and then gives brief examples of the two house model in its living form.

The two house model

The pou oranga explained how in the two house model, the three stages of recovery are mapped onto the physical layout of the courtroom. The courtroom is divided into three domains: entrance, mid-section and the bench:

If you look at the courtroom, you have got three sections in the court room: [1] you have got the public gallery, [2] then you have got the mid-section where prosecution, lawyers and case managers sit, [3] then you have got the last section, which is where the judge sits (AODT Court team #21).

He then explained the representativeness of recovery, symbolised in the panel art, as manifest in the courtroom space, through the interactions that occur within each of the three courtroom domains:

So the idea of taking those [panels of art] off the wall, literally... and placing them in the [court]house. [For example] you enter into the public gallery and that realm, is the realm of serenity, so you want

peace to abide in the [court]house as people enter ...

In the midsection is where a lot of rigorous conversations are had, courageous conversation are had in the court.

And then finally, in the courtroom you have the bench, which is where judgments or conversations are had [that are] wisdom based. Because in pre-court you gather all the information, so now you have all the concepts, ideas and the wisdom to deliver back (AODT Court team #21).

The three core domains of Tumutumuwhenua parallel the courtroom space in the two house model. The pou oranga also explained how the three stages of recovery are represented in the purpose and practices that occur in the whare:

Likewise when you enter the tupuna whare, same goes, Rongomaraeroa (God of peace): [that you enter the] house in peace. So there we have correlation straight away, great, OK, so that fits upon entry.

Then you look at Tumutumuwhenua. When the pōwhiri (welcome) begins and the whaikōrero (formal speech) begins, it’s in the midsection Tumutumuwhenua at this house. So then there was a direct correlation. It sat right. So we can agree on these [two] domains.

In the tupuna whare, which you have from that pou, which is all in here to the wall, is ngā tupuna (ancestors), the puna mātauranga, or the access to the wisdom of the past, the future and the present (AODT Court team #21).
A highlight on the four pou

Within the two house model, the four pou that hold up the tāhuhu (the main-ridge pole in a whare tūpuna) represent the core principles that support the AODT Court participants and the AODT Court. Below is an descriptive outline of the four pou in which we rely heavily on documentation provided to us by the pou oranga.

1) Poutāhuhu or front post supporting the ridge pole in the front wall inside a meeting house. This pou is concerned with the birth of man and woman, with the generation of life and the welfare of humanity. It speaks to the concept of whānau and the inter-connectedness of tāhuhu to their many parts.

2) Pou tokomanawa tuatahi or the first centre pole supporting the ridge pole of a meeting house. This pou represents the Māori worldview that each AODT Court must practice in accordance to. Specifically, pou tokomanawa represents three universal Māori values of wairua, tumanako, and tika that speak to the spiritual, therapeutic, and judicial realms that underpin the AODT Court. Specifically, te taha wairua acknowledges tāhuhu existence in the greater scheme of things; tumanako provides a sense of hope through treatment and the removal of addiction; and tika, provides the correct pathway from crime through the criminal justice system.

3) Pou tokomanawa tuarua or the second centre pole supporting the ridge pole of a meeting house. This pou represents the special relationship between the crown and mana whenua forged through the Treaty of Waitangi.

4) Pou te wharau or the centre post supporting the back of the meeting house. This pou symbolises six guiding principles for the AODT Court itself and AODT Court participants, their whānau and the wider community. These include: aroha (compassion), manaakitanga (care), tino rangatiratanga (independence), āta (behaviour in relationships with people, kaupapa and environments), whānau and tua kiri (identity).

Across the cultural framework is a tukutuku panel that symbolises the interweaving of the AODT Court with AODT Court participants, their whānau, service providers, iwi, marae and the wider community. The tukutuku panel is composed of four main parts: one part made from natural materials, two parts rigid, and one flexible. Flexible material is threaded through vertical stakes and horizontal rods to form the patterns and designs of the tukutuku. The tukukuku panels are considered to be both functional and significant in origin.

The two house model in its living form

The pou oranga considers cultural interventions for participants across a continuum as part of the cultural framework of the AODT. The cultural interventions range from when participants enter to well after they leave the AODT Court programme. The pou oranga proposed that cultural interventions could occur through tikanga that creates connectedness as early as when a potential participant applies for a place in the AODT Court:

So ideally, in my opinion, the continuum is to get them right at custody and when they apply [to the AODT programme], and that be the first point of cultural intervention. [It could be] as simple as just having a meeting with them, having a karakia with them and just making them feel a part of [the process] at this point of the journey (AODT Court team #21).

This quote shows the tikanga of the AODT Court processes should mirror the tikanga and marae kawa (processes) of the pōwhiri. In this way, the participant is extended an invitation and welcomed into the two houses and shown arohatanga (love), manaakitanga (hospitality), and whanaungatanga (connectedness). Through the latter, participants are embraced and welcomed as whānau, with the reciprocal responsibilities and accountabilities. Participants’ spiritual needs, therefore, are met in custody and they remain supported till they
exit or graduate.

The pou oranga also emphasised the importance of collecting information related to participants’ culture at the time of referral to the AODT Court. (This process of referral is currently assigned to Community Alcohol and Drugs Service (CADS)). He has instigated the collection of four pieces of information at the time of the assessment, including: 1) whether the participant identifies as having Māori ancestry; 2) if they are interested in finding out more about their Māori heritage; 3) if they or their whānau know the name of their iwi and marae; and 4) what in particular they would like to know and develop. The pou oranga then draws on that initial referral information for determination hearings, with the hope that it also influences the case manager’s pathway for culturally-appropriate treatment.

For the duration of the AODT Court programme, tikanga guides the team and participants’ interactions. The AODT Court pre-court and open court is opened and closed by way of waiata (song) and karakia (prayer) led by the pou oranga. The pou oranga is central to the graduation of AODT Court participants and ensures there is a haka in court to acknowledge their achievements. Outside the AODT Court, there are two ceremonies a year for all graduates where they are acknowledged for their continued commitment to their recovery and all are given a specially blessed pounamu (greenstone) taonga (treasure). These ceremonies are named ‘He Takitini’ meaning ‘the many who stand together’ which represents all those in recovery from substance use.

The pou oranga role is also committed to continuing to support the AODT team in their development of cultural competency. As mentioned in the introduction to this section, the Takarangi Competency Framework (2010) is currently being implemented to help the AODT Court team better understand and work with Māori participants.

Finally, the cultural framework places importance on connection and forgiveness with loved ones in order to fully heal. This is a key role of the pou oranga:

There is a huge cultural disconnect in Auckland, we all know that. Some of these guys just don’t want to know where they are from or they think they don’t want to know, they feel a huge sense of whakamā; they are ashamed. So they are ashamed of themselves, they don’t think the family want to know, they have let their family down so many times and often families have just cut them off like, ‘enough’, they have been stealing from me, they are meth addicts, they have ruined our lives, I cannot do this anymore…. So there is a lot of healing to do, there is a lot of reconnection to do and I think that is a huge piece of work for our pou oranga (AODT Court team #38).

Additionally, community partnership facilitated by the pou oranga is needed to ensure that the AODT Court develops cultural competence as determined by Māori:

Also to be out there educating the wider Māori community about the work of the court and what was involved, but very importantly be a conduit through which the wider Māori community could inform the development of the court in a way that is true to the Treaty of Waitangi (AODT Court team #37).

In conclusion, the AODT Court cultural framework was represented by the pou oranga in which a detailed illustration was depicted of how the different paradigms work together to create a unified treatment model in the context of justice. The stages of Recovery - serenity, courage and wisdom- are given life within two houses, the space of the AODT Court and within the whare on Orākei marae. Continued development of cultural responsiveness is recommended by the pou oranga to strengthen the AODT Court framework. Māori participants could be advantaged by early identification in the AODT Court referral process and participants’ healing, as well as the AODT Court itself, might be improved by increased focus on whanaungatanga (connectedness) and greater community partnership with Māori.
CONCLUSION:
The therapeutic framework of Te Whare Whakapiki Wairua / The Alcohol and Other Drug Treatment Court

Lore completes the weaving of the four strands, creating the therapeutic framework of the AODT Court in the New Zealand context. In this report, Law, Recovery, US Best Practice and Lore are woven together in unique, dynamic and changing ways to contribute to Aoteoroa/New Zealand’s interpretation of the drug courts.

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Methodology of Drug Court case study

This AODT Court case study is part of an ongoing research programme funded by the Royal Society of New Zealand Marsden Fund investigating the development, current practices, and underlying philosophy of therapeutic specialist courts in Aotearoa/New Zealand. As part of this research programme, two other case studies are being conducted on Te Kooti Rangatahi o Hoani Waititi and the Te Kooti o Timatanga Hou/ New Beginnings Court in Auckland District Court. The wider specialist court movement is also considered through interviews with relevant judges of this movement nationally (see Thom, 2015) and an analysis of local literature, political digests and media. From this, we hope to see how therapeutic courts are characteristically framed from a variety of sources and interpret what this framing says about shifting societal understandings of suitable responses to significant social problems in New Zealand.

Objectives of the AODT Court case study

1. Micro objective: To build a picture of the therapeutic practices each court team member undertakes in their daily work for the AODT Court.

2. Meso objective: To closely examine the interactions between the court team as they collectively negotiate the therapeutic pathway for court participants.

3. Macro objective: To map how the cultural, legal and socio-political landscape of Aotearoa/New Zealand has shaped the therapeutic nature of the AODT Court.

Why?

We know there is a large amount of critical commentary, evaluation research, and jurisprudence on drug courts, so why do this project with the specific focus we have?

1. Generally less is known about what ‘therapeutic’ means in practice in drug courts. Little attention has been given to the legal framing and practical usage of therapeutic principles in drug courts – in other words the coming together of the ‘health' and ‘justice’. This is why we aimed to closely examine the practices of the court team in order to define the ‘therapeutic’ within the AODT Court.

2. While we may be able to read about the role of judges and lawyers in drug courts, there is a dearth of research focused on non-legal actors’ practices. Non-legal actors’ practices may involve managing competing professional framings of ‘therapeutic’ as they interact with legal professionals within the AODT Court. Just how the different professionals within problem-solving courts negotiate the meaning of therapeutic discourse, however, remains under-investigated.

3. Some research has suggested that therapeutic principles used in particular specialist courts are shaped by the wider institutional and cultural constraints (see Nolan, 2009). Exactly how the political, legal and cultural landscape of New Zealand has shaped the AODT Court is important, and yet not well documented.

How?

The AODT Court case study involved observation of pre-court team meetings and courtroom proceedings over three months from August-December 2014 (approximately 41 court days, 200 hours). The aim of the observations was to become familiar with the AODT Court processes, closely follow interactions between professionals within the courtroom environment and help solidify emerging ideas being collected from other data sources. Semi-structured interviews were conducted with 25 AODT Court team professionals (judges, cultural advisor, court coordinators, counsel, police prosecutors and case managers) and one focus group took place with four peer support workers. The aim of the interviews and focus groups were to obtain experiential accounts from different professionals that comprise the AODT Court team. Finally, AODT Court handbooks and American based best practice documents were reviewed. Understanding the changing nature of the AODT Court pilot, we envisage further follow-up observations and interviews will be required for a longitudinal view.

Across these data collection methods, we aimed to explore how the court teams’ work for the court differs to their practice-as-usual; how they define and understand their use of therapeutic principles and how the requirements of the courts shape their existing professional understandings of therapeutic discourse. Thematic analysis was used as the data collection progressed so we could become familiar with the data as a whole, generate initial coding of patterns, and eventually group codes into broader themes. We then progressed towards providing ‘thick descriptions’ of the construction, shaping and collective negotiation of the meaning of ‘therapeutic’ in problem-solving courts.

The case study of the AODT Court received approval from University of Auckland Human Participants Ethics Committee April 11th 2014 (ref 011293) for a period of three years. The macro shaping study received approval from the University of Auckland Human Participants Ethics Committee on December 19th 2013 (ref 010983). The overall project has also been approved by the Ministry of Justice, AODT Court Steering Committee, New Zealand Police, Corrections, Odyssey House, and Judicial Research Committee.
References


National Association of Drug Court Professionals. (2013). Adult Drug Court Best Practice Standards: Volume I. Virginia: NADCP.


Glossary*

Aotearoa. The Long White Cloud, New Zealand.

Aroha. Love and compassion.

Arohatanga. Denotes the processes of love and compassion.

Āta. Behaviour in relationships with people, purpose and environment.

Community Alcohol and Drug Services (CADs). An AOD provider that offers a number of government funded educational and therapeutic groups for people who have issues with alcohol or drugs. They provide assessments at the referral
stages of the AODT Court and after care services.

**Collaborative law/holistic law.** A non-adversarial approach particular relevant to family law disputes. Parties opting for a collaborative approach commit to working together with their professional advisors. It promotes participant wellbeing through a holistic and healing approach. Collaborative practice is used for the resolution of both parenting and financial issues arising from separation and divorce. See [www.collaborativedlaw.org.nz](http://www.collaborativedlaw.org.nz).

**Creative Problem Solving.** A broad approach to lawyering that takes into account a wide variety of non-legal issues and concerns and then seeks creative solutions to otherwise win/lose scenarios (See Daicoff, 2000).

**Odyssey House.** An AOD treatment service provider. Leads the contract for the AODT Court Treatment Network. Odyssey House provides one project manager, four case managers, seven residential beds, and complementary services (such as housing support).

**Haka.** Ceremonial dance.

**Hapū.** Extended family group, usually described as a sub-tribe that retains its importance as an autonomous social and political group.

**Harekeke.** New Zealand flax.

**Higher Ground.** An AOD treatment provider. Provides seven residential beds, after-care programme and after-care accommodation for those who have completed the residential programme at Higher Ground.

**Hoani Waititi.** Was a respected educationalist and rangatira (leader) of Te Whanau-a-Apanui iwi (tribe), he worked tirelessly to improve the aspirations of his people.

**Hoani Waititi marae.** Is an urban marae in Waitakere, West Auckland, it opened in 1980 to support the people of Aotearoa New Zealand and the community of Waitakere.

**Iwi.** Descent group, nation, people. It acts as a social and political cohesive kin group.

**Kākahu.** Garment, clothes, cloak, apparel, clothing.

**Karakia.** Prayer, blessing.

**Kaupapa.** Purpose.

**Kawa.** Protocols or correct processes, practices that need to be followed.

**Kete.** Basket.

**Korowai.** Cloak that is generally woven or made from traditional materials like flax and feathers. It is worn as a mantle of prestige and honor.

**Kowhai.** Yellow.

**Kupe.** An important ancestor who is recognised for voyaging and discovering the islands of New Zealand.

**Kupenga.** Nets.

**Mā.** White.

**Mana whenua.** Refers to the Māori people of the land, who have power, authority and jurisdictions.

**Manaakitanga.** Denotes the processes of care, respect, kindness and hospitality.

**Manawanui.** Courage, to be steadfast, resolute, committed, dedicated or unswerving.

**Marae.** Culturally significant meeting place, that refers to the space in front of a meeting house and the adjoining buildings.

**Māramatanga.** Wisdom, enlightenment, insight or understanding.

**National Association of Drug Court Professionals.** This American based body represents over 27,000 multidisciplinary justice professionals and community leaders. Since 1994, the NADCP has aimed to create and enhance drugs courts by drawing on the scientific research that has developed over 26 years. The NADCP hosts a large training conference and over 130 smaller training and technical assistances events annually, as well as publishing academic and practitioner publications on the drug court model.

**Ngā Whenu Raranga.** Weaving strands.

**Ōrākei.** Is a suburb of Auckland city, Aotearoa New Zealand. It is located a short distance from the city centre.

**Ōrākei marae.** Is the name of the marae located at Ōrākei. The people of Ngāti Whātua Ōrākei are a hapū (sub-tribe) of the Ngāti Whātua iwi that welcomes those of the hapū, iwi and others to learn about their history.

**Pango.** Black.

**Pou.** Posts supporting the ridgepole within the whare tupuna - Tumutumuwhenua.

**Pou oranga.** Translates in English to 'healing post'. A member of the AODT Court team who provides cultural support to the AODT Court team members and participants, ensures meaningful incorporation of tikanga in the AODT Court and active engagement with whānau, hapū, iwi and the wider community.

**Pou te wharaua.** Centre post supporting the back of the meeting house.

**Pou tokomanawa tuarua.** Second centre pole in a meeting house.

**Pou tokomanawa tuatahi.** First centre pole in a meeting house.

**Pounamu.** Greenstone jade found in the South Island of New Zealand.

**Poutāhuhu.** Front post supporting the ridge pole in the front wall in a meeting house.

**Pōwhiri.** Ceremony that takes place to welcome manuhiri (visitors) on to a marae.
Preventative law. According to Daicoff (2000), preventive law is the oldest vector, emerging around 50 years ago. It seeks to put legal structures in place to prevent lawsuits before they occur.

Problem solving courts. Problem-solving courts originated in the United States. They place the judge at the centre of rehabilitation and use the authority of the court and the services necessary to reduce re-offending and address the issues which drive crime. Problem solving courts are specialised and use interventions like drug treatment or counselling to target the factors that lead people to crime, and monitor offenders to make sure that they are engaging with treatment (Centre for Court Innovation, 2016).

Procedural justice. Procedural justice or “PJ” refers to Tom Tyler’s research indicating those experiencing the legal processes are more concerned with the process itself than the actual outcome (win/lose). These are: (1) voice or participation, referring to the chance to be heard, (2) being treated with dignity by the judge, (3) and the litigant’s perception that the legal authorities (i.e., judges) are trustworthy. Of most importance, was the finding that trustworthiness was directly related to whether those experiencing the legal processes perceived they were treated with dignity, given a voice, and felt the decision was adequately explained to them.

Puna mātauranga. Fountain of wisdom.

Restorative justice. Restorative justice or “RJ” is an alternative perspective on crime and offers new processes on how to respond to crime. Although there is no agreed definition of restorative justice processes, Zehr (2002) has stated, “restorative justice is a process to involve, to the extent possible, those who have a stake in a specific offence and to collectively identify and address harms, needs and obligations, in order to heal and put things as right as possible” (37).

Rongomaraeroa. Māori God of Peace.

Tāhuhu. Ridge pole of the meeting house. It represents the spine of an ancestor. Symbolically it connects the spiritual and physical worlds together.

Tangata whenua. People of the land.

Taonga. Is a precious gift or treasure.

Takiwā. Region.

Te taha wairua. Refers to the spiritual side or dimension

Te wairua mārie. Serenity

Te Kawerau a Maki. Name of the tangata whenua (people of the land) of Waitakere City, who hold customary authority or mana whenua within the city.

Te reo. Māori language. The Māori language is an official language of Aotearoa New Zealand.

Tika. Judicial, the application of correct, true, just, fair, appropriate lawful or proper.

Tikanga. Customary system of values, principles and law.

Tino rangatiratanga. Independence.

The Salvation Army. An AOD treatment provider. Provides the AODT Court with four peer support workers, six residential beds, an intensive 90 day programme, and an after-care programme.

Therapeutic jurisprudence. Therapeutic jurisprudence or “TJ” has been defined as the ‘study of the law as a therapeutic agent’ with a focus of determining whether legal rules, procedures, and roles should be reshaped to enhance their therapeutic potential while not subordinating due process principles. It is a relatively new multidisciplinary field taking its name from ‘jurisprudence’, the study of the law, and ‘therapeutic’, the power to cure or heal (see Brookbanks, 2015 for further details of TJ in the New Zealand context).

Tua kiri. Identity.

Tukutuku. Ornamental lattice-work adorning the walls of a meeting house between the carvings.

Tūmanako. Sense of hope through treatment and the removal of addiction.

Tumutumuwhenua. The name of the tribal ancestor. The whare tupuna at Orakei marae represents this ancestor.

Tūpuna. Ancestors. Western dialect has been used for this report.

Tiriti o Waitangi. Treaty of Waitangi. An agreement signed between Māori chiefs and representative of the Crown in 1840. For more information see All About the Treaty available at www.treaty2u.govt.nz.

Waiata. Song.

Wairua. Spirit, spiritual aspects. Te taha wairua acknowledges tāhuhu existence in the greater scheme of things.

Whaikōrero. Formal speech given by male, usually kaumātua (elders) during a powhiri (welcome ceremony) on a marae.

Whakamā. Shame or embarrassment.

Whānau. Family or blood kin, today this has been extended to various special interest groups who function as kin.

Whare. House, refers to the meeting house.

Whare tupuna. Ancestral meeting house.

Whāriki. Mats.

Whanaungatanga. Blood kin or kin-like relationships that bring with it rights, responsibilities and expectations of each kin group.

Whero. Red.

