The effect of restorative justice interventions for children and young people on offending and reoffending: A mixed-methods systematic review

Toolkit technical report

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Abstract/Plain Language Summary

Purpose:

This report examines the effectiveness of restorative justice interventions (RJIs) in reducing children and young people's involvement in crime and violence. Restorative justice (RJ) is a unique ideological approach for responding to crimes and other harms. In a criminal justice context, definitions of RJ stress the process of those affected by an offence (i.e., the victim or person harmed, the offender or person responsible, and affected communities) coming together with the aim of dealing with the offence aftermath and restoring the imbalance created by the commission of the offence. This review summarises the findings from 71 studies, comprising 46 independent impact evaluations, 8 mixed-method studies and 25 qualitative process evaluations to examine the impact of RJIs for children and young people involved in crime and violence.

Key Findings:

- The results suggested that restorative justice (RJ) was associated with a relative reduction in later serious offending that was estimated to be 34%. However, RJ was not associated with a change in later serious offending in the small number of studies in which the seriousness of offences both before and after the delivery of RJ was examined.
- In addition, restorative justice interventions (RJIs) were associated with a reduction in later offending both when considering those who received the full treatment (estimated as a 15% relative reduction i.e., treatment of treated) and those who should have received RJ (estimated as a 12% relative reduction, i.e., intention to treat).
- The more 'restorative' the RJ was, for example initiatives that provided preparation time for victims and offenders, supporters of victims and offenders were present, or community members present, the greater its success amongst those in the intention-to treat analysis (i.e., those who should have received RJ).

- Amongst those who received RJ and reoffended, RJ was also not associated with delayed reoffending.
- Unfortunately, the quality of the evaluations of RJIs was generally weak. The randomised controlled studies were all high risk or contained some concerns and only one quasi-experimental study was considered low risk of bias.
- All other studies were considered either moderate, serious or critical risk of bias. The quality of evidence is therefore limited, and as such the findings should be interpreted with considerable caution.
- Importantly, the evaluations mostly included White males from the United States and Australia, and as such, the result represent the potential effectiveness of RJIs for a specific and non-diverse population.
- Also, most evaluations compared RJ alongside diversion compared to typical criminal justice processing, which itself is known to be criminogenic. This makes it difficult to determine the unique contribution of RJ.
- Many of the requirements for RJIs (e.g., being voluntary, admitting guilt, the offender having supporters, the victim being willing), and the selection criteria for participants (e.g., certain offence types, offender being assessed as 'suitable' for RJ), may mean certain young people, particularly those from Global Majority groups may be less likely to be offered and received RJ. To the extent that RJ is effective, or that involvement in RJ increases diversion, RJ may risk perpetuating systemic bias.
- The qualitative evidence synthesis found four main themes relevant to the successful implementation of restorative justice interventions:
- The qualitative evidence synthesis found four main themes relevant to the successful implementation of restorative justice interventions:
    - *Resourcing and infrastructure*: Stable, multi-year funding and basic delivery conditions (skilled staffing, manageable caseloads, suitable venues) are prerequisites for fidelity and continuity; short-term or inadequate resourcing drives turnover, limits reparative options, and degrades quality.
    - *Integration with legal, social and community systems*: Strong partnerships and clear referral pathways with police, youth courts and community organisations increase appropriate referrals, victim

participation and option breadth; weak buy-in or strained relationships suppress uptake and produce inconsistent processes.

- *Workforce capability and training*: Regular, role-specific training for facilitators and justice partners (including referrers) underpins safe, consistent practice and shared understanding of RJ principles; gaps in training and supervision compromise fairness, preparation and outcomes.
- *Fostering a restorative environment through procedurally fair practice*: Meaningful participation, voluntariness, safety, dignity and voice—supported by careful preparation, culturally and linguistically sensitive practice, and purposeful family involvement—are essential to engagement and successful conferences; poor logistics or imbalanced communication deter victims and undermine impact.

Conclusions:

The findings of this review suggested that restorative justice might be a useful way to address the offending or reoffending of children and young people but there are important points to consider. First, the quality of the evidence about the effectiveness of RJ is not strong. Furthermore, RJ is often delivered alongside other diversionary activities which means it is difficult to identify the independent benefit of RJ. There are many challenges in establishing and delivering a successful restorative justice intervention, and the common requirements of the delivery of restorative justice (i.e., certain types of offences, voluntary, often requiring a victim present), could result in RJ being considered a highly selective intervention approach which risks perpetuating systemic bias.

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Objective and Approach

The objective of this report is to review the evidence on the effectiveness of restorative justice interventions as a way of preventing or reducing the involvement of children and young people's involvement in crime and violence. Restorative Justice (RJ) is a unique philosophy for addressing offending and other harm. Definitions of RJ vary, and indeed, many researchers have noted that RJ has become an 'umbrella term which has been stretched over a number of disparate practices and processes' (Shapland, 2003, p. 197). In a criminal justice context, definitions of RJ stress the process of those affected by an offence (i.e., the victim or person harmed, the offender or person responsible and affected communities) coming together to address the harm caused by the offence and restoring the imbalance created by this offence. An example of this definition of RJ would be community conferencing in which the person harmed, the person responsible and supporters of both are led in a discussion (by a trained facilitator) to consider the implications of the offence and how the harm caused by this offence might be repaired (e.g., People & Trimboli, 2007).

This technical report is informed by an ongoing mixed-methods systematic review on the effectiveness of restorative justice interventions for children and young people (Gaffney et al., 2025). The protocol for this review provides further insight into the methodology and approach for this review (Gaffney et al., 2023). This report is based on the findings from 71 studies, comprising 46 independent impact evaluations, 8 mixed-method studies and 25 qualitative process evaluations.

The aim of the present technical report is to examine the potential impact of RJIs on reducing, and/or preventing, children and young people's involvement in crime and violence and to explore the quality of the available evidence. A second, and equally important aim, is to utilise a mixed-methods approach to synthesise and understand the views of participants in RJIs. This was to develop an evidence base to inform good implementation practice of restorative justice in youth justice settings.

Description of the Intervention

Restorative justice interventions (RJIs) can involve a range of different activities, including for example, victim-offender mediation, group conferencing and peace-making circles. Umbreit and Armour (2011) identified 'restorative justice dialogue' as the most widely used and evidence-based RJI. Gaffney et al. (2024) provide a

detailed overview of the range of RJIs in their protocol, and the following section summarises that information.

An assessment of level of 'restorativeness' is one approach that has been used to classify the various forms of RJ that have been developed and implemented (e.g., McCold, 2000). Table 1 provides a non-exhaustive list of a number of types of RJ and illustrates that certain activities and approaches are generally considered more 'restorative' than others. In addition, it is important to note that this classification reflects westernised conceptions and representations of restorative practices (see e.g., Blagg & Anthony, 2019). Restorative approaches have a long tradition of use in Indigenous communities across the world (e.g., Maori communities in New Zealand; e.g., Moyle & Tauri, 2016).

Table 1. Examples of activities categorised based on degree of restorative justice involved.

Fully Restorative	***Mostly Restorative***	***Partly restorative***
Peace-making circles	Victim Support Circles	Victim Services
Family Group Conferencing	Victim Restitution	Victim Crime Compensation
Community Conferencing	Victim-Offender Mediation	Offender Community Service
	Therapeutic Communities	Youth Aid Panels
	Positive Discipline	Reparative Boards
	Victimless conferences	Victim awareness training
		Offender Family Services
		Family-Centred Social Work

The three pillars of RJ were used to classify the level of 'restorativeness' of the various approaches. These are: addressing the needs of those harmed for reparation, those responsible for accountability and the communities of care for relational reconciliation and reintegration of those responsible (McCold, 2000; Zehr, 1990). Those approaches that incorporate all three (e.g., peace-making circles, family group conferencing, community conferencing) are considered fully restorative. One commonly evaluated form that is mostly restorative is victim-offender conferencing (e.g., Strang et al., 2013). This form typically commences with those harmed and those responsible individually meeting with a facilitator (Zehr,

2002). If both parties agree to a meeting, then a trained facilitator will arrange this and lead the conversations. The expressed aim of these communications is having the individual responsible take responsibility for the harm caused by the offence and ideally, finding a resolution agreeable to all parties. The person harmed may also receive an apology and an explanation for the reasoning behind the offence (Zehr, 2002). In another form of RJ these meetings are facilitated in non-face-to-face forms, such as over the phone or through a third-party. This is often referred to as shuttle mediation.

It is difficult to clearly delineate the different levels and forms of RJ that are listed in Table 1. An evaluation of the level of 'restorativeness' of an intervention would require an assessment of how restorative justice was actually enacted by those implementing this approach. A recent high-quality review of restorative justice with children and young people (i.e., Kimbrell et al., 2022) adopted this approach.

How Might the Intervention Work?

It has been suggested that RJ might be particularly useful for young people who are justice-involved (e.g., Suzuki and Wood, 2018). This is because generally young people commit less serious offences than adults, they may be more developmentally and cognitively malleable to changes in empathy and moral reasoning, and finally young people are typically considered less culpable than adults. Conversely, it is also possible that justice-involved young people may be more likely to possess neurodivergence (diagnosed or undiagnosed) such as speech and language issues or other cognitive conditions which limit their understanding or ability to actively participate in RJ (Day, 2022; Rossner, 2013).

Braithwaite's (1989) Theory of Reintegrative Shaming is an important part of the theory of change of RJIs. This theory details the process by which a community can express their 'disapproval' of the actions of the perpetrator (i.e. the harm they have caused) which is followed by their reacceptance of the perpetrator into the community (Wong et al., 2016, p. 1312). Importantly, Braithwaite (1989) highlighted that the shame elicited from RJ can be experienced either negatively or positively. Stigmatising shame (negative) occurs in in RJ when a perpetrator internalises the shame and this becomes integrated in their self-identity. However, when shame is used to sanction the behaviour of the perpetrator, while also affirming the value of the perpetrator as a human, this shame can be a positive vehicle for change (Braithwaite, 1989; Suzuki & Wood, 2018).

It has been acknowledged by scholars (e.g., Strang, 2020) including Braithwaite himself that the concepts that underpin the reintegrative shaming framework have been present in many Indigenous communities worldwide, including Oceania, Asia, Africa, the Middle East and the Americas. Furthermore, while there is debate about the importance of reintegrative shaming in the RJ process, reparation and appropriately eliciting and addressing shame is an important part of many forms of RJIs (e.g., family group conferences; Frost et al., 2012; McGinn et al., 2020; Pitt et al., 2020).

Other criminological theories are represented in the RJ process. For example, procedural justice and ensuring that fairness and equality of opportunity for participants to contribute to the RJI is a central part (Daly, 2002). Similarly, RJ might minimise the societal labels associated with involvement in the criminal justice system and thus encourage greater prosocial behaviour and promote desistance (e.g., Wong et al., 2016). It is common for RJIs, particularly those with young people, to be implemented as part of diversion from the criminal justice system (Wong et al., 2016). This makes it difficult to distinguish the unique benefits of the RJI as diversion is widely evidenced as an effective way to reduce the offending of young people (Petrosino et al., 2010).

RJIs may also have an impact on the risk or protective factors associated with offending. For example, the intense experience of emotions may positively impact a perpetrator's levels of empathy (Wallis, 2014). Low empathy, or a diminished ability to understand or experience the emotions of others, is commonly implicated risk factor for offending behaviour (Jolliffe & Farrington, 2021).

Also, the reparative aspect that form part of many RJIs may have a deterrent effect. That is, having to pay a fine may deter perpetrator from committing a similar offence in the future. Alternatively, certain forms of reparation (e.g., working with volunteers to remove graffiti) may enhance a perpetrators self-worth and sense of community.

The reparations that take place as part of RJ can also be 'symbolic'. Symbolic reparations occur when the perpetrator expresses genuine remorse for their behaviour, this is perceived by the person harmed as sincere and they are willing to accept an apology and an offer to make amends (Shapland et al., 2006). Interestingly, a full or partial apology was noted in only about half of victim-offender mediation agreements in the UK (Dhami, 2016).

It has been suggested that RJIs may have non-desirable impacts especially if these are not facilitated properly. If, for example, the perpetrators are subjected to harassment or aggressive questioning by those harmed, supporters, or members of the community this could result in an increase in the perpetrators defiance. Increased defiance has been linked with an increase in later reoffending (Sherman, 1993).

There is also a risk of RJ of producing undesirable results when used with children and young people who have committed an offence. This is because children may: (1) not fully comprehend RJ proceedings and may be more vulnerable to suggestion by adult participants; (2) have poorer communication skills; (3) not be as emotionally mature; and (4) have undiagnosed neurodiversity or speech and language issues (Day, 2022; Rossner, 2013; Suzuki & Wood, 2018). This may mean that children feel induced to participate (rather than volunteering) to avoid the alternative sanctions (Suzuki & Wood, 2018).

RJ may have benefits wider than simply preventing the perpetrator from reoffending. For example, victims may receive some form of material restitution from the perpetrator (or work in lieu). However, evaluations of the impact of RJ on victims have tended to focus on the potential emotional benefits for victims (e.g., Nascimento et al., 2023; Strang et al., 2013). For example, Nascimento et al. (2023) found that victims who participated in RJ showed significant decreases in post-traumatic stress symptoms, and negative emotions such as fear, anger, guilt, anxiety and distress. In their systematic review, Strang et al. (2013) found that victims who participated in RJ perceived that the perpetrator was less likely to reoffend, were more likely to receive an apology and more likely to perceive that this apology was sincere. In this study, RJ was also associated with increased victim satisfaction with the criminal justice system and a decrease of victim's desire for revenge (Sherman et al., 2005).

The theory of change involved in RJ is one framed by broad concepts and ideas, but which is created anew each time the RJ participants come together (directly or indirectly) with the aim of addressing the harm caused by an offence (Shapland et al, 2006). There are, however, key aspects of RJ which are considered fundamental to the proposed causal mechanism. These include interaction and effective communication between those harmed and perpetrators, specifically about the events leading to the offence and about what should happen in the

future (Rossner, 2013; Shapland et al., 2006). Another important factor in RJ is the voluntary nature of participation. It is common for RJIs to require offenders to both have admitted guilt for the offence for RJ to be consider 'suitable' for RJ. Also, victims typically have to voluntarily agree to participate, especially as forced participation could lead to further re-victimisation (Daly, 2002).

How Effective is the Intervention?

This section presents findings on the effectiveness of restorative justice interventions for children and young people in preventing or reducing offending and reoffending based on the systematic review and meta-analysis (Gaffney et al., 2025). The details of the systematic review and the meta-analytic approach are described in Appendix A. A meta-analytical model that allows for dependent effect sizes was used (i.e., correlated and hierarchical effects model with robust variance estimation, CHE; Pustejovsky & Tipton, 2021). In total, 334 effect sizes were extracted from 39 reports of 44 evaluations of restorative justice interventions for children and young people involved in crime and violence[1]. Effect sizes were grouped into categories that represent the impact of RJIs on meaningfully similar outcomes prior to conducting meta-analyses. The effect sizes that were the primary outcomes were: (1) any reoffending, treatment-of-treated effect sizes, and (2) any reoffending, intention-to-treat (ITT) effect sizes. It was also possible to examine the relationship between RJIs and (3) time to reoffending; (4) seriousness of reoffending; (5) change in seriousness of reoffending; and (6) secondary outcomes.

To be included in the review, evaluations of RJIs had to:

(1) Implemented with children and young people aged between 10 and 25 years old;
(2) Include a suitable comparison group of participants that did not participate in an RJI;
(3) Evaluate an RJI that aligns with the fundamental aspects of restorative justice (i.e., acknowledgement of harm, voluntary participation, emphasis on restorative over punishment, and be deliberative in nature);
(4) If reporting qualitative findings, evaluations had to be a 'trial sibling' of a quantitative impact evaluation. The associated impact evaluation did

[1] This review is ongoing, and as such the final numbers of studies included reported here may differ from the final number reported by Gaffney et al. (2025).

not have to be included in our analysis, but there needed to be some attempt to quantify the impact of the RJI.

Serious Reoffending

An important research question in the present review was whether RJIs were an effective intervention to reduce the involvement of children and young people in violence. Therefore, a meta-analysis was conducted according to the type of offences committed by participants who reoffended. Fourteen effect sizes were calculated from four studies (see Table 3 below) that reported data ranking the young person's most serious new offence on an ordinal scale, for example: 0=none, 1=other/minor offence, 2=property offence, 3=offence against a person. All of the offences in these studies were violence/offences against the person. These effects represent a combination of recidivism and severity of recidivism, as they are based on data from all participants regardless of whether they reoffended. Given the small number of studies (i.e., four studies) that produced measures of this outcome, these results must be interpreted with caution.

A meta-analysis using the CHE model with robust variance estimation found that these RJIs had a desirable impact on serious reoffending amongst participating children and young people (lnOR = -0.482, SElnOR = 0.023, OR = 0.618, 95% CIOR 0.52, 0.74, p = <0.001; k = 4, n = 14). The odds ratio of 0.618 is equivalent to a Cohen's d effect size of 0.26, which according to the YEF Technical Guide (2025) is a high effect. This mean effect size suggests that RJIs were associated with a statistically significant 34% reduction in the odds of serious reoffending. This figure was calculated using Table 5 on page 39 of the YEF Technical Toolkit Guide (2005). Figure 1 represents a forest plot of all effect sizes for seriousness of reoffending outcomes (Appendix B).

Heterogeneity of Serious Reoffending

The heterogeneity in each of this meta-analysis was assessed using the *Q* statistic and I^2, along with the partitioning of τ^2 across the levels of the models. There was no significant heterogeneity found between effect sizes (Q (df = 13) = 4.219, p =0.999; I^2 = 0%). However, due to the very small number of included studies (k=4), the effect of potential moderators or the presence of small-study effects was not examined.

Evidence Security

Each primary evaluation that was included in this review was assessed for risk of bias using either the RoB 2 (Sterne et al., 2019) for randomised controlled trials or ROBINS-I (Sterne et al., 2016) for quasi-experimental evaluations. Please see Appendix C for details of this process. Based on overall ratings, the risk of bias for all studies included in this review was either high or some concern for experimental studies, with none considered to be low risk. Similarly, only three quasi-experimental studies were considered low risk of bias, with the remainder either serious or moderate risk of bias.

The classification of the studies included in the review based on methodological quality using the YEF approach as detailed in the YEF Technical Toolkit Guide (2025) are:
Type A: High-quality randomised controlled trial (RCT)

Type B: High-quality quasi-experimental study

Type C: Moderate-quality RCT or quasi-experimental study with minor limitations

Type D: Low-quality RCT, quasi-experimental study or PPD study with major limitations

Evidence Security of Serious Reoffending

Table 3 shows the location of the studies included in the meta-analysis of serious reoffending along with the risk of bias and the corresponding YEF Security of Evidence Rating. This would be a Level 2 Security Rating as there are four studies of any quality meaning that we have **low confidence** in this impact assessment.

Table 2. Quality of Evidence: Serious Reoffending

Study	Location	Risk of Bias	Security of Evidence
Bergseth & Bouffard (2007)	USA	Serious	D

Nugent & Paddock (1995; 1996)	USA	Serious	D
Stone (2000)	USA	Moderate	C
Urban & Burge (2006)	USA	High	D

Table 3. Summary Table of Serious Reoffending

Outcome	OR (d)	CI	P	% reduction	Impact rating	Number of studies	Evidence rating
Serious Reoffending	0.62 (0.26)	0.52-0.74	<.001	34%	High	4	Low

Any Reoffending (Treatment of Treated)

Using a CHE model with robust variance estimation, the mean effect size suggested that RJIs had a desirable impact on reoffending outcomes amongst children and young people when the evaluation was conducted as 'treatment-of-treated' (lnOR = -0.257, SElnOR = 0.089, OR = 0.75, 95% CIOR 0.63, 0.89, p < 0.001; k = 35, n=192). The odds ratio of 0.75 is equivalent to a Cohen's d effect size of 0.16, which according to the YEF Technical Guide (2025) is a moderate effect. This mean effect size suggests that RJIs were associated with a statistically significant 15% reduction in the odds of serious reoffending. This figure was calculated using Table 4 on page 39 of the YEF Technical Toolkit Guide (2005). Figure 2 (Appendix B) presents a forest plot of all effect sizes included in this meta-analysis.

Heterogeneity of Treatment of Treated

There were significant differences between the studies included in this meta-analysis ($Q_{(191)}$ = 1104.618, p < 0.001; I^2 = 82.07%). Further investigation suggested that these differences was mainly explained by between-study differences (i.e., differences between independent evaluations of different RJIs; I^2 = 44.75%). The remaining variance was assigned to within-study differences (i.e., differences observed between effect sizes estimated from the same evaluations of RJIs; I^2 =

37.32%). Sampling error variance accounted for less than 20% of the overall heterogeneity (I^2 = 17.93%).

Evidence Security of Treatment-of-Treated

Table 4 shows the location of the studies included in the meta-analysis of treatment-of-treated along with the risk of bias and the corresponding YEF Security of Evidence Rating. The initial evidence security rating of this outcome would be level 3 (8+ type C studies). There was significant heterogeneity between observed effect sizes extracted from the 36 studies (Q (191) = 1104.618, p < 0.001; I2 = 82.07%), so this would be downgraded to level 2, This would mean that we have **low confidence** in this impact estimate.

Table 4. Quality of Evidence: Any Offending (Treatment of Treated)

Study	Geography	Risk of Bias	Security of Evidence
Allard et al. (2009)	Australia	Serious	D
Baliga (2017)	USA	Moderate	C
Beckman (2010)	USA	Moderate	C
Beckman et al. (2023)	USA	Serious	D
Bergseth & Bouffard (2007)	USA	Serious	D
Brooks (2013)	USA	Moderate	C
Buchholz (2014)	USA	Critical	D
Daly et al. (2013)	Australia	Moderate	C
Dolling & Hartmann (2011)	Germany	Moderate	C

Evje & Cushman (2000)_Los Angeles	USA	Serious	D
Evje & Cushman (2000)_Santa Barbara	USA	Serious	D
Evje & Cushman (2000)_Santa Clara	USA	Serious	D
Evje & Cushman (2000)_Sonoma County	USA	Serious	D
Hill-Clark (2014)	USA	Moderate	C
Jonas van-Dijk et al. (2020)	Netherlands	Moderate	C
Jones (2009)	Australia	Moderate	C
Kirby Forgays & DeMilio (2005)	USA	Serious	D
Luke & Lind (2002)	Australia	Moderate	C
Mackie et al. (2014)	England	Serious	D
McCold & Wachtel (1998)	USA	Moderate	C
Povitsky (2005)	USA	Moderate	C
Povitsky Stickle et al. (2008)	USA	High	D

Rodriguez (2005)	USA	Serious	D
Schneider & Schneider (1985)_Washington DC	USA	High	D
Shapland et al. (2008)_REMEDI	UK	Low	B
Shem-Tov et al. (2021)	USA	High	D
Sherman et al. (2000)_Property	Australia	High	D
Sherman et al. (2000)_Shoplifting	Australia	High	D
Smith & Weatherburn (2012)	Australia	Moderate	C
Stone (2000)	USA	Moderate	C
Stone et al. (1998)	USA	Moderate	C
Triggs (2005)	New Zealand	Serious	D
Urban & Burge (2006)	USA	High	D
Walker et al. (2002)	USA	High	D
Wax (1977)	USA	High	D
Wiinamaki (1997)	USA	Moderate	C

Table 5. Summary Table of Any Reoffending (Treatment of Treated)

Outcome	OR (d)	CI	P	% reduction	Impact rating	Number of studies	Evidence security rating
Reoffending (ToT)	0.75 (0.159)	0.63-0.89	<.001	15%	Moderate	36	Low

Any Reoffending (Intention to Treat; ITT)

We also computed a mean effect size for studies that reported an intention-to-treat effect size for any reoffending outcome. This is an estimate based on those who were supposed to receive RJ, regardless of whether they actually did, compared to the control condition. Some of these effect sizes were manually estimated by combining data reported for programme completers and non-completers. Overall, 62 ITT effects were extracted from 17 evaluations of RJIs. A meta-analysis of ITT effect sizes for any recidivism outcomes also suggests that RJIs implemented with children and young people have a desirable impact for children and young people (lnOR = -0.239, SElnOR = 0.076, OR = 0.79, 95% CI OR 0.68, 0.91, p < 0.01, k=17, n=62). The odds ratio of 0.79 is equivalent to a Cohen's d effect size of 0.163 which according to the YEF Technical Guide (2025) is a moderate effect. This mean effect size suggests that RJIs were associated with a statistically significant 12% reduction in the odds of serious reoffending. This figure was calculated using Table 4 on page 39 of the YEF Technical Toolkit Guide (2005). A forest plot of observed effects included in this meta-analysis is presented in Figure 3 (Appendix B).

Heterogeneity of Intention to Treat

There was significant heterogeneity between the observed effect sizes ($Q_{(61)}$ = 905.369, p <0 .001; I^2 = 87.85%). Further exploration identified that the majority of this variance was within-clusters of effect sizes (I^2= 78.8%), with most of the remaining variance attributed to between-clusters of effects (I^2 = 9.01%). Due to the small number of included studies in this meta-analysis (k=17) and the high level of heterogeneity within this meta-analysis (I^2 = 87.85%), we did not assess for the presence of small-study effects.

Evidence Security of Treatment-of-Treated

Table 5 shows the location of the studies included in the meta-analysis of intention-to-treat along with the risk of bias and the corresponding YEF Security of Evidence Rating. The initial evidence security rating of this outcome would be level 3 (8+ type C studies). However, there was significant heterogeneity between the observed effect sizes (see above), so this would be downgraded to level 2, or we have **low confidence** in this impact estimate.

Table 6. Quality of Evidence: Any Offending (Intention to Treat)

Study	Geography	Risk of Bias	Security of Evidence
Beckman et al. (2023)	USA	Moderate	C
Bergseth & Bouffard (2007)	USA	Serious	D
Broadhurst et al. (2018)	Australia	Moderate	C
Church et al. (2021)	USA	Moderate	C
Gase et al. (2016)	USA	Moderate	C
Jonas van-Dijk et al. (2020)	Netherlands	Moderate	C
Luke & Lind (2002)	Australia	Moderate	C
McCold & Wachtel (1998)	USA	Moderate	C

Miers et al. (2001)	UK	Critical	D
Nugent & Paddock (1995; 1996)	USA	Serious	D
Riggs (2007)	New Zealand	Critical	D
Rodriguez (2005)	USA	Serious	D
Shapland et al. (2008)_JRC Northumbria	UK	Some Concerns	C
Shem-Tov et al. (2021)	USA	High	D
Smith & Weatherburn (2012)	Australia	Moderate	C
Umbreit (1994)	USA	Serious	D
Urban & Burge (2006)	USA	High	D

Table 7. Summary Table of Any Reoffending (Intention to Treat)

Outcome	OR (d)	CI	P	% reduction	Impact rating	Number of studies	Evidence rating
Reoffending (ITT)	0.79 (0.13)	0.68-0.91	<.01	12%	Moderate	17	Low

Time to Reoffence

Applying a CHE model of meta-analysis, the mean effect size of these outcomes suggests that RJIs did not have an impact on time to first reoffending outcomes (lnHR = -0.097, SElnHR = 0.107, HR[2]=0.908, 95% CIHR 0.73, 1.13, p =0.411, k=6, n = 36). Although the direction of this mean effect size implies that participants who participated in an RJI may have taken slightly longer to reoffend than participants in the comparison or control group, the pooled effect is not statistically significant. Moreover, these results should be interpreted with caution due to the small number of studies reporting such outcomes. A forest plot of primary effect sizes for time to reoffending outcomes is presented in Figure 4 (Appendix B).

Heterogeneity of Time to Reoffence

There was significant heterogeneity between observed effect sizes ($Q_{(35)}$ = 107.810, p< 0.001; I^2 = 85.35%). Almost all of the variance in this model was attributed to between-study differences (I^2 = 82.71%). Due to the small number of included studies in this meta-analysis (k=6), it was not appropriate to assess for the effect of potential moderators or the presence of small-study effects.

Evidence Security of Time to Reoffence

Table 8 shows the location of the studies included in the meta-analysis of time to reoffence along with the risk of bias and the corresponding YEF Security of Evidence Rating. The initial evidence security rating of this outcome would be level 2 (3+ A, B or C studies). However, there was significant heterogeneity between observed effect sizes (see above), so this would be downgraded to level 1, or we have **low confidence** in this impact estimate.

Table 8. Quality of Evidence: Time to Reoffence

Study	Geography	Risk of Bias	Security of Evidence
Bergseth & Bouffard (2007)	USA	Serious	D

[2] HR or the hazard rate is an effect size that estimates the likelihood of reoffending controlling for time.

Broadhurst et al. (2018)	Australia	Moderate	C
Gase et al. (2016)	USA	Moderate	C
Jones (2009)	Australia	Moderate	C
Luke & Lind (2002)	Australia	Moderate	C
Smith & Weatherburn (2012)	Australia	Moderate	C

Change in Seriousness of Reoffence

Three studies included in this meta-analysis reported the impact of interventions on an individual young person's subsequent offence seriousness, compared to their previous offending (Jones, 2009, Smith & Weatherburn, 2012; Urban & Burge, 2006). Thirteen effect sizes were able to be calculated from three studies that reported data comparing the seriousness of the young person's first reoffence compared to the seriousness of their original offence. For example: less serious, no change, more serious. These effects represent outcomes only for participants who reoffend and therefore should be considered in combination with the effect of the intervention on reoffending. Also, the results should be interpreted with caution given the small number of studies reporting this outcome. A meta-analysis using the CHE model with robust variance estimation found that there was no statistically significant impact of the included RJIs on the change in offence severity of participating children and young people (lnOR = 0.079, SElnOR = 0.157, OR = 1.083, 95% CIOR 0.76, 1.54, p=0.507; k= 3, n= 13). The odds ratio of 1.083 is equivalent to a Cohen's d effect size of -0.04 which according to the YEF Technical Guide (2025) is no effect. Figure 5 (Appendix B) represents a forest plot of all effect sizes for change in seriousness outcomes.

Heterogeneity in Change in Serious Reoffence

There was no significant heterogeneity found between effect sizes (Q (12) = 13.688, p =0.321; I2 = 75.71%), but the majority of variance in the model was between-studies (I2 = 75.71%). Due to the very small number of included studies (k=3), it was not appropriate to assess for the effect of potential moderators or the presence of small-study effects.

Evidence Security of Change in Serious Reoffence

Table 8 shows the location of the studies included in the meta-analysis of change of serious reoffence along with the risk of bias and the corresponding YEF Security of Evidence Rating. The initial evidence security rating of this outcome would be level 1 (2+studies of any type). There was no significant heterogeneity found between effect sizes (see above), so this would be level 1, or we have **very low confidence** in this impact estimate.

Table 9. Quality of Evidence: Change in Seriousness of Reoffence

Study	Geography	Risk of Bias	Security of Evidence
Jones (2009)	Australia	Moderate	C
Smith & Weatherburn (2012)	Australia	Moderate	C
Urban & Burge (2006)	USA	High	D

Table 10. Summary Table of Change in Serious Reoffence

Outcome	OR (d)	CI	P	% reduction	Impact rating	Number of studies	Evidence rating

Change in Seriousness of Reoffence	1.083 (-0.04)	0.76 – 1.54	0.507	-	No effect	3	Very Low

Secondary Outcomes

Three studies (Church et al., 2021; Povitsky et al., 2008, Wax, 1977) provided data to calculate the effect of RJI participation on 16 secondary outcomes, including academic performance, peer relationships, neighbourhood attachment and school behaviour. Applying a CHE model of meta-analysis, the mean effect size of these outcomes suggests that RJIs did not have a significant impact on the secondary outcomes included in this analysis (g = 0.044, SEg = 0.204, 95% CI –1.05, p=0.214; k = 3, n = 16). According to the YEF Technical Guide (2025) this is a small effect. Once again, these results should be interpreted with caution due to the small number of studies reporting such outcomes. A forest plot of primary effect sizes for secondary outcomes is presented in Figure 6 (Appendix B).

Heterogeneity of Secondary Outcomes

There was significant heterogeneity between observed effect sizes ($Q_{(15)}$ = 73.318, p<0.001; I^2 = 89.63%). The majority of variance in this model was attributed to between-study differences (I^2 = 78.56%) in comparison to the variance within-clusters (I^2 = 11.08%). Due to the very small number of included studies (k=3), it was not appropriate to assess for the effect of potential moderators or the presence of small-study effects.

Evidence Security of Secondary Outcomes

Table 11 shows the location of the studies included in the meta-analysis of secondary outcomes along with the risk of bias and the corresponding YEF Security of Evidence Rating. The initial evidence security rating of this outcome would be level 1 (2+studies of any type). There was no significant heterogeneity found between effect sizes (see above), so this would be level 1, or we have **very low confidence** in this impact estimate.

Table 11. Quality of Evidence: Secondary Outcomes

Study	Geography	Risk of Bias	Security of Evidence
Church et al. (2021)	USA	Moderate	C
Povitsky Stickle et al. (2008)	USA	High	D
Wax (1977)	USA	High	D

Table 12. Summary Table of Secondary Outcomes

Outcome	OR (g)	CI	P	% reduction	Impact rating	Number of studies	Evidence rating
Secondary Outcomes	1.075 (0.04)	0.52 - 2.24	0.214	-	Small	3	Very Low

Moderators

Moderator analyses were only conducted in the two meta-analyses where there were a sufficient number of studies (k>=10; Any Reoffending Treatment of Treated and Any Reoffending Intention to Treat) and there was variation in the moderator variables within the studies in the meta-analysis.

The variables used as moderators were:

Type of Treatment Model

This was based on the approach to RJ used. These included: Conferencing, Family Group Conferencing, Mediation, Teen Court, Restorative Community Support/ Conferences or Mediation (or a combination of these models).

Degree of Restorativeness

Each intervention was scored based on the presence of certain characteristics. These were:

- Were the victims present during the intervention?
- Any evidence of preparation (for victim or perpetrator)?
- Any evidence community members present?
- Any supporters present (victim or perpetrator)?
- Were emotions such as anger expressed by the victim?
- Were emotions such as guilt/regret expressed by the perpetrator?
- Was there an immediate outcome of the intervention (e.g., apology, agreed statement of facts, reparation)?
- Did the perpetrator volunteer for the intervention?
- Did the perpetrators admit responsibility before the programme?

Intervention Setting

This was a classification of where the RJ was delivered based on information provided in the manuscripts/reports. These included:

- Community
- Courtroom
- Probation/Parole/School or specialised RJ setting (e.g. Institute for Conflict Management).

Country of the Intervention

The country that the RJ was delivered was recorded. The primary evaluations were overwhelmingly from the USA (n=30), followed by Australia (n=9). Four evaluations were conducted in the UK, two in the Netherlands and one each in Germany and New Zealand.

Study Design

Evaluations were classified into those that were RCTs and those that were QEDs.

Risk of Bias

The risk of bias for each evaluation was assessed using the Cochrane RoB 2 tool (Sterne et al., 2019) for randomised controlled trials and ROBINS-I (Sterne et al., 2016) for quasi-experimental designs[3].

Overall, the mean effect sizes for moderator variables were not statistically significant in relation to any reoffending outcomes (treatment of treated).

[3] Greater detail about the overall quality of the primary studies can be found in the 'How Secure is the Evidence section below.

However, in the meta-analysis of any reoffending (intention to treat), the degree of restorativeness in the intervention was significantly associated with the overall effect ($F(1, 60) = 7.117$, $p<0.01$), with each unit increase in restorativeness (measured on a scale of 0-9) resulting in a 7.4% decrease in the odds of reoffending (lnOR = -0.077, SElnOR =0.020, OR=0.926, $p<0.01$). In addition, the country where the intervention was conducted was significantly associated with the overall effect ($F(3, 58) = 2.851$, $p<0.05$), with significantly lower odds of reoffending after treatment seen in evaluations conducted in the United States (lnOR = -0.375, SElnOR =0.085, OR=0.687, $p<0.001$) and the Netherlands (lnOR = -0.461, SElnOR =0.011, OR=0.631, $p<0.01$).

Publication Bias

A common method of assessing the presence of reporting or publication bias is to assess for the presence of small-study effects in the data. Small-study effects are seen in a meta-analysis when studies with smaller sample sizes are more likely to be associated with larger and statistically significant effect sizes, in contrast to studies with larger sample sizes. It is important to note however that there can be other reasons for the presence of small-study effects that do not necessarily reflect reporting bias. These can include between-study heterogeneity reflecting different 'true' effects of interventions, an association between the size of a sample and treatment fidelity or risk of bias, or simply by chance (Harrer et al., 2021).

We planned to assess the possibility of reporting bias by conducting PET-PEESE models where appropriate. The PET-PEESE model is a two-stage weighted least squares regression model to detect and adjust for the presence of small-study effects. The PET-PEESE model performs poorly without sufficient studies ($k>=20$) or where between-study heterogeneity (calculated as I^2) is less than 80% (Stanley, 2017, cited in Harrer et al., 2021). As each of our meta-analyses had either too few included studies, or too high heterogeneity, it was not appropriate to conduct PET-PEESE models in this review. We note this as a deviation from our protocol (Gaffney et al., 2024).

Sensitivity Analysis

We assessed the sensitivity of each of the six meta-analyses to our assumptions about the level of correlation between effect sizes within the studies (*rho*). We re-ran each meta-analysis setting *rho* at 0.2, 0.6, and 0.8. The resulting effect sizes and standard errors are presented in Table 8.

Table 13. Results of Sensitivity Analyses Based on Assumed Values of Rho

Outcome	ES metric	*rho*	Pooled ES	$SE_{(pooled\ ES)}$	*P*
Recidivism (TOT)	*lnOR*	0.2	-0.275	0.087	<0.001
		0.6	-0.257	0.089	<0.001
		0.8	-0.245	0.089	<0.001
Recidivism (ITT)	*lnOR*	0.2	-0.260	0.075	<0.001
		0.6	-0.239	0.076	<0.001
		0.8	-0.225	0.079	<0.01
Time to reoffending	*lnHR*	0.2	-0.105	0.129	0.453
		0.6	-0.097	0.107	0.411
		0.8	-0.077	0.104	0.496
Seriousness of subsequent offending	*lnOR*	0.2	-0.477	0.023	<0.001
		0.6	-0.482	0.023	<0.001
		0.8	-0.487	0.021	<0.001
Change in seriousness of reoffending	*lnOR*	0.2	0.118	0.168	0.702
		0.6	0.079	0.157	0.507
		0.8	0.033	0.164	0.203
Secondary outcomes	*g*	0.2	0.043	0.212	0.2

		0.6 0.8	0.044 0.048	0.204 0.199	0.214 0.243

EDIE

Ethnicity

Ethnicity data were inconsistently reported by primary studies included in this review. When available, the majority of participants were identified as White (e.g. Beckman et al., 2010; Mackie et al., 2014; Umbreit, 1994), though some studies included more racially diverse or majority Black samples (Beckman et al., 2023; Brooks, 2013). Hispanic participants were the majority in Gase et al. (2016), and Indigenous status was noted in Daly et al. (2013) and Lawlor et al. (2023). Ethnic breakdowns were entirely missing in several cases.

For studies that used quasi-experimental, pre/post unmatched designs in our review, ethnicity was inconsistently reported. When included, participants were primarily described as Majority White (Bucholz, 2014; De Beus & Rodriguez, 2007), Majority White or Hispanic (McCold & Wachtel, 1998), or Indigenous (Allard et al., 2009). One study did not report any ethnicity data (Evje & Cushman, 2000: Santa Clara).

For studies using RCT pre/post designs, where ethnicity was reported, most studies involved mainly minority populations. Shem-Tov et al. (2021) included a majority Black or Hispanic sample, while Schneider et al. (1985) focused on majority Black participants. Ethnicity was not reported in several studies (Shapland et al., 2008: JRC Northumbria; Wax, 1977).

For studies using RCT post-test only designs, ethnicity was reported as majority White in Povitsky Stickle et al. (2008).

Because of the limited number of studies of non-White participants and the considerable variation within and between these evaluations in terms of evaluation approach, risk of bias, methodological quality, type of treatment and geographic location it was not considered appropriate to compare these with evaluations based on predominantly White samples.

Overall, the evidence about RJIs in our review appears to be based predominantly on evaluating the impact of these on White males.

Gender

In this review the proportion of male participants was generally high, often exceeding 60%. Several studies reported male samples above 80%, such as Daly et al. (2013) at 97% and Umbreit (1994) at 85%. The lowest reported male percentage was 54.9% (Hill-Clark, 2014). A small number of studies did not report gender distribution (Evje & Cushman, 2000: Santa Barbara; Sonoma County).

For studies which used quasi-experimental, pre/post unmatched designs, the proportion of male participants ranged from 53% (McCold & Wachtel, 1998) to 71% (Allard et al., 2009), with most studies reporting a majority-male sample. Gender data were not reported in Evje & Cushman (2000): Santa Clara.

For studies using RCT pre/post designs, the proportion of male participants was consistently high, ranging from 74.8% (Urban & Burge, 2006) to 97% (Schneider et al., 1985). Two studies did not report gender distribution (Shapland et al., 2008: JRC Northumbria; Wax, 1977).

For studies using RCT post-test only designs, gender composition was reported in one study, with Povitsky Stickle et al. (2008) reporting 74.1% male.

In summary, many of the studies did not report the gender of those in their evaluations (e.g., De Beus & Rodriguez, 2007, Dölling & Hartmann, 2011, Evje & Cushman, 2000; Shapland et al. 2008; Sherman et al. 2000). However, of those that did the proportion male ranged from 53% male (McCold & Wachtel, 1998) to 97% (Daly et al. 2013; Schneider et al. 1985). Therefore, this evidence base provides limited information about the impact of RJ on females.

Information about young people with special educational needs and disabilities (SEND), care experience, deprivation and their educational attendance and attainment was not examined in this systematic review. This was in line with the published protocol (Gaffney et al., 2023). In addition, we have limited confidence that the relevant details for these would have been available within the studies.

Key Factors for Successful Implementation

Drawing on our qualitative synthesis (see Appendix D for full reporting), four related domains emerged as critical to the effective and just implementation of restorative justice (RJ) with children and young people: (1) resourcing and infrastructure; (2) integration with legal, social and community systems; (3) workforce capability and training; and (4) fostering a restorative environment through procedurally fair practice.

Resourcing and infrastructure

Across process evaluations, the adequacy and stability of funding and resources were repeatedly linked by participants to the integrity, continuity and quality of delivery (Cannon, 2002; Kellow et al., 2005; Slater et al., 2015; Ventura, 2006; People & Trimboli, 2007; Robinson, 2010; Pearson, 2019; Campbell et al., 2005). Insufficient and short-term funding were put forward as key challenges impacting:

- Workforce instability and loss of specialism: High staff turnover and limited opportunities to build specialist practice undermined programme continuity and the consistency of restorative philosophy in day-to-day decision-making (Cannon, 2002). This, in turn, weakened the relationships necessary for safe, high-quality encounters. A member of staff from court administration in an evaluation of Pine Ridge Project, stated: *"I want to say that it's probably, it's changed hands many, many times, the leading persons of that, the program coordinator has changed often and that's probably contributed to the program not doing as well as it should have. Yeah. Too many philosophies working there too."* (Court Administration Staff in Cannon, 2002, p. 130)

- Constrained practice conditions: Limited budgets reduced creativity around reparative activities and restricted access to suitable venues, both of which narrowed the menu of meaningful options available to participants and could compromise safety, dignity and engagement. For example, a staff member in Pearson (2018, p.95) said: *"It takes a special individual to work with this certain group of kids, and it's hard to keep those special people if they feel they are not compensated correctly, you know, a lot of people can't work with good kids, a lot of people can't work with kids period, but to work*

with these at-risk kids and to endure the verbal abuse the emotional abuse, the long hours yeah I feel that if the pay was higher more people those special people would stay longer, I can't really say they would do more because their passion driven."

Taken together, these findings emphasise that RJ requires not only start-up funds but predictable, medium-to-long-term investment to stabilise staffing and maintain core delivery conditions.

System integration and stakeholder buy-in

Successful delivery depended on RJ being embedded within existing legal, social and community systems—with explicit cooperation from key stakeholders (police, youth courts, referrers, and community organisations). Participants across several studies and geographies documented how weak relationships with police and youth courts reduced referrals, dampened victim engagement and led to inconsistent processes (Slater et al., 2015). Scepticism within Youth Courts—particularly regarding community panels—limited uptake and created implementation friction. Process evaluations highlighted the impact of poor or challenging relationships with the police and youth courts on the number of referrals to, victim engagement in, and process consistency of restorative justice interventions implemented with children and young people involved in crime and violence. For example:

- *"Frontline Police sabotaging, saying (to the victim) 'Don't waste your bloody time. He is a shit this kid. Don't go'."* (Participant in Slater et al., 2015, p. 634)
- *"The need to remind YOTS [youth offending teams) of the availability of the service has been a recurrent theme. Referrals have dried up when memories of presentations about the project have begun to fade."* (Evaluator in Wilcox & Hoyle, 2004, p. 32)
- *"The problem with community conferencing is … implementation. To be effective [it] requires the active support of police and magistrates."* (Respondent in Prenzler & Hayes, 1998, p. 27)

By contrast, programmes that cultivated system-level partnerships were better able to sustain themselves and broaden opportunities for young people. Ventura (2006), for example, described how the Mount Pleasant Youth Court achieved self-sustainability by developing the programme with assistance and support from the

wider juvenile justice community. Engagement with community initiatives (e.g., local businesses) was considered central to expand the range of reparative or developmental options—such as securing work placements for young people who had committed car theft (Kellow et al., 2005)—and help ensure participation and positive outcomes (e.g., Laundra et al., 2013).

The analysis suggests that strategic alignment (clear referral pathways, agreed thresholds, and shared goals) and operational mechanisms (regular liaison, joint training, and feedback loops) are foundational to implementation success.

Workforce capability and training

There was strong consensus that consistent, role-appropriate training is central to effective and just RJ delivery (Wilcox & Hoyle, 2004). Process evaluations highlighted the need for:

- Skilled facilitators and informed partners: Facilitators, volunteers, police, magistrates and other contributors should receive regular training to sustain practice quality and a shared understanding of RJ principles (Curry et al., 2004; People & Trimboli, 2007; Wilcox & Hoyle, 2004). For example, an Officer in People & Trimboli (2007, p.48) said: "*A 30 – 40 minute lecture would have been useful. It would have been good to know, from the outset, the list of offences that were eligible and ineligible. If I knew more about the program, I could have said to the offender, get your solicitor to suggest the program to the magistrate.*"
- Training across the RJ "ecosystem": Beyond practitioners and participants, those outside the immediate process—particularly referrers—require training on the mechanics of RJ (eligibility, timing, preparation, safeguarding) to support appropriate, timely referrals and to set accurate expectations (People & Trimboli, 2007).

Sustained training can mitigate risks introduced by staff turnover and support fidelity, especially where programmes rely on volunteers or multi-agency delivery.

Fostering a restorative environment (procedural justice in practice)

A cross-cutting theme concerned the procedural conditions under which RJ occurs—participation and meaningful engagement; humanising, respectful treatment; opportunities for voice and dialogue; and careful facilitation. According

to participants across multiple studies, these conditions enable the core elements of RJ to be realised in practice:

- Victim participation and safety: Engagement depends on the context and space of encounters. Victims reported that poorly chosen venues (e.g., meetings at an offender's home) could feel unsafe or intimidating (Miers et al., 2001). Planning should prioritise victims' input on timing, location and accessibility, alongside clear information and choice.
- Attitudes and readiness: Victims' attitudes towards young people influence willingness to participate and perceptions of fairness (Maxwell et al., 2004); likewise, young people's acceptance of responsibility and full engagement was linked strongly to positive conference experiences and outcomes (Slater et al., 2015).
- Tailoring interventions to individual needs and circumstances: RJ should be tailored to people's needs in processes and sanctions (Bright et al., 2015). For example, taking into account learning difficulties, mental health issues and age/developmental stage. Newburn et al. (2002) also highlights the need to consider victims' input when selecting the time, venue and location of meetings. This includes considerations of time and access to locations (Campbell et al., 2005; Maxwell et al., 2004). Sanctions and outcomes should also be matched to young people and their behaviour, in a way that capitalises on young people's potential and takes into account the fact that RJ may not be suitable for all offences (Cannon, 2002).
- Family involvement—an enabling but nuanced lever: Involving parents or guardians can strengthen the process, reinforce accountability, and create learning opportunities (Newburn et al., 2002; Bernard, 2014). However, evaluations also identified challenges: absence of parents or low-quality involvement (e.g., disengaged or adversarial participation) could undermine progress, with staff in a county-wide US diversion programme noting such difficulties (Pearson, 2019). This "duality" illustrates that mechanisms promoting participation can both enable and hinder outcomes depending on quality and context.

Overall, fostering a restorative environment requires deliberate attention to preparation, voluntariness, safety, dignity and voice for all parties, supported by skilled facilitation and appropriate practical arrangements.

Implications for implementation

- Secure stable, multi-year funding to maintain staffing, specialist expertise and suitable venues; monitor caseloads to protect quality.
- Formalise system partnerships (police, youth courts, referrers) via clear referral protocols, information-sharing agreements and regular liaison to smooth operational flow and ensure consistency.
- Build community partnerships (e.g., businesses, education/training providers) to expand reparative and developmental options, including work placements.
- Invest in role-specific, recurrent training for facilitators, volunteers and justice partners; provide concise training/briefings for referrers and plain-language preparation for participants.
- Centre procedural justice: co-design logistics with victims, offer safe and accessible venues, and ensure informed choice throughout.
- Plan for family engagement with structured preparation and support; set expectations and provide guidance to maximise constructive involvement.
- Screen for readiness and support accountability, ensuring that young people understand the process, accept responsibility, and receive the preparation needed for meaningful participation.

These factors are mutually reinforcing: stable infrastructure enables skilled practice; system buy-in unlocks timely referrals and options; and procedurally fair delivery sustains engagement and legitimacy. Together, they form the backbone of successful RJ implementation for children and young people.

How much does it Cost?

Within this systematic review, no primary studies provided details on the actual costs incurred.

Conclusion and Takeaway Messages

Our review indicates that restorative justice (RJ) shows promise for reducing subsequent offending among children and young people, including the likelihood of serious offending. Effects tend to be stronger when interventions are delivered with high "restorativeness"—that is, when victims and young people receive thorough preparation, supporters are included, and community participation is built in. At the same time, we found no convincing evidence that RJ changes the

seriousness of later offences, extends the time to reoffending, or consistently improves other outcomes. These findings should therefore be read as encouraging but provisional. Confidence in the effect estimates is limited by the quality of the underlying evidence. Many randomised trials were at high risk of bias, and most quasi-experimental studies were vulnerable to confounding, selection, and measurement problems. This matters not only for internal validity but also because RJ is often compared to traditional processing (arrest or conviction), which is itself associated with higher reoffending. It remains uncertain whether RJ outperforms simple diversion without additional sanctions.

Equity and applicability are also concerns. The evidence base is skewed towards White male samples in the United States and Australia, despite RJ's roots in Indigenous traditions. Given the selective nature of RJ (requiring admission of responsibility, voluntariness, perceived suitability, and often parental support), there is a real risk that access and benefits accrue unevenly, potentially reinforcing existing disparities. Evidence specific to 18–25-year-olds and to Global Majority contexts is thin, limiting generalisability.

There was also limited evidence about RJIs being used as an approach to prevent initial offending. This may be a result of the searching strategy or an absence of evidence.

Implementation conditions strongly shape outcomes. The participants interviewed as part of the qualitative evidence review suggested that programmes were more likely to succeed when they had stable, multi-year resourcing; were embedded within police, youth court, and community systems with clear referral pathways; and maintained skilled, regularly trained facilitators and partners. Creating a genuinely restorative environment—one that protects voluntariness, safety, dignity, and voice for all parties—requires careful preparation, attention to balanced communication and cultural/language sensitivity, and purposeful involvement of families. Interventions should also be responsive to age and developmental stage, special educational needs, and mental health, and should be applied with clear offence-type boundaries.

For practice, commissioners and providers should pair adoption with safeguards that promote equitable access and outcomes (e.g., monitoring uptake and impact by ethnicity and need), formalise partnerships with police, courts, and community organisations to widen reparative options, set minimum training standards, and provide clear participant preparation to protect informed choice and

voluntariness. Investment in medium- to long-term funding and data systems is essential for fidelity, quality assurance, and continuous learning.

For research, the field needs pre-registered, adequately powered trials and stronger quasi-experimental designs with independent outcome assessment and intention-to-treat analyses. Future evaluations should compare RJ directly with simple diversion, measure and report fidelity/restorativeness[4] and use individual participant data approaches to bring mixed adult–youth samples into view for 18–25s. Studies should probe mechanisms and heterogeneity (e.g., by ethnicity, offence type, readiness/voluntariness) and report harms as well as benefits.

Takeaway Messages

Restorative justice interventions can reduce reoffending among children and young people—especially when delivered with high restorativeness and under strong implementation conditions. But methodological limits and equity risks mean any scale-up should proceed with care: build capacity and partnerships, safeguard voluntariness and fairness, and generate better evidence as you go.

[4] Restorativeness could be variously operationalised, but should assess the extent to which the three pillars of RJ (i.e., addressing the needs of those harmed, those responsible for accountability, and the communities for relational reconciliation and reintegration of those responsible were represented; McCold, 2000).

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* = *included studies in qualitative evidence synthesis*

^ = *included studies in the meta-analysis*

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