Guide for Implementing the Comprehensive Strategy for Serious, Violent, and Chronic Juvenile Offenders
Guide for Implementing the Comprehensive Strategy for Serious, Violent, and Chronic Juvenile Offenders

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Juvenile violence is increasing in America and is causing great fear both of and for our youth. The FBI’s most recent data, published in the *Uniform Crime Reports*, show that from 1992 to 1993, arrests of juveniles under age 18 for violent crimes increased nearly 6 percent, while arrests of adults for violent crimes decreased. Juvenile arrests increased nearly 14 percent for murder, almost 6 percent for robbery, and nearly 6 percent for assault. Even more alarming, arrests of juveniles under 15 for murder increased more than 24 percent, while arrests of youth in this age group for weapons violations increased 14 percent. During the same period, arrests of adults increased only 2 percent for murder and 7 percent for weapons violations.

These patterns continue a trend that began in the latter half of the 1980’s. Between 1989 and 1993, arrests of juveniles for violent crimes increased 36 percent and arrests for homicides increased nearly 45 percent. National victimization data show a similar pattern. Between 1987 and 1992, robberies and assaults (including simple assaults) committed against juveniles increased more than 12 percent, from 1.3 million per year to in excess of 1.5 million.

America is demanding solutions to escalating violent juvenile crime. The Office of Juvenile Justice and Delinquency Prevention’s Comprehensive Strategy for Serious, Violent, and Chronic Juvenile Offenders provides a framework for strategic responses at the community, city, State, and national levels. The *Guide for Implementing the Comprehensive Strategy for Serious, Violent, and Chronic Juvenile Offenders* provides the necessary tools and program information to systematically and comprehensively address rising violent juvenile crime. Implementing the Comprehensive Strategy, however, will require a true national commitment to improving the juvenile justice system and providing appropriate prevention and programmatic interventions for our youth.

The Comprehensive Strategy and this *Guide* are important resources for communities interested in identifying and implementing solutions to growing juvenile violence by creating a more effective juvenile justice system. While this is being accomplished, and to the extent that the juvenile justice system is not currently able to handle some of the more violent or intractable juvenile offenders, waivers and transfers of some juveniles to the criminal justice system may be required in order to protect society. We must begin, however, to strengthen the juvenile justice system by providing the tools and graduated sanction programs necessary to address the needs of juvenile offender populations. Only then can the juvenile justice system play its proper role in working effectively with delinquent youth and securing public safety.

The *Guide* provides “best practice” information found in an exhaustive survey of the research addressing successful mobilization of communities, assessment of the needs of those communities in a risk-focused prevention approach, and the identification of appropriate and effective prevention and intervention activities in a graduated sanctions model. I am pleased to provide this *Guide* as a tool for communities that are ready to make a sustained commitment to turn back the tide of juvenile violence that they are confronting.

Shay Bilchik
Administrator
Preface

In 1993, the Office of Juvenile Justice and Delinquency Prevention published its *Comprehensive Strategy for Serious, Violent, and Chronic Juvenile Offenders: Program Summary* (Wilson and Howell). Shortly thereafter, OJJDP made a competitive award to the National Council on Crime and Delinquency (NCCD) to undertake a national assessment of programs to identify effective and promising programs nationwide for use in implementing the Comprehensive Strategy. NCCD was aided by Developmental Research and Programs, Inc., (DRP) in this review. Under the direction of Dr. Barry Krisberg, NCCD assumed responsibility for the review of treatment programs, and DRP, under the direction of Dr. David Hawkins, carried out the review of prevention programs. Five products resulted from the work Krisberg and Hawkins directed:


In its report on “Preventing Serious, Violent, and Chronic Juvenile Offending,” Developmental Research and Programs, Inc., used the term “potentially promising programs” to describe those interventions that did not have sufficiently strong research designs to warrant calling them “promising.” Solely for the purpose of simplifying the language in this Guide, the term “promising” is used to describe this program category.
Acknowledgments

OJJDP is grateful to Barry Krisberg, David Hawkins, and Richard Catalano for their superb work in reviewing programs and tools for use in implementing the Comprehensive Strategy. With the help of their colleagues, they carried out the entire project in less than 1 year. This was an enormous effort that demonstrated their commitment to the project, to the field, and to finding solutions to serious, violent, and chronic juvenile crime.

OJJDP thanks the many professionals in the field who helped NCCD and DRP identify promising and effective programs and all the program directors who responded promptly to requests from NCCD and DRP for information on their programs. Without this assistance, this project could not have been brought to such a successful conclusion.

OJJDP also thanks Dr. James C. “Buddy” Howell, recently retired from OJJDP’s Research and Program Development Division, for his dedication to the study of juvenile justice, his pioneering work in formulating the Comprehensive Strategy, and his many contributions to the production and editing of this document.
Increasing youth violence has become a major national concern, and juvenile arrests are on the rise.

**Introduction**

This Guide is a resource to help States, cities, and communities implement OJJDP’s Comprehensive Strategy for Serious, Violent, and Chronic Juvenile Offenders (Wilson and Howell, 1993). The Guide is presented in four parts. The first provides a detailed blueprint for use by communities and organizations that plan to implement all or part of the Comprehensive Strategy. The remaining three parts provide detailed, research-focused program information on key topics covered in Part I, including prevention, graduated sanctions, and risk assessment.

**Arrest Trends**

The following review of research and statistics on delinquency assesses what is known about serious, violent, and chronic juvenile delinquency.

Increasing youth violence has become a major national concern, and juvenile arrests are on the rise. Between 1984 and 1993, arrests of juveniles for violent offenses rose by nearly 68 percent. Most of this increase occurred between 1989 and 1993, during which time juvenile arrests for murder increased 45 percent, arrests for robbery increased 37 percent, and arrests for aggravated assault increased 37 percent (FBI Uniform Crime Reports, 1994). This pattern was especially pronounced from 1992 to 1993, when:

- Total juvenile arrests increased 5 percent.
- Juvenile arrests for violent crimes increased 6 percent.
- Juvenile arrests for homicide increased 14 percent.
- Juvenile arrests for weapons violations increased 12 percent.
- Adult changes in these categories were negligible, with the exception of weapons violations, which increased 7 percent (FBI Uniform Crime Reports, 1994).

The most alarming statistics among these increases are the growth in homicides and weapons violations among younger juveniles. Between 1992 and 1993, homicide arrests of adolescents under age 15 increased 24 percent while arrests of youth in this age group for weapons violations increased 12 percent (FBI Uniform Crime Reports, 1994).

**Victimization**

National victimization data also show an increase in violent crimes against juveniles. An estimated 1.55 million violent crimes were committed against juveniles in 1992, a 23 percent increase since 1987 (Moone, 1994).

Children are raped, robbed, and assaulted at higher rates than adults, according to the National Crime Victims Survey (Moone, 1994). In 1992, juvenile (ages 12 to 17) victimization rates for these violent crimes were about the same as rates for youth 18 to 24 years old and were almost twice those for individuals ages 25 to 34. Although these three groups were victims of robbery at about the same rate, juveniles were assaulted at much higher rates than the two older groups. Of an estimated 6.62 million rapes, robberies, and assaults committed in 1992, approximately 1.3 million were assaults committed against juveniles (Moone, 1994).
Chronic, Serious, and Violent Career Patterns

Evidence continues to mount that a small proportion of offenders commit the most of the serious and violent juvenile crimes. Several studies have provided estimates of the proportion of juveniles in the general population that is responsible for most serious violent juvenile delinquency.

The Philadelphia birth cohort study (Wolfgang, Figlio, and Sellin, 1972) found that “chronic offenders” (five or more police contacts) constituted 6 percent of the cohort and 18 percent of the cohort’s delinquents. Chronic offenders were responsible for 51 percent of all offenses and about two-thirds of all violent offenses. A 15-year followup study of a 10 percent sample of the original Philadelphia birth cohort (Wolfgang, Thornberry, and Figlio, 1987) examined the cohort’s police records through age 30. Researchers found that although chronic offenders’ offenses increased in seriousness into adulthood, arrests declined steadily after age 18 and about one-quarter of the adults had no official juvenile record.

A second Philadelphia birth cohort study (Tracy, Wolfgang, and Figlio, 1990) found that 7 percent of the cohort and 23 percent of offenders in that cohort accounted for 61 percent of all offenses, 65 percent of aggravated assaults, 60 percent of homicides, 75 percent of forcible rapes, and 73 percent of robberies.

Shannon (1988, 1991) studied three youth cohorts in Racine, Wisconsin. Although he found slightly less concentration of crime among chronic offenders than was found in the Philadelphia studies, the findings regarding criminal patterns were very similar to those of the Philadelphia research: From 8 percent to 14 percent of each cohort was responsible for about 75 percent of all felony arrests.

Hamparian, Schuster, Dinitz, and Conrad’s (1978) cohort study of arrested juveniles in Columbus, Ohio, found that juveniles arrested for violent offenses were a small proportion (2 percent) of the total cohort. The researchers also observed that juvenile offenders did not typically progress from less to more serious crime, making it difficult to predict violent behavior.

Hamparian, Schuster, Davis, and White (1985) conducted a followup study of the violent subgroup of the Columbus cohort into their midtwenties. The study found that almost 60 percent of these individuals were arrested at least once as a young adult for a felony offense. The first adult arrest was likely to be prior to age 20. Those who were subsequently arrested in adulthood tended to have more arrests as juveniles, to have begun their delinquent acts earlier, to have continued them late into their juvenile years, and to have been involved in more serious violent offenses as juveniles. Many of these youth have been committed at least once to a State juvenile correctional facility.

Snyder (1988) studied a cohort of Phoenix and Utah juveniles, among whom 34 percent had a juvenile court record. Among the entire cohort, 5 percent had four or more referrals to juvenile court. They represented 16 percent of offenders but were responsible for 51 percent of all offenses, including 61 percent of murders, 64 percent of rapes, 67 percent of robberies, 61 percent of aggravated assaults, and 66 percent of burglary cases.

The National Youth Survey (NYS) showed (Elliott, 1994; Elliott, Huizinga, and Morse, 1986) that about 5 percent of all juveniles (ages 12 to 17) at each age level were classified as serious violent offenders (those who have engaged in three or more of the following offenses: aggravated assault, sexual assault, gang fights, and strong-arm robbery). On average, these offenders commit 132 delinquent offenses annually, 8 of which were serious violent offenses; however, 84 percent of serious violent offenders in the survey had no official delinquency record.

Elliott (1994) and Elliott, Huizinga, and Morse’s (1986) analyses of the NYS data also showed that the onset of serious violent careers begins to increase at age 12, doubles between ages 13 and 14, continues to increase to a peak at ages 16 to 17, drops 50 percent by age 18,
New Research on Serious, Violent, and Chronic Juvenile Offenders

OJJDP’s Program of Research on Causes and Correlates of Juvenile Delinquency (three longitudinal studies in Denver, Colorado; Rochester, New York; and Pittsburgh, Pennsylvania) has produced important new information on serious, violent, and chronic juvenile careers (Huizinga, Loeber, and Thornberry, 1994; Huizinga, Loeber, and Thornberry, In press). These three studies are the most detailed ever conducted on the causes and correlates of delinquency. Large random samples of inner-city high-risk youth are being studied using the same core measures, beginning with children 6 years old. The results reported below (Huizinga et al., In press) cover data collected between 1988 and 1992. All of the juvenile delinquency involvement reported below is based on self-reports by the surveyed youth. Findings on arrests and court referrals will be reported later.

For intervention and treatment purposes, it is clear that the juvenile justice system does not see most offenders until it is too late to intervene effectively.

Examination of arrest data shows that there is a significant time lag between the peak age at which juveniles are actively involved in serious violent offending and peak arrest ages (Elliott, 1994; Elliott et al., 1986). Whereas the NYS indicates that actual violent behavior of males peaks at age 17, studies based on official records show that arrest rates remain high between ages 18 and 25. Fewer than 5 percent of serious violent offenders in the NYS had an initial arrest for a serious violent offense before age 18. Therefore, initial arrests for a violent offense in a serious violent career most often take place several years after initiation into this type of behavior, given that nearly half of those who continued their violent careers into their twenties reported having begun their violent offending before age 11. For intervention and treatment purposes, it is clear that the juvenile justice system is not seeing most offenders until it is too late to intervene effectively.

The NYS sample were ages 11 to 17 in 1976. When they were last interviewed in 1993, they were in the 27 to 33 age range. A key question is whether more recent data show similar patterns. Therefore, we turn to the National Program of Research on Causes and Correlates of Juvenile Delinquency.

Violent Careers

A surprisingly large proportion of juveniles committed violent acts. By the time they were in the 10th or 11th grades, 58 percent of the Rochester juveniles and 54 percent of the Denver youth had self-reported being involved in a violent crime at some time in their lives. However, tremendous variation was observed in the extensiveness of youth involvement. Chronic violent offenders, who constituted 15 percent of the adolescent sample in Rochester and 14 percent of the sample in Denver, accounted for the vast majority of all violent offenses: 75 percent of the violent offenses in Rochester and 82 percent of the violent offenses in Denver.

Age of Onset

A large proportion of those who are involved in violent behavior at an early age eventually become chronic violent offenders. Although this finding is not new, the early age of onset was startling. In Rochester, of those who began committing violent offenses at age 9 or younger, 39 percent became
chronic violent offenders during adolescence. However, among those who began committing violent offenses between ages 10 and 12, 30 percent became chronic violent offenders. The Denver findings were more striking. Of those who initiated violent behavior at age 9 or younger, 62 percent became chronic violent offenders. On average, the chronic violent offenders began offending a full year prior to those who did not become chronic offenders.

A large proportion of those who are involved in violent behavior at an early age eventually become chronic violent offenders.

Chronic Offending

In Rochester, a total of 5,504 violent acts were self-reported by the respondents. Of these, nonchronic violent offenders up to ages 17 and 18 reported 1,370 violent offenses, or an average of 3.9 per person. On the other hand, chronic violent offenders reported a total of 4,134 violent crimes, an average of 33.6 per person. Denver respondents up to ages 17 and 18 reported 5,164 violent acts. Of these, 927 violent offenses were committed by nonchronic offenders, an average of 4.5 per person; 4,237 violent offenses were committed by chronic offenders, an average of 51.7 per person.

Prevalence Rates

Preliminary analyses of serious violent prevalence rates (percentage of boys who self-report serious violent offenses) show a different pattern than has been found in other studies of individual offending. Previous studies have found male prevalence rates to peak at ages 16 to 17, unlike arrest rates, which generally have been found to peak at ages 18 to 19. However, data from these three sites have shown no decline in male self-reported serious violent offending in late adolescence. These prevalence rates remain high (17 to 20 percent) during the 17 to 19 age period. Whether an anticipated downward age curve will be found for males in the future requires analysis of additional years of data that are being collected at each site.

Co-Occurring Problem Behaviors

All three studies showed that chronic violent offenders not only engaged in multiple types of offenses but also in a variety of other problem behaviors. These youth have higher rates of dropping out of school, gun ownership for protection, gun use, gang membership, teenage sexual activity, teenage parenthood, and early independence from their family. In Rochester, nearly two-thirds of chronic violent offenders reported being members of street gangs. During the period of gang membership among juveniles in Rochester and Denver, levels of involvement in violence were much higher than during the periods before and after gang membership.

The Rochester site examined the relationship between exposure to family violence and later involvement in youth violence. Not only was greater risk for violent offending found to exist when a child was physically abused or neglected early in life, but such children were more likely to begin violent offending earlier and to be more involved in such offending than children who had not been abused or neglected. Second, this research revealed that children who witnessed and experienced multiple acts of violence in the home (child abuse, spouse abuse, and family conflict) were twice as likely to commit violent acts themselves (Thornberry, 1994).

Multiple Risk Factors

These three studies have also confirmed earlier research showing that serious, violent, chronic juvenile offenders have multiple risk factors. No single risk factor is responsible for serious delinquency and violence. Chronic offenders have multiple risk factors in their backgrounds, including deficits in such arenas as family, school, peers, and neighborhood characteristics. Moreover, these factors tend to be cumulative and to interact with one another to produce high levels of serious offending.
Interacting Risk Factors

The family violence analysis showed that as risk factors accumulate, the risks for delinquency increase substantially; that is, the presence of additional types of family violence increased the likelihood of subsequent violent youth behavior. Other data showed that multiple risk factors interact with one another to produce higher levels of risk than simple additive models would suggest. For example, juveniles who have both delinquent friends and problem parents exhibit the highest levels of involvement in serious delinquency, and this effect far exceeds the individual effects of either peers or parents by themselves. The roles of parents and peers interact in influencing the level of serious and violent delinquency.

Protective Factors

Not all high-risk youth succumb to the risk and actually engage in delinquency or violence. Some high-risk youth are resilient and manage to avoid the negative influences of risk factors. Researchers in the Rochester site identified 12 protective factors in the categories of family, school, peer group, and personal characteristics. Individually, each of these protective factors had only a small impact on reducing delinquency. Collectively, however, the presence of multiple protective factors had a sizeable impact on reducing delinquency. Of the high-risk youth (those who had five or more risk factors), 80 percent of those who had fewer than six of the protective factors in their environment reported involvement in serious delinquency. On the other hand, of the high-risk youth, only 25 percent who had nine or more of these protective factors in their environment reported involvement in serious delinquency.

Developmental Pathways

The studies also delineated pathways juveniles take to problem behavior and serious, violent, and chronic offending. The following developmental pathways were identified in the Pittsburgh study:

Authority Conflict Pathway—starting with stubborn behavior, followed by defiance, and subsequently followed by authority avoidance (staying out late, truancy, running away from home).

Covert Pathway—starting with minor covert behaviors, followed by property damage, and subsequently followed by moderate to serious delinquency (burglary, fraud, car theft).

Overt Pathway—starting with minor aggression, followed by fighting, and subsequently followed by more serious violence (attacks, rape).

The overt pathway is the most violent. However, the most serious, violent, and chronic offenders traveled in all three pathways. Most (75 percent) high-rate offenders fit into one or more of these pathways.

If we want to reduce the overall level of violence in society, we must successfully intervene in the lives of high-risk offenders, who commit about 75 percent of all violent juvenile offenses.

Conclusion

These studies clearly document that a rather small subset of the offending juvenile population is responsible for the bulk of serious violent juvenile crime. While this is not a recent revelation, the accumulation of evidence has added important knowledge to our understanding of serious, violent, and chronic offending. What do the data and research tell us?

First, most violent offending is not brought to the attention of juvenile justice authorities. The juvenile justice system does not have an opportunity to rehabilitate these offenders. Second, in most cases the juvenile justice system is intervening toward the end of self-reported offending careers, when the crime-reduction potential is much lower. Third, scarce resources are often wasted on noncareer juvenile delinquents who are unlikely to commit further offenses because they are at the end of their short offending span. Fourth, prevention programs are much more likely to be successful than intervention programs that attempt to reduce and offset risk factors that, over time, multiply and become more
interwoven. Fifth, intervention programs must target career offenders early. Research has highlighted the importance of identifying risk factors early in the development of serious and violent careers. Sixth, such programs must be comprehensive, addressing multiple risk factors. Seventh, interventions should be made available on a long-term basis because of the negative interaction of multiple risk factors. Eighth, a subset of serious, violent, and chronic juvenile delinquents consists of dangerous offenders who present a real threat to public safety. To protect society, these cases must be reviewed for the possibility of prosecution in the criminal justice system.

Authorities are beginning to see the need to focus prevention and juvenile justice resources on the serious, violent, and chronic juvenile offender. As Huizinga, Loeber, and Thornberry (In press) have pointed out, if we want to reduce the overall level of violence in our society, we must successfully intervene in the lives of high-risk offenders because they constitute about 15 percent of high-risk youth yet commit about 75 percent of all violent juvenile offenses. The researchers’ observation is sobering: “even if we were 100 percent successful in preventing the nonchronic violent offenders from ever engaging in violence, we would only reduce the level of violent offending by 25 percent” (p. 17). The only way to substantially reduce serious and violent offending is through prevention and early intervention with youth who are on paths toward becoming serious, violent, chronic offenders.

The Guide presents the best available technology for addressing serious, violent, and chronic juvenile offending. It contains a blueprint for applying this technology that reflects the understanding research has provided regarding the development of careers of serious and violent offenders.

In addition, the Guide presents advanced techniques that take into account what we know about risk factors and causes and correlates of serious and violent offending. It incorporates programs that have been evaluated and found to be effective or promising, and that constitute a continuum of care, and a parallel system of graduated sanctions that, combined with prevention and early intervention, constitutes a comprehensive strategy.

Finally, the approach this Guide outlines is comprehensive in another respect. It calls for collaborative interventions on the part of all the human service systems—juvenile justice, mental health, health care education, and child welfare. The Comprehensive Strategy recommended in this Guide is necessary to address what otherwise would be an intractable problem.
OJJDP’s Comprehensive Strategy

This Guide brings together in one place the information necessary for a community to design and implement its own comprehensive strategy to deal with the problem of serious, violent, and chronic juvenile delinquency. For the convenience of the reader, we include in this section the essence of OJJDP’s Comprehensive Strategy as originally presented in the Comprehensive Strategy for Serious, Violent, and Chronic Juvenile Offenders: Program Summary (Wilson and Howell, 1993). Figure 1 provides an overview of the key elements of the Comprehensive Strategy.

- **We must strengthen the family** in its primary responsibility to instill moral values and provide guidance and support to children. Where there is no functional family unit, we must establish a family surrogate and assist that entity to guide and nurture the child.

- **We must support core social institutions**—schools, religious institutions, and community organizations—in their roles of developing capable, mature, and responsible youth. A goal of each of these societal institutions should be to ensure that children have the opportunity and support to mature into productive law-abiding citizens. A nurturing community environment requires that core social institutions be actively involved in the lives of youth. Community organizations include public and private youth-serving agencies; neighborhood groups; and business and commercial organizations providing employment, training, and other meaningful economic opportunities for youth.

- **We must promote delinquency prevention** as the most cost-effective approach to reducing juvenile delinquency. Families, schools, religious institutions, and community organizations, including citizen volunteers and the private sector, must be enlisted in the Nation’s delinquency prevention efforts. These core socializing institutions must be strengthened and assisted in their efforts to ensure that children have the opportunity to become capable and responsible citizens. When children engage in “acting out” behavior, such as status offenses, the family and community, in concert with child welfare agencies, must respond with appropriate treatment and support services. Communities must take the lead in designing and building comprehensive prevention approaches that address known risk factors and target other youth at risk of delinquency.

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**The emerging professional consensus is that communities need comprehensive strategies to combat youth crime. OJJDP has developed a framework for such a comprehensive approach.**

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**General Principles**

Increases in juvenile arrests and admissions to juvenile facilities are overwhelming communities across the Nation. At the same time, communities have fewer resources—due to fiscal crises—to handle these increases. Elected officials have responded to public fears about juvenile crime by passing a slew of “get tough” measures nationwide. But few juvenile justice professionals believe that tougher laws by themselves will stem the tide of serious youth crime. The emerging professional consensus is that communities need comprehensive strategies to combat youth crime. OJJDP has developed a framework for such a comprehensive approach. OJJDP’s Comprehensive Strategy is based on five general principles.
### Overview of Comprehensive Strategy

#### Prevention
**Target Population: At-Risk Youth**

- **Youth Development Goals:**
  - Healthy and nurturing families.
  - Safe communities.
  - School attachment.
  - Prosocial peer relations.
  - Personal development and life skills.
  - Healthy lifestyle choices.

#### Graduated Sanctions
**Target Population: Delinquent Youth**

- **Youth Habilitation Goals:**
  - Healthy family participation.
  - Community reintegration.
  - Educational success and skills development.
  - Healthy peer network development.
  - Prosocial values development.
  - Healthy lifestyle choices.

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**Figure 1**

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<th>Problem Behavior</th>
<th>Noncriminal Misbehavior</th>
<th>Delinquency</th>
<th>Serious, Violent, and Chronic Offending</th>
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• **We must intervene immediately and effectively when delinquent behavior occurs** to successfully prevent delinquent offenders from becoming chronic offenders or progressively committing more serious and violent crimes. Initial intervention efforts, under an umbrella of system authorities (police, intake, and probation), should be centered in the family and other core societal institutions. Juvenile justice system authorities should ensure that an appropriate response occurs and act quickly and firmly if the need for formal system adjudication and sanctions has been demonstrated.

• **We must identify and control the small group of serious, violent, and chronic juvenile offenders** who have committed felony offenses or have failed to respond to intervention and nonsecure community-based treatment and rehabilitation services offered by the juvenile justice system. Measures to address delinquent offenders who are a threat to community safety may include placement in secure community-based facilities, training schools and other secure juvenile facilities, and, when necessary, waiver or transfer of the most violent or intractable juveniles to the criminal justice system.

Under OJJDP’s Comprehensive Strategy, it is the family and community, supported by our core social institutions, that have primary responsibility for meeting the basic socializing needs of our Nation’s children. Socially harmful conduct, acting-out behavior, and delinquency may be signs of the family being unable to meet its responsibility. It is at these times that the community must support and assist the family in the socialization process, particularly for youth at the greatest risk of delinquency.

The strategy incorporates two principal components: (1) preventing youth from becoming delinquent by focusing prevention programs on at-risk youth and (2) improving the juvenile justice system response to delinquent offenders through a system of graduated sanctions and a continuum of treatment alternatives that include immediate intervention, intermediate sanctions, and community-based corrections sanctions, incorporating restitution and community service when appropriate.

### Target Populations

The initial target population for prevention programs is juveniles at risk of involvement in delinquent activity. While primary delinquency prevention programs provide services to all youth wishing to participate, maximum impact on future delinquent conduct can be achieved by seeking to identify and involve in prevention programs youth at greatest risk of involvement in delinquent activity. This includes youth who exhibit known risk factors for future delinquency; drug and alcohol abuse; and youth who have had contact with the juvenile justice system as nonoffenders (neglected, abused, and dependent), status offenders (runaways, truants, alcohol offenders, and incorrigibles), or minor delinquent offenders.

The next target population is youth, both male and female, who have committed delinquent (criminal) acts, including juvenile offenders who evidence a high likelihood of becoming, or who already are, serious, violent, or chronic offenders.

### Program Rationale

What can communities and the juvenile justice system do to prevent the development of and interrupt the progression of delinquent and criminal careers? Juvenile justice agencies and programs are one part of a larger picture that involves many other local agencies and programs that are responsible for working with at-risk youth and their families. It is important that juvenile delinquency prevention and intervention programs are integrated with local police, social service, child welfare, school, and family preservation programs and that these programs reflect local community determinations of the most pressing problems and program priorities. Establishing community planning teams that include a broad base of participants drawn from local government and the community (e.g., community-based youth development organizations, schools, law enforcement, social service agencies, civic organizations, religious groups, parents, and teens) will help create consensus on priorities and services to be provided as well as build support for a comprehensive program approach that draws on all sectors of the community for participation. Comprehensive approaches to delinquency prevention and intervention will require collaborative efforts between
the juvenile justice system and other service provision systems, including mental health, health, child welfare, and education. Developing mechanisms that effectively link these different service providers at the program level will need to be an important component of every community's comprehensive plan.

Evidence suggests that a risk reduction and protective factor enhancement approach to prevention is effective. Risk factors include the family, the school, the peer group, the community, and characteristics of juveniles themselves. The more risk factors present in a community, the greater the likelihood of youth problems in that community as children are exposed to those risk factors. Prevention strategies will need to be comprehensive, addressing each of the risk factors as they relate to the chronological development of children being served.

Research and experience in intervention and treatment programming suggest that a highly structured system of graduated sanctions holds significant promise. The goal of graduated sanctions is to increase the effectiveness of the juvenile justice system in responding to juveniles who have committed criminal acts. The system's limited resources have diminished its ability to respond effectively to serious, violent, and chronic juvenile crime. This trend must be reversed by empowering the juvenile justice system to provide accountability and treatment resources to juveniles. This includes gender-specific programs for female offenders, whose rates of delinquency have generally been increasing faster than males in recent years and who now account for 23 percent of juvenile arrests. It will also require programs for special needs populations such as sex offenders and mentally retarded, emotionally disturbed, and learning disabled delinquents.

The graduated sanctions approach is designed to provide immediate intervention at the first offense to ensure that the juvenile's misbehavior is addressed by the family and community or through formal adjudication and sanctions by the juvenile justice system, as appropriate. Graduated sanctions include a range of intermediate sanctions and secure corrections options to provide intensive treatment that serves the juvenile's needs, provides accountability, and protects the public. They offer an array of referral and dispositional resources for law enforcement, juvenile courts, and juvenile corrections officials. The graduated sanctions component requires that the juvenile justice system's capacity to identify, process, evaluate, refer, and track delinquent offenders be enhanced.

The Juvenile Justice System

The juvenile justice system plays a key role in protecting and guiding juveniles, including responding to juvenile delinquency. Law enforcement plays a key role by conducting investigations, making custody and arrest determinations, and exercising discretionary release authority. Police should be trained in community-based policing techniques and provided with program resources that focus on community youth, such as Police Athletic Leagues and the Drug Abuse Resistance Education (D.A.R.E.) Program.

The traditional role of the juvenile and family court is to treat and rehabilitate the dependent or wayward minor, using an individualized approach and tailoring its response to the particular needs of the child and family with goals of:

- Responding to the needs of troubled youth and their families.
- Providing due process while recognizing the rights of the victim.
- Rehabilitating the juvenile offender.
- Protecting both the juvenile and the public.

While juvenile and family courts have been successful in responding to the bulk of youth problems to meet these goals, new ways of organizing and focusing the resources of the juvenile justice system are required to

New ways of organizing and focusing the resources of the juvenile justice system are required to effectively address serious, violent, and chronic juvenile crime.
effectively address serious, violent, and chronic juvenile crime. These methods might include the establishment of unified family courts with jurisdiction over all civil and criminal matters affecting the family.

A recent statement by the National Council of Juvenile and Family Court Judges (NCJFCJ) succinctly describes the critical role of the court:

The Courts must protect children and families when private and other public institutions are unable or fail to meet their obligations. The protection of society by correcting children who break the law, the preservation and reformation of families, and the protection of children from abuse and neglect are missions of the Court. When the family falters, when the basic needs of children go unmet, when the behavior of children is destructive and goes unchecked, juvenile and family courts must respond. The Court is society's official means of holding itself accountable for the well-being of its children and family unit (NCJFCJ, “Children and Families First, A Mandate for Change,” 1993).

Earlier, NCJFCJ developed 38 recommendations regarding serious juvenile offenders and related issues facing the juvenile court system. These issues included confidentiality of juvenile offenders and their families, transfer of a juvenile offender to adult court, and effective treatment of the serious juvenile offender (NCJFCJ, 1984).

Finally, juvenile corrections has the responsibility to provide treatment services that will rehabilitate the juvenile and minimize the chances of reoffending. Juvenile courts and corrections will benefit from a system that makes a continuum of services available that respond to each juvenile’s needs.

The juvenile justice system, armed with resources and knowledge that permit matching juveniles with appropriate treatment programs while holding them accountable, can have a positive and lasting impact on the reduction of delinquency. Developing effective case management and management information systems (MIS) will be integral to this effort. OJJDP will provide leadership in building system capacity at the State and local levels to take maximum advantage of available knowledge and resources.

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**Delinquency Prevention**

Most juvenile delinquency efforts have been unsuccessful because of their negative approach—attempting to keep juveniles from misbehaving. Positive approaches that emphasize opportunities for healthy social, physical, and mental development have a much greater likelihood of success. Another weakness of past delinquency prevention efforts is their narrow scope, focusing on only one or two of society’s institutions that have responsibility for the social development of children. Most programs have targeted either the school arena or the family. Communities are an often neglected area. Successful delinquency prevention strategies must be positive in their orientation and comprehensive in their scope.

**An effective juvenile justice system combines accountability and sanctions with increasingly intensive treatment and rehabilitation services.**

The prevention component of OJJDP’s comprehensive strategy is based on a risk-focused delinquency prevention approach (Hawkins and Catalano, 1992). This approach states that to prevent a problem from occurring, the factors contributing to the development of that problem must be identified and then ways must be found (protective factors) to address and ameliorate those factors.

**Graduated Sanctions**

An effective juvenile justice system program model for the treatment and rehabilitation of delinquent offenders is one that combines accountability and sanctions with increasingly intensive treatment and rehabilitation services. These graduated sanctions must be wide-ranging to fit the offense and include both intervention and secure corrections components. The intervention component includes the use of immediate intervention and intermediate sanctions, and the secure corrections component includes the use of community confinement and incarceration in training schools, camps, and ranches.
Each of these graduated sanctions components should consist of sublevels, or gradations, that together with appropriate services constitute an integrated approach. The purpose of this approach is to stop the juvenile’s further penetration into the system by inducing law-abiding behavior as early as possible through the combination of appropriate intervention and treatment sanctions. The juvenile justice system must work with law enforcement, courts, and corrections to develop reasonable, fair, and humane sanctions.

At each level in the continuum, the family must continue to be integrally involved in treatment and rehabilitation efforts. Aftercare must be a formal component of all residential placements, actively involving the family and the community in supporting and reintegrating the juvenile into the community.

Programs will need to use Risk and Needs Assessments to determine the appropriate placement for the offender. Risk assessments should be based on clearly defined objective criteria that focus on (1) the seriousness of the delinquent act; (2) the potential risk for reoffending, based on the presence of risk factors; and (3) the risk to the public safety. Effective risk assessment at intake, for example, can be used to identify those juveniles who require the use of detention as well as those who can be released to parental custody or diverted to nonsecure community-based programs. Needs assessments will help ensure that (1) different types of problems are taken into account when formulating a case plan; (2) a baseline for monitoring a juvenile’s progress is established; (3) periodic reassessments of treatment effectiveness are conducted; and (4) a systemwide data base of treatment needs can be used for the planning and evaluation of programs, policies, and procedures. Together, risk and needs assessments will help to allocate scarce resources more efficiently and effectively. A system of graduated sanctions requires a broad continuum of options.

**Intervention**

For intervention efforts to be most effective, they must be swift, certain, consistent, and incorporate increasing sanctions, including the possible loss of freedom. As the severity of sanctions increases, so must the intensity of treatment. At each level, offenders must be aware that, should they continue to violate the law, they will be subject to more severe sanctions and could ultimately be confined in a secure setting, ranging from a secure community-based juvenile facility to a training school, camp, or ranch.

The juvenile court plays an important role in the provision of treatment and sanctions. Probation has traditionally been viewed as the court’s main vehicle for delivery of treatment services and community supervision. However, traditional probation services and sanctions have not had the resources to effectively target delinquent offenders, particularly serious, violent, and chronic offenders.

The Balanced Approach to juvenile probation is a promising approach that specifies a clear and coherent framework. The Balanced Approach consists of three practical objectives: (1) Accountability; (2) Competency Development; and (3) Community Protection. Accountability refers to the requirement that offenders make amends to the victims and the community for harm caused. Competency Development requires that youth who enter the juvenile justice system should exit the system more capable of being productive and responsible citizens. Community Protection requires that the juvenile justice system ensure public safety.

The following graduated sanctions are proposed within the Intervention component:

**Immediate Intervention**

First-time delinquent offenders (misdemeanors and nonviolent felonies) and nonserious repeat offenders (generally misdemeanor repeat offenses) must be targeted for system intervention based on their probability of becoming more serious or chronic in their delinquent activities. Nonresidential community-based programs, including prevention programs for at-risk youth, may be appropriate for many of these offenders. Such programs are small and open, located in or near the juvenile’s home, and maintain community participation in program planning, operation, and evaluation. Community police officers, working as part of Neighborhood Resource Teams, can help monitor the juvenile’s progress. Other offenders may require sanctions tailored to their offense(s) and their
needs to deter them from committing additional crimes.

**Intermediate Sanctions**

Offenders who are inappropriate for immediate intervention (first-time serious or violent offenders) or who fail to respond successfully to immediate intervention as evidenced by reoffending (such as repeat property offenders or drug-involved juveniles) would begin with or be subject to intermediate sanctions. These sanctions may be nonresidential or residential.

Many of the serious and violent offenders at this stage may be appropriate for placement in an Intensive Supervision Program as an alternative to secure incarceration. OJJDP’s Intensive Supervision of Probationers Program Model is a highly structured, continuously monitored individualized plan that consists of five phases with decreasing levels of restrictiveness:

- Short-Term Placement in Community Confinement.
- Day Treatment.
- Outreach and Tracking.
- Routine Supervision.
- Discharge and Followup.

**Secure sanctions are most effective in changing future conduct when they are coupled with comprehensive treatment and rehabilitation services.**

**Secure Corrections**

The criminal behavior of many serious, violent, and chronic juvenile offenders requires the application of secure sanctions to hold these offenders accountable for their delinquent acts and to provide a structured treatment environment. Large congregate-care juvenile facilities (training schools, camps, and ranches) have not proven to be particularly effective in rehabilitating juvenile offenders. Although some continued use of these types of facilities will remain a necessary alternative for those juveniles who require enhanced security to protect the public, the establishment of small community-based facilities to provide intensive services in a secure environment offers the best hope for successful treatment of those juveniles who require a structured setting. Secure sanctions are most effective in changing future conduct when they are coupled with comprehensive treatment and rehabilitation services. A smaller group of violent offenders, whose conduct warrants criminal sanctions, or those offenders who have proven themselves not to be amenable to juvenile justice system treatment, will require waiver or transfer to the criminal justice system.

Standard parole practices, particularly those that have a primary focus on social control, have not been effective in normalizing the behavior of high-risk juvenile parolees over the long term. Consequently, growing interest has developed in intensive aftercare programs that provide high levels of social control and treatment services. OJJDP’s Intensive Community-Based Aftercare for High-Risk Juvenile Parolees Program provides an effective aftercare model that incorporates five programmatic principles:

- Preparing youth for progressive responsibility, and freedom in the community.
- Facilitating youth-community interaction and involvement.
- Working with both the offender and targeted community support systems (e.g., families, peers, schools, and employers) to facilitate constructive interaction and gradual community adjustment.
- Developing needed resources and community support.
- Monitoring and ensuring the youth’s successful reintegration into the community.

The following graduated sanctions strategies are proposed within the Secure Corrections component:
Community Confinement

Offenders whose presenting offense is sufficiently serious (such as a violent felony) or who fail to respond to intermediate sanctions as evidenced by continued reoffending may be appropriate for community confinement. Offenders at this level represent the more serious (such as repeat felony drug trafficking or property offenders) and violent offenders among the juvenile justice system correctional population.

The concept of community confinement provides secure confinement in small community-based facilities that offer intensive treatment and rehabilitation services. These services include individual and group counseling, educational programs, medical services, and intensive staff supervision. Proximity to the community enables direct and regular family involvement with the treatment process as well as a phased reentry into the community that draws upon community resources and services.

Incarceration in Training Schools, Camps, and Ranches

Juveniles whose confinement in the community would constitute an ongoing threat to community safety or who have failed to respond to community-based corrections may require an extended correctional placement in training schools, camps, ranches, or other secure options that are not community-based. These facilities should offer comprehensive treatment programs for these youth with a focus on education, skills development, and vocational or employment training and experience. These juveniles may include, where State law permits, youth convicted in the criminal justice system following a determination that the serious or violent nature of their conduct warrants waiver or transfer to the criminal justice system. Such juveniles are generally referred to an adult correctional facility upon reaching the age at which they are no longer subject to the original or extended jurisdiction of the juvenile justice system.

Expected Benefits

The proposed strategy provides for a comprehensive approach in responding to delinquent conduct and serious, violent, and chronic criminal behavior, consisting of (1) community protection and public safety, (2) accountability, (3) competency development, (4) individualization, and (5) balanced representation of the interests of the community, victim, and juvenile. By taking these factors into account in each program component, a new direction in the administration of juvenile justice is fostered.

Delinquency Prevention

This major component of the comprehensive strategy involves implementation of delinquency prevention technology that has been demonstrated to be effective. Prevention strategies within the major areas that influence the behavior of youth (individual development, family, school, peer group, and community) parallel the chronological development of children. Because addressing these five areas has been found to be effective in reducing future delinquency among high-risk youth, it should result in fewer children entering the juvenile justice system in demonstration sites. This would, in turn, permit concentration of system resources on fewer delinquents, thereby increasing the effectiveness of the graduated sanctions component and improving the operation of the juvenile justice system.

Graduated Sanctions

This major component of the comprehensive strategy is premised on a firm belief that the juvenile justice system can effectively handle delinquent juvenile behavior through the judicious application of a range of graduated sanctions and a full continuum of treatment and rehabilitation services. Expected benefits of this approach include:

- Increased juvenile justice system responsiveness. This program will provide additional referral and dispositional resources for law enforcement, juvenile courts, and juvenile corrections. It will also require these system components to increase their ability to identify, process, evaluate, refer, and track juvenile offenders.

- Increased juvenile accountability. Juvenile offenders will be held accountable for their behavior, decreasing the likelihood of their development...
• Increased program effectiveness. As the statistical information presented herein indicates, credible knowledge exists about who the chronic, serious, and violent offenders are, that is, their characteristics. Some knowledge also exists about what can effectively be done regarding their treatment and rehabilitation. However, more must be learned about what works best for whom under what circumstances to intervene successfully in the potential criminal careers of serious, violent, and chronic juvenile offenders. Followup research and rigorous evaluation of programs implemented as a part of this strategy should produce valuable information.

Crime Reduction

The combined effects of delinquency prevention and increased juvenile justice system effectiveness in intervening immediately and effectively in the lives of delinquent offenders should result in measurable decreases in delinquency in sites where the above concepts are demonstrated. In addition, long-term reduction in crime should result from fewer serious, violent, and chronic delinquents becoming adult criminal offenders.
Part I: A Blueprint for Implementing the Comprehensive Strategy for Serious, Violent, and Chronic Juvenile Offenders

Part I of the Guide is designed to assist communities in implementing the Comprehensive Strategy. It describes planning and organizational steps that communities must consider in building their comprehensive strategies. The focus is on a systemwide approach that moves communities away from the traditional emphasis on single-factor programs. A blueprint is provided to assist communities in assessing their serious, violent, and chronic juvenile delinquency problems and juvenile justice system responses.

This blueprint is organized around three major topics:

- A Risk-Focused Approach to Graduated Sanctions.
- Implementation, Management, and Evaluation.

A final section offers some concluding observations.

**Strategy for the Prevention of Serious, Violent, and Chronic Juvenile Delinquency**

Reducing serious, violent, and chronic juvenile delinquency requires a multifaceted, coordinated approach, with prevention as a critical first step. The comprehensive approach presented here is based on research findings regarding factors that increase or decrease the likelihood that young people will commit serious and violent crimes and on the effectiveness of various approaches to address these factors. Prevention approaches that reduce risk and enhance protection can be effective in preventing crime, violence, and substance abuse among adolescents and young adults.

Reducing serious, violent, and chronic juvenile delinquency requires a multifaceted, coordinated approach, with prevention as a critical first step.

We begin with a brief description of risk and protective factors for violence, crime, and substance abuse, followed by a theoretical framework known as the Social Development Strategy for reducing risks and enhancing protective factors. Next, we describe a model that includes communitywide involvement in assessing local risks and resources and implementing promising preventive approaches to address the community’s unique risk and resource profile. We then identify proven and promising prevention approaches. More detailed information on prevention programs can be found in Part II.

**Foundations of Risk-Focused Prevention**

Public health professionals pioneered risk-focused approaches to prevention that have been successfully applied to problems as diverse as cardiovascular disease and traffic-related injuries. Prevention approaches attempt to interrupt the processes that produce problem behavior. During the past 30 years, research has identified precursors of juvenile delinquency and violence, called risk factors, as well as protective factors that buffer the effects of exposure to risks and inhibit the development of behavior problems even in the face of risk.

Risk and protective factors predict increased or decreased probability of developing problem behaviors,
including serious crime and violence. However, just as prevention measures are not an absolute guarantee against developing heart disease and other illnesses, protective factors cannot eliminate all delinquent behavior. Nonetheless, approaches to prevention that attempt to reduce risk factors and, at the same time, enhance protective factors are likely to provide the most effective form of prevention (Institute of Medicine, 1994).

**Risk Factors for Crime, Violence, and Substance Abuse**

Extensive research has identified risk factors for crime and violence (Tolan and Guerra, 1994; Yoshikawa, 1994; American Psychological Association, 1993; Reiss and Roth, 1993; Dryfoos, 1990), and substance abuse (Kandel, Simcha-Fagan, and Davies, 1986; Hawkins, Catalano, and Miller, 1992). These risk factors exist within the communities in which children develop, as well as within families, schools, peer groups, and within each individual. Some risk factors can be reduced; others cannot. After identifying and setting priorities of risk factors that can be changed, communities can design prevention efforts to reduce known risk factors. However, it is equally important to know which risk factors cannot be modified, because this helps identify populations that should receive protective interventions.

Figure 2 shows risk factors identified in longitudinal studies as predictors of health and behavior problems. The specific problems predicted by each risk factor are checked in the figure.

**Risk Factors for Adolescent Problem Behaviors**

The following is a summary of the risk factors and the problem behaviors they predict.

**Community Risk Factors**

**Availability of drugs (substance abuse).** The more easily available that drugs and alcohol are in a community, the greater the risk that drug abuse will occur in that community (Gorsuch and Butler, 1976). Perceived availability of drugs in school is also associated with increased risk (Gottfredson, 1988).

**Availability of firearms (delinquency, violence).** Firearms, primarily handguns, are the leading mechanism of violent injury and death in the United States (Fingerhut, Kleinman, Godfrey, and Rosenberg, 1991). The easy availability of firearms in a community can escalate an exchange of angry words and fists into an exchange of gunfire. Research has found that communities with greater availability of firearms experience higher rates of violent crime, including homicide (Alexander, Massey, Gibbs, Altekruse, 1985; Kellerman, Rivara, Rushforth, et al., in review; Wintenute, 1987).

**Community laws and norms favoring drug use, firearms, and crime (substance abuse, delinquency, and violence).** Community norms—the attitudes and policies a community holds concerning drug use, violence, and crime—are communicated through laws, written policies, informal social practices, the media, and the expectations that parents, teachers, and other members of the community have for young people. Laws, tax rates, and community standards that favor or are unclear about substance abuse or crime put young people at higher risk of delinquency.

One example of a law affecting drug use is the taxation of alcoholic beverages. Higher rates of taxation decrease the rate of alcohol use (Levy and Sheflin, 1985; Cook and Tauchen, 1982). Other examples of local rules and norms affecting drug and alcohol use are policies and regulations in schools and workplaces.

**Media portrayals of violence (violence).** There is growing evidence that media violence can influence community acceptance of violence and rates of violent or aggressive behavior. Both long- and short-term effects of media violence on aggressive behavior have been documented (Eron and Huesmann, 1987; National Research Council, 1993).

**Transitions and mobility (substance abuse, delinquency, and school dropout).** Even normal school transitions can predict increases in problem behaviors. When children move from elementary school to middle school or from middle school to high school, significant increases in the rates of drug use, school dropout, and antisocial behavior may occur (Gottfredson, 1988).
### Figure 2: Risk Factors for Health and Behavior Problems

<table>
<thead>
<tr>
<th>Risk Factor</th>
<th>Substance Abuse</th>
<th>Delinquency</th>
<th>Teenage Pregnancy</th>
<th>School Dropout</th>
<th>Violence</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Community</strong></td>
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<td></td>
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<tr>
<td>Availability of Drugs</td>
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<tr>
<td>Availability of Firearms</td>
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<tr>
<td>Community Laws and Norms Favorable Toward Drug Use, Firearms, and Crime</td>
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<tr>
<td>Media Portrayals of Violence</td>
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<td>Transitions and Mobility</td>
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<tr>
<td>Low Neighborhood Attachment and Community Organization</td>
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<tr>
<td>Extreme Economic Deprivation</td>
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<tr>
<td><strong>Family</strong></td>
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<tr>
<td>Family History of the Problem Behavior</td>
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<tr>
<td>Family Management Problems</td>
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<tr>
<td>Family Conflict</td>
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<tr>
<td>Favorable Parental Attitudes and Involvement in the Problem Behavior</td>
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<tr>
<td><strong>School</strong></td>
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<tr>
<td>Early and Persistent Antisocial Behavior</td>
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<tr>
<td>Academic Failure Beginning in Elementary School</td>
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<td>✔</td>
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<tr>
<td>Lack of Commitment to School</td>
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<tr>
<td><strong>Individual/Peer</strong></td>
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<tr>
<td>Rebelliousness</td>
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<tr>
<td>Friends Who Engage in the Problem Behavior</td>
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<td>✔</td>
</tr>
<tr>
<td>Favorable Attitudes Toward the Problem Behavior</td>
<td>✔</td>
<td>✔</td>
<td>✔</td>
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<td>✔</td>
</tr>
<tr>
<td>Early Initiation of the Problem Behavior</td>
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</tr>
<tr>
<td>Constitutional Factors</td>
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</tbody>
</table>

Communities with high rates of mobility appear to have increased drug and crime problems. The more frequently people in a community move, the greater the risk of criminal behavior (Farrington, 1991). Whereas some people find buffers against the negative effects of mobility by making connections in new communities, others are less likely to have the resources to deal with the effects of frequent moves and are more likely to have problems.

Low neighborhood attachment and community disorganization (substance abuse, delinquency, and violence). Higher rates of juvenile drug problems, crime, and delinquency, as well as higher rates of adult crime and drug trafficking, occur in neighborhoods where people have little attachment to the community, where the rates of vandalism are high, and where there is low surveillance of public places (Murray, 1983; Wilson and Hernstein, 1985).

Perhaps the most significant issue affecting community attachment is whether residents feel they can make a difference in their lives. If the neighborhood’s key players—such as merchants, teachers, police, and human and social services personnel—live outside the neighborhood, residents’ sense of commitment will be less. Lower rates of voter participation and parental involvement in school also reflect attitudes about community attachment. Neighborhood disorganization makes it more difficult for schools, churches, and families to pass on prosocial values and norms (Herting and Guest, 1985; Sampson, 1986).

Extreme economic and social deprivation (substance abuse, delinquency, violence, teenage pregnancy, and school dropout). Children who live in deteriorating neighborhoods characterized by extreme poverty, poor living conditions, and high unemployment are more likely to develop problems with delinquency, teenage pregnancy, and school dropout, and are more likely to engage in violence toward others during adolescence and adulthood (Bursik and Webb, 1982; Farrington, Loeber, Elliott, Hawkins, Kandel, Klein, McCord, Rowen, and Tremblay, 1990). Children who live in these neighborhoods and have behavior or adjustment problems early in life are also more likely to have drug abuse problems as they grow older (Robins and Ratcliff, 1979).

Family Risk Factors

Family history of high-risk behavior (substance abuse, delinquency, teenage pregnancy, and school dropout). Children raised in a family with a history of addiction to alcohol or other drugs are at increased risk of having alcohol or other drug problems (Goodwin, 1985), and children born or raised in a family with a history of criminal activity are at increased risk of delinquency (Bohman, 1978). Similarly, children born to a teenage mother are more likely to be teenage parents, and children of dropouts are more likely to drop out of school themselves (Slavin, 1990b).

Family management problems (substance abuse, delinquency, violence, teenage pregnancy, and school dropout). Poor family management practices are defined as not having clear expectations for behavior, failing to supervise and monitor children, and excessively severe, harsh, or inconsistent punishment. Children exposed to these poor family management practices are at higher risk of developing all of the health and behavior problems listed above (Patterson and Dishion, 1985; Farrington, 1991; Kandel and Andrews, 1987; Peterson et al., 1994; Thornberry, 1994.)

Family conflict (substance abuse, delinquency, violence, teen pregnancy, and school dropout). Although children whose parents are divorced have higher rates of delinquency and substance abuse, it appears that it is not the divorce itself that contributes to delinquent behavior. Rather, conflict between family members appears to be more important in predicting delinquency than family structure (Rutter and Giller, 1983). For example, domestic violence in a family increases the likelihood that young people will engage in violent behavior themselves (Loeber and Dishion, 1984). Children raised in an environment of conflict appear to be at risk for all of the problem behaviors that have been noted in this section.

Parental attitudes and involvement in problem behaviors (substance abuse, delinquency, and violence). Parental attitudes and behavior toward drugs and crime influence the attitudes and behavior of children (Brook et al., 1990; Kandel, Kessler, and Maguiles, 1978; Hansen, Graham, Shelton, Flay, and Johnson, 1987). Children who are excused for breaking the law are more likely to develop problems with
juvenile delinquency (Hawkins and Weis, 1985) and children whose parents engage in violent behavior inside or outside the home are at greater risk for exhibiting violent behavior.

In families in which parents are heavy illegal drug or alcohol users or are tolerant of their children’s use, children are more likely to become drug and alcohol abusers in adolescence. The risk is further increased if parents involve children in their drug- or alcohol-using behavior—for example, asking a child to light a cigarette or to get a beer from the refrigerator (Ahmed, Bush, Davidson, Ianotti, 1984).

**School Risk Factors**

Early and persistent antisocial behavior (substance abuse, delinquency, violence, teen pregnancy, and school dropout). Boys who are aggressive in grades K–3 or who have trouble controlling their impulses are at higher risk for substance abuse, delinquency, and violent behavior (Loeber, 1988; Lerner and Vicary, 1984; American Psychological Association, 1993). When a boy’s aggressive behavior in the early grades is combined with isolation, withdrawal, or hyperactivity, there is an even greater risk of problems in adolescence (Kellam and Brown, 1982).

Academic failure beginning in late elementary school (substance abuse, delinquency, violence, teenage pregnancy, and school dropout). Beginning in the late elementary grades, academic failure increases the risk of drug abuse, delinquency, violence, teen pregnancy, and school dropout. Children fail for many reasons, but it appears that the experience of failure itself, not necessarily a lack of ability, increases the risk of problem behaviors (Jessor, 1976; Farrington, 1991).

Lack of commitment to school (substance abuse, delinquency, teenage pregnancy, and school dropout). Children who are not committed to school have ceased to see the role of student as a viable part of their lives and are at higher risk for problem behaviors (Gottfredson, 1988; Johnston, 1991).

**Individual and Peer Group Risk Factors**

Rebelliousness (substance abuse, delinquency, and school dropout). Young people who feel they are not a part of society and not bound by its rules, who do not believe in trying to be successful or responsible, or who take an actively rebellious stance toward society are at higher risk of drug abuse, delinquency, and school dropout (Jessor and Jessor, 1977; Kandel, 1982; Bachman, Lloyd, and O’Malley, 1981).

Friends who engage in the problem behaviors (substance abuse, delinquency, violence, teenage pregnancy, and school dropout). Young people who associate with peers who engage in problem behaviors—delinquency, substance abuse, violent activity, sexual activity, or dropping out of school—are much more likely to engage in the same behaviors (Barnes and Welte, 1986; Farrington, 1991; Cairns, Cairns, Neckerman, Gest, and Gairepy, 1988; Elliott et al., 1989). This association is one of the most consistent predictors that research has identified. Even when young people come from well-managed families and do not experience other risk factors, just spending time with friends who engage in problem behaviors greatly increases the risk of developing similar problems.

Favorable attitudes toward the problem behavior (substance abuse, delinquency, teenage pregnancy, and school dropout). During their elementary school years, children usually express anti-drug, anti-crime, and prosocial attitudes, and have difficulty imagining why people use drugs, commit crimes, or drop out of school. In middle school, however, their attitudes often shift toward greater acceptance of delinquent behaviors as others they know participate in such activities. This acceptance places them at higher risk (Kandel et al., 1978; Huesmann and Eron, 1986).

Early initiation of problem behaviors (substance abuse, delinquency, violence, teenage pregnancy, and school dropout). The earlier young people drop out of school, begin using drugs, commit crimes, and become sexually active, the greater the likelihood that they will have chronic problems with these behaviors later in life (Elliott et al., 1986). Research shows, for example, that young people who initiate drug use before the age of 15 are at twice the risk of having drug problems as those adolescents who wait until after the age of 19 (Robins and Przybeck, 1985).

Constitutional factors (substance abuse, delinquency, and violence). Constitutional factors that
contribute to problem behaviors may have a biological or physiological basis (Hawkins and Lam, 1987). These factors are often seen in young people exhibiting such behaviors as sensation seeking, low harm-avoidance, and lack of impulse control. These factors appear to increase the risk of young people abusing drugs, engaging in delinquent behavior, and committing violent acts.

**Generalizations About Risk**

The following generalizations regarding risks for crime, violence, and substance abuse have important implications for risk-focused prevention:

- Exposure to a greater number of risk factors increases risk of crime, violence, and substance abuse geometrically.

- Risks are found in many domains, including the community, the family, the school, the peer group, and the individual. These findings suggest that prevention programming must use multiple strategies to reduce multiple risk factors. Agencies that traditionally administer categorical funds will need to collaborate in reducing a variety of risks at multiple levels if a risk-focused prevention approach is to succeed.

- Because common risk factors predict diverse problem behaviors—including crime, violence, and substance abuse—generic prevention strategies that address these common risk factors should affect a wide spectrum of health and behavior problems. Thus, comprehensive risk-focused prevention initiatives should be designed and implemented to reduce overall levels of risk exposure at the community, family, school, peer, and individual levels. Effects on a broad range of health and behavior problems, including substance abuse, school dropout, teen pregnancy, violence, and crime, should be evaluated.

- Risk factors show much consistency in effects across different races and cultures. While levels of risk may vary in different groups, the risk factors appear to operate in the same way across different racial and cultural groups.

- Protective factors may buffer exposure to risks.

**Protective Factors Against Crime, Violence, and Substance Abuse**

Awareness of the risk factors helps identify what to focus on to prevent adolescent problem behaviors. However, knowledge of the risk factors does not indicate how to reduce risk. Understanding protective factors provides the key to effective risk reduction.

Research shows that some children exposed to multiple risk factors manage to avoid adolescent health and behavior problems. Research has identified protective factors that appear to insulate these children against the effects of risk exposure. These protective factors have been grouped into three classes:

- Factors inherent in the individual.
- Factors related to social bonding.
- Healthy beliefs and clear standards for behavior.

*When families, schools, and communities have clearly stated policies and expectations for young people's behavior, children are less likely to become involved in crime and delinquency.*

Individual protective factors include female gender, high intelligence, a positive social orientation, and a resilient temperament that helps a child bounce back in adverse circumstances. Research indicates that one of the most effective ways to protect young people from risk exposure is to strengthen their bonds with positive, prosocial family members, adults outside the family (including teachers, coaches, youth leaders), and friends. Young people with strong, supportive relationships with families, friends, school, and community are invested in or committed to achieving the goals held by these groups. They are bonded to these groups. Young people who are bonded are less likely to do things that threaten that bond—such as use drugs, become violent, or commit crimes. Studies of children who avoid problem behavior despite living
in high-risk situations show that strong bonds with an adult—whether parent or other family member, teacher, coach, community member, or other significant adult—can decrease the likelihood of delinquent behavior.

When families, schools, and communities have clearly stated policies and expectations for young people’s behavior, children are less likely to become involved in crime and delinquency. Healthy beliefs and clear standards, communicated consistently by the significant individuals and social groups to whom the child is bonded, build a web of protection for young people exposed to risk.

**Social Development Strategy**

The social development strategy (see figure 3) reduces identified risk factors by enhancing known protective factors against health and behavior problems. It provides a model for addressing targeted risks in a way that enhances protection.

The goal of the social development strategy is healthy behavior. Healthy beliefs and clear standards for behavior in the family, school, and community directly promote healthy behavior in children. For example, during the 1980’s the “Just Say No” campaign, the War on Drugs, and Drug-Free Zones were all elements of a strategy of advocating clear standards for behavior concerning illegal drug use, and they had an important impact in changing community standards about illegal drug use.

Another element was an increasing recognition that drug use was unhealthy, as studies reported the negative health consequences of tobacco, alcohol, and other drug use. As new standards and beliefs developed concerning drug use, marijuana and cocaine use rates dropped significantly.

The United States is just beginning a discussion about healthy beliefs and clear standards in response to violence in families, neighborhoods, and communities. Responsible adults must, through words and deeds, show the Nation’s youth that fighting does not solve problems and that the violent behavior portrayed in the entertainment media does not provide a good model for real life. We need to set clear standards about acceptable, nonviolent behavior. Another critical protective factor that promotes healthy behavior is bonding with families, peer groups, schools, and communities. A sense of community must be re-created in this country. Despite changes in norms concerning drug use, each year thousands of young people in the United States begin to use tobacco, alcohol, marijuana, cocaine, and other drugs. Many of these youth do not identify with individuals or groups that communicate healthy beliefs and clear standards about drugs. Because they are not bonded to the larger society, these young people ignore the anti-drug message. For young people to accept these messages, they first need help in developing the motivation to live by healthy standards. The social development strategy suggests that by bonding with people and institutions that promote healthy beliefs and clear standards, youth will adopt similar beliefs and standards. Bonding can provide the motivation youth need to protect themselves from exposure to risk.

Children who feel a bond to those with healthy beliefs and clear standards do not want to behave in ways that would threaten that bond.
To promote bonding, three conditions must be met:

- Children must have meaningful, challenging opportunities to contribute to their families, schools, peers, and communities. This helps them feel responsible and significant.

- Children must be taught the skills they need to take advantage of the opportunities they receive. Without these skills, children are likely to experience frustration and/or failure.

- Children must receive recognition for their efforts. Recognition motivates children to contribute and reinforces skillful performance.

In short, families, schools, and communities that view youth as resources and that provide youth with opportunities, skills, and recognition for making an active contribution create a protective environment for healthy development.

Without strong bonds to positive individuals and groups with healthy beliefs and clear standards for behavior, youth may bond with those who have unhealthy beliefs and standards, such as gangs. Gangs provide all the conditions necessary to promote bonding. If young people do not have opportunities to bond with people who have healthy beliefs, many youth will find their way to antisocial individuals and groups.

Prevention programs should communicate consistent, healthy beliefs and clear standards and encourage bonding.

Individual protective factors affect one’s ability to perceive opportunities, develop skills, and obtain recognition. For example, a child with a positive social orientation is more likely to see a childcare setting as an opportunity to make new friends. An intelligent child may find it easier to develop the reading skills necessary for success in the classroom of a mediocre teacher. Children with resilient temperaments are more likely to persist in discovering ways to be recognized for their accomplishments. Youth who do not possess these special protective characteristics must have opportunities and recognition in their families, schools, and communities to promote strong bonding as a protective factor.

Prevention Principles

Understanding the research on risk and protective factors for crime, violence, and substance abuse suggests a set of principles that should guide prevention programming:

- Prevention efforts must address known risk factors for crime, violence, and substance abuse.

- Prevention efforts must clearly connect program activities with risk reduction. For example, family management problems have been identified as a risk factor for health and behavior problems in children, and these problems may emerge from different sources. Parents who work may need more effective ways to monitor their children’s behavior; in such cases, childcare centers, schools, and latchkey programs can report children’s daily behavior to parents. Alternatively, if the problem stems from a lack of knowledge of effective discipline techniques, providing parents with opportunities to learn and practice a variety of parenting skills may be effective. The link between prevention activities and the risk reduction objective should be clearly specified.

- Prevention programs should communicate consistent, healthy beliefs and clear standards and encourage bonding. This means giving young people opportunities for meaningful involvement, teaching them the skills they need, and recognizing their contributions.

- Risk reduction activities should address risks at or before the time they become predictive of later problems. Early intervention is likely to minimize the effort needed and maximize the outcome. For example, interventions to improve family management practices before the child is born or during infancy are likely to be more effective than efforts after a referral to authorities for abuse or neglect.

- Interventions should reach individuals and communities exposed to multiple risk factors. Since
those exposed to multiple risks are at much greater risk, efforts to prevent chronic and serious problems of crime, violence, and substance abuse need to reach these populations. Approaches can identify individuals or communities exposed to multiple risks. Working with high-risk communities has advantages in that individual children are not labeled at early ages as potential problems. A second advantage is that high- and low-risk children can continue to associate and learn from each other. Evidence suggests that this approach benefits youth exposed to high levels of risk without deleterious effects on youth at lower risk. A communitywide approach allows higher- and lower-risk families in a neighborhood to work and learn together, modeling, supporting, and reinforcing efforts to strengthen protective factors and processes.

• Since multiple risks in multiple domains predict serious crime, violence, and substance abuse, a range of coordinated prevention approaches should be used that address key risk factors across the domains of community, family, school, individual, and peer group.

• Prevention programs must reach and be accepted by the diverse racial, cultural, and socioeconomic groups in a community. This is best accomplished by providing full representation of these groups in all aspects of planning and implementation.

Planning and Implementing a Comprehensive Prevention Strategy

The process of planning and implementing a comprehensive prevention strategy is crucial to the success of this strategy. The following elements are essential:

• Take a communitywide approach.

• Create ownership.

• Reach the diverse groups in the community.

• Include key elected officials and grassroots community leaders.

• Give priority to risk factors that cause the most problems in the community.

• Gain the commitment of all stakeholders to a long-term, sustained effort.

The most effective approach is one that reduces risk and enhances protection in all areas that affect young people’s lives, including the family, school, peer group, and community. For example, even an excellent school behavior management curriculum is not likely to deter adolescents from crime and delinquency by itself because children and youth spend much of their time outside the school environment— with family, peers, and in the larger community.

Key leaders must have the ability to empower a coalition of diverse community representatives to work collaboratively to build a web of protection and support for all children.

A communitywide approach to prevention of serious and violent crime is effective for several reasons. First, this approach affects the entire social environment. The focus is on influencing norms, values, and policies throughout the community, as well as eliminating the conditions that place children at risk for adolescent problems. Second, this approach develops a broad base of support and teamwork. By involving the entire community, no single organization, strategy, person, or institution carries the entire burden of responsibility for solving serious and violent crime. This teamwork approach brings together all community members—young people, parents, educators, law enforcement, government officials, religious leaders, ethnic and minority groups, business people, civic groups, social service providers, and health professionals—to work toward a common vision of their community as a healthy, protective environment for all children. Third, a communitywide approach institutionalizes prevention by integrating prevention strategies into the services and activities of existing organizations and institutions.

The strategy must mobilize key community leaders who control resources and direct policy. These key
leaders must have the will and the leadership to focus the community on prevention. They must commit to institutionalizing a collaborative approach to risk-focused prevention so that the necessary long-term effort can be sustained independent of leadership changes. They must have the ability to empower a coalition of diverse community representatives to work collaboratively to build a web of protection and support for all children. The breadth and diversity of this collaborative working group will determine the success of prevention efforts.

Prevention strategies must reach and communicate effectively with the population at risk. Effective prevention programs address diverse populations and empower people to take ownership of the program techniques. Without this ownership, it is difficult to apply even the most potent program with sufficient vigor to change a neighborhood, family, or child. The best outcomes are likely to result from combining knowledge of effective prevention programs focused on risk and protective factors with local ownership of prevention initiatives.

Prevention programs should address those factors that put children in a particular community at most danger of developing serious criminal, violent, or substance-abusing behavior. Addressing all risk factors at once is likely to overburden the prevention system. Each community should assess its unique risk profile to select and design prevention strategies that address the risk factors most dangerous in that community.

Prevention strategies must be long term to realize the full benefits—sustained efforts are required to change and shape behavior patterns. Comprehensive, communitywide prevention literally changes how children are reared. For example, in programs using home visitors to deliver services, long-term intervention increases the likelihood that the mother and home visitor will develop a trusting relationship in which knowledge and skills can be shared, which in turn can strengthen the mother’s commitment to her own and her child’s development.

Comprehensive, communitywide prevention requires collaboration and resource sharing. In most communities, barriers must be broken down and collaborative bridges built among and within agencies, organizations, and groups with responsibility for addressing juvenile delinquency. For example, schools must interact more effectively with the community—including business, senior organizations, local government, social service and health agencies, and civic organizations—in pursuing their educational goals. Just as important, schools must become models of collaboration by eliminating barriers between teachers, administrators, special educators, educational assistants, parent volunteers, and students and building bridges that help them reach the goal of success for all young people. Each organization, agency, and institution must “get its own house in order” as well as reach out to build collaborative relationships with others in the community. Clearly success in this process requires a sustained effort. Evidence from public health efforts to affect community norms about smoking and high-fat diets demonstrates that community norms can be changed. However, change requires long-term commitment by the entire community.

Evidence from public health efforts to affect community norms about smoking and high-fat diets demonstrates that community norms can be changed.

Preventive strategies must be carried out by those who have a strong commitment to prevention and who are trained for specific intervention tasks. Service providers, whether professionals or paraprofessionals, must be well trained in the preventive methods they are expected to implement. All staff require regular inservice training, supportive supervision, and sufficient compensation to promote high-quality services, engage families and children in the intervention, and reduce job stress.

Finally, expectations should be realistic. Good prevention programs usually show modest to moderate benefits. Reducing crime, violence, and substance abuse requires sustained, communitywide efforts directed at all developmental stages and across all the influential domains affecting children’s behavior.
A Model for Implementing a Comprehensive Prevention Strategy

The overall effectiveness of a community’s prevention efforts will be determined by three factors: the processes used to select prevention strategies, the specific preventive programs used, and the methods used to implement these programs.

An approach that can guide community-wide, risk-focused prevention is the Communities That Care (CTC) model (Hawkins and Catalano, 1992). This model empowers communities to identify and address priority risk factors based on epidemiological evidence on local risk and protective factors. By recognizing and building on existing community resources and programs, this model develops a comprehensive system to reduce risks and enhance protective factors.

CTC is the result of more than 14 years of research and program development on delinquency and substance abuse prevention. It includes a 1-year planning phase involving community mobilization, risk and resource assessment, and strategic planning followed by an implementation phase. The planning phase begins with an orientation period for key community leaders—mayors, police chiefs, judges, school superintendents, and business, civic, and religious leaders—on the risk-focused prevention approach. The orientation helps the leaders understand the community they seek to mobilize, assess its readiness, and develop a shared vision for the future. Involving community leaders in this process makes it more likely that they will commit resources to prevention once the community’s strategic prevention plan is completed. After the orientation period, the leaders appoint or identify a community prevention board, whose members should include informal and grassroots leaders and representatives of key educational, law enforcement, business, religious, and health and human service areas. The prevention board becomes a permanent community institution.

The following questions should be considered when developing a community prevention board:

- How many members should be appointed to the board? (Depending on the size of the community, a board of 15 to 30 people is necessary.)
- Does the board reflect the racial, ethnic, cultural, and socioeconomic diversity of the community?
- Are all the significant areas of a youth’s life represented on the board—home, school, community, and peers? Young people should also serve on the board.
- What will be the board’s official status? Will it be a separate 501(C)(3) nonprofit organization? Will it be a part of government?
- How will the board be governed and to whom will it be accountable?
- How will communication between board members and key leaders be ensured?
- How will the board use the social development strategy as a model in bonding members to the group by providing opportunities, skills, and recognition?

Once established, the community prevention board is trained to assess community risks. The board must collect and analyze data on risk indicators and assess existing prevention programs in terms of risk, protective factors, and demonstrated effectiveness. This risk assessment provides the prevention board with a concrete, objective analysis of community risks, enabling communities to focus resources on the high-priority risks. Using objective data to identify community priorities promotes community support for prevention activities and reduces turf battles over programs and resources.

After the assessment is completed, the community prevention board identifies two to five high-priority risk factors that are present at the local level at a higher rate than national or State averages. This creates a collaborative problem-solving focus in which all groups play an active role. For example, if academic failure is a priority risk factor, schools can provide enhanced instruction, family-oriented groups can establish parent programs to support academic success, youth agencies can include educational components in afterschool and late-night programs, and law enforcement can emphasize truancy prevention.

Once the priority risk factors have been identified, the board collects information about the effectiveness of existing community programs to address these risk factors. Resource assessment helps identify programming gaps that can be addressed in the strategic plan.
The next step is to create a strategic prevention plan to fill identified programming gaps with specific programs that address high-priority risk factors. Effective programs that reduce risks and enhance protection are described in Part IV, along with those that show promise. Effective programs that already address high-priority risk factors are included in the strategic plan, which includes a design for evaluating the process and outcomes of the Comprehensive Strategy.

The implementation phase begins at this point, with the board creating working groups for each new or enhanced program element in the strategic plan. The working groups oversee program planning and implementation in each area. The board has overall responsibility for implementing identified programs and providing ongoing, systematic evaluation of the program activities and outcomes. In addition, the board oversees the new risk and resource assessment that is carried out at least every 2 years. As changes in risk and protective factors occur in the community, the board should adjust its prevention plan accordingly. This allows the plan to address changing conditions produced either by the previous interventions or changing risk conditions. At all stages of planning and implementation, it is important to have diverse representation from the community—including ethnic, cultural, socioeconomic, age, and geographic diversity, and representation by all relevant community agencies and organizations.

Selecting Program Strategies

The process of evaluating and selecting prevention strategies is an ongoing part of a comprehensive, risk-focused prevention effort. Once communities develop strategic plans to fill gaps identified through the risk and resource assessment, the next step is to select program strategies.

This section highlights effective and promising approaches developed through CTC for reducing risks while enhancing protection. As used here, the term “effective programs” refers to those where there is strong research evidence of reduced risks and enhanced protective factors for crime, violence, and substance abuse. Promising programs are those that show promise of effectiveness and meet the program assessment criteria drawn from prevention principles.

Promising strategies for reducing risks for delinquency and violence can be classified as follows:

• Preschool and family programs.
• School programs.
• Programs directed to youth in peer groups and settings outside the family and school.
• Community-level interventions.

A fuller discussion of prevention strategies and specific programs appears in Part II, which focuses specifically on prevention.

A Risk-Focused Approach to Graduated Sanctions

The OJJDP Comprehensive Strategy for Serious, Violent, and Chronic Juvenile Offenders is based on a risk-focused continuum of graduated sanctions in which secure care is reserved for the small percentage of juvenile offenders who are violent and in which a broad range of well-structured, community-based
programs is provided for most offenders. Research has shown that such community-based programs can reduce recidivism more effectively than traditional large-scale institutions and at less cost. Part III reviews some of these programs.

The Comprehensive Strategy’s model of risk-focused graduated sanctions is based on a planned continuum of programs. This continuum includes immediate sanctions in the community for first-time, nonviolent offenders; intermediate sanctions for more serious offenders; and secure care programs for the most violent offenders. For those who are placed in residential programs, there must be a high-quality system of aftercare to support community reentry.

While there is no perfect model for a graduated sanctions system, something close to a professional consensus has emerged concerning the core principles of such a system. These core principles were summarized by Wilson and Howell (1993) in the Comprehensive Strategy for Serious, Violent, and Chronic Juvenile Offenders: Program Summary. (See p. 7 in this Guide.)

The risk-focused graduated sanctions system combines reasonable, fair, humane, and appropriate sanctions that blend concern for public safety with attention to the rehabilitative needs of young people. Juveniles move between different levels of the continuum through a well-structured system involving different levels of control and supervision. At each level of the continuum, offenders and their families understand that the youth will be subject to more restrictive sanctions if offending continues.

Objective risk-based classification instruments are employed to determine which level of the continuum is most appropriate for each youth. The instruments are based on the risk the offender poses in terms of reoffending and take into account the severity of the current offense, the number and severity of prior offenses, and the presence of other risk factors.

Under the Comprehensive Strategy, programs are small in size at all levels of the continuum, ensuring that youth receive individualized attention. Rehabilitation plans are customized to meet the needs of each youth and, whenever possible, involve families and extended families in the reform process. Residential programs have strong aftercare components in which the family and the community help reintegrate the youth to the community.

**Coordinating and Integrating Services**

Soler (1992) has noted that most services for children and families in the United States are categorical, fragmented, and uncoordinated. Children labeled as “delinquent” are tracked toward correctional placements aimed at keeping them within a designated setting and modifying their behavior, with little effort to resolve underlying family problems. Children labeled “abused,” “neglected,” or “dependent” are removed from their homes and quickly placed in foster care but rarely receive preventive family support or mental health services. Children with mental health needs are placed in secure psychiatric settings and often heavily medicated, with little opportunity for treatment in community-based, family-oriented programs.

**Most services for children and families in the United States are categorical, fragmented, and uncoordinated.**

This fragmented human services system does not effectively serve anyone: not youth, not families, and not communities. The system is expensive, it often fails to solve youth’s problems, and youth are referred from here to there with little followup. In some cases, this fragmented system results in iatrogenic outcomes, making the patient sicker, rather than effecting a cure. One solution to this dilemma is to create a coordinated, community-based system that offers a continuum of care, including prevention, early intervention, and treatment services. Its goal would be to serve youth’s needs, not the requirements of funding streams or various bureaucracies. Collaborative efforts are needed among agencies responsible for assessing the needs of at-risk youth and providing several simultaneous services to maximize efforts.

Without a continuum of care, the piecemeal, fragmented systems will continue to offer fragmented services for a
variety of problems, never solving any of them. Children in trouble who need out-of-home services can be found in four different systems: the juvenile justice system, the alcohol and other drug treatment system, the mental health system, and the social welfare system. Without coordination among these systems, the same youth will loop in and out of all of them.

Peggy Smith, director of Indiana’s Step Ahead program, a statewide coordinating effort, says, “We’ve got staff who have been living in silos for 30 years. We’re asking them to interrelate differently, that their relationships should be different, and to move away from categorical approaches to a more blended approach, a networked approach that forces them to behave differently. That’s the hard part.” (Howard, 1994, p.1).

Comprehensive service systems should offer services that provide care, protection, and treatment while reducing placements in out-of-home settings. The services should be focused on the child, strengthen the family, and be located in the community. These services provide alternatives to restrictive out-of-home placements, which are more expensive. In-home placements are best for the child unless there is a serious case of abuse or neglect or the public safety is threatened.

An example of a comprehensive service system is the Norfolk Interagency Consortium (NIC), which was created to coordinate community resources and to improve services. It is governed by a board of representatives of the heads of health, social services, police, education, juvenile services and other agencies, parents, and private citizens. The board ensures coordinated delivery of comprehensive services, including access to a State pool of funds. Service collaboration is put into action by Community Assessment Teams (CAT’s), which consist of case manager supervisors from the agencies represented on the NIC. The CAT’s conduct needs assessments and treatment plans for children whose multiple, co-occurring problem behaviors require the assessment resources of more than one discipline or agency and whose service needs require collaboration by two or more agencies. The comprehensive assessments and treatment plans are carried out by the responsible agencies, working in close collaboration, under the supervision of the assigned CAT.

The ultimate goal of the public health model of prevention is to avoid illness. In the juvenile justice context, the goal should be to prevent youth from becoming involved in the juvenile justice system. However, unlike medicine’s eradication of smallpox in the 20th century, we have not yet found the way to prevent all youth from becoming involved in the juvenile justice system. We do know, however, that once youth become involved in the system, graduated sanctions can deter some from becoming more deeply involved. We also recognize that some youth need to be in secure care to protect society.

The Role of Risk-Focused Classification

Communities developing a graduated sanctions system need tools to determine how many youth, and which ones, should be placed at each security level of the continuum of care. In an effective graduated sanctions system, risk-focused classifications are used to make placement decisions for juvenile offenders.

Risk-focused classification instruments are gaining popularity because they give juvenile justice practitioners a more objective, simple, and reliable tool to help them make placement decisions. It is critical to note that these risk-assessment instruments are used to augment, not replace, the judgment of experienced juvenile justice personnel. The Comprehensive Strategy assumes that placement decisions are initially based solely on public safety considerations. Risk-focused classification instruments attempt to sort youth into groups with differing probabilities of reoffending, just as insurance companies estimate the risks for customers seeking
automobile or life insurance. Well-designed risk instruments provide maximum separation of these subgroups based on their actual rates of recidivism; the highest risk group will have much higher rates of recidivism than the lowest risk group. Table 1 shows the rates of subsequent rearrest by risk group of delinquents referred or committed to Michigan Youth Services. Those in the high-risk group were more than three times as likely to be rearrested as those in the low-risk group.

Risk assessment instruments are effective in predicting aggregate outcomes because they are based on group data. However, these instruments cannot correctly predict outcomes for specific individuals: some high-risk youth will not commit additional crimes and low-risk youth will reoffend. Thus, risk assessment can be viewed as a technique to reduce, but not eliminate, our uncertainty about human behavior (Clear, 1988).

Because the rate of violence (even among serious offenders) is usually low, predicting future violent or assaultive behavior is extremely difficult. As a result, most risk assessment scales are not designed to predict violence. General recidivism is easier to predict because minor or moderately serious offenses occur more frequently, and a statistical prediction that a new offense of any type will be committed is easier than a prediction of future violent behavior. While the risk scale does not, therefore, predict the likelihood of future violent acts, program selections and placement review procedures discussed later do take into account prior violent offenses when determining the appropriate security level required for each youth.

Risk assessment instruments generally include two types of measures: criminal history and social and personal stability. Most research indicates that these two types of variables are strongly related to recidivism. Typical criminal history items include number of prior arrests or adjudications and age at first arrest or adjudication. Stability items may include substance abuse problems, history of running away, mental health problems, and prior out-of-home placements.

Figures 4 and 5 show the risk assessment instruments utilized in Louisiana and Colorado. The factors used in the two instruments reflect both the severity of the current offense and the probability of continued delinquency. Both instruments give the greatest weight to measures of the severity of current and prior offenses. In fact, the offense severity weights and the classification cutoff scores have been designed to ensure that youth committing the most serious offenses are automatically recommended for secure placement. Both instruments classify youth into three categories: high-risk youth in need of secure placement, medium-risk youth in need of short-term secure placement followed by community supervision, and low-risk youth who are appropriate for intensive community-based placements.

### Results of Previous Classification Studies

Risk-focused classification systems have been developed in many States. Krisberg, Onek, Jones, and Schwartz (1993) examined the results of classification studies conducted in 14 States. According to their study, many States clearly need a broader range of

---

<table>
<thead>
<tr>
<th>Risk Level</th>
<th>Number of Cases</th>
<th>Percent Rearrested</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Once</td>
</tr>
<tr>
<td>Low</td>
<td>331 (33%)</td>
<td>11.2%</td>
</tr>
<tr>
<td>Moderate</td>
<td>511 (51%)</td>
<td>28.8%</td>
</tr>
<tr>
<td>High</td>
<td>156 (16%)</td>
<td>28.8%</td>
</tr>
<tr>
<td>Total</td>
<td>998 (100%)</td>
<td></td>
</tr>
</tbody>
</table>
### Louisiana Office of Juvenile Services Secure Custody Screening Document

**Figure 4: Louisiana Office of Juvenile Services Secure Custody Screening Document**

<table>
<thead>
<tr>
<th></th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Severity of Present Adjudicated Offense</td>
<td></td>
</tr>
<tr>
<td>Level 0 felony</td>
<td>10</td>
</tr>
<tr>
<td>Level 1 felony</td>
<td>7</td>
</tr>
<tr>
<td>Level 2 felony</td>
<td>5</td>
</tr>
<tr>
<td>Level 3 felony</td>
<td>3</td>
</tr>
<tr>
<td>Level 4 felony</td>
<td>1</td>
</tr>
<tr>
<td>All others</td>
<td>0</td>
</tr>
<tr>
<td>2. If Present Adjudication Involves</td>
<td></td>
</tr>
<tr>
<td>Possession/use of firearm</td>
<td>2</td>
</tr>
<tr>
<td>Multiple felonies</td>
<td>2</td>
</tr>
<tr>
<td>3. Number of Prior Adjudications</td>
<td></td>
</tr>
<tr>
<td>Two or more felony adjudications</td>
<td>2</td>
</tr>
<tr>
<td>One felony or 2 + misdemeanors</td>
<td>1</td>
</tr>
<tr>
<td>None</td>
<td>0</td>
</tr>
<tr>
<td>4. Most Serious Prior Adjudication</td>
<td></td>
</tr>
<tr>
<td>Level 0 or level 1 felony</td>
<td>5</td>
</tr>
<tr>
<td>Level 2 felony</td>
<td>3</td>
</tr>
<tr>
<td>Level 3 or below</td>
<td>0</td>
</tr>
<tr>
<td>5. For Offenders With Prior Adjudications</td>
<td></td>
</tr>
<tr>
<td>Age at first adjudication</td>
<td></td>
</tr>
<tr>
<td>Age 13 or younger</td>
<td>2</td>
</tr>
<tr>
<td>Age 14</td>
<td>1</td>
</tr>
<tr>
<td>Age 15 and older</td>
<td>0</td>
</tr>
<tr>
<td>6. History of Probation/Parole Supervision</td>
<td></td>
</tr>
<tr>
<td>Offender currently on probation/parole</td>
<td>2</td>
</tr>
<tr>
<td>Offender with probation/parole revocation</td>
<td>1</td>
</tr>
<tr>
<td>7. History of Inhome/Nonsecure Residential Intervention</td>
<td></td>
</tr>
<tr>
<td>Three or more prior failures</td>
<td>3</td>
</tr>
<tr>
<td>One or two prior failures</td>
<td>1</td>
</tr>
<tr>
<td>None</td>
<td>0</td>
</tr>
<tr>
<td>8. If the Offender Had a Prior Placement in OJS</td>
<td>2</td>
</tr>
<tr>
<td>9. Prior Escapes or Runaways</td>
<td></td>
</tr>
<tr>
<td>From secure more than once</td>
<td>3</td>
</tr>
<tr>
<td>From secure once or nonsecure 2+</td>
<td>2</td>
</tr>
<tr>
<td>From nonsecure once</td>
<td>0</td>
</tr>
</tbody>
</table>

**Recommended Action**

- 0–6 = Consider nonsecure placement
- 7–8 = Consider short-term secure placement
- 9+ = Consider secure placement
Figure 5: Colorado Security Placement Instrument

1. Severity of Current Offense
   Murder, rape, kidnap, escape ................................................................. 10
   Other violent ...................................................................................... 5
   All other ............................................................................................. 0

2. Severity of Prior Adjudication
   Violent offense ................................................................................... 5
   Property offense .................................................................................. 3
   Other/none ......................................................................................... 0

3. Number of Prior Adjudications
   Two or more ...................................................................................... 5
   Less than two ..................................................................................... 0

Total Items 1–3

Total items 1–3. If score is 10 or higher, score as secure placement.
If less than 10, score remaining stability items.

4. Age at First Referral
   12–13 ................................................................................................. 2
   14+ ..................................................................................................... 0

5. History of Mental Health Outpatient Care
   Yes .......................................................................................................... 1
   No ....................................................................................................... 0

6. Youth Lived Alone or With Friends at Time of Current Adjudication
   Yes .......................................................................................................... 1
   No ....................................................................................................... 0

7. Prior Out-of-Home Placements
   Yes .......................................................................................................... 1
   No ....................................................................................................... 0

Total Items 1–7

Apply score to the following placement scale:
10+ Consider for Secure
5–9 Short-Term Placement
0–4 Immediate Community
Figure 6: State Classification Recommendations Based on Risk Assessment Instruments

Percent of Youth

<table>
<thead>
<tr>
<th>State</th>
<th>High Risk</th>
<th>Medium Risk</th>
<th>Low Risk</th>
</tr>
</thead>
<tbody>
<tr>
<td>AL</td>
<td>27</td>
<td>54</td>
<td>23</td>
</tr>
<tr>
<td>AR</td>
<td>23</td>
<td>49</td>
<td>34</td>
</tr>
<tr>
<td>AZ</td>
<td>34</td>
<td>59</td>
<td>67</td>
</tr>
<tr>
<td>CO</td>
<td>67</td>
<td>51</td>
<td>23</td>
</tr>
<tr>
<td>DE</td>
<td>37</td>
<td>37</td>
<td>66</td>
</tr>
<tr>
<td>GA</td>
<td>28</td>
<td>37</td>
<td>19</td>
</tr>
<tr>
<td>IL</td>
<td>13</td>
<td>16</td>
<td>33</td>
</tr>
<tr>
<td>LA</td>
<td>23</td>
<td>16</td>
<td>33</td>
</tr>
<tr>
<td>MS</td>
<td>46</td>
<td>13</td>
<td>23</td>
</tr>
<tr>
<td>NE</td>
<td>51</td>
<td>26</td>
<td>16</td>
</tr>
<tr>
<td>NH</td>
<td>16</td>
<td>66</td>
<td>27</td>
</tr>
<tr>
<td>OR</td>
<td>16</td>
<td>66</td>
<td>27</td>
</tr>
<tr>
<td>RI</td>
<td>31</td>
<td>22</td>
<td>26</td>
</tr>
<tr>
<td>WI</td>
<td>27</td>
<td>54</td>
<td>23</td>
</tr>
</tbody>
</table>

Note: Instrument design varied among States.

program options more closely suited to the public safety risks posed by the juveniles in State custody. In each State in this study, researchers worked in conjunction with a local juvenile justice task force to develop a risk assessment instrument. The factors included in the risk assessment instruments reflected a primary emphasis on public safety in making placement decisions. The risk assessment instruments, which were applied to the training school populations in each State, classified youth into one of three groups: high risk, medium risk, and low risk.

Figure 6 shows how youth in the 14 States were distributed among the 3 risk categories. In every State, a significant portion of the youth in training schools were found not to need long-term residential care; that is, did not score as high risk. In Mississippi, only 13 percent of training school youth were classified as high risk; in Oregon, this proportion was just 16 percent. In Georgia training schools, which had the highest percentage of high-risk youth (67 percent), one-third of the youth scored as medium or low risk. In each of the 14 States, at least one-third of the youth in training schools were found not to need long-term secure residential care, based on public safety-oriented assessment criteria developed by juvenile justice officials in the respective States.

Krisberg and his colleagues took this analysis a step further by applying the risk classification results to compute the number of secure beds needed in each State. According to their calculations (shown in table 2), using objective public safety risk factors, an average of 31 percent of incarcerated juveniles in the 14 States could be safely placed in less secure settings. Nebraska had the highest estimated secure bed reduction of 68 percent; Rhode Island had the lowest at 5 percent. Many States maintained more secure
residential beds than were necessary, based on their own public safety standards. Since States commonly spend between $35,000 and $60,000 per year to incarcerate a youth (Camp and Camp, 1990), reductions in training school placements would reduce costs considerably.

The 14 studies included in the Krisberg analysis, as well as similar and more recent studies in the District of Columbia, Indiana, and Michigan, underscore the value of structured, public-safety oriented classification instruments in making placement decisions. In addition to ensuring that these decisions are made in a consistent fashion, these instruments help reduce inappropriate placements, thereby reducing the costs of juvenile court sanctions.

**Forming a Graduated Sanctions Working Group**

The first step a community must take to develop a risk-focused graduated sanctions system is to convene a special graduated sanctions working group. The makeup of this working group is crucial to the success of the Comprehensive Strategy. The working group must include all key juvenile justice decisionmakers in the jurisdiction, including judges, prosecutors, police, and youth corrections managers. Members must have a high degree of respect and credibility in the community. If the working group includes respected decisionmakers from the diverse components of the juvenile justice system, the programs will be more readily accepted by juvenile justice personnel, elected officials, and the public. The working group carries out the following tasks:

- Decides which population to screen using the classification instruments.
- Develops a risk assessment instrument.
- Develops a needs assessment instrument.
- Develops a program selection matrix.

<table>
<thead>
<tr>
<th>State</th>
<th>Annual Admissions</th>
<th>Number of Residential Beds</th>
<th>Residential Beds Needed per NCCD/CSYP Study</th>
<th>Percentage Reduction</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alabama</td>
<td>891</td>
<td>430</td>
<td>327</td>
<td>24</td>
</tr>
<tr>
<td>Arizona</td>
<td>981</td>
<td>640</td>
<td>369</td>
<td>42</td>
</tr>
<tr>
<td>Arkansas</td>
<td>692</td>
<td>267</td>
<td>248</td>
<td>7</td>
</tr>
<tr>
<td>Colorado</td>
<td>543</td>
<td>342</td>
<td>244</td>
<td>29</td>
</tr>
<tr>
<td>Delaware</td>
<td>243</td>
<td>65</td>
<td>53</td>
<td>18</td>
</tr>
<tr>
<td>Georgia</td>
<td>901</td>
<td>730</td>
<td>670</td>
<td>8</td>
</tr>
<tr>
<td>Illinois</td>
<td>1,596</td>
<td>1,210</td>
<td>978</td>
<td>19</td>
</tr>
<tr>
<td>Louisiana</td>
<td>899</td>
<td>778</td>
<td>482</td>
<td>38</td>
</tr>
<tr>
<td>Mississippi</td>
<td>1,354</td>
<td>300</td>
<td>222</td>
<td>26</td>
</tr>
<tr>
<td>Nebraska</td>
<td>281</td>
<td>305</td>
<td>98</td>
<td>68</td>
</tr>
<tr>
<td>New Hampshire</td>
<td>110</td>
<td>107</td>
<td>65</td>
<td>39</td>
</tr>
<tr>
<td>Oregon</td>
<td>720</td>
<td>513</td>
<td>203</td>
<td>60</td>
</tr>
<tr>
<td>Rhode Island</td>
<td>224</td>
<td>171</td>
<td>162</td>
<td>5</td>
</tr>
<tr>
<td>Wisconsin</td>
<td>992</td>
<td>658</td>
<td>371</td>
<td>44</td>
</tr>
<tr>
<td><strong>Totals</strong></td>
<td><strong>10,427</strong></td>
<td><strong>6,516</strong></td>
<td><strong>4,492</strong></td>
<td><strong>31</strong></td>
</tr>
</tbody>
</table>
• Recommends program options based on applying the classification instruments to the selected population.

Determining Which Population Should Be Screened by the Classification System

The working group must first determine the population to be classified using the risk-focused system. Ideally, the classification instrument would be applied to all adjudicated youth in a community. In practice, however, because of budget and staffing limitations, many jurisdictions choose to focus initially on youth in secure care, who account for the bulk of juvenile justice expenditures. Policymakers are often interested in conserving resources by determining how many secure beds are needed and which youth are being inappropriately placed. However, it is important that assessments be conducted across the entire juvenile justice system population.

Developing a Risk Assessment Instrument

At its first meeting, the working group receives information about how risk assessment is used in similar jurisdictions. Next, the group begins to develop a risk assessment instrument for its jurisdiction. There are two approaches to this task: the empirical model and the consensus model. The empirical model is recommended for communities that have the time and resources to carry out a large-scale assessment. The empirical model is research-based and items in an empirical risk assessment instrument are selected because they correlate statistically with higher recidivism rates. A community using the empirical model conducts original research on the recidivism rates of its juvenile justice population (the question of who is included in this population is discussed later) to determine which items to include in its risk assessment instrument. The Colorado risk assessment instrument shown in figure 5 was developed using the empirical model. Risk factors were selected for this instrument that statistically predicted major rule violations or frequent minor violations while the youngster was under State custody.

The Louisiana risk assessment instrument shown in figure 4 was developed using the consensus model. Under this model, the working group takes an instrument that has been validated elsewhere and modifies it to conform to its community norms. Working group members must decide which factors to include in the instrument and what the relative weight of each factor will be. The consensus approach is based on the assumption that officials with an intimate understanding of the State’s juvenile justice system and clientele will make informed, accurate decisions regarding public safety risks.

The consensus model is less costly and less time consuming than the empirical model because original research is not required. In practice, its results are often similar to those of the empirical model because most policymakers are guided by the results of existing research-based instruments. Nevertheless, it is crucial that jurisdictions adopting consensus model risk instruments conduct periodic validation studies to determine if the instrument is reasonably predictive of youth’s future behavior.

The working group must decide the cutoff points for classifying youth as high risk, medium risk, and low risk. These risk classifications will usually be one of two dimensions to be taken into account in selecting programs and placement levels for individual youth. Offense severity is the other.

Developing a Needs Assessment Instrument

Next, the working group develops a needs assessment instrument. Results of the needs assessment do not come into play until after the security level has been determined. Needs assessments ensure the selection of the most appropriate program for a youth within the security level already determined for that youth through the risk assessment process. The needs assessment may identify cases with severe needs that would warrant placement in specialized programs (e.g., sex offender or violent offender programs) or make placement in certain programs seem inappropriate. For example, the needs assessment may suggest that a youth’s health problems make the youth an inappropriate candidate for a rigorous wilderness program. Needs assessment results should also be
used in case planning after program acceptance to identify the appropriate service needs for youth.

The structured needs assessment serves several purposes in addition to program selection and case planning. It ensures that certain treatment issues are consistently examined for all youth by all staff. It provides a simple, easy-to-use overview of an individual’s problems for the case manager, program staff, and service providers. Needs assessment scores also provide additional measures for setting priorities, with more time being devoted to cases with higher scores. Finally, aggregated information from needs assessments provides a data base for agency planning and evaluation, especially in determining whether there are enough treatment resources to meet current client treatment needs.

A review of juvenile justice needs assessment instruments nationwide reveals that most are quite similar in content and format. Instruments usually contain items on substance abuse, family functioning and relationships, emotional stability, school attendance and behavior, and peer relationships. Many assessments also include measures of health and hygiene, intellectual ability and achievement, and learning disabilities. The needs assessment instrument developed by Alaska Youth Services is shown in figure 7. The reader will note that many of these factors are identical to the risk factors identified in the CTC model.

Unlike risk assessment instruments, needs assessments do not necessarily predict future behavior. Thus, they are not developed through empirical research. Instead, the consensus approach is employed to identify and set priorities for the most important service issues. Members of the working group are responsible for selecting items to include in the needs assessment instrument. They are guided in this effort by existing State and Federal laws (e.g., laws addressing special education services) and local philosophies about effective rehabilitation services.

Developing a Program Selection Matrix

After developing the risk and needs assessment instruments, the working group turns its attention to developing a program matrix. This matrix consists of the two most important factors to be considered when making placement decisions: the severity of the current offense and the risk of future recidivism as determined by the risk assessment instrument.

The classification determined by the program selection matrix leads directly to the level and type of placement for each youth, although there are staff override procedures that will be discussed in the following section. Using the program matrix, low-risk youth with limited offense histories are recommended for immediate sanctions; high-risk youth who are serious or violent offenders are recommended for secure incarceration; and youth who fall between these two categories are recommended for intermediate sanction programs. The program matrix developed by policymakers in Indiana is shown in figure 8. Now the working group has completed the first step in developing a program matrix: development of a risk assessment instrument that classifies youth into various risk categories. The second step is to decide what the offense severity groupings will be for the current charge and which offenses to include in each offense grouping. In the Indiana matrix, there were four offense severity groupings: violent offenses, serious offenses, less serious offenses, and minor offenses. The offense categories included in each of the four offense severity groupings are listed in figure 9.

The outline of the program matrix is now complete. In the Indiana example, the risk dimension (consisting of three levels of risk) and the offense severity dimension (consisting of four levels) combine to form the 12 cells in the matrix. The working group’s next step is to identify appropriate programs or dispositions for each cell. The Indiana matrix, developed in consultation with NCCD, serves as an excellent model for the types of program options that should be available in a graduated sanctions system. In Indiana, the programs selected were based on “best practices” identified in a survey of graduated sanctions conducted by NCCD for OJJDP and augmented by NCCD’s knowledge of recently initiated program models in other States. Brief descriptions of the programs included in the Indiana matrix can be found in figure 10. Part III provides other examples of the types of programs that could be included in the matrix.
<table>
<thead>
<tr>
<th>Section</th>
<th>Description</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Basic Living Situation</td>
<td>Suitable living environment</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>Stable out-of-home residence</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td>Transitional residence problems, three or more settings</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>Chronic residence problems, nomadic lifestyle, unacceptable residence</td>
<td>6</td>
</tr>
<tr>
<td>2. Primary Family Relationships</td>
<td>Relatively stable or not applicable</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>Some disorganization or stress, but potential for improvement</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td>Chronic disorganization or stress with some potential for improvement</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>Major chronic disorganization or stress</td>
<td>6</td>
</tr>
<tr>
<td>3. Alternative Family Relationships</td>
<td>Relatively stable relationship or not applicable</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>Some disorganization or stress but potential for improvement</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td>Chronic but moderate disorganization or stress</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>Major chronic disorganization or stress</td>
<td>6</td>
</tr>
<tr>
<td>4. Emotional Stability</td>
<td>Appropriate adolescent responses. No apparent dysfunction</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>Marginal adolescent responses. Minor reluctantly responds to expectations</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td>Exaggerated periodic or sporadic responses such as aggressive acting out</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>Excessive responses prohibit or limit adequate functioning</td>
<td>6</td>
</tr>
<tr>
<td>5. Peer Relationships</td>
<td>Adequate social skills and nondelinquent friends</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>Negative friends or socially inept</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td>Delinquent peers</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>Exploitative or manipulative peers or self, and most activities</td>
<td>6</td>
</tr>
<tr>
<td></td>
<td>with groups having strong delinquent orientation</td>
<td></td>
</tr>
<tr>
<td>6. Substance Abuse</td>
<td>No known use or interference with functioning</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>Experimentation but no indication of sustained use</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td>Occasional use/abuse, some disruption of functioning</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td>Chronic abuse, serious disruption of functioning</td>
<td>4</td>
</tr>
<tr>
<td>7. Victimization</td>
<td>No history or indication of physical or sexual abuse</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>Suspected physical or sexual abuse or sexual exploitation</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td>Verified physical abuse</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td>Verified sexual abuse or both sexual and physical abuse</td>
<td>4</td>
</tr>
<tr>
<td>8. Intellectual Ability</td>
<td>Ability to function independently</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>Average or above measured intelligence but has educational disability</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td>Mild retardation requiring need for some assistance</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td>Deficiencies severely limit independent functioning</td>
<td>3</td>
</tr>
</tbody>
</table>
The great advantage of the matrix format is that it provides an opportunity to create a large number of classifications and thereby to refine the precision with which offenders are assigned to different security levels and programs. The Indiana matrix illustrates this point. The instrument goes beyond simply grouping youth into three security levels. Instead, it links classification results to a full range of security and program options. The Indiana instrument provides a blueprint for a continuum of care that is integrally tied to the risk assessment and classification process. Although other jurisdictions may provide guidance to the working group, a matrix must reflect the community’s own laws, values, and policies. The working group should apply its matrix to a variety of individual cases to determine if the resulting recommendations would appear appropriate to working group members and the public.

Again, it is crucial that working group members represent all parts of the juvenile justice system and are well respected in their fields. This group will decide what factors and programs to include in the matrix. Only if these decisions reflect a strong consensus among key juvenile justice decisionmakers will the program receive the support necessary for successful implementation.

**Developing Staff Override Procedures**

The working group must also develop criteria for staff override procedures in the program selection process. Discretionary overrides can and should occur when staff practitioners agree that the unique circumstances of a case warrant a different placement than that suggested by the matrix. An effective override procedure documents in writing the reasons for the departure...
from the matrix. Reasons may include the extreme violence of an offense or extraordinary individual needs that can best be met in a residential setting, such as the need for inpatient mental health treatment. No set of instruments can capture all information about an individual, and the professional judgment of juvenile justice practitioners may dictate the placement decision.

Overrides do need to be closely monitored, however. Generally, overrides should not exceed 10 percent of all placement decisions. A higher override rate indicates problems with the decisionmaking instruments or with staff acceptance of the system. In programs where staff do not have final control over program acceptance, documentation of judicial overrides should also be maintained. If these become excessive, the discrepancies should be discussed with the court to resolve the problem.

**Applying the Program Matrix to the Selected Population**

The completed program matrix is a blueprint for a broad, comprehensive, risk-focused continuum of care. Developing the blueprint, however, is not an end in itself: the blueprint still must be implemented. A key step in doing so is to apply the program selection matrix to a large sample of youth (the issue of which youth was an earlier decision made by the working group). The results of this analysis should be summarized and presented to the working group. The results show how many youth fall into each box on the program matrix grid, giving the jurisdiction a sense of what types of programs it needs, and how many slots it needs in each program area.

The results from Indiana, where the instrument was applied to training school admissions, are shown in table 3. The results show that 35 percent of the males and 61 percent of the females in the study fell in the four cells in the lower right-hand corner of the figure 8 matrix. These youth were committed for less

---

**Figure 8: Indiana Juvenile Corrections Placement Matrix (Proposed Model)**

<table>
<thead>
<tr>
<th>Offense Severity</th>
<th>Risk Level</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>High</td>
<td>Medium</td>
<td>Low</td>
</tr>
<tr>
<td>1. Violent Offenses</td>
<td>Violent Offender Program</td>
<td>Violent or Sex Offender Program</td>
<td>Boot Camp Intermediate Sanctions Program</td>
</tr>
<tr>
<td></td>
<td>Assaultive Sex Offender Program</td>
<td>Staff Secure Residential</td>
<td></td>
</tr>
<tr>
<td>2. Serious Offenses</td>
<td>Boot Camp</td>
<td>Intermediate Sanctions Program</td>
<td>Intermediate Sanctions Program</td>
</tr>
<tr>
<td></td>
<td>Staff Secure Residential Job Corps</td>
<td></td>
<td>Day Treatment Specialized Group Homes</td>
</tr>
<tr>
<td>3. Less Serious Offenses</td>
<td>Intermediate Sanctions Program</td>
<td>Proctor Program Tracking Community Service</td>
<td>Community Supervision Community Service Mentors</td>
</tr>
<tr>
<td></td>
<td>Day Treatment Specialized Group Homes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Minor Offenses</td>
<td>Proctor Program Tracking Community Supervision Mentors</td>
<td>Community Supervision Mentors</td>
<td>Mentors</td>
</tr>
</tbody>
</table>
Figure 9: Indiana Delinquent Offense Categories

<table>
<thead>
<tr>
<th>Violent Offenses</th>
<th>Less Serious Offenses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Murder</td>
<td>Stolen Property Offenses</td>
</tr>
<tr>
<td>Nonnegligent Manslaughter</td>
<td>Fraud Offenses/Forgery</td>
</tr>
<tr>
<td>Negligent Homicide</td>
<td>Miscellaneous Property Offenses</td>
</tr>
<tr>
<td>Murder/Nonnegligent Manslaughter</td>
<td>Drug Other/Marijuana, Possess/Use</td>
</tr>
<tr>
<td>Manslaughter (Unspecified)</td>
<td>Drug Other/Marijuana (Unspecified)</td>
</tr>
<tr>
<td>Criminal Homicide</td>
<td>Marijuana, Possess/Use</td>
</tr>
<tr>
<td>Forcible Rape</td>
<td>Marijuana, Traffic</td>
</tr>
<tr>
<td>Other Violent Sex Offenses</td>
<td>Drugs Include/Marijuana, Possess/Use</td>
</tr>
<tr>
<td>Sodomy (Unspecified)</td>
<td>Drugs Include/Marijuana, Traffic</td>
</tr>
<tr>
<td>Statutory Rape</td>
<td>Drugs Include/Marijuana (Unspecified)</td>
</tr>
<tr>
<td>Sex Offense, Rape (Unspecified)</td>
<td>Marijuana (Unspecified)</td>
</tr>
<tr>
<td>Aggravated Assault</td>
<td>Prostitution/Related Offenses</td>
</tr>
<tr>
<td>Assault (Unspecified)</td>
<td>Liquor Law Violations, Not Status</td>
</tr>
<tr>
<td>Kidnapping</td>
<td>Disorderly Conduct</td>
</tr>
<tr>
<td>Endangerment</td>
<td>Tools of Crime</td>
</tr>
<tr>
<td>Attempted Murder</td>
<td>Escape</td>
</tr>
<tr>
<td>Serious Offenses</td>
<td>Obstruction of Justice</td>
</tr>
<tr>
<td>Other Nonviolent Sex Offenses</td>
<td>Technical Violation of Probation</td>
</tr>
<tr>
<td>Sex Offense, Not Rape (Unspecified)</td>
<td>Other Public Order Offenses</td>
</tr>
<tr>
<td>Robbery</td>
<td>Other Delinquency (Unspecified)</td>
</tr>
<tr>
<td>Simple Assault</td>
<td>Running Away</td>
</tr>
<tr>
<td>Offenses Against Persons (Unspecified)</td>
<td>Truancy</td>
</tr>
<tr>
<td>Burglary</td>
<td>Curfew Violation</td>
</tr>
<tr>
<td>Burglary and Trespassing</td>
<td>Ungovernability</td>
</tr>
<tr>
<td>Arson</td>
<td>Liquor Status Offense</td>
</tr>
<tr>
<td>Arson and Vandalism</td>
<td>Other Status Offense</td>
</tr>
<tr>
<td>Drug Other/Marijuana, Traffic</td>
<td>Driving Under Influence</td>
</tr>
<tr>
<td>Weapons</td>
<td>Hit and Run</td>
</tr>
<tr>
<td>Less Serious Offenses</td>
<td>Reckless Driving</td>
</tr>
<tr>
<td>Larceny/Shoplifting</td>
<td>Driving Without License</td>
</tr>
<tr>
<td>Larceny, No Shoplifting/Motor Theft</td>
<td>Other Traffic Offense</td>
</tr>
<tr>
<td>Larceny (Unspecified)</td>
<td>Criminal Mischief</td>
</tr>
<tr>
<td>Trespassing</td>
<td>Violator, Parole</td>
</tr>
<tr>
<td>Auto Theft, Unauthorized Use</td>
<td></td>
</tr>
<tr>
<td>Auto Theft, Not Unauthorized Use</td>
<td></td>
</tr>
<tr>
<td>Auto Theft (Unspecified)</td>
<td></td>
</tr>
<tr>
<td>Vandalism</td>
<td></td>
</tr>
</tbody>
</table>

After determining the percentage of youth that fall into each cell, the working group must estimate the number of youth that will be placed in each program type, based on current admission levels. The results of this analysis in Indiana are summarized in table 4. Finally, the number of beds or program slots needed for each program can be estimated by making assumptions about how each matrix cell will be divided among programs and how long the average stay will be for each program. Figure 11 details the refined program space needs for Indiana. The working group must follow the Indiana example and come up with its own estimates.

Program Options: Filling in the Gaps

The working group’s task is nearly completed. The next step is to assess existing community programs to see where they fit in the matrix. This process should
Figure 10: Brief Descriptions of Programs Included in Indiana Matrix

1. Violent Offender Program — a secure residential treatment program with no more than 25 residents. Average length of stay of 9–12 months with extensive treatment services focused on anger management, neutralizing gang culture, and nonviolent dispute resolution techniques. These youth would typically move into the Intermediate Sanction Program described below as part of their reentry plans.

2. Assaultive Sexual Offender Program — another secure residential treatment program with no more than 25 residents. Similar length of stay in a Violent Offender Program. NCCD is currently examining sex offender treatment strategies and will make recommendations later as to possible intervention approaches. These youths would typically exit this program through the Intermediate Sanction Program.

3. Staff Secure Residential Program — designed for chronic property offenders and persistent drug traffickers, this program could house up to 35 youth in a residential setting. The expected length of stay is 6–9 months. These youngsters would exit to day treatment or community programs as needed.

4. Wilderness Boot Camps, Ecology, and Job Corps Programs — designed for 25 youths each, these programs assume a 90-day stay in a rural setting. The focus of intervention would be physical challenges, constructive work, and patterns of personal discipline. There would be great attention to literacy and job skills training. These youths would exit to one or more community programs.

5. Intermediate Sanction Program — conceived of as the heart of the model system, this program ties together 30 days in a secure residential program and 6 months in a day treatment program. This phased reentry system should handle the bulk of departmental commitments and should be the expected aftercare program for more serious offenders. NCCD has developed a detailed operational manual and training program for this program.

6. Day Treatment — this program handles up to 35 youths in a nonresidential setting. Youth arrive at a center for education, counseling, and recreational activities. There are wraparound services covering weekends and evenings. Typical enrollment in day treatment is 6 months.

7. Tracking — this program uses small caseloads and intensive supervision on 24-hour, 7-day a week basis. The trackers are both advocates and watchers. The services provided approximate those of a family preservation model. Supervision could last from 4 to 6 months.

8. Proctor — this program combines tracking with residential services. The youth literally live with the trackers, who are typically graduated students at a local university or foster parents. This program is designed for youth who should be in a tracking program but lack a safe living environment.

9. Specialized Group Homes — through this program, a limited number of specialized group homes support other community programs. The maximum size of such a program is 10 residents. These youngsters are living in the community, attending schools, and working.

10. Community Service — for minor offenders, this is a short-term community-based program emphasizing work, victim restitution, and community betterment projects. Clients are living at home.

11. Community Supervision and Mentoring — a program of limited supervision and contacts, probably best done by well-managed volunteers. The chief role of the agent would be brokering services. This is a limited cost service for lowest severity offenders.
clearly show any gaps in programming, indicating what new programs must be developed and implemented. The working group must make recommendations about what these programs should be.

As part of the Comprehensive Strategy effort, NCCD has identified effective programs at every level of the juvenile justice continuum that communities can use as models to develop programs in their own systems. (See Part III, pp. 141–155.) All the programs identified by NCCD have been evaluated with positive results.

The Indiana program selection matrix divides youth into 12 cells. The cells that are often of greatest concern to juvenile justice policymakers are those in the upper left-hand corner—cells that include serious and violent offenders in high- and medium-risk groups. NCCD research shows that these youth are most effectively handled in small, secure programs where they can receive individualized attention.

One such program is the Florida Environmental Institute (FEI), which targets Florida’s most serious and violent juvenile offenders. Most FEI youth are committed for crimes against persons and have been processed in the criminal justice system; they average 18 prior offenses and 11.5 prior felonies. The program is an unlocked facility whose remote location in the Florida Everglades, coupled with high supervision of clients, protects the public safety. FEI focuses on education and vocational skills, employs a system of rewards and sanctions, operates a phase system, promotes bonding with staff role models, and has a strong aftercare component. The intensive aftercare program includes supervised community-based residential care.

The Capital Offender Program (COP) in Texas is an innovative program for the most serious of offenders: youth incarcerated for homicide. COP is an intensive, offense-specific group treatment program. Eight juveniles live together and participate in group psychotherapy for 16 weeks. Role-playing is a key element of the group sessions; youth reenact their crimes from both their own perspectives and from those of their victims. COP groups are led by highly trained psychologists who are also available for individual counseling should youth require more intensive support. This intensive period is followed by more traditional secure confinement and intensive aftercare.

While serious and violent offenders are of greatest concern to most jurisdictions, many studies have shown that most delinquent youth fall into the middle cells on the placement grid—cells slated for

<table>
<thead>
<tr>
<th>Table 3: Proposed Indiana Juvenile Corrections Placement Matrix</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Males</strong></td>
</tr>
<tr>
<td><strong>Offense Severity</strong></td>
</tr>
<tr>
<td>I. Violent Offenses</td>
</tr>
<tr>
<td>4.6%</td>
</tr>
<tr>
<td>II. Serious Offenses</td>
</tr>
<tr>
<td>III. Less Serious Offenses</td>
</tr>
<tr>
<td>IV. Minor Offenses (Trespass, Vandalism, Status Offenses, Warrants)</td>
</tr>
<tr>
<td><strong>Females</strong></td>
</tr>
<tr>
<td><strong>Offense Severity</strong></td>
</tr>
<tr>
<td>I. Violent Offenses</td>
</tr>
<tr>
<td>II. Serious Offenses</td>
</tr>
<tr>
<td>III. Less Serious Offenses</td>
</tr>
<tr>
<td>IV. Minor Offenses (Trespass, Vandalism, Status Offenses, Warrants)</td>
</tr>
</tbody>
</table>
Figure 11: Indiana Refined Estimates of Program Space Needs

A. All Secure Programs 100% = 99 males, 21 females
B. Boot Camps 50% = 76 males, 10 females
  Job Corps 20% = 30 males, 4 females
  Intermediate Sanctions 30% = 46 males, 6 females
C. Intermediate Sanctions 45% = 209 males, 32 females
  Day Treatment 45% = 209 males, 32 females
  Group Homes 10% = 46 males, 4 females
D. Tracking 30% = 85 males, 27 females
  Community Supervision 30% = 85 males, 27 females
  Community Services 30% = 85 males, 27 females
  Proctor Program 10% = 29 males, 9 females
E. Community Supervision 50% = 104 males, 90 females
  Mentors Program 50% = 103 males, 90 females

Program Summary

Secure Programs 120 admissions x 12-month stay = 120 beds
Boot Camps 86 admissions x 90-day stay = 22 beds
Job Corps 34 admissions x 90-day stay = 9 beds
Intermediate Sanction Program 293 admissions x 30-day stay = 24 beds
Day Treatment 1 774 admissions x 6-month stay = 387 program slots
Group Homes 51 admissions x 12-month stay = 51 beds
Tracking 112 admissions x 5-month average stay = 47 program slots
Proctor Programs 38 admissions x 5-month average stay = 16 program slots
Community Service 112 admissions x 90-day average stay = 28 program slots
Community Supervision 306 admissions x 6-month stay = 153 program slots
Mentoring 193 admissions x 6-month stay = 97 program slots

1 Day treatment program slots include all intermediate sanction program participants and all youth exiting secure programs, boot camp, and Job Corps.

Table 4: Indiana Estimates of Program Space Needs

<table>
<thead>
<tr>
<th></th>
<th>Males</th>
<th></th>
<th>Females</th>
</tr>
</thead>
<tbody>
<tr>
<td>A. Violent Offender, Sex Offender (Staff Secure Residential)</td>
<td>99 (8.3%)</td>
<td>21 (5.5%)</td>
<td></td>
</tr>
<tr>
<td>B. Boot Camp, Ecology/Job Corps (Intermediate Sanctions)</td>
<td>152 (12.7%)</td>
<td>20 (5.4%)</td>
<td></td>
</tr>
<tr>
<td>C. Day Treatment, Specialized Group Homes (Intermediate Sanctions)</td>
<td>455 (38.0%)</td>
<td>68 (18.0%)</td>
<td></td>
</tr>
<tr>
<td>D. Community Services, Proctor Program/Tracking</td>
<td>284 (23.7%)</td>
<td>90 (23.7%)</td>
<td></td>
</tr>
<tr>
<td>E. Community Supervision/Mentors</td>
<td>207 (17.3%)</td>
<td>180 (47.5%)</td>
<td></td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>1,197 (100%)</td>
<td>379 (100%)</td>
<td></td>
</tr>
</tbody>
</table>

* May not equal 100 percent due to rounding.
intermediate sanctions programs such as community-based residential programs, intensive supervision programs, boot camps, and outdoors programs. As shown on the Indiana matrix, these programs are targeted for low-risk violent offenders, serious offenders of all risk levels, and high-risk youth who have committed less serious offenses.

The most restrictive intermediate sanction programs are community-based residential programs. The Thomas O’Farrell Youth Center (TOYC) is a model of such a program. TOYC is an unlocked, staff-secure residential program located in rural Maryland. The typical youth in this program has many prior court referrals, generally for property crimes and drug offenses. Youth stay at TOYC for an average of 9 months, followed by 6 months of community aftercare. Key program components include group counseling, intensive family counseling, individualized educational services, and a phase system that rewards appropriate behavior and imposes sanctions for inappropriate behavior.

Serious offenders can also be handled by outdoors/wilderness programs. VisionQuest is a national outdoors program that serves as an alternative to incarceration for serious juvenile offenders. VisionQuest youth spend 12–15 months in various challenging outdoor “impact” programs. Typically, the program sequence involves 3 months in an orientation wilderness camp; 5 months in an adventure program such as a wagon train, sailing expedition, or biking trip; and 5 months in a community residential program. There is also an aftercare program to facilitate youth’s return to their families. VisionQuest youth have a consistent education plan that follows them through each stage of the program. Youth also have individual treatment plans developed for them, which are constantly reevaluated and updated.

Boot camp programs have become increasingly popular in recent years. Research has shown that boot camp approaches stressing control aspects have been ineffective, while research on boot camps combining control and treatment has been inconclusive. Nonetheless, NCCD has identified one boot camp that does seem effective: the About Face boot camp in Memphis, Tennessee. About Face serves nonviolent males, ages 14 to 17, convicted of cocaine trafficking. It consists of 3 months in a nonsecure residential facility followed by 6 months of aftercare. About Face’s residential program focuses on military training (which avoids abusive, punitive aspects sometimes associated with correctional boot camps), group and individual counseling, and individualized education services.

Family preservation programs are another type of intermediate sanction. Of all programs reviewed by NCCD, the program with the strongest research was the Family and Neighborhood Services (FANS) program. FANS is a public program in South Carolina utilizing the principles of “multisystemic” therapy, defined as highly individualized and family- and home-based treatment that deals with offenders in the context of their family and community problems. FANS youth are at imminent risk of out-of-home placement because of the seriousness of their offense histories; they average 3.5 previous arrests and 9.5 weeks of previous incarceration, and over half have been arrested at least once for a violent crime. The program, which operates out of a community mental health center, employs masters-level therapists who work with very small caseloads (four families each) over an average of slightly more than 4 months. The caseworkers are available on a 24-hour basis and see the juvenile and/or the family as often as once daily, usually in the juvenile’s home.

Intensive supervision programs (ISP’s) are perhaps the most widespread type of intermediate sanctions program. NCCD has done extensive work in the ISP area and has identified model ISP programs. One of these is the Lucas County, Ohio, Intensive Supervision Unit (ISU), which provides case management and surveillance services to nonviolent felony offenders without a previous commitment. ISU operates a four-tiered phase system in which youth begin under house arrest and move to successive phases, with more freedom and privileges, as they exhibit more
services and graduated sanctions to control serious and violent youth crime.

Implementation, Management, and Evaluation

Implementing the Comprehensive Strategy

Coordinating the Prevention and Intervention Components

It is crucial to the success of the Comprehensive Strategy to integrate the prevention and intervention components at both the policy and operational levels. These components may have separate working groups, but formal channels of communication should be established between them. Attempts at

It is essential to have a high level of support for the Comprehensive Strategy from elected officials and from top administrators of those agencies implementing component programs.

Securing Support for the Comprehensive Strategy

Broad support for the Comprehensive Strategy must be secured during the planning stage and maintained after implementation. This support must come from the administration and staff of the governmental unit or agency implementing the strategy, from other juvenile justice decisionmakers and agencies, from community agencies, and from the community at large.
The Comprehensive Strategy must actively involve a broad cross section of the community, especially those youth and families who will be involved in program services.

A high level of support for the Comprehensive Strategy from elected officials and from top administrators of those agencies implementing component programs is essential. These administrators must thoroughly understand the premises and designs of the Comprehensive Strategy. Including these administrators in the working groups discussed previously will likely increase their support for the model.

Support must also be gained from juvenile justice policymakers and other community leaders outside of the governmental unit or agency implementing the model. These may include juvenile court judges, police, prosecutors, public defenders, schools, community service providers, mayors, State juvenile corrections officials, and State legislators. Some of these actors should be included in the working groups. Meetings should also be held with those not serving on the working group to explain the rationale and design of the Comprehensive Strategy. Meeting planners should anticipate some negative reactions to the model, as participants may be concerned about whether public safety issues will be adequately addressed. Presenting the impressive research supporting effective programs can demonstrate that prevention and graduated sanction programs are both safe and effective.

Successful implementation also hinges on garnering support for the Comprehensive Strategy from service-providing community agencies. Again, meetings should be held with key agency personnel and policy boards. Support of the schools is particularly important, since most of the at-risk youth will have specialized educational needs. School staff will need to work cooperatively with case managers to coordinate educational planning and monitor behavior.

Support from other community programs and groups is also important. Most youth and their families will be receiving services from multiple community resources. Good relationships with these agencies will make it easier for case managers to coordinate services, avoid duplicating efforts, and make appropriate referrals.

Support from the community at large must be generated as well. The media’s response to the Comprehensive Strategy will influence public opinion and support. Concerns about keeping juvenile offenders in the community are likely to be raised. To counter this, an effective public education effort should be included in the implementation plan. Meetings should be held with groups such as local victims’ organizations and neighborhood associations. While wholehearted public support for the program will be difficult to achieve, a strong public education effort is the best way to generate program support and minimize opposition.

**Formal cooperative interagency agreements or memorandums of understanding should be developed that explicitly state the relationship between agencies.**

**Ensuring Interagency Cooperation**

Successful implementation of the model depends on coordinating the efforts of multiple agencies. Formal and informal relationships must be forged with all agencies that will provide services to youth in the model. These agencies include schools, community programs, and other juvenile justice programs. Strained relations with these organizations can be extremely harmful to the success of the Comprehensive Strategy.

Formal cooperative interagency agreements or memorandums of understanding should be developed that explicitly state the relationships between agencies. While informal relationships with other service providers may be helpful, formal agreements are needed to ensure that youth are referred to appropriate agencies and receive services identified in the case plan. These formal agreements should include provisions ensuring that service slots are available to youth in the model system. An excellent example of the approach can be seen in the Norfolk Interagency Consortium, a forum for interagency collaboration in Norfolk, Virginia (Pratt, 1994).
The agency that takes the lead in implementing the Comprehensive Strategy must develop a particularly strong relationship with the local school system. Day treatment programs, which are part of the graduated sanctions component, will have onsite educational programs. An agreement may be reached with the school district allowing the district to assign teachers to the program. If the program hires its own teachers, the program will need to have its educational program accredited by the school district.

In addition, most youth in the graduated sanctions programs will be transitioned back to regular schools eventually. Case managers must work with the school system to ensure that youth are placed in the appropriate school setting (for example, a youth might need special education services) and with individual teachers to check on student progress and behavior. Formal interagency agreements and school administration support will encourage individual teachers to cooperate.

Formal agreements should be made with other community resources as well, such as mental health services, medical resources, drug and alcohol treatment, parental support groups, legal services. Case managers should receive a document listing agencies, their services, and procedures to obtain these services for their clients.

**Staffing Issues**

Agency staff should be integrally involved in planning and implementing the Comprehensive Strategy. This will both improve staff commitment to the model and ensure that it is grounded in operational reality. A cross-section of agency staff—including line, supervisory, and administrative staff—should be represented on the working group. In addition, meetings should be held within the agency to explain the model to staff and address their concerns, and all agency staff should receive basic information on the model.

The intensive nature of the Comprehensive Strategy requires that staff be dedicated, motivated, energetic, and committed. Staff will require extensive initial and ongoing training. Agencies implementing the model must design policies to address the issue of staff burnout. These policies should consist of concrete incentives such as higher pay, liberal compensatory time policies, and flexible work schedules to compensate for nontraditional work hours and the psychological pressures the job entails. One innovative response to staff burnout is to place a cap—usually 12 to 18 months—on the number of consecutive months that staff can work in the model system.

**Case Management**

An effective case management system is crucial to the success of the Comprehensive Strategy. Case management leads to the coordination of services and a high level of accountability. One person—the case manager—must follow each youth through the various stages of the continuum of graduated sanctions and be responsible for all key decisions concerning that youth. For prevention services, the case management should be at the family level. Two excellent case management systems are the Massachusetts Division of Youth Services system and the system in Hillsborough County, Florida.

Case managers serve as both service brokers and direct service providers. Which of these two roles is emphasized more will vary from site to site, depending largely on the availability of community resources. Case managers are responsible for case assessment and planning, referral and monitoring of service delivery, and reassessment. They may also serve as mentors for youth. Case managers should have caseloads of no more than 15 to 20 serious offenders.

The case manager must complete a case assessment and a written case plan for each youth involved in the graduated sanctions programs. The case assessment should consider the unique history, characteristics, and circumstances of each youth. It should address the factors most closely related to the youth's risk of reoffending. Many of these factors will have already been identified by the risk and needs instruments discussed earlier. Thus, the assessment should begin...
with an examination of these instruments. However, the assessment should go well beyond the information contained on these instruments. As part of the assessment, the case manager should examine the results of previous and current clinical and educational evaluations. In addition, new evaluations might be conducted. For example, if the risk and needs instruments indicate a history of mental health problems, the case manager might arrange for a formal mental health evaluation.

The case assessment should examine the particular circumstances of the youth’s offenses—both the instant offense and prior offenses—in addition to reviewing offender needs. This examination, which should include the youth’s cognitive processes and affective states, may reveal motivations for and triggers of the youth’s behavior.

The case assessment should identify youth’s strengths as well as their problem areas. This should include the youth’s individual strengths as well as the strengths of the youth’s family, peers, and community. These strengths should be viewed as key protective factors that can buffer the youth against delinquent tendencies.

An individualized case plan must be developed for each youth based on the results of the case assessment. The case plan should identify intervention priorities and consist of both short-term and long-term goals. These goals should be explicitly stated in the case plan. An example of a case plan is shown in figure 12.

A behavioral contract based on the case plan should be developed by the case manager, the youth, and the youth’s parents. The contract should be written in specific behavioral terms and specify what the rewards and sanctions will be for complying or not complying with the contract. These rewards and sanctions should be delivered swiftly and consistently.

Case plans must be flexible and responsive, and should be reassessed at regularly prescribed intervals—approximately every 2 to 3 months. The reassessment should be based on the youth’s recent behavior, progress in meeting objectives, and newly identified needs. It should take into account changes in the youth’s environment and in available resources.

Developing a Management Information System

A well-designed Management Information System (MIS) is another core component of the Comprehensive Strategy. The MIS can be used for client tracking, planning, budgeting, monitoring, and evaluation. While the MIS will be useful to line staff as well as management, its main purpose should be to support broad-level management and reporting needs. The MIS is based on individual-level data that can be used to track individuals through the system as well as to produce aggregate system-level data such as program enrollments, terminations, and lengths of stay. These individual-level data generally include youth characteristics, offense history, placement history, risk and needs assessment information, and outcome information.

Communities implementing the Comprehensive Strategy should convene a special MIS task force (which is distinct from the main Comprehensive Strategy working groups). The MIS task force should consist of technical MIS staff, managers, and line staff. This mixture of personnel is essential so that program staff can tell MIS staff what information they need to run the Comprehensive Strategy most effectively. The task force is charged with deciding what data to include in the MIS and how and when to collect and process these data.

The task force should begin by defining the community’s data needs. Data needs include information desired for reports, documents, listings, statistics, and rapid inquiry. These data needs should drive which data elements are included in the MIS. A careful, deliberate process is required to ensure that the right data elements are selected. The importance of the MIS rests in the quality and usefulness of the information collected, not in the quantity of the data. The MIS should include whatever data elements are needed to effectively operate and evaluate the Comprehensive Strategy. Agencies that collect too much information run the risk of becoming overwhelmed with inaccurate and untimely information. Agencies that collect too little information may be unable to adequately plan or evaluate the Comprehensive Strategy unless
### Area: Family
**Goals:** To return home by 10/1 and remain in home with minimal conflict with mother.

**Phase**  
1. To achieve prerelease status at Group Home by 9/1 and release by 10/1.

**Objectives:**  
2. To complete all chores and adhere to 7 p.m. curfew while on weekend passes at home during September.  
3. To not argue with mother about restrictions on peers in the home.  
4. To attend all family counseling sessions in September and October.

**Steps:** N/A

**Responsibilities:** CM complete court papers for release from group home.  
Mother attend family counseling and ISP parents group.

**Resources:** Group home and ISP staff, Mr. Johnson at Lighthouse Center, CM.

### Area: Education/Work
**Goals:** Get GED and enroll in vocational school by end of Phase 4.

**Phase**  
1. To complete remedial work in math and reading (and pass tests) at ISP school by 10/1.

**Objectives:**  
2. To complete GED prep work at Roxbury H.S. by 2/15/92 (test on 3/2/92).  
3. To obtain brochures and applications for vocational schools by 11/1.

**Steps:** Continue with tutor; enroll in GED at Roxbury; clarify vocational interests.

**Responsibilities:** CM identify area vocational schools and sources of scholarships/funding.  
Tutor available 3 times per week next 2 months.

**Resources:** Tutor, Mrs. White at Roxbury, Joint Area Vocational, Electronics Academy, ISP school staff.

### Area: Peers
**Goals:** Disengage from McGruder St. crowd.

**Phase**  
1. To have no contact with Ray B., Raheem, and Rabbit on weekend passes and after return home.

**Objectives:**  
2. To finish work on “easily influenced” problem in group.  
3. Once home, to meet with mentor three times per week.  
4. Complete scuba course or weightlifting program at YMCA.

**Steps:** N/A

**Responsibilities:** Mentor available three times per week; mother and surveillance staff monitor friends.

**Resources:** Mentor, ISP group, YMCA.
they undergo the costly and time-consuming process of collecting additional data.

How can the task force identify how much and what kind of data it needs? It is helpful to work from the general to the specific, as outlined in the following approach:

• Describe the output reports needed in general terms.
• Identify who needs which reports how often.
• Identify the data elements needed for each report.
• Identify the desired format.
• Identify inquiry needs and unique data elements.

For each data element to be included, the task force should be able to explain the function the element relates to, how it will be used, who needs it, and how it will be captured. Only if these characteristics can be accurately defined should a data element be included in the MIS. A practical purpose must exist for every data element included in the MIS.

Figure 13 shows data elements that might be included in an MIS. This list should be used only as a guide, because particular communities must follow the design steps listed above to determine their specific needs.

Another MIS issue to be addressed is using automated versus manual data. Some data elements should be automated while others can be retrieved manually. The MIS designers must recognize which data need to be computerized. The distinctive capabilities and needs of a particular community should be taken into account when making decisions about the degree of automation in the MIS. However, some general guidelines are helpful in selecting the most efficient data collecting and processing options.

Manual systems can be the most efficient way to process information that does not need to be aggregated. For example, such manual systems can produce lists of case actions due in a specified time period, case plans, and the frequency and types of contacts.

A manual system with batch processing of summary data can also be an efficient option. Some tracking procedures can be effectively done manually and still provide valuable aggregate data for management. A particular community must compare the cost of automating an entire process with the cost of keying in manually tabulated summaries on a regular basis. In some situations, this may be the best option due to its simplicity and low cost. The disadvantage of such a system is the time lag that occurs between staff actions, summaries, and data entry. Thus, this approach should be used only for routine reports in which a brief delay in obtaining the data will not be a problem.

Microcomputer-based processing operations are quickly replacing centralized operations in other fields and should be seriously considered by all communities implementing the Comprehensive Strategy.

An automated system should be used for data that will be aggregated for management use. Automated client-tracking systems can also be extremely useful to line staff and supervisors. The most successful systems are based on simple designs. Recent advances in technology (e.g., the microprocessor) have created new opportunities for automated data management. Microcomputers can meet the needs of nearly all juvenile corrections agencies. This frees juvenile agencies from centralized data processing operations, enabling them to control the collection, processing, and reporting of data. Microcomputer-based processing operations are quickly replacing centralized operations in other fields and should be seriously considered by all communities implementing the Comprehensive Strategy.

In sum, an effective MIS should consist of the following features:

• Often utilizes a combination of manual, batch processing, and online applications to meet agency needs (although microcomputers and distributive processing are resulting in increased automation).
• Captures data from forms used for other agency purposes rather than adding a new layer of paperwork.
1. Intake and Assessment Information

Client Demographics
- Name
- Birth Date
- Sex
- Race
- Address
- Phone Number
- Social Security Number
- School Name (if any)
- School Address
- Contact Person at School
- School Phone Number
- Employer’s Name (if any)
- Address of Employer
- Phone Number of Employer

Parents/Guardian and Siblings
- Parents/Guardian Names
- Relationship to Client
- Address
- Phone Number
- Employer
- Work Phone
- Marital Status
- Sibling Names
- Sibling Ages

Offense History
- Disposition Date
- Committing Offense and Date
- Adjudicated Offense(s)
- Offense(s) Charged at Arrest
  (if different from adjudication)
- Detention at Arrest?
- Current Placement Status
- Number of Prior Delinquency Referrals
- Prior Adjudicated Offenses and Dates

Risk Assessment
- Date of Assessment
- Age at First Adjudication
- Number of Prior Arrests
- Current Offense
- Number of Prior Out-of-Home Placements
- History of Drug Usage
- Current School Status
- Probation Status
- Number of Runaways from Prior Placements
- Number of Grades Behind in School
- Level of Parental/Caretaker Control
- Peer Relationships

Needs Assessment
- Date of Assessment
- Basic Living Situation
- Primary Family Relationships
- Alternative Family Relationships
- Emotional Stability
- Peer Relationships
- Substance Abuse
- Victimization
- Intellectual Ability
- School Adjustment
- Employment
- Vocational/Technical Skills
- Transportation
- Health/Hygiene and Personal Appearance
- Runaway History
- Victims of Abuse/Neglect
- School Status
- Truancy History
- Prior Placements

2. Client Progress in Program

- Phase Completion Dates
- Services Received—type and date
- Academic Gain
- Rules Violation—type and date
- Program Sanctions—type and date
- Living Arrangements
- Arrests—type and date
- Risk and Needs Reassessments
- Staff Assigned

3. Termination

- Date of Termination
- Reason for Termination
- Legal Status
- Living Arrangement
- School Status
- Employment Status
- Assessment of Progress

4. Followup Data (6 months and/or 12 months following termination)

- Date of Followup
- Number of Arrests
- Number of Adjudications/Convictions
- Legal Status
- Living Arrangement
- School Status
- Employment Status
• Operates in a dynamic and flexible manner. Items and report formats can be added, changed, or deleted without a major programming effort.

• Routinely provides aggregate information to management. (Management use of this information should, in turn, be conveyed to line staff.)

• Provides timely and useful information to all levels of the organization and is integrally tied to other management functions.

• Includes routine editing procedures (manual and/or automated) to protect the integrity of the data.

A comprehensive MIS is crucial in the management and evaluation of the Comprehensive Strategy. Recent technology has made it relatively easy for all communities implementing the Comprehensive Strategy to operate such a system.

**Evaluating the Comprehensive Strategy**

The Comprehensive Strategy must incorporate a comprehensive evaluation component consisting of two parts: a process evaluation and an outcome evaluation. The process evaluation will assess the degree to which the model was implemented as planned. The outcome evaluation will analyze how successfully it reduced youth crime and recidivism.

The process evaluation will describe how the Comprehensive Strategy actually operates. It will describe and analyze the planning and implementation of the model. The evaluation will discuss the forces that influenced the model’s implementation.

Ideally, the evaluation should be conducted by an outside organization that is independent of the agency operating the Comprehensive Strategy. If the evaluation is not conducted by an outside organization, its design should describe how the organization will maintain neutrality and objectivity and how conflicts between the needs of the model and the needs of the evaluation will be avoided.

The process evaluation should include at a minimum an analysis of the following program elements: context, client identification, program interventions, and program linkages. Contextual issues include system philosophy, local juvenile justice conditions, and key decisionmakers involved in the development and implementation of the model. Client identification refers to the degree to which planned client selection procedures were implemented and selected youth reflect the planned target population. The element of program interventions includes information on all programs in the continuum of graduated sanctions. Types of information include number of youth served and youth and staff attitudes towards each program.

Program linkages refer to a description and assessment of the formal and informal conditions and relationships that may hinder or support program operations. The attitudes of agency staff and staff from other juvenile justice agencies should be analyzed, as should the degree of cooperation between the agency and other service-providing agencies.

An independent research group should conduct the outcome evaluation. When possible, experimental designs should be used to test the efficacy of program interventions. This means that youth in various components of the model system should be compared to a randomly selected control group. The outcome evaluation should examine recidivism, positive social adjustments, and costs.

Several recidivism outcome measures should be included in the evaluation. These include the number and seriousness of rearrests, number and seriousness of readjudications, number of incarcerations, and self-report delinquency measures. The design should specify how the analysis will treat technical violations that do not involve a new offense.

Youth’s “positive adjustment” refers to their participation in educational, vocational, family, and community activities that research has shown can reduce delinquency. Measures for the “positive adjustment” portion of the evaluation could include attendance at educational programs, completion of educational programs, and improvements in educational scores; employment measures such as hours worked per week and income earned; and attitudinal and motivational measures such as satisfaction with family and law-abiding friends, self-esteem, and perceived control over life.
Conclusion

This Guide offers a solution to growing juvenile violence: “A Comprehensive Strategy for Serious, Violent, and Chronic Juvenile Offenders.” This proposed solution is an alternative to the currently popular response of increasing reliance on the criminal justice system with decreasing reliance on prevention and the juvenile justice system. Neither punishment alone nor treating juveniles as adults offers much promise as a strategy for reducing juvenile violence.

Two main features of the Comprehensive Strategy hold the key to success in dealing with serious, violent, and chronic juvenile delinquency: prevention and balanced blending of treatment and graduated sanctions. Prevention is essential because of the pervasiveness of violence among America’s youth, which is no longer mainly an inner-city or urban problem. Furthermore, most of the juveniles responsible for about two-thirds of serious, violent crime do not have an official juvenile justice system record during their adolescent years (see Elliot et al., 1986). This startling finding implies that community-based prevention holds the most prospects for reducing the bulk of juvenile crime.

New prevention technology, patterned after successful efforts in the health arena, enables communities to manage communitywide prevention programs. This “risk factor” approach involves reducing risk factors and providing protective buffers against known risk factors. The CTC strategy pioneered by Hawkins and Catalano (1992) guides communities in risk-focused prevention and actively involves civic leaders, juvenile justice professionals, citizens, and youngsters. The CTC model is a systematic process of assessing local risk factors, identifying those most prevalent in the community, and then selecting specific program models from a wide range of options which that particular community wishes to implement to reduce priority risk factors or provide protective buffers against them. Reviews of early intervention and prevention approaches by Hawkins and his colleagues have provided encouragement that sufficient program strategies and models are available to communities to prevent even serious and violent crime among juveniles.

The landmark studies conducted under OJJDP’s Program of Research on the Causes and Correlates of Juvenile Delinquency (Huizinga, Loeber, and Thornberry, In press) suggest that eliminating all violent acts among nonchronic violent offenders would reduce violence by only 25 percent. This conclusion is based on their finding that at least 75 percent of all violent juvenile offenses are committed by chronic violent offenders, who constitute about 15 percent of high-risk populations. Therefore, the Comprehensive Strategy targets these offenders for immediate intervention and graduated sanctions. Prevention efforts may not succeed in reducing the most intractable youth’s violence because of the large number of multiple risk factors in their lives. Interventions must be instituted early in the onset of their offending careers.

A Comprehensive Strategy is needed because most juvenile justice system interventions occur too late. In general, serious and violent youth behavior peaks at ages 16 and 17, while peak ages for arrests are 18 and 19 (Elliot, 1994). Earlier intervention with graduated sanctions and treatment measures is essential to rehabilitation efforts.

Our review of intervention and treatment programs for serious, violent, and chronic juvenile offenders is very encouraging. A surprisingly large number of promising and effective programs were identified. Moreover, most of them appear to address the concerns raised by delinquency researchers regarding the difficult task of successfully rehabilitating chronic, violent juveniles because of the severity, scope, and interactive nature of their problems. To be successful, treatment programs for chronic, violent juveniles must address the wide range of co-occurring problems in a comprehensive and highly structured manner over a long period of time. Indeed, it is remarkable that there are as many promising graduated sanctions programs as were found in our review.
The intensive treatment approach, coupled with graduated sanctions, called for in the Comprehensive Strategy necessitates reallocation of juvenile justice system resources. The necessary technology is at hand to enable the system to target scarce resources on those serious, violent, and chronic juvenile offenders responsible for most of the juvenile crimes of greatest concern in America today.

Risk assessments enable corrections officials to assess objectively the extent to which confined juveniles threaten public safety. On average, about one-third of those confined in long-term juvenile corrections facilities could safely receive treatment in less secure, and less expensive, community-based programs. Doing so would make resources available to improve programming for those most difficult to rehabilitate. Conducting comprehensive needs assessments, covering the wide range of problems serious, violent, and chronic juvenile offenders possess, together with the promising programs identified, could significantly improve the success of the juvenile justice system with these offenders.

This Guide provides a support base for the implementation of OJJDP’s Comprehensive Strategy. Implementation of the Comprehensive Strategy holds great promise for achieving the following objectives:

- Making more resources available for delinquency prevention.
- Increasing juvenile justice system responsiveness.
- Increasing juvenile accountability.
- Decreasing costs of juvenile corrections.
- Increasing the responsibility of the juvenile justice system.
- Increasing juvenile justice system program effectiveness.
- Reducing crime in the long run.

These prospects remain to be realized. Full implementation and evaluation are necessary before any firm conclusions can be drawn. However, this Guide for the Comprehensive Strategy should help communities plan and implement a full continuum of care that gives every juvenile a fair chance to become a productive and contributing member of society.
Part II: Preventing Serious, Violent, and Chronic Delinquency and Crime

Part II summarizes the review of preventive intervention strategies. Twenty-five effective and promising interventions are grouped into two categories: conception to age 6 (9 specific programs) and childhood through adolescence (16 program areas). Approaches to prevention that seek to reduce identified risk factors and, at the same time, enhance protective factors are likely to provide the strongest form of prevention.

Effective Early Interventions

Reducing youth violence and crime requires a multifaceted, coordinated approach in which early intervention is a critical first step (General Accounting Office, March 31, 1992). Several researchers (Hawkins and Catalano, 1992; Hawkins, Catalano, and Miller, 1992; Institute of Medicine, 1994; Olds and Kitzman, 1993; and Yoshikawa, 1994) have reviewed well-designed evaluations of preventive interventions targeting risk factors for delinquency, violence, and substance abuse. These sources should be consulted for more complete descriptions of the programs and their effects than can be presented in this Guide.

The preventive interventions described below have been tested extensively with children born to single (often teenage) mothers living in poverty. Preventive initiatives using these early intervention strategies should reach those children at risk because of low birthweight or preterm birth or because their mothers were unwed, poor, or teenagers. The interventions are organized developmentally from the prenatal period through age 6.

The programs described here have been found to reduce risks and enhance protective factors against crime, violence, and substance abuse. Some have demonstrated long-term preventive effects as well. Only programs that provide direct services to individuals and/or their families are included in this consideration of early interventions.

Pre- and Perinatal/Early Education

The Prenatal/Early Infancy Project is an example of a comprehensive program that includes many of the intervention components from both the pre-/perinatal period and the birth to age 4 developmental stage (Olds, Henderson, Tatelbaum, and Chamberlin, 1986; Olds, Henderson, Chamberlin, and Tatelbaum, 1986). The program targeted a geographical area with high rates of poverty and child abuse in the semirural Appalachian region of New York State. Most of the mothers in the sample were unmarried and from the lowest socioeconomic group; nearly half were teenagers. In the full implementation of the program, home visits by a nurse began during pregnancy and continued until children were 2 years old. The nurses provided mothers with health and parent education, job and education counseling, health and social service linkage through referral and advocacy, and emotional and social support. The nurses also encouraged

Approaches to prevention that seek to reduce identified risk factors and, at the same time, enhance protective factors are likely to provide the strongest form of prevention.
the mothers’ close friends and family members to participate in the home visits and assist the mothers in a variety of ways, including helping with child care and household responsibilities.

The project evaluation, which used a randomized clinical trial design, identified significant reductions in several risk factors. Program participation decreased perinatal difficulties for teenage mothers and mothers who smoked. In addition, 24 months after the program had ended, the rate of verified child abuse and neglect was only 4 percent for program participants compared with 19 percent for those in the control group. Of the mothers who had not finished high school at the beginning of the study, program participants were twice as likely as those in the control group to have graduated from high school or be enrolled in an educational program. Program participation also led to increased employment for single, poor, older mothers and delayed subsequent pregnancies for single, poor mothers.

Parent-Child Interaction Training is another example of a program that effectively reduced risk factors, including poor family management practices and early antisocial behavior (Strayhorn and Weidman, 1991). This program targeted low-income parents who had complained that their preschool children (ages 2 to 5) exhibited at least one behavioral or emotional problem. Most parents were unmarried and experiencing depressive symptoms, and the sample was predominantly African-American. Parents participated in four to five 2-hour small group sessions with instruction and role-playing on parenting skills, including behavioral management. Parents also were trained to play constructively with their preschool children, conducting individual play sessions with them and attending sessions until the parents reached a criterion level. A randomized trial showed that at the 1-year followup, children who participated in the program improved significantly more than those in the control group in terms of teacher-rated attention-deficit, hyperactive, aggressive, and anxious behavior.

The Healthy Start program in Hawaii, although not yet rigorously evaluated, is a promising example of a statewide policy-driven early intervention program. Healthy Start is an ongoing service project that aims to prevent child abuse and neglect by reducing the risks of poor family management and academic failure and enhancing the protective factor of parent-child bonding (Breakey and Pratt, 1991). Healthy Start screens mothers who are admitted to hospitals for childbirth, using 15 indicators for determining at-risk status. The screening procedures are effective in identifying those families at high and low risk for child abuse and neglect (Hawaii State Department of Health, 1992). Families determined to be at risk are offered comprehensive early intervention services; approximately 95 percent of the families accept the offer. The program serves families beginning postpartum and continues until children are 5 years old.

Healthy Start provides linkage to a “medical home,” which emphasizes preventive health care, and comprehensive home visits by trained paraprofessionals, which include parent training, family counseling, enhancement of parent-child interaction, child development activities, health and social service linkage and coordination, and emotional and social support. Beginning with weekly home visits, the level and intensity of services vary over time with the families’ needs and risk levels.

**Three major controlled studies of early childhood education and home visitation have tracked participants well into adolescence and have shown that these interventions predict lower rates of violence and crime.**

**Educare**

Structured educational daycare, or educare, and preschool programs that emphasize language development (including teacher-directed, student-centered, and student-initiated programs) advance children’s cognitive and social development (Yoshikawa, 1994). Programs with various structures seem about equally effective in reducing these risk factors and enhancing children’s bonds to school and home (Hawkins and Catalano, 1992).
Three major controlled studies of early childhood education and home visitation have tracked participants well into adolescence and have shown that these interventions predict lower rates of violence and crime. The Perry Preschool program (Berretta-Clement, Schweinhart, Barnett, Epstein, and Weikart, 1984) used the High/Scope Cognitively Oriented curriculum to foster social and intellectual development in children ages 3 to 4 years. The program targeted children with below average IQ’s from low-income African-American families in a poor neighborhood in Ypsilanti, Michigan. Nearly half the children in the study were from single-parent families. In the program, the preschool teacher divided the classroom into language-oriented learning centers that encouraged children to use, experience, and discover language through activities and play. The teacher and child jointly planned and initiated activities. In addition to early education, teachers met with each mother and child weekly. The teacher encouraged the mother to engage the child in activities in a manner consistent with the classroom curriculum.

In a randomized trial, the Perry Preschool program showed significant reductions in risk factors, as well as criminal and violent behavior (Berretta-Clement et al., 1984). Program participants attached greater importance to school and displayed higher academic achievement than those in the control group as indicated by standardized tests and grade point averages in high school, high school completion rates, and literacy levels at age 19. Only 31 percent of program participants had ever been arrested or charged with a crime by age 19, as compared with 51 percent of those in the control group. Program participants also self-reported approximately 50 percent less violent behavior than controls. The Perry Preschool program also had other positive impacts for participants, including better employment and a lower likelihood of receiving public assistance by age 19.

Two other programs that employed early education and home/family interventions are the Houston Parent-Child Development Center and the Syracuse Family Development Research Project. During the first year of the child’s life, the Houston Parent-Child Development Center program consisted of home visitation services that focused on enhancement of parent-child interaction and child cognitive development activities. The second stage of the program began when the child was 2 years old and consisted of center-based educational nursery school and parent training. Followup evaluations 5 to 8 years later, when children were ages 8 to 11, discovered that participants in the Houston Parent-Child Development Center program displayed less teacher-rated fighting and disruptive, impulsive, and restless behavior than control children (Johnson and Walker, 1987).

Program participants who had juvenile records committed less serious and fewer offenses than control subjects with juvenile records.

The Family Development Research Project included a home visitation component with parent training, enhancement of parent-child interaction, child cognitive development activities, social support, promotion of social service use, and a toy and book lending library. The other components of the program were center-based educational child care and a parent organization. A followup evaluation showed that only 6 percent of the program participants had juvenile records by age 15, in comparison to 22 percent of those in the control group (Lally, Mangione, and Honig, 1988). Moreover, program participants who had juvenile records committed less serious and fewer offenses than control subjects with juvenile records.

Ages 4 to 6

As children prepare to enter elementary school, preventive interventions should be supplemented with social competence curriculums, which may be delivered at preschool centers or at home by parents. These curriculums aim to counteract and prevent early antisocial behavior by teaching basic interpersonal skills (Hawkins, Catalano, Morrison, et al., 1992). Two examples of programs of this type are the Interpersonal Cognitive Problem-Solving (ICPS) and the PATHS curriculums. The ICPS curriculum tries to decrease impulsivity and inhibition (Shure and Spivack, 1980; Spivack and Shure, 1989). The program consists of daily lessons in the form of games. Early lessons focus
on simple word concepts, such as “not,” “or,” “same,” “different,” and “because,” which are essential for understanding later problem-solving skills. The rest of the curriculum emphasizes alternative solutions to interpersonal problems, consequential thinking, and recognition of and sensitivity to others’ feelings. In preschool, kindergarten, and home implementations of the ICPS curriculum with children from low-income urban families, the program had significant and durable effects on behavioral adjustment, including reduced aggressive and socially inappropriate behaviors and improved problem-solving skills in program participants compared with control subjects (Shure and Spivack, 1980, 1982, 1988).

PATHS (Providing Alternative Thinking Strategies) is a newer social competence curriculum that attempts to reduce early antisocial behavior by integrating emotional, cognitive, and behavior skill development in young children (Greenberg and Kusche, 1993). The PATHS curriculum begins with kindergarten children and has four main objectives:

• Control arousal and behavior through self-regulation (“stop and calm down”).
• Develop affective vocabulary and emotion processing to help understand self and others.
• Integrate affective, cognitive, and linguistic skills for effective social problem solving.
• Promote positive self-esteem and effective peer relations.

Lessons are developmentally sequenced and include dialoguing, role-playing, modeling by teachers and peers, social- and self-reinforcement, attribution training, and verbal mediation. The program has been found to be effective in reducing behavior problems of deaf children (Greenberg and Kusche, 1993). While evaluations are ongoing with hearing populations, the approach represents an advance over earlier social competence curriculums because it integrates skills to recognize and regulate emotions with cognitive and behavioral skills training, an element missing from earlier skills training programs.

**Summary**

The programs described above are promising interventions that reduce risk and enhance protection for infants and very young children. The evidence is clear that prevention approaches applied from the prenatal period through age 6 can help prevent crime, violence, and substance abuse in adolescence and young adulthood. To implement effective interventions, communities must design and guide their own comprehensive local strategies using the risk-focused prevention approach. Communities that find risk factors affecting children from conception through age 6 to be major contributors to overall levels of community risk should consider the preventive interventions reviewed here for inclusion in their strategic prevention plans.

**Childhood, Adolescence, and the Community**

We turn now to a review of selected preventive interventions focused on the developmental periods of children in early elementary school through adolescence and on the community at large. The importance of the community in preventing delinquency among children from age 6 through adolescence cannot be overemphasized. For greatest effectiveness, community prevention efforts should consist of interventions that do the following:

• Address the highest priority risk and protective factors to which children in a particular community are exposed.
• Focus on populations exposed to multiple risk factors.
• Address risk and protective factors early and at the appropriate developmental stage.
• Address multiple risk factors in multiple domains.
• Create a continuum of prevention services across developmental stages and throughout the community.
• Reach and communicate effectively with the target populations.
• Continue over a long period of time.
• Involve a service delivery system that employs personnel who are well trained for specific intervention tasks and who have a unified vision of risk-focused prevention.

Putting such a comprehensive strategy in place requires that communities organize to take the steps listed below:

• Assess their children’s risk exposure and the current resources directed at these risks.
• Prioritize risk factors and identify gaps in existing resources that address those risk factors.
• Put new programming in place to address service gaps.

In the following pages, we will present evaluations of preventive interventions for childhood through adolescence in 16 program areas. Communities will find the evaluations helpful in the selection of effective programs for inclusion in their comprehensive risk reduction strategies. Because these programs are popular, they need to be assessed to determine their effectiveness in preventing delinquency and violence. For most of these program areas, no current comprehensive review of rigorous evaluations exists.

Review of Prevention Programs

An extensive literature search was conducted for this review. The PsycInfo, ERIC, Sociofile, and Social Work Abstracts data bases and the holdings of the University of Washington libraries were searched using numerous author names and key words. More than 375 programs, organizations, and researchers involved in delinquency and violence prevention in the United States were contacted in the search for evaluated programs. Descriptions and evaluations of relevant preventive interventions were requested, and written materials were received from 101 of these sources.

The 16 prevention approaches reviewed here focus on children from age 6 through adolescence. (Delinquency and violence prevention approaches that intervene in the period between conception and age 6 were examined previously.) Overall, the 16 program areas are classified here into 3 groups.

The program areas in the first group, which are based in schools, include the following:

• Classroom organization, management, and instructional strategies.
• School behavior management strategies.
• Conflict resolution and violence prevention curriculums.
• Peer mediation.
• Peer counseling.
• School organization.

The second group of interventions, which are directed to children, youth, and families in settings outside school, include those listed below:

• Parent training.
• Intensive family preservation services.
• Marital and family therapy.
• Mentoring.
• Afterschool recreation.
• Gang prevention.
• Youth service.
• Vocational training and employment.

The third group of approaches involves community-level interventions:

• Community laws and policies related to weapons.
• Policing strategies.
• Community mobilization.

Within the first two broad groups of preventive interventions, approaches are ordered in a developmental sequence, from early elementary school through late adolescence. The position of a prevention approach in this ordering is determined by the age of participants when the program began. In some cases, a particular prevention approach may also be implemented at later points developmentally. The school-based approaches also are sequenced from individually
oriented programs to interventions on the organizational and ecological levels. Multicomponent programs are classified according to the intervention’s principal component. In some program areas, existing literature reviews and meta-analyses that adequately discuss relevant quasi-experimental and experimental evaluations are used as sources. The results and conclusions are discussed and supplemented with reviews of other program evaluations not previously examined. Program evaluations chosen for review satisfied six criteria (modified from Institute of Medicine, 1994):

- The program addressed known risk and protective factors for delinquency and violence. While some investigators did not present a program in terms of the risk factors it addressed, if it could be reasonably assumed that the program addressed an identified risk or protective factor for delinquency and violence, then the evaluation was judged to have met this criterion.

- The demographic, social, and risk characteristics of the population served by the program were specified.

- The preventive intervention itself was adequately described, including details on goals and content, personnel delivering the program, and methods of service delivery.

- The evaluation used a quasi-experimental or a more rigorous research design in testing program effects. Uncontrolled, preexperimental designs suffer from too many threats to internal validity to allow reasonable interpretation of results.

- The evaluation provided evidence concerning the degree of program implementation and information on whether the intervention was delivered according to plan.

- Quantitative evidence was presented regarding program outcomes on delinquency, violence, and associated risk and protective factors. Unless otherwise noted, the investigators controlled for pre-program differences between experimental and control/comparison groups in assessing program outcomes.

The review in this Guide includes only delinquency and violence prevention programs. It excludes programs that involve young people as a result of contact with law enforcement or the juvenile justice system. Covered programs may have included youth with previous contact with law enforcement or the juvenile justice system, but their participation was not a consequence of this contact. Interventions for young offenders are reviewed in Part III of this guide. This review does not include related programs that are specifically designed to prevent substance abuse, such as drug education programs and changes in drinking age laws. See Hawkins, Catalano, and Miller (1992) and Hawkins, Arthur, and Catalano (in press) for reviews of these programs. In addition, most research discussed in this review has not distinguished serious, violent, or chronic delinquency from more general delinquent behavior. As a result, the conclusions at the end of this section primarily apply to the prevention of delinquency and violence as a whole.

School districts considering reducing class size to increase achievement must weigh the cost of this intervention relative to the small educational benefits observed.

Classroom Organization, Management, and Instructional Strategies

Interventions involving classroom organization, management, and instructional strategies attempt to promote the protective factors of opportunities to participate actively in learning, skills to establish positive social relationships, and bonding to school and prosocial peers. These interventions seek to reduce school-related risk factors of academic failure, low commitment to school, and early and persistent antisocial behavior.

Robert Slavin and his associates have conducted several reviews and meta-analyses of evaluations of classroom organization, management, and instructional strategies. Their reviews and meta-analyses included studies that met four criteria: the program must be portable and replicable, the program must...
have lasted at least one semester, the evaluation must have included objective standardized academic achievement tests as outcome measures, and the evaluation must have involved at least three experimental and three control teachers.

In a meta-analysis, Slavin (1990a) showed that substantial reductions in class size (i.e., greater than 20 percent) had small positive effects (median effect size = .14) on students’ reading achievement in kindergarten and first grade classrooms. Reliable effects of reduced class size have not been found for second and higher grades. School districts considering reducing class size to increase achievement must weigh the cost of this intervention relative to the small educational benefits observed.

Slavin (1994) reviewed controlled evaluations of the presence of teacher aides in classrooms. He found that using multipurpose teacher aides who helped with instructional, clerical, and custodial activities did not consistently increase students’ academic achievement in the early elementary grades.

A comprehensive meta-analysis of experimental and quasi-experimental studies by Slavin (1987) indicated that the effects of ability grouping for instruction in elementary school varied by format. The results demonstrated no improvement from ability-grouped class assignment or tracking within grades (median effect size = .00), but showed moderate positive effects for ability grouping in reading across classes and grades (median effect size = .45) and within class ability grouping in mathematics in the middle and late elementary grades (median effect size = .32). Almost all the studies included in this meta-analysis were conducted before 1980 (Hiebert, 1987), which suggests caution in generalizing these results.

Ability grouping in the secondary schools, however, does not appear to improve students’ academic achievement. Slavin (1990b) performed a meta-analysis of experimental, quasi-experimental, and correlational studies of ability grouping in secondary schools. The median effect size of between- and within-class ability grouping on students’ academic achievement was - .02. This result held for different forms of ability grouping, different subjects, and students of different ability levels.

Gutierrez and Slavin (1992) conducted a meta-analysis of a related classroom arrangement, the nongraded elementary school, where “students are grouped according to their level of academic performance, not their ages” (p. 334) and are allowed to progress through elementary school at their own pace. They found that nongraded programs had positive effects on student achievement when used for one subject (median effect size = .46) and multiple subjects (median effect size = .34). This effect did not hold when nongraded programs were combined with individualized instruction, where the student initiates more of the individually tailored learning activity (median effect size = .02) or with individually guided education (a variant of individualized instruction) (median effect size = .11). However, both nongraded elementary schools and ability-grouping programs in elementary school may attach a stigma to students of lower ability groups.

Holmes and Matthews (1984) conducted a meta-analysis of the effects of not promoting students to the next grade in elementary and junior high schools. They showed that nonpromotion had negative effects on students’ academic achievement, behavior, attitudes toward school, and school attendance, over and above the effects of nonpromoted students’ lower intelligence and academic achievement.

O’Leary and O’Leary (1977) reviewed experimental research on behavioral techniques for classroom management. The authors identified several effective techniques to promote positive classroom behavior, such as clear rules and directions, praise/approval, modeling, token reinforcement, self-specification of contingencies, self-reinforcement, and shaping. They also identified effective strategies for decreasing disruptive negative behavior, such as ignoring misbehavior, reinforcing behavior incompatible with the undesired behavior, and using soft reprimands, timeouts, point

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loss and fines in token economies, and relaxation methods.

Kellam and Rebok (1992) and Kellam, Rebok, Ialongo, and Mayer (1994) evaluated the impacts of a behavioral classroom management technique called the Good Behavior Game. Program teachers measured students’ levels of aggression and disruption during a baseline period and then assigned students to one of three heterogeneous teams that included equally aggressive and disruptive children. When the Good Behavior Game was in progress, teachers assigned checkmarks on the chalkboard to a team when a member engaged in disruptive behavior. At the end of a game period, teams with fewer than five checkmarks earned a reward. During the beginning of the program, game periods were announced, and tangible rewards such as stickers were immediately distributed to team members. As the program progressed, the teacher began the game unannounced and provided less tangible rewards, such as participation in a rewarding activity (e.g., extra recess) or class privileges that were delayed until the end of the day or week. Teams that won (by having fewer than five checkmarks) most often during the week received a special reward on Friday. The 2-year program was tested with first grade students in public schools in eastern Baltimore. The participating urban public schools recruited children from low- and middle-income residential areas and included neighborhoods varying in ethnic diversity. Forty-nine percent of the study children were male, and 65 percent were African-American.

The researchers used a true experimental design to evaluate program effects. Within each of five urban areas, schools were assigned to receive the Good Behavior Game, a mastery learning instructional intervention, or no intervention (the control group). Teachers and entering students were randomly assigned to intervention or control classrooms. During the first weeks of the program, the Good Behavior Game was played for three 10-minute periods a week. The duration of game periods gradually increased over subsequent weeks to a maximum of 3 hours.

After 1 year, experimental students were rated as significantly less aggressive and shy by teachers and peers in comparison to control students. The largest program effects after 1 year were found for the most aggressive children. There were no overall program effects on sixth grade teacher-rated aggression after controlling for aggression ratings by first grade teachers. However, boys in the experimental group rated as highly aggressive in first grade were rated as significantly less aggressive in sixth grade than their counterparts in the control and mastery learning groups, controlling for the level of first grade aggression.

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Slavin and Madden (1989) reviewed controlled evaluations of instructional strategies for elementary school students, especially for those at risk of academic failure. They found evidence of effectiveness (small to moderate effect sizes) for two categories of instructional methods: continuous progress and cooperative learning.

In continuous progress programs, students proceed through a defined hierarchy of skills and are tested at each level to assess their readiness to advance to the next skill. Students who fail these mastery assessments receive special instructional assistance (e.g., tutoring, assignment to different groups, corrective instruction in small groups, or other materials and activities). Continuous progress programs maintain careful records of each student’s progress through the curriculum, and these records are used to guide instructional decisions. In these programs, teachers deliver most instruction to groups of students at the same instructional level. Evaluations of seven different continuous progress programs showed positive effects on students’ academic achievement.

In cooperative learning programs, teachers provide initial instruction to groups of students at the same skill level or to the entire class. Then students work in learning teams, each with four to five members of mixed skill levels, helping each other learn and
assessing one another’s progress in preparing for tests and teacher assessments. Students take tests individually, without help from teammates, but receive some type of recognition based on the learning of all team members. When students do not meet the required level of mastery, they are provided with specific corrective procedures. Cooperative learning has shown positive effects on academic achievement in a variety of subjects for short-term interventions lasting less than a full semester in elementary and secondary schools (Slavin, 1983b), as well as in longer term interventions in elementary schools (Slavin and Madden, 1989). In addition, cooperative learning programs of all types have had positive effects on such outcomes as attitudes toward school, race relations, and acceptance of special education students mainstreamed into regular classes (Slavin, 1983a, 1990c).

One-on-one tutoring of elementary school students in reading and math by older students, adult community volunteers, trained paraprofessionals, and professional teachers produced substantial and long-term improvements in student achievement (see also Wasik and Slavin, 1994). These findings held whether tutoring was remedial or preventive in nature and structured or unstructured in design. Moreover, older students who served as tutors to younger students also showed academic gains as a result of their participation. Cohen, Kulik, and Kulik (1982) showed similar results in their meta-analysis of controlled evaluations of peer- and cross-age tutoring in the elementary and middle school grades. Tutoring had moderate positive effects on both tutees’ and tutors’ academic achievement (mean effect sizes = .40 and .33, respectively) and attitudes toward the subject matter covered in tutoring (mean effect sizes = .29 and .42, respectively). These effects held for students across all achievement levels. Furthermore, randomized evaluations of classwide peer tutoring and tutoring by adults in elementary grades demonstrated long-term positive program effects on students’ academic achievement 1–2 years following tutoring (Coie and Krehbiel, 1984; Greenwood, Terry, Utley, Montagna, and Walker, 1993).

In addition, Madden and Slavin (1989) demonstrated that computer-assisted instruction had reliable, though modest, positive effects on students’ achievement in acquiring basic reading and math skills. They also found that diagnostic-prescriptive pullout strategies may be somewhat effective in increasing students’ academic achievement. In these programs, “... students identified as being in need of remedial services are carefully assessed and then instruction appropriate to their needs is given by a teacher in a location separate from the regular classroom (or occasionally within the classroom setting). Instruction may be given to individuals or to small groups within a pullout class of roughly three to eight students” (p. 54).

The Seattle Social Development Project, which was explicitly designed to prevent delinquency and other problem behaviors (Hawkins and Lam, 1987), employed several classroom management and instruction program components, including cooperative learning, proactive classroom management, and interactive teaching. Proactive classroom management consisted of establishing expectations for classroom behavior; using methods of maintaining classroom order that minimized interruptions to instruction and learning; and giving frequent, specific, and contingent
praise and encouragement for student effort and progress. Interactive teaching involved several elements, including assessment, mental set, objectives, input, modeling, and checking for understanding and remediation. Students had to master specific learning objectives before proceeding to more advanced work.

The program was tested in regular classrooms in multi-ethnic public elementary and middle schools in combination with a social competence curriculum and parent training. (See Hawkins, Catalano, and Brewer, 1994, for a review of these latter preventive interventions.) The evaluation used a true experimental design. In six elementary and three middle schools, entering first and seventh grade students, as well as teachers, were randomly assigned to experimental and control classrooms. One additional school of each level (elementary and middle) was designated as a full experimental school, and another school of each level was designated as a full control school. In elementary schools, the program was implemented in grades one to six for the experimental cohort. In middle schools, the program was implemented only during the seventh grade in math, language arts, and social studies classrooms. The program was fairly well implemented. Experimental teachers’ instructional practices consistently and significantly more closely matched intended program practices than control teachers’ classroom behavior.

For the elementary school cohort, by the end of grade two there were significantly less teacher-rated aggressive behavior for experimental boys and self-destructive behavior for experimental girls than for their control counterparts. However, no program effects were found for African-American children in the study on teacher-rated behaviors in second grade (Hawkins, Von Cleve, and Catalano, 1991). By the beginning of fifth grade, experimental students reported significantly better family management practices in their homes and greater bonding to family and school than control students after controlling for socioeconomic status, race, and mobility. Experimental students also were significantly less likely to have initiated delinquent behavior and alcohol use. There were no significant differences between experimental and control students in their attitudes and beliefs toward problem behaviors (Hawkins, Catalano, Morrison, O’Donnell, Abbott, and Day, 1992). By the end of sixth grade, low-income experimental students reported significantly greater bonding to conventional society and more opportunities and rewards for conventional involvement and interaction than low-income control students. In addition, low-income experimental boys had significantly greater academic achievement and better teacher-rated behavior. Low-income experimental girls reported significantly fewer opportunities for antisocial involvement and interaction and less alcohol, tobacco, and marijuana use than low-income control girls (O’Donnell, Hawkins, Catalano, Abbott, and Day, in press).

There is also some evidence that a combination of proactive classroom management, interactive teaching, and cooperative learning has worked to prevent delinquency.

For the middle school cohort, after 1 year of intervention, experimental students showed significant increases in bonding to school relative to their control counterparts. This effect held for low-achieving students as well. In addition, low-achieving experimental students, relative to low-achieving controls, had significantly smaller increases in school suspensions and expulsions (Hawkins, Doueck, and Lishner, 1988). There were no significant differences between experimental and control students in academic achievement or delinquent and violent behavior following the 1-year middle school intervention. As with most other multicomponent prevention programs, evaluations of the Seattle Social Development Program could not estimate the independent effects of the different program components.

Summary. Evaluations of classroom organization, management, and instructional interventions generally used relatively strong experimental designs. These evaluations constitute a fairly large body of research conducted over decades in which significant knowledge of program effects has accumulated. Many of these programs had reliable, positive effects on school-related risk and protective factors.
Slavin and Madden (1989) concluded that “consistently effective classroom programs accommodate instruction to individual needs while maximizing direct instruction, and they frequently assess student progress through a structured hierarchy of skills” (p. 45). There is also some evidence that a combination of proactive classroom management, interactive teaching, and cooperative learning has worked to prevent delinquency.

**School Behavior Management Strategies**

Beyond programs focused solely on classroom management, behavioral interventions have been used in schools to improve behavior and achievement. Four kinds of school behavior management programs have been evaluated:

- Structured playground activities.
- Behavioral consultation.
- Behavioral monitoring and reinforcement of attendance, academic progress, and school behavior.
- Special educational placements for disruptive, disturbed, and learning-disabled students.

These school-based behavioral interventions beyond the classroom can address the protective factors of bonding to school and recognition of positive behavior, and several risk factors, including poor family management practices, academic failure, alienation and rebelliousness, low commitment to school, and early and persistent aggressive behavior.

**Structured playground activities.** Murphy, Hutchison, and Bailey (1983) evaluated a playground program at an elementary school in Tallahassee, Florida. Children gathered on the school playground beginning an hour before school started. Prior to the program, school staff regarded students’ disruptive and aggressive behavior on the playground as a problem during this morning period. The program consisted of organized games (jump rope and foot races) for kindergarten to second grade children on the playground in the 40 minutes before school started. Three aides supervised these activities and used a timeout procedure for students who committed particularly unruly behaviors. For timeout, the disruptive student was required to sit quietly on a bench for 2 minutes. The researchers used a reversal (ABAB) design to evaluate program effects. Twelve days of baseline observations of student playground behavior (during which teacher aides monitored unorganized activities as usual) were followed by observations during 7 days of the experimental program. The next 4 days were the second baseline observation period, which were followed by 6 more days of the experimental program. Seven observers stationed on the perimeter of the playground observed students’ behavior in different thirds of the play area in the 20 minutes before school started. These observers made reliable behavioral observations of disruptive incidents, including aggression, property abuse such as taking someone else’s books, and violations of school rules.

The children participated vigorously in the organized games, although they were still free to play on their own. The mean number of disruptive incidents per observation period during the experimental periods was 53 percent less than during the baseline periods. This difference was highly statistically significant. Most of the disruptive incidents, especially during baseline periods, involved aggression. This program showed only situation-specific reductions in aggressive behavior on the playground. Program effects on student behavior in other settings were not investigated.

**Behavioral consultation.** Mayer and Butterworth (1979) evaluated a program in which graduate student consultants trained in applied behavioral analysis and behavioral consultation worked with elementary school teams composed of two teachers, the principal, and the school counselor or psychologist to develop classroom and schoolwide antivandalism programs. Teams from all program schools also attended ten 2-hour training workshops. The behavioral interventions and training focused on:
• Matching academic materials to students’ skill levels.
• Increasing positive reinforcement for appropriate classroom behavior and academic progress.
• Reducing the use of punishment.
• Applying various learning and behavioral management principles.
• Educating school counselors or psychologists in behavioral consultation methods.

Four graduate student consultants worked in a school 1 half-day per week for a school year.

The evaluators used a true experimental design to assess program impacts. Nineteen elementary schools in Los Angeles County participated in the study, with 10 randomly assigned to the program and 9 randomly assigned to the control group. In most study schools, students were predominantly from low-income African-American or Latino families. In both experimental and control schools, principals selected two respected and openminded teachers from their schools who taught in grades four to six. In experimental schools, these teachers were part of the anti-vandalism teams. In all schools, observers rated the disruptive and on-task behavior of six randomly chosen students in the two participating teachers’ classes in the fall and again in late spring. Both experimental and control teachers’ use of positive reinforcement in class decreased from fall to spring, but the decrease was significantly less for experimental teachers than control teachers.

In terms of vandalism costs, experimental and control schools were roughly comparable before the program began. Vandalism costs decreased by 57 percent for experimental schools but increased by 320 percent for control schools. However, the statistical significance of these findings was not reported, and vandalism costs are highly sensitive to single, very expensive damages. During the program year, observer-rated disruptive behavior significantly decreased for experimental students relative to control students, and experimental students’ on-task classroom behavior (as rated by observers) increased significantly compared with controls.

Mayer, Butterworth, Nafpaktitis, and Sulzer-Azaroff (1983) evaluated essentially the same program as the one described by Mayer and Butterworth (1979). The only differences between the programs were that the former included junior high schools and continued to offer limited program services (fewer training workshops and lower intensity consultation) for 2 years after the first program year. The evaluators used a delayed intervention control group design. Eighteen elementary and junior high schools from 12 school districts in Los Angeles County participated in the study, with 9 schools randomly assigned to the experimental group (group I) and 9 schools randomly assigned to the control group (group II). Group I schools received the program for 3 continuous years, and group II schools received the program for the second and third years. By the third year, four schools dropped out of the program from group I, and three schools dropped out of the program from group II. In addition to the two teachers in each school who participated in the program teams, two other “barometer” teachers in each study school were selected at random to measure possible “spillover” effects of the program. Project staff made no deliberate attempt to consult with these teachers. Six low-achieving and disruptive students in classrooms of each of the team and barometer teachers were randomly selected to be observed at regular intervals during the project. Each year, behavioral observations were made in late fall, winter, and late spring.

Team and barometer teachers significantly increased their use of positive reinforcement in the classroom after the program was in place and maintained these improvements throughout the project. Significantly more experimental (6/9) than control schools (1/9) reduced their vandalism costs in the first project year. A similar decrease appeared when the program began for group II schools in the second project year. In comparison with baseline levels, vandalism costs,
adjusted for school size, decreased in project schools by 79 percent on average. Relative to controls, experimental students significantly decreased their disruptive and off-task behavior, maintaining these program effects in following years of the project.

**Behavioral monitoring and reinforcement of attendance, academic progress, and school behavior.**

Brooks (1975) evaluated a school behavior management program designed to increase the attendance of truant high school students. Program participants signed contracts pledging not to have unexcused absences and agreeing to have all their teachers sign a daily attendance card, which would be turned in to the school counselor at the end of each school day. Participants earned one ticket for each teacher’s signature and each written positive comment from a teacher. Participants’ accumulated tickets were used in raffles held at the midpoint and end of the intervention period. Prizes included money, movie tickets, record albums, and gift certificates. Students with better attendance (and thus more tickets) had higher probabilities of winning a prize.

Program effects were evaluated using a true experimental design. Persistently truant students in one suburban southern California high school were randomly assigned to the experimental or the control group. Attendance was monitored over an 8-week baseline period and an 8-week intervention period. During the baseline period, regular school attendance procedures were followed, including parent contacts, home calls, suspensions, contacts with probation officers, and truancy petitions filed with the district attorney. Relative to controls’ attendance rates, experimental students’ attendance rates increased significantly and dramatically from the baseline period to the intervention period.

Barber and Kagey (1977) evaluated an attendance program for first through third grade students in a rural Virginia elementary school. Each month during the program, students with no unexcused absences for that month could attend a party with free nonalcoholic drinks and activities. Students who had one to three unexcused absences for the month could attend the party, but for less time and with some restrictions on the activities in which they could participate. Students with more than three unexcused absences were sent to a special workroom to work on academic assignments while other students attended the party. One month prior to the program, teachers carefully explained it to students (in person) and parents (through letters). At the beginning of the program, the school organized a party and allowed all students to attend, regardless of their attendance histories. During the program, each classroom maintained a visible record of each student’s attendance.

Monthly attendance rates were computed by teachers and school administrators for a 3-month baseline period from September through November and for the 4-month intervention period from January through April of the program year. Monthly attendance rates were also calculated for the program school for 4 years prior to the program year. In addition, monthly attendance rates were available for nine comparison elementary schools in the same county for the whole 5-year study period.

These evaluations indicate that monitoring school attendance coupled with contingent reinforcement of attendance can reduce truancy in both elementary and high schools.

Attendance rates at the experimental school during the baseline period of the program year were not significantly different from the school’s attendance rates during the same months over the 4 previous years. However, attendance rates in the experimental school during the intervention period were significantly higher than in the same months during the 4 previous years. During the program year, attendance rates at the comparison schools did not vary significantly from the previous 4 years for either the baseline or intervention periods. For the comparison schools during the whole 5-year study period and for the experimental school during the 4 years before the program, there were substantial and significant declines in attendance from the fall months to the winter and spring months. However, in the experimental school during the program year, there was no significant seasonal decline in attendance rates.
These evaluations indicate that monitoring school attendance coupled with contingent reinforcement of attendance can reduce truancy in both elementary and high schools.

Bry (1982) evaluated a 2-year behavioral intervention focused on low-achieving, disruptive seventh grade students who had low bonding to their families. Program staff interviewed participants’ teachers weekly about participants’ tardiness, class preparedness, class performance, and behavior. Program staff then met with participants in weekly small group sessions to review their school behavior. Participants earned points for positive ratings from the teacher interviews, attendance, and lack of disciplinary referrals, as well as lack of inappropriate behavior during the weekly meetings. Participants could use the points they accumulated during the school year for an extra school trip of their own choosing. Program staff contacted participants’ parents periodically with progress reports. During the year after the 2-year intervention period, program staff conducted teacher interviews biweekly and offered small group “booster” review sessions biweekly. Program staff sent written feedback to those participants who did not attend these booster sessions, since fewer than 50 percent of participants attended each session.

The evaluation used a true experimental design. Pairs of identified at-risk students from the same classrooms were matched on academic achievement and school attendance, and one student in each pair was randomly assigned to the experimental group and the other to the control group. Approximately half of the study youth were from an urban school system, and the other half were from a suburban school system. Forty-two percent of the study youth were African-American, and the rest were white.

At the end of the program, experimental youth had significantly better school grades and attendance than controls (Bry and George, 1979, 1980), and program impacts were uniform across race, sex, socioeconomic, and achievement motivation groups. In the year after the main program intervention, experimental youth displayed significantly fewer problem behaviors at school (e.g., suspensions, academic failure, poor attendance, and tardiness as determined from school records) than controls. In the 1 1/2 years after the main program period, experimental youth self-reported significantly less abuse of some types of illegal drugs and less criminal behavior. These significant program impacts on delinquency were long-term: 5 years after the main program period ended, experimental youth were 66 percent less likely than control youth to have a juvenile record with the county probation office. Although the sample was somewhat small, the study had a very strong design and very little attrition of study participants.

Special educational placements had no, or marginally positive, effects on academic achievement and school behavior during the program and no lasting effects after students leave the program.

Special educational placements for disruptive, disturbed, and learning-disabled students. Safer (1982) reviewed quasi-experimental and true experimental evaluations of special education placements, including self-contained classes and resource rooms, for disruptive, emotionally disturbed, learning-disabled, and/or educable developmentally disabled elementary students. He found that such special education placements had no, or marginally positive, effects on academic achievement and school behavior during the program and no lasting effects after students left the program.

There are two available evaluations of special educational placements for disruptive secondary school students. Safer (1990) evaluated a program in which multisuspended seventh to ninth grade students were placed into a special classroom section for the school day. At each grade level, a regular teacher and an aide led classes of 10 to 15 multisuspended youth in four major academic subjects during consecutive morning periods using small group and individualized instruction. The program used a token economy for reinforcing good classroom behavior. Points could be used to earn early release from school (at approximately 1 p.m.), gain access to play in an afternoon recreation room, study in an academic resource room, or buy
items such as food or dance tickets. Other school reinforcers included daily, weekly, and monthly recognition of good behavior in the form of certificates and cash awards; grades also were partially based on attendance. Program staff had regular meetings with program youth’s parents to develop home-based reinforcement contracts that specified the rewards parents would provide youth contingent on their good school reports. Students who broke more than one class rule during the same period were expelled from the class until they spent a few hours in school detention or renegotiated their home reinforcement contracts. Virtually all program students were returned to regular classes 3 months before the end of ninth grade.

The evaluation used a nonequivalent comparison group design that compared one experimental junior high school with two comparison junior high schools in suburban, working-class areas in Baltimore County, Maryland. In each of the three study schools, study youth were multisuspended students selected by the school’s assistant principal. Prior to entry to the study, experimental and comparison youth were similar in terms of intelligence, socioeconomic status, family structure, academic achievement, and school misconduct. The program operated for 7 years.

More evaluations using rigorous experimental designs are needed to determine the effectiveness of school-based behavioral interventions.

During the program, experimental youth had significantly fewer expulsions from the classroom, fewer school suspensions, and better grades than comparison youth. These findings, however, reflect measures of school reactions to misbehavior that may have themselves been affected by the presence of the program. There were no reliable differences between groups on a standardized academic achievement test and apparently no significant differences in attendance during the program. Following the program, experimental youth were significantly more likely to enter high school and had significantly higher attendance rates and better classroom behavior (as indicated in school records) than comparison youth. Experimental and comparison youth did not differ significantly in the 10th grade in terms of grades, rate of office visits, or suspensions, although this lack of differences could be due to the greater attrition of comparison youth. Comparison youth were significantly more likely to drop out of school than program youth, but there were no significant differences between groups in graduation rates. The evaluation did not measure youth’s behavior outside of school, which might have been especially important given that youth who behaved well in class could be released from school early. A potential disadvantage of this program was that it isolated participants from other students for much of the school day, while increasing association with peers who had behavior problems.

Trice, Parker, and Safer (1982) evaluated school-based behavioral interventions for disruptive 10th grade students. They tested three approaches for responding to disruptive students, each implemented independently for 1 year over 3 successive years in the same high school. In the first year, there was no special program available, and disruptive students were placed in regular classes. The intervention in the second year consisted of a self-contained special class where disruptive students received instruction in four major academic subjects from one teacher and an aide. The program used behavior management techniques in the classroom similar to those used in the junior high program evaluated by Safer (1990). In addition, teachers sent parents daily student behavior reports, and parents engaged their children in contingency contracting with home-based reinforcement for favorable reports. Students also participated in part-time, afternoon vocational training in carpentry and related areas for school credit. Students were paid to participate in the training during the second semester.

In the third year, all 10th grade students were placed in regular classrooms, but teachers could refer disruptive or low-achieving students to a resource room for tutoring, individual instruction, counseling, and/or inschool detention. The resource room was staffed by a teacher or a counselor and two aides, and most of...
staff time was spent on relatively long-term (2- to 3-month) academic instruction. Almost half of the disruptive students participated in vocational training similar to that offered in the second-year intervention. If major academic subject teachers reported favorably on a student’s behavior for the day, that individual could participate in vocational training or leave school early. Students were paid for their participation in vocational training throughout the school year. The evaluators mentioned that during this year the school also implemented several special incentive programs for truancy prevention.

The evaluators used a quasi-experimental design to assess program impacts. In one Baltimore County senior high school, the 10th grade students from each year who were identified as disruptive were compared on outcomes during their 10th grade years and for 2 years following their respective programs.

There were no significant differences among students in the three interventions in terms of age, gender, academic achievement scores, or attendance and suspension rates before the interventions. During the 10th grade, disruptive students in the resource room program implemented in the third year of the study had significantly higher grades, increases in academic achievement scores, and attendance rates and significantly lower suspension rates than students in the other two programs. Disruptive students in the resource room program also were significantly more likely to attend school in the 2 years following the program than disruptive students in the other programs. On virtually every outcome, disruptive students in the self-contained class fared worst in comparison with students in the other programs. It is possible that truancy prevention activities also implemented in the third year of the study contributed to the positive outcomes associated with the resource room intervention. The evaluators provided no information on implementation for any of the programs.

Summary. These school-based behavioral interventions vary in their degree of demonstrated effectiveness. Monitored, structured activities outside of the classroom, such as on the playground, may reduce antisocial behavior, particularly aggression, in these contexts. In addition, behavioral consultation in elementary and secondary schools may improve students’ school behavior and reduce school vandalism. Special educational placements, while ineffective in elementary school for disruptive, disturbed, learning-disabled, and educable developmentally disabled students, might enhance academic achievement, attendance, and school behavior among disruptive secondary school students, but the available evidence is mixed. More evaluations using rigorous experimental designs are needed to determine the effectiveness of these interventions.

The available evaluations indicate that behavioral monitoring and reinforcement of attendance, academic progress, and school behavior are effective in improving these areas for both elementary and secondary school children. In one evaluation (Bry, 1982), regular behavioral monitoring and reinforcement of appropriate school behavior and performance reduced delinquency for adolescents at risk by virtue of academic failure, persistent behavior problems, and low bonding to family.

Numerous conflict resolution and violence prevention curriculums have been developed in recent years, but very few have been evaluated in controlled studies.

Conflict Resolution and Violence Prevention Curriculums

Conflict resolution and violence prevention curriculums are designed to improve students’ social, problem-solving, and anger management skills. Curriculums vary in the incorporation and intensity of these components. Risk factors addressed by these curriculums include early and persistent aggressive behavior and association with delinquent and violent peers. Protective factors addressed include increasing skills to resolve conflict and healthy beliefs and clear standards for behavior. Numerous conflict resolution and violence prevention curriculums have been developed in recent years, but very few have been evaluated in controlled studies. All the evaluations below used nonequivalent comparison group designs.
Brennan (1992) evaluated a version of the Empowering Children to Survive and Succeed (ECSS) curriculum designed for prekindergarten to third grade students. Curriculum content focused on self-control, self-confidence, speaking and listening, responsibility, relaxation, thinking, problem solving, and cooperation. A trained consultant led instruction in the curriculum (with the participation of the classroom teacher) for one 30-minute session a week. In the evaluation, first and second grade experimental students received the curriculum over 10 weeks, while experimental students in all other grades received the curriculum over 6 weeks. The consultant modeled skills in the classroom, and then students practiced the skills in age-appropriate games and success-oriented activities. Lessons ended with a class discussion of the skill examined during that lesson. Over the school year, nine workshops (three for teachers, three for parents, and three for school staff) were presented to introduce ECSS methods and skills. Teachers and parents were encouraged to use program techniques with students, and parents received ECSS handbooks that described program techniques and vocabulary. School administrators monitored teachers’ implementation of program methods as part of their regular observation of classroom teaching. Curriculum instruction and workshops were supplemented by training handbooks, worksheets, charts, and stamps that were distributed to students throughout the school year. In addition, posters highlighting curriculum skills were displayed in the classroom and throughout the school.

The evaluation used a nonequivalent comparison group design, including an experimental and comparison group for each of five grade levels from prekindergarten to third grade. Except for the prekindergarten group, in which experimental and comparison students attended the same school, comparison classes were “. . . drawn from schools with similar demographic patterns and achievement . . .” (p. 7) to experimental schools. No information was provided about the characteristics of the students. For some grade levels, experimental and comparison students numbered as few as nine, suggesting that bias may have been introduced by nonresponse and attrition (Brennan, personal communication, June 16, 1994). No information was reported about workshop implementation and attendance. Immediately before and after the curriculum period, students were orally interviewed with a 45-item inventory of attitudes and behaviors focusing on self-responsibility, self-control, self-esteem, self-concept, attitudes toward diversity, attitudes toward learning, conflict resolution, problem solving, and learning skills.

Outcome data were aggregated across grade levels. Analysis of covariance results showed that the program was significantly associated with improved overall scores on the outcome inventory after controlling for grade level. There was a significant grade by intervention interaction, with greater improvements for experimental students, relative to comparison students, in kindergarten, first, and second grades than in the other grades. However, the results from this evaluation are somewhat difficult to interpret. The global outcome measure included a high proportion of items measuring wide-ranging constructs; thus, it is unclear whether the program actually affected risk and protective factors for delinquency and violence. Also, in four grade levels there appeared to be sizable pretest differences between study groups on the outcome measure favoring experimental students. Additionally, selection bias may have contributed to the observed outcomes.

Relative to comparison students, experimental students improved significantly in their empathy, interpersonal problem solving, anger management, and behavioral social skills as measured by interview responses to hypothetical social conflict situations.

The Committee for Children (1988, 1989, 1990, 1992) developed and tested the Second Step violence prevention curriculum, with versions specifically tailored to students in preschool and kindergarten, grades one to three, four and five, and six to eight. The curriculum teaches skills in empathy, appropriate social behavior, interpersonal problem solving, and anger management through discussion, modeling, and role-playing. Trained teachers implement the curriculum,
which consists of approximately 30 lessons taught one to three times per week over a 3- to 6-month period (the number of lessons and length of instruction periods varied across implementations and grade levels). The version for grades 6 to 8 has 13 to 18 lessons taught over 3 to 6 weeks. Evaluations of each version were conducted with students in western Washington State. For each evaluation, the experimental classes of students were matched with comparison classes of similar grade levels from the same schools on demographic and academic achievement factors. The evaluators administered pretests 1 week before the curriculum began and posttests 1 to 2 weeks after the curriculum ended. Relative to comparison students, experimental students improved significantly in their empathy, interpersonal problem solving, anger management, and behavioral social skills as measured by interview responses to hypothetical social conflict situations. These results were limited by somewhat small samples in each evaluation.

Marvel, Moreda, and Cook (1993) evaluated the Fighting Fair conflict resolution curriculum. The curriculum covers causes and dynamics of conflict, anger, communication, problem solving, anger reduction techniques, mediation, and negotiation. Trained teachers used discussion, brainstorming, role-playing, and storytelling techniques in 30-minute daily lessons over a 7-week period. Teachers infused conflict resolution topics into language arts and social studies lessons and directed students to use their conflict resolution knowledge in their interpersonal disputes. Three classes of fourth, fifth, and sixth grade students were assigned to the experimental group, and three classes of the same grades served as comparisons. All students in both groups attended the same public school with a student population of primarily low-income, ethnic minority children. Pretest and posttest measures consisted of students’ responses to hypothetical social conflict situations.

Experimental students improved significantly more than comparison students in their prosocial responses to the hypothetical social conflict situations. Teacher-reported incidents of problem behaviors (including aggression and violence) also significantly decreased among experimental students relative to comparison students. Unfortunately, this evaluation had several limitations, including poorly constructed, unvalidated measures; unspecified procedures for assignment of classrooms to experimental conditions; and potentially biased teacher reports of student behavior (since teachers also implemented the curriculum).

Gainer, Webster, and Champion (1993) developed and evaluated a violence prevention curriculum for students in grades five to nine. The curriculum reviews risk factors for violence (including drug use and sales, alcohol, weapons, anger and arguments, and poverty) and discusses the relationship between drugs and violence. Half the sessions focus on social problem-solving skills. As part of the program, students also contract with an adult who is not involved with drugs, alcohol, or weapons to help them resolve conflicts nonviolently. Experienced instructors (including an attorney, a trauma nurse, an emergency medical technician, and a former drug dealer who was shot and subsequently became a paraplegic) taught different sessions of the curriculum. The curriculum consists of fifteen 50-minute sessions conducted on consecutive days over 3 weeks for the particular implementation assessed in this evaluation.

The experimental group included all fifth grade students in two elementary schools and students in three seventh grade classes at a junior high school. The comparison group consisted of all fifth and seventh grade students enrolled in the same three schools the year following the intervention. All schools were located in high-crime areas in Washington, D.C., and most students knew someone who had been murdered or assaulted with a gun or knife. For experimental students, pretests were administered 1 to 3 days before the program began and posttests 1 to 2 weeks after the program ended. For both tests, students responded to hypothetical social conflict situations and indicated their beliefs about aggression and
violence. Comparison students’ pre- and posttests were separated by the same amount of time 1 year later.

This study yielded mixed results. Following intervention, experimental students significantly increased their knowledge of risk factors for violence and listed more negative consequences to using violence, compared to control students. Experimental students also were significantly less likely to define social problems in adversarial ways and legitimize violence. However, experimental students were significantly less likely to provide nonviolent solutions in hypothetical conflict situations. There were no differences between groups regarding the desire to have a weapon for protection. Furthermore, following the intervention, experimental students actually perceived significantly less risk of violence associated with drug dealing than did comparison students.

Hammond and Yung (1991) developed and evaluated the PACT (Positive Adolescents Choices Training) violence prevention curriculum, a training program specifically designed for African-American youth. Trained doctoral-level facilitators led group instruction and practice in six social skills (giving positive feedback, giving negative feedback, accepting negative feedback, resisting peer pressure, problem solving, and negotiation). Skills were introduced with videotaped vignettes featuring African-American teen role models in ethnically relevant social contexts. Students’ practice role-playing sessions also were videotaped and reviewed. Active participation and appropriate behavior were rewarded with desirable items such as cassette tapes. Students attended two 50-minute training sessions per week for a semester. The experimental group consisted of 14 African-American middle school students referred for behavior problems, while the comparison group included 13 students who were referred for the same reasons but did not receive intervention. The authors did not explain why these students did not participate. At pretest and posttest, students were videotaped performing role-plays for the six targeted social skills as well as for following instructions and conversation. Trained observers rated these performances. The evaluators also collected pretest and posttest teacher and self-ratings of behavior and checked students’ school records for suspensions and expulsions.

The results suggested improvement in all skill levels for experimental students as judged by observers, teachers, and participants. Overall, comparison students did not improve on teacher ratings. In addition, experimental students’ suspensions and expulsions decreased, while comparison students’ increased. Interpretation of these findings is difficult because it is unclear whether the experimental and comparison groups were comparable initially and because the authors did not report the statistical significance of results. Furthermore, the teachers were not blind to students’ experimental condition.

Hammond and Yung (1992, 1993) reported long-term evaluation results for the first year of the PACT program and for replications of the program in the 3 following years with the same target population in similar settings. Participants in the replications received essentially the same curriculum as in the first year. Examination of school disciplinary records indicated that experimental youth’s physical and verbal aggression tended to decrease in the semester during and semester after the program, while comparison youth’s aggression tended not to decrease in these periods. For each of the four program cohorts, experimental youth also tended to have lower rates of juvenile court-recorded criminal offenses at followup than comparison youth. No inferential data analyses comparing study groups were reported for any of these results. Hammond and Yung (1992) stated that comparison group youth were generally those whose academic schedules did not allow participation. They also noted, however, that program staff made “... efforts to exclude youth who are chronically truant” (p. 9) from the experimental group. Such youth are at risk for violent and delinquent behavior, and their inclusion in the comparison group suggests that the study groups were not comparable. This potentially serious selection bias could account for the observed differences in outcomes between experimental and comparison youth. The PACT evaluation reports also lacked descriptions of other important characteristics of experimental and comparison youth (such as age and socioeconomic status).

Larson (1992) evaluated the Think First anger-control and problem-solving training program with middle school students designated by the school as high risk. Through modeling (from live and videotaped
demonstrations) and role-playing, the program taught students functional analysis of behavior and self-instructional methods of anger-aggression control and problem solving. The program also included an incentive system for attendance and completion of self-monitoring homework assignments. The program consisted of ten 50-minute sessions, with participants meeting twice weekly over 5 weeks. From the author’s report, it is not clear who led the program sessions, although the students’ teachers were not involved. Students in one middle school classroom were assigned to be the experimental group and students in another classroom, closely matched on demographic characteristics, served as the comparison group. Both classes were for students classified by the school as at risk. Most students in both groups were African-Americans from low-income families. While students in the experimental class received the training program, students in the comparison group participated in discussions (not specified by the author) with an incentive system for attendance. The author gathered data on students’ problem behavior referrals from teachers during the intervention and for unspecified baseline and followup periods. Pretest and posttest self-reports of anger and attitudes toward delinquency and aggression and teacher reports of student aggression were collected 1 week before and 1 week after the program.

Results indicated no significant decrease in referrals for experimental students. There was a significant treatment by phase (baseline, intervention, followup) interaction: during the program, referrals were highest for experimental students and lowest for comparison students, but during the followup period, referrals were lowest for experimental students and highest for comparison students. There were apparently no significant main or interaction effects on self-reported anger and aggression, attitudes toward delinquency and violence, or teacher-rated aggression.

Bretherton, Collins, and Ferretti (1993) tested the impact of the Dealing With Conflict curriculum for adolescents. This conflict resolution curriculum consists of activities that build participants’ group cohesion, trust and respect for one another, self-esteem, and self-disclosure. Lessons also review barriers to communication, causes and types of conflict, and ways to resolve conflict, especially by using assertiveness.

Trained teachers held weekly 1-hour sessions in the classroom for 10 weeks. Classes were drawn from three Melbourne, Australia, secondary schools. One 9th grade and one 10th grade class were designated as experimental classes, and one 10th grade class was designated as a comparison class. Students in both classes were approximately 15 years old, and most came from working class, immigrant families. Pretests were conducted 3 weeks before the curriculum began, and posttests were administered 1 week after the curriculum ended. At each test, students responded to hypothetical social conflict situations and provided self-reports of aggressive behavior and attitudes toward aggression and violence. Relative to comparison students, experimental students self-reported significantly decreased violent behavior and were significantly less likely to perceive hypothetical conflict situations in a hostile way. There were no significant differences between groups in their attitudes toward violence and aggression or on other problem-solving and cognitive measures. Slight age differences between the experimental and comparison students might have contributed to the significant findings.

Relative to comparison students, experimental students self-reported significantly decreased violent behavior and were significantly less likely to perceive hypothetical conflict situations in a hostile way.

Spiro et al. (1989) (discussed and cited in Webster, 1993) evaluated Prothrow-Stith’s (1987) Violence Prevention Curriculum for high school students. This curriculum focuses on risk factors for violence, anger management, negative consequences of violence, and alternatives to violence. Experimental teachers from four inner-city high schools across the United States received 1 day of training in the curriculum. These teachers assigned (nonrandomly) 10th grade classes to the experimental or comparison group. These teachers also administered pretests 2 weeks before the curriculum began and posttests 1 month after the curriculum ended. Webster (1993) did not mention whether Spiro et al. (1989) assessed the degree of curriculum implementation.
There were no significant differences between experimental and comparison students in pretest to posttest changes on knowledge about violence, attitudes about how to handle conflicts, acceptance of violence, violence locus of control, self-esteem, self-reported fighting, drug use, or weapon carrying. A decrease in experimental subjects’ self-reported fighting, relative to changes in comparison students’ self-reports, would have been significant if the significance level had not been adjusted for multiple comparisons. This marginal result is further tempered by the greater attrition for high-risk students in the experimental group than in the comparison group, the unknown comparability of the experimental and comparison groups, and the questionable procedure of using program teachers to collect evaluation data.

**Curriculum intervention might be more successful if nonviolent beliefs and attitudes were the primary emphasis.**

**Summary.** Evaluated conflict resolution and violence prevention curriculums generally have been effective in improving students’ social skills as measured by verbal responses to hypothetical social conflict situations. Of the four evaluations that measured students’ attitudes toward violence, only one (Gainer et al., 1993) demonstrated a positive program impact on these attitudes. This program differed from the other curriculums in that instructors had intimate knowledge of the violence problem, and the curriculum included information on the relationship between drugs and violence. The results of all four studies that assessed students’ aggressive or violent behavior suggested some positive program impacts (Bretherton et al., 1993; Hammond and Yung, 1991, 1992, 1993; Marvel et al., 1993; Spiro et al., 1989). These four programs varied significantly in content and instructional method. However, in the two studies with apparent reductions in self-reported violent behavior (Bretherton et al., 1993; Spiro et al., 1989), there were no accompanying changes in attitudes toward violence. In addition, the evaluations by Spiro et al. (1989), Hammond and Yung (1991, 1992, 1993), and Marvel et al. (1993) all suffered from serious methodological flaws that hinder clear interpretations of their results.

In reviewing evaluations of some of these curriculums, Webster (1993) highlighted several methodological and theoretical problems, including (among others) the possibility of social desirability influences in students’ self-reported responses, short-term followups, and lack of measurement of behavior outside of school. Conflict resolution and violence prevention curriculums are also partially predicated on the assumption that aggressive youth are deficient in their social- and self-perceptions. However, there is only slight, if any, evidence of such a relationship (Cairns and Cairns, 1991). Aggressive and non-aggressive youth do differ, however, in their approval of violence; curriculum intervention might be more successful if nonviolent beliefs and attitudes were the primary emphasis. Thus, in addition to the specific methodological problems in each evaluation and the lack of random assignment to study groups, these limitations suggest that the few positive results should be interpreted very carefully. More rigorous evaluations of conflict resolution and violence prevention curriculums are clearly needed.

**Peer Mediation**

Peer mediation programs, which sometimes operate in conjunction with conflict resolution curriculums, may be offered in elementary and secondary schools. In terms of risk factors, peer mediation may address early and persistent antisocial behavior and association with peers who are involved in violence and delinquency. Protective factors addressed include opportunities to contribute, skills to resolve conflict, and healthy beliefs and clear standards for behavior. In peer mediation programs, students involved in a conflict agree to have a trained peer mediator help them resolve their dispute. Peer mediators help the disputants examine the problem at hand, recommend changes and compromises, and help develop a mutually agreed-on solution. The peer mediation process is designed to be democratic and avoid blame. The topics covered in peer mediator training vary across programs but can include instruction in problem solving, active listening, communicating, taking command of adversarial situations, identifying points of agreement, and maintaining confidentiality and a nonjudgmental stance.
Lam (1989) reviewed 14 evaluations of peer mediation programs in North America. None of the evaluations used a randomized experimental design, and only three used quasi-experimental designs (most of these had short baseline/pretest observation periods, poorly conceived measures, short-term followup observations, and lacked objective indicators of impact). Two quasi-experimental evaluations of peer mediation programs that operated in tandem with conflict resolution curriculums suggested that the intervention positively affected students’ attitudes toward conflict and violence and knowledge of conflict resolution techniques (Benenson, 1988; Jenkins and Smith, 1987). Qualitative and anecdotal reports in many of the studies Lam reviewed also suggested that peer mediation had positive effects on students’ knowledge, attitudes, and behavior. However, none of the controlled studies of peer mediation showed significant impacts on students’ observable behavior (e.g., fighting disciplinary referrals).

To illustrate, Araki, Takeshita, and Kadomoto (1989) evaluated a peer mediation program in several ethnically diverse Hawaiian public schools. Their controlled study represents perhaps the largest and best documented evaluation of peer mediation. A peer mediation program was implemented in three schools, including one elementary, one intermediate, and one high school. There were two comparison schools for each elementary and intermediate school and one comparison high school. The program lasted 3 years and was well implemented. The researchers gathered data for the year prior to program implementation and all 3 years of the program. The results indicated no consistent program effects on school climate, rates of student retention, suspension, dismissal, or attendance despite the favorable assessments of the program by student mediators, disputants, school administrators, and project staff.

Since Lam’s (1989) review, the only well-designed evaluation of a peer mediation program was Tolson, McDonald, and Moriarty’s (1992) study of a high school peer mediation program. Students referred to the assistant deans for interpersonal conflicts were randomly assigned to either peer mediation or the control condition of traditional discipline (e.g., warnings, demerits, or suspensions). The program was implemented in a predominantly middle-class, ethnically diverse, suburban high school with a drop-out rate of less than 2 percent. Peer mediation participants were significantly less likely to be referred again in 2 1/2 months to the assistant dean for interpersonal conflicts than students receiving traditional discipline.

**Peer mediation participants were significantly less likely to be referred again in 2 1/2 months to the assistant dean for interpersonal conflicts than students receiving traditional discipline.**

**Summary.** The two evaluations that measured attitudes toward conflict and knowledge of conflict resolution techniques showed positive program impacts on these variables (Benenson, 1988; Jenkins and Smith, 1987). However, only one of four studies with a quasi-experimental or true experimental design associated a decrease in aggressive behavior with peer mediation. This study (Tolson et al., 1992) found that high school students who participated as disputants in peer mediation were less likely to be referred to school officials for interpersonal conflicts during a short followup period than were control students. Other evaluations focused on peer mediation with younger students and did not follow the behavior of individual disputants over time, but measured aggregate changes in school behavior instead. Thus, the available evidence is inconclusive about the impact of peer mediation programs. Existing controlled evaluations of peer mediation presented no evidence of the schools’ having significant problems with conflict among students or a large number of students at high risk for delinquent and violent behavior. It may be that the lack of significant effects reported in some evaluations were due to floor effects, since interpersonal conflict may have been already at fairly low levels. We need further evaluations of programs serving populations at risk of delinquency and violence using rigorous research designs (including random assignment of students or schools to intervention and control groups) to determine whether peer mediation can help prevent delinquency and violence.
Peer Counseling

G. Gottfredson (1987) reviewed evaluations of peer counseling approaches, variously referred to as guided group interaction, positive peer culture, peer culture development, and peer group counseling. Peer counseling typically involves an adult leader guiding group discussions in which participants are encouraged to recognize problems with their behavior, attitudes, and values. The approach tries to shift participants’ attitudes so that they become unfavorable to antisocial behavior, including delinquency and violence, and to provide peer group support for this shift in attitudes. The adult leader asks questions, creates norms of reassurance, repeats ideas expressed in the group, and summarizes important themes. Peer counseling programs may address the risk factors of favorable attitudes toward delinquency, alienation and rebelliousness, and association with delinquent and violent peers. Protective factors addressed may include healthy beliefs and clear standards for behavior and opportunities and skills to communicate and resolve problems. Peer counseling interventions have primarily been implemented in treatment rather than prevention settings. As a preventive intervention, peer counseling is implemented in schools (including elementary and secondary levels) and frequently involves students at high risk for delinquency and violence as well as prosocial student leaders and others at low risk. The available evidence from quasi- and true experimental evaluations indicates that peer counseling in elementary and secondary schools has no or even negative effects on delinquency and associated risk factors, including academic failure, alienation and rebelliousness, lack of commitment to school, and association with delinquent and violent peers (Gottfredson, 1987). This research also demonstrates that peer counseling fails to increase protective factors such as bonding to family and school.

School Organization

School organization approaches can involve a wide variety of interventions, including changes in school ecology; parent involvement; development and communication of school policies; and teams of school administrators, teachers, and parents that plan and implement school policies and programs. These programs may strengthen the protective factors of bonding to school, healthy beliefs and clear standards for behavior, and skills to resist engaging in and becoming a victim of aggression. School organization interventions may address a number of risk factors, including transitions, laws and norms regarding delinquency and violence, academic failure, lack of commitment to school, association with delinquent and violent peers, and alienation and rebelliousness.

Cauce, Comer, and Schwartz (1987) and Comer (1988) evaluated a comprehensive school organization intervention designed for demoralized inner-city elementary schools serving disadvantaged students. There were four primary program components:

- A social calendar that integrated arts and athletic programs into school activities.
- A parent program in support of school academic and extracurricular activities that fostered interaction among parents, teachers, and other school staff.
- A multidisciplinary mental health team that provided consultation, especially for school staff, in managing student behavior problems.
- A representative governance and management team composed of school administrators, teachers, support staff, and parents that oversaw the implementation of the other three program components. This team identified and assessed problems and opportunities in the school, developed and allocated resources, created programs to address problems and opportunities, evaluated these program outcomes, and modified the programs as necessary.

The program was originally implemented in two inner-city public elementary schools in New Haven, Connecticut. Ninety-nine percent of students at these schools were African-American, and the overwhelming majority came from low-income families. Before the program, these schools were characterized by poor attendance, low achievement, discipline problems, and high teacher turnover.

The researchers used a nonequivalent comparison group design in evaluating program impacts. Study youth were seventh grade students in the same division of a middle school. Experimental students had attended the program elementary school, while
comparison students had attended another elementary school. Comparison students were matched with experimental students on age and sex. Although these reports did not describe detailed implementation data, in one of the two program schools 92 percent of the parents had visited the school 10 times or more over the past year (Comer, 1988), indicating a high degree of parent involvement. The outcomes showed that experimental students had significantly higher middle school grades, academic achievement test scores, and self-perceived social competence than comparison students. These results, however, are limited by the small sample size and questions about whether the study groups were comparable in terms of characteristics other than sex and age.

To paraphrase Olweus (1991), bullying may be defined as repeated negative actions by one person to one or more others. Bullying is a prevalent aggressive behavior among children and youth, especially in elementary school. Olweus (1991) evaluated a large-scale antibullying program in Norway. The five program components are listed below:

- School personnel at all Norwegian comprehensive schools (grades one to nine) received a booklet that described bully/victim problems, suggested how teachers and the school could counteract and prevent such problems, and dispelled myths about the nature and causes of bullying.
- All families in Norway with school-age children received an information packet with information and advice about bullying.
- A videocassette depicting episodes from the daily lives of two early adolescent bullying victims was made available for purchase or rental at a highly subsidized price.
- Students in all comprehensive schools completed a brief anonymous questionnaire about bullying problems, and the results were used to inform school and family interventions.
- In the city of Bergen, project staff met with school staff 15 months after the program began to provide feedback on the program and emphasize main program principles and components.

The evaluation used a quasi-experimental design employing time-lagged contrasts between age-equivalent groups. The program was implemented nationwide at the same time, so the design involved comparisons among successive cohorts of children for particular grade levels. Data were collected from approximately 2,500 students originally belonging to grades 4 to 7 in 42 Bergen schools. Time 1 measurements were made 4 months before the program began, and time 2 and 3 measurements were made 1 and 2 years after time 1, respectively. At each time point, students were surveyed about their experiences as perpetrators and victims of bullying, participation in other antisocial and delinquent behavior, enjoyment of recess time (when much bullying occurs), estimates of how many classmates were bullies and victims, and attitudes toward bullying.

Significantly fewer students reported being victims and bullies at 8 and 20 months after the program began. There were corresponding decreases in students’ estimates of the number of classmates who were bullies and victims. Students reported significantly decreased antisocial and delinquent behavior and significantly increased enjoyment of recess time at 8 and 20 months after the program began. There were only weak and inconsistent changes in attitudes about bullying. It is unclear which of the program’s recommended interventions for schools and families (p. 444) were actually implemented, and to what degree. As a result, it is not possible to specify those components that were most effective in reducing bullying. Olweus (in press), though, demonstrated a substantial dosage effect for the program. Classes that implemented more of the three program components (class rules against bullying, class meetings about bullying problems, and class role-plays about bullying) had fewer subsequent bullying problems than other classes ($r = -.51$).
Gottfredson (1986) evaluated Project PATHE (Positive Action Through Holistic Education), a comprehensive school organization intervention for secondary schools. Listed below are PATHE’s six main components:

- Teams of teachers, other school staff, students, parents, and community members that designed, planned, and implemented school improvement programs with help from two full-time project staff persons.

- Curriculum and discipline policy review and revision, including student participation in developing school and classroom rules and ongoing inservice training for teachers in instructional and classroom management practices.

- Schoolwide academic innovations, including study skills programs and cooperative learning techniques.

- Schoolwide climate innovations, including expanded extracurricular activities, peer counseling, and a school pride campaign to improve the overall image of the school.

- Career-oriented innovations, including a job-seeking skills program and a career exploration program.

- Special academic and counseling services for low-achieving and disruptive students.

The evaluation used a nonequivalent comparison group design involving four study middle schools and four study high schools in low-income, predominantly African-American urban and rural areas in Charleston County, South Carolina. One school at each level was designated as a comparison school. In experimental schools, students experiencing academic and behavioral problems were randomly assigned to an experimental group that received special academic and counseling services or a control group that did not. Evaluation results were available for 2 years of the program in the middle schools and for 1 year of the program in the high schools.

The intervention was well implemented, efficiently managed, and regarded positively by teachers. The author reported changes in outcomes for experimental and comparison schools separately but did not directly compare the outcomes for experimental and comparison schools. Over the course of the program, students in experimental schools reported significantly less delinquency and drug involvement and significantly fewer school suspensions and punishments. Students in comparison schools did not tend to show the same pattern of changes in these outcomes. Students in experimental schools significantly improved in grades, attendance, and self-concept, but these changes were matched by similar improvements on these outcomes among students in comparison schools. Teachers’ assessments of school climate generally improved in the experimental schools while worsening in comparison schools.

The students in experimental schools who received special academic and counseling services scored significantly higher on standardized tests of basic academic skills and were significantly less likely to report drug involvement or repeat a grade than control group students in the experimental school. Seniors who received these services were significantly more likely to graduate (76 percent) than seniors in the corresponding control group (42 percent). There were no significant differences between those students who received the special services and their respective controls on self-reported delinquency, court contacts, suspensions, expulsions, other disciplinary problems, dropout rates, grades, attachment to school, attendance, educational expectations, or self-concept. It is difficult to interpret the effectiveness of the whole intervention, however, because the author did not directly compare students in experimental and comparison schools in terms of outcomes.

D. Gottfredson (1987) evaluated Project CARE, a 2-year school organization intervention for secondary schools. Within the context of an organizational development activity (Program Development Evaluation), a team of teachers, administrators, and other school staff planned and implemented school improvement programs. The two major program components were classroom management techniques (Assertive Discipline and Reality Therapy) and cooperative learning. Several other components were partially implemented, including a parent volunteer program, a community support and advocacy program, and other programs used by Project PATHE (Gottfredson,
The evaluation used a nonequivalent comparison group design involving two junior high schools in low-income, predominantly African-American areas in Baltimore, Maryland. One school was designated the experimental school, and the other was designated the comparison school. The program was not successfully implemented at the comparison school, which also experienced considerable turnover in administrative personnel during the program period.

In the experimental school, the program was primarily implemented in only one of three physically separate units of the school. A cohort of students from other units in the school was used for comparison.

The lack of direct comparisons between experimental and comparison schools again hampers the assessment of program effects.

The author did not report direct comparisons between experimental and comparison schools in terms of outcomes. Over the program period, teachers in the experimental school reported significantly better organizational health, but the comparison school tended to experience such improvements as well. Over the course of the program, students’ self-reports of delinquency decreased significantly in the experimental school but increased significantly in the comparison school. Comparison school students reported significantly more rebellious behavior, and experimental school teachers reported significantly more classroom orderliness over the program period. Experimental school students’ reports of social integration at school and academic rewards significantly increased and reports of educational expectations decreased. However, comparison school students also showed the same pattern of changes on these outcomes. There were no significant changes for students in either experimental or comparison schools over the course of the program in terms of attachment to school or positive peer associations.

Within the experimental school, students in the experimental unit reported significantly less delinquent and rebellious behavior and lower educational expectations and significantly higher social integration and academic rewards than comparison group students. Experimental unit students also had significantly more office referrals (perhaps as a result of the classroom management strategies) but significantly fewer suspensions than comparison cohort students. There were no other significant differences in outcomes for students in the experimental unit and corresponding comparison group. The lack of direct comparisons between experimental and comparison schools again hampers the assessment of program effects. Furthermore, the comparison school may not have been adequately comparable to the experimental school given the comparison school staff’s resistance to the program.

Gottfredson, Karweit, and Gottfredson (1989) evaluated another multicomponent school organization intervention for middle schools with four main program components:

- School discipline policy review and revision to develop school rules (including provisions for systematically rewarding positive student behavior) that were clear, specific, administered fairly, and coordinated with individual classroom policies.

- A behavior tracking system for recording individual students’ positive and negative referrals to the office and disciplinary actions, which was used for notifying parents of their child’s school behavior.

- Classroom organization and management that focused on clear and effectively communicated rules, procedures, and instruction; monitoring; activity transitions; fair grading; and frequent and systematic feedback on student academic progress.

- Behavioral modification techniques in which teachers reinforced positive behavior and consistently responded to misbehavior according to the communicated rules and consequences.

These components were implemented in the context of an organizational development activity (Program Development Evaluation) intended to increase school staff commitment to and ownership of the program and equip them with the skills and information needed to manage program implementation effectively.
The evaluators used a nonequivalent comparison group design. Eight study schools in Charleston County, South Carolina, were selected for their high levels of student punishment (implying low levels of bonding to school). Six of these schools were assigned to the program and two were designated as comparison schools. Comparison schools were roughly similar to experimental schools in size and unspecified demographic factors. Teachers and students completed surveys of classroom climate on a quarterly basis in every class except gym. The experimental program ran for 3 years. Only three of the experimental schools successfully implemented all or most of the program components. Over the project period, students in experimental schools perceived significantly less classroom disruption and more classroom organization and rule clarity. Students in comparison schools showed similar, though mostly nonsignificant, changes. The evaluators did not report any direct comparisons between experimental and comparison schools, nor were any details given on how well matched the experimental and comparison schools were.

Felner, Ginter, and Primavera (1982), Felner and Adan (1988), and Felner, Brand, Adan, Mulhall, Flowers, and Sartain (1993) evaluated the School Transitional Environment Project (STEP). This 1-year program, which targeted students entering large secondary schools from multiple feeder schools, was designed to facilitate successful adaptation to large middle and high schools, particularly for low-income, minority, and other disadvantaged students. Incoming students were assigned to units of approximately 65–100 students, or “schools within the school.” Homerooms and classes in primary academic subjects included only students in the same unit, and classrooms for a unit were located near each other (e.g., the same wing and floor of a building). Teachers of primary academic subjects also served as homeroom teachers for students in that unit. Homeroom teachers acted as the main administrative and counseling link between the students, their parents, and the rest of the school. STEP homeroom teachers contacted parents before the school year began to explain the program and encourage them to contact program teachers. The program homeroom teachers also had brief counseling sessions with homeroom students approximately once a month. After a year in STEP, participants returned to the general student population. The researchers used a nonequivalent comparison group design in which a set of ninth grade students entering a large urban high school were randomly selected to be placed in the school’s STEP unit. The comparison group consisted of other entering ninth grade students, matched with experimental students on sex, age, and ethnicity. Most study youth were ethnic minorities.

Experimental students had significantly more positive perceptions of school, teachers, and other school personnel (indicating greater bonding to school) than comparison students at the end of the intervention year. Experimental students showed significantly smaller decreases in academic performance and attendance during the transition between junior and senior high school. Long-term results showed a significantly lower dropout rate for experimental students (24 percent) than for comparison students (43 percent). STEP students also had significantly higher grades and attendance rates in the first 2 years of high school (the difference in grades disappeared in subsequent years as a result of comparison students’ higher dropout rate). No pretest measures were available for most outcomes, which limits a clear interpretation of these results. However, there were no significant preprogram differences between experimental and comparison students in terms of attendance and grades.

Felner and Adan (1988) and Felner et al. (1993) briefly mentioned that replications of STEP in rural and suburban lower-class and lower-middle class junior and senior high schools yielded similar results as well as positive effects on delinquency, substance abuse, and depression outcomes. No details of these evaluations were given in the researchers’ reports.

Reyes and Jason (1991) evaluated a school transition program very similar to STEP. Students in the program unit, however, took only three primary
academic classes with other program students, and program classrooms were not specifically located close to each other. As in the STEP program, homeroom teachers taught one of the program students' primary academic subjects and served as the main administrative and counseling link between program students, their parents, and other school personnel. In addition, this program, in contrast to STEP, included an academic progress feedback component in which parents of participating students were sent progress reports on their children's academic performance. The program was implemented with students entering ninth grade at a large, urban high school attended primarily by low-income, Hispanic youth. The evaluators used a nonequivalent comparison group design to estimate program impacts. Identified regular education students were randomly assigned to experimental and comparison groups the summer before the program began. Sixteen percent of incoming students did not enroll until the beginning of the school year and were assigned to the comparison group, which received regular education in the general school population.

Although school organization interventions are potentially promising, future evaluations of such programs should use more rigorous designs and include thorough data analysis.

At the end of the program year (ninth grade), there were no significant differences between experimental and comparison students in grades, course failure, attendance, class rank, counseling referrals, school dropout, or standardized math and writing scores. Experimental students did, however, obtain significantly higher reading achievement scores than comparison students. The school's considerable gang, drug, and violence problems and a long teacher strike at the beginning of the project year may have contributed to a demoralized educational and institutional climate that could have interfered with successful implementation of the program.

Summary. School organization interventions are noteworthy for their comprehensiveness and system-oriented prevention approach. In several evaluations, various school organization interventions appeared to reduce risk factors and increase protective factors for delinquency and violence. Olweus' (1991) evaluation of a multicomponent antibullying program presented evidence of significant reductions in violent and delinquent behavior. However, none of these evaluations used a true experimental design, and several evaluations did not report complete analyses of the outcome data, which hinders a clear interpretation of evaluation results. Although school organization interventions are potentially promising, future evaluations of such programs should use more rigorous designs and include thorough data analysis.

Parent Training

Parent training approaches involve teaching parents specific child management skills. Typically, such programs instruct parents to define behavior in observable terms, observe and note specific instances of a child's pro- and antisocial behavior, use social learning techniques (including positive reinforcement, ignoring and distraction, punishment, and contingency contracting), and use family problem-solving techniques to help them respond consistently to their children's behavior. Parent training addresses the risk factors of family management problems, family conflict, and early and persistent antisocial behavior. Protective factors addressed include opportunities for active family involvement, skills to meet goals without resorting to aggression, recognition of positive behavior, consequences for negative behavior, bonding to family, and healthy beliefs and clear standards for behavior. Parent training interventions have been conducted with parents of children and adolescents.

Dumas (1989) reviewed experimental and quasi-experimental evaluations of parent training programs conducted by such major contributors as Patterson and his colleagues at the Oregon Social Learning Center, McMahon, Forehand, and other researchers. Dumas (1989) concluded that parent training approaches were clearly effective in reducing children's antisocial behavior (such as aggression and noncompliance) and improving family management practices. However, short-term parent training programs are
unlikely to succeed with families characterized by low stability and high conflict and plagued by unemployment, poverty, illness, and other crises (Fraser, Hawkins, and Howard, 1988; Patterson and Reid, 1973; Wahler, 1980). For instance, Patterson (1974) found that while an average family required 31 hours of training, some low-income, crisis-prone families needed over 100 hours of training to make significant improvements (Patterson and Fleishman, 1979).

Boys in the experimental group were significantly less likely to have been arrested for major offenses (including robbery, burglary, grand theft, automobile theft, and assault) than comparison boys (27 percent versus 43 percent).

Two evaluations of multicomponent programs that include parent training as a major component have demonstrated long-term preventative effects on delinquent behavior. Satterfield, Satterfield, and Schell (1987) evaluated a multicomponent, clinic-based intervention for hyperactive Euro-American schoolboys of normal intelligence ages 6 to 12. The researchers used a nonequivalent control group design to assess program effects. The experimental group included boys referred to the clinic for hyperactivity from 1973 to 1974, and the comparison group included boys referred to the clinic for hyperactivity from 1970 to 1972. The criteria for admission into the study were constant over these 5 years. Boys in both study groups received a stimulant medication (methylphenidate) to counteract their hyperactivity. Parents of boys in the experimental group were provided parent training that focused on behavior management. In addition, a team of therapists provided boys in the experimental group with various combinations of individual and group psychotherapy and educational therapy; experimental boys and their families also received family therapy. Individual therapy focused on building self-esteem, teaching consequences of inappropriate behavior, identifying interpersonal triggers of aggressive behavior, and modeling and role-playing appropriate behavior.

On average, experimental boys were 9 months older and rated by teachers as slightly less hyperactive than comparison boys. Otherwise, there were no significant differences between experimental and comparison boys on numerous preintervention demographic, psychological, and family characteristics. Most boys’ families were middle or upper class, and about half of the boys lived with both biological parents. The use of stimulant medication was carefully monitored for both groups for response and compliance, and boys received monthly checkups by a psychiatrist for their medication use. Most boys in both groups received the stimulant for 2 years. There were no significant differences between groups over time in stimulant dosages or the proportion of boys still receiving medication. Experimental boys and their families were seen for a mean of 3.5 therapy visits per month for an average of 35 months. Followup assessments of boys’ juvenile offense records were made approximately 9 years after boys entered the program.

The rate of attrition was not significantly different between study groups (27 percent and 30 percent for experimental and comparison groups, respectively). Except for a tendency for boys living with their two biological parents to remain in the study, there were no other significant correlates of attrition. At followup, there was no significant difference between study groups in minor delinquency (e.g., status offenses, intoxication, vandalism, petty theft, etc.). However, boys in the experimental group were significantly less likely to have been arrested for major offenses (including robbery, burglary, grand theft, automobile theft, and assault) than comparison boys (27 percent versus 43 percent). Similarly, experimental boys were significantly less likely to be arrested or institutionalized than comparison boys (8 percent versus 22 percent). Analyses of covariance that controlled for boys’ age and hyperactivity at program entry confirmed these results, as did further analyses based only on boys from birth cohorts represented in both study groups.

Tremblay, McCord, Boileau, Charlebois, Gagnon, LeBlanc, and Larivee (1991) and Tremblay, Vitaro, Bertrand, LeBlanc, Beauchesne, Boileau, and David (1992) evaluated a 2-year intervention directed at disruptive kindergarten boys from white, French-speaking families of low socioeconomic background in Montreal. The two primary program components
were home-based parent training and school-based social skills training for the boys. The parent training included a reading program and emphasized monitoring children’s behavior, positive reinforcement for prosocial behavior, effective and nonabusive punishment, family crisis management, and generalization skills. The social skills training was conducted within groups, including both disruptive and prosocial boys. Skills training sessions focused on initiating social interaction, improving interpersonal skills, making verbal requests, following rules, handling anger, and mastering “look and listen” techniques for regaining self-control. The researchers used a true experimental design. Boys were randomly assigned to one of three groups: experimental (received intervention), observational (received attention but no intervention), and control (no attention or intervention). Parents received a mean of 17 parent-training sessions and boys received 19 skills-training sessions during the 2-year intervention.

Experimental boys’ teacher-rated fighting behavior decreased significantly relative to observational and control boys at the 3-year followup when boys were age 12. In comparison to observational and control boys, experimental boys were also significantly less likely at the 3-year followup to be held back a grade or placed in special classes, schools, or institutions.

**The Homebuilders Program, developed by Jill Kinney and David Haapala, was the first such intervention and continues to serve as a model for other IFPS programs.**

By age 12, experimental boys were 50 percent less likely to have serious school adjustment problems and significantly less likely to have initiated delinquent behaviors, including trespassing and theft, than observational and control boys.

Kazdin, Siegel, and Bass (1992) conducted a true experimental evaluation of a similar program. They found that for boys and girls ages 7 to 13 who were exhibiting antisocial behavior, a combination of parent training and problem-solving skills training significantly reduced self-reported and parent-rated aggressive, antisocial, and delinquent behavior at 1-year followup more than parent training or problem-solving skills training alone. In addition, the combined intervention significantly reduced parents’ stress and overall symptoms of dysfunction at 1-year followup in comparison with either type of training alone. This study suggests that parent training interventions are most effective when combined with other promising approaches for preventing delinquent and violent behavior.

**Summary.** Parent training programs effectively reduce children’s antisocial behavior and improve family management practices. Moreover, two multi-component interventions involving parent training have demonstrated significant preventive effects on delinquency and violence. Parent training during pregnancy, infancy, and early childhood also is an effective intervention with long-term preventive impacts. However, parent training alone may not be sufficient to alter family management practices or improve children’s behavior in families experiencing multiple problems. In combination with child training in social skills, however, parent training has demonstrated improvement in child behavior even in multi-problem families.

**Intensive Family Preservation Services—Home Visitation**

Intensive family preservation services (IFPS) programs are short-term crisis interventions for families whose children are at risk for out-of-home placement. IFPS are delivered to families in their homes to stabilize the family by improving family functioning and linking the family to sustaining sources of support. The Homebuilders Program, developed by Jill Kinney and David Haapala, was the first such intervention and continues to serve as a model for other IFPS programs. In this approach, workers respond within 24 hours to a family in crisis and deliver a variety of clinical and material services in the home over a brief period (90 days or less). Workers have small caseloads (two to three families) but provide intensive services (a minimum of 8 to 10 hours of face-to-face client contact per week). IFPS interventions may address the risk factors of poor family management practices, transitions (in the form of out-of-home placements), family conflict, and early and persistent antisocial
behavior. Protective factors addressed may include bonding to family and healthy beliefs and clear standards.

Rossi (1992) reviewed quasi-experimental and experimental evaluations of IFPS programs conducted before 1993. In these evaluations, families with children at risk for out-of-home placement received either IFPS or unspecified ordinary child protective services. Most evaluations focused on out-of-home placement as the primary outcome. Rossi (1992) concluded that there was not consistent evidence across studies about the impact of IFPS on out-of-home placement. In addition, he noted that in two true experimental evaluations, there were no significant differences between experimental and control families in terms of the number of child maltreatment complaints filed against them during followup periods of 8 months and 5 years, respectively.

Bergquist, Szwejda, and Pope (1993) evaluated the State of Michigan’s Families First program, which was based on the Homebuilders model. Families with substantiated incidents of child abuse, neglect, or delinquency and with a child judged to be at imminent risk for out-of-home placement were referred to the program. Cases from three counties were studied in this evaluation. Experimental families were those families referred to the program who were cooperative and willing to participate. Comparison families had a child who was being returned to the home after placement in foster care. Experimental and comparison cases were matched in terms of county of residence, type of referral, previous involvement with child protective services (apparently previous to Families First or foster care), date of termination of services (either Families First or foster care), and child age. From case records, the evaluators calculated the proportion of experimental and comparison children who were placed outside the home at 3, 6, and 12 months after the end of services.

The intervention was well implemented. On average, 28 hours passed between the time of the referral and first caseworker contact. Most caseworkers had caseloads of only two families, and caseworkers were available to clients 24 hours a day, 7 days a week. Experimental families received an average of 30 days of IFPS, and most caseworker time was devoted to providing clinical and material services to families.

Caseworkers reported a high degree of satisfaction with the program. At each followup point, more comparison children were in out-of-home placements than experimental children. At the 12-month followup, significantly more comparison children (35 percent) than experimental children (24 percent) were placed outside the home. However, methodological problems hinder a clear presentation of these results. Experimental and comparison families were substantially different in two ways: experimental families were selected partially on the basis of their cooperation and willingness to participate, and approximately 15 percent of experimental families were judged by staff not to be at imminent risk for out-of-home placement.

Walton, Fraser, Lewis, Pecora, and Walton (1993) conducted a true experimental evaluation of IFPS for families with children already in an out-of-home placement. In this study, experimental children were returned home and their families received IFPS. Control families received routine family reunification services. For a year after the 90-day IFPS period, significantly more children returned to experimental families than control families. It is not clear, however, whether this difference was due to the IFPS or simply returning children to their families without specific intervention.

Some evaluation results suggest that IFPS may reduce risk for delinquency and violence and increase protection. Using a true experimental design, Feldman (1991) evaluated a well-implemented IFPS program for families with children at risk for out-of-home placement in four New Jersey counties. IFPS produced significant, but small and decreasing, reductions in out-of-home placement over a 1-year followup period after the intervention. In addition, families that received IFPS improved significantly more during the program in several aspects of

At each followup point, more comparison children were in out-of-home placements than experimental children.
parent-rated family environment and child well-being than control families. However, experimental families did not decline significantly during the program in parent-rated social support relative to control families.

Summary. IFPS programs may be promising interventions for reducing risk factors and enhancing protective factors for delinquent and violent behavior. The available evaluations do not demonstrate clear or consistent IFPS program effects on out-of-home placement or child maltreatment reports, although one evaluation suggests that IFPS enhanced family environment and child well-being. More evaluation research is needed to assess adequately the effectiveness of IFPS, especially with respect to such outcomes as child maltreatment and family and child functioning.

Two meta-analyses have demonstrated the general effectiveness of marital and family therapy in reducing family conflict, family management problems, and children’s antisocial behavior.

Marital and Family Therapy

While there are several types of marital and family therapy, the diverse approaches share a focus on changing maladaptive patterns of family interaction and communication. Marital and family therapy typically involves a trained therapist working with multiple family members as a group. Family therapy may address several risk factors, including poor family management practices, family conflict, and early antisocial behavior. Protective factors addressed include skills for effective family interaction, bonding to family, and healthy beliefs and clear standards for behavior.

Two meta-analyses have demonstrated the general effectiveness of marital and family therapy in reducing family conflict, family management problems, and children’s antisocial behavior. Shadish (1992) performed a meta-analysis of true experimental evaluations of the effectiveness of marital and family therapies on family behavioral outcomes such as frequency of marital fights. The meta-analysis included only those studies involving clinically distressed clients and focused only on posttest outcomes. The mean effect size, weighted by study sample size, for the 58 studies included was .70, indicating a moderate degree of improvement in family functioning due to family and marital therapy. Shadish (1992) was not able to determine decisively whether effectiveness varied significantly across different therapy approaches, such as behavioral, systemic, humanistic, psychodynamic, and eclectic orientations, although there were some indications that behavioral approaches may be somewhat more effective.

Hazelrigg, Cooper, and Borduin (1987) conducted a meta-analysis of quasi-experimental and true experimental evaluations of family therapy. For families with children and/or adolescents with behavior problems, family therapy significantly improved posttest outcomes, including family interaction (weighted mean effect size = .45) and child behavior (weighted mean effect size = .50), in comparison to no treatment. For families with children or adolescents with behavior problems or parents with mental health problems, family therapy significantly improved posttest family interaction, child behavior, and parents’ level of functioning in comparison to other therapeutic interventions (e.g., group therapy). These improvements were not maintained over followup periods ranging from 6 weeks to 3 1/2 years (weighted mean effect size = .06), although clients receiving family therapy were significantly less likely to return to the referring agency with continuing problems (weighted mean effect size = .47).

More recent experimental evaluations have documented positive effects of family therapy with low-income and ethnic minority families with children exhibiting behavioral problems. For instance, Szapocznik, Rio, Murray, Cohen, Scopetta, Rivaz-Vazquez, Hervis, Posada, and Kurtines (1989) showed that for Hispanic families with boys with behavioral and emotional problems, structural family therapy conducted with family members conjointly significantly improved family interaction at 1-year followup in comparison to individual psychodynamic child therapy and a child recreation control condition.
Garrigan and Bambrick (1977, 1979) also assessed the preventive impact of family therapy on delinquency. Using a true experimental design, they evaluated the effects of Zuk’s go-between method of systemic family therapy with the families of white, middle-class, preadolescent, and adolescent children who attended a school for emotionally disturbed students. Over a 20-week period, graduate students trained in counseling provided 10 to 15 family therapy sessions to experimental families. Control families were offered the chance after the intervention to participate in parent group discussions and seminars. After the intervention, children and their parents rated family interaction, and parents rated the behavior of their children at home. Before and after the intervention, independent observers rated child school behavior. Parents were interviewed 1 to 2 years after the intervention period about the behavior of their children. Also at followup, school personnel (typically counselors or principals) rated those study children who were attending public schools on various aspects of their academic performance and school behavior.

Two studies have specifically examined the preventive effects of family therapy on delinquency. In the first, Klein, Alexander, and Parsons (1977) evaluated the impact of 8 hours of behavioral systems family therapy delivered over a 4-week period. The therapy focused on differentiating rules from requests, establishing a token economy system for each family member to reinforce desired behaviors, training in communication skills, and presenting a modified therapy guide to families for study (Parsons and Alexander, 1973). Families were referred to family therapy by the Salt Lake County (Utah) juvenile court for an adolescent’s delinquent behavior. The Klein et al. (1977) evaluation focused on the preventive effects of the intervention on the delinquent behavior of the identified adolescents’ siblings.

Experimental children showed significantly better behavior at home after the intervention and significantly improved school behavior over the course of the program in comparison to control children. Experimental parents’ ratings of some facets of family interaction also were significantly more favorable than control parents’ ratings at the end of the program. At followup, experimental children overall were significantly more likely to be in regular school classes or employed than control children. In addition, according to parent reports, experimental children were significantly less likely to have been involved with the courts with respect to arrest, conviction, or probation than control children. Experimental children also received better ratings on all nine aspects of academic performance and school behavior than control children. It is not clear whether there was

While most marital and family therapies are designed for families already experiencing conflict, one intervention related to marital therapy aims to help families avoid developing problems in the first place. Markman, Renick, Floyd, Stanley, and Clements (1993) evaluated a communication skills training program to prevent distress and divorce in couples who were planning marriage and in couples who were already married. Their experimental evaluation showed that the experimental couples had significantly less family conflict than control couples throughout a 5-year followup period.

The evaluators used a true experimental design in which families were randomly assigned to behavioral systems family therapy, client-centered family group discussion, church-based “eclectic-dynamic” family counseling, or no treatment. Families that received behavioral family therapy had significantly better family interaction at posttest than families receiving the other treatments or no treatment at all. From 2 1/2 to 3 1/2 years after the intervention, significantly fewer siblings of identified delinquents whose families received behavioral systems family therapy had juvenile court records (20 percent) than siblings of identified adolescents whose families received no or other interventions (40–63 percent), indicating a substantial preventive impact. In addition, for the identified delinquents, recidivism 6 to 18 months following the intervention period was significantly lower for those whose families received behavioral family therapy (26 percent) than for those whose families received no or other interventions (47–73 percent).

At followup, experimental children overall were significantly more likely to be in regular school classes or employed than control children.
a selection bias in the families interviewed at followup, because study families who requested (and then received) therapy after the intervention period were not interviewed at followup.

Summary. A relatively large body of research indicates that marital or family therapy is an effective intervention for reducing family conflict and children’s antisocial behavior and improving family management practices. In addition, two different family therapy programs demonstrated long-term preventive effects on delinquency. More research is required to determine whether effects vary by the type of marital and family therapy applied and whether different approaches are more appropriate for different levels of family functioning and child behavior problems.

Mentoring

Mentoring programs typically involve nonprofessional volunteers spending time with individual youth in a supportive, nonjudgmental manner while acting as role models. Mentoring interventions may address several risk factors, including alienation, academic failure, low commitment to school, and association with delinquent and violent peers, as well as the protective factors of opportunities for prosocial involvement, skills for and recognition of prosocial involvement, bonding to prosocial adults, and healthy beliefs and clear standards for behavior.

Goodman (1972) evaluated a form of mentoring called “companionship therapy” in which college students served as mentors to fifth and sixth grade boys with emotional and behavioral problems in Berkeley, California. Mentors were to be empathetic and open with their mentees and participate in conversation and recreational activities together. Each mentor was given a small monthly expense allowance to spend on the boy. The paid male mentors met with their mentees two or three times weekly for a total of 4 to 8 hours a week over an 8-month period. Mentors were selected on the basis of the understanding, openness, warmth, and “therapeutic talent” they displayed in small-group discussions. Half of the mentors received approximately 8 hours of training and orientation, while the other half of mentors received the 8-hour orientation and also attended weekly interpersonal discussion/training groups.

The evaluators used a true experimental design to assess program effectiveness. Pairs of students were closely matched on severity and type of behavior problem, race, socioeconomic status, and family structure. One student in each pair was randomly assigned to the experimental group, and the other student was assigned to the control group. Each mentor was nonrandomly assigned to a different boy. Outcome assessments of study boys were made before the program, at the end of the program, and 1 year after the program ended. The program operated for 2 years.

Scores for boys in the experimental group on numerous aspects of parent-, classmate-, and teacher-rated behavior tended to move in a less favorable direction over time in comparison with control boys’ scores.

Most mentors met with their mentees twice a week for an average of 3 hours per visit. Scores for boys in the experimental group on numerous aspects of parent-, classmate-, and teacher-rated behavior tended to move in a less favorable direction over time in comparison with control boys’ scores. This study, though, was limited by substantial attrition in the control group.

Dicken, Bryson, and Kass (1977) evaluated a program similar to Goodman’s (1972) intervention. In the program, unpaid college student volunteers met children from low-income families twice weekly for a total of 6 hours per week over a one-semester period. Mentors participated in various social and recreational activities with their mentees. The San Diego County Welfare department referred children ages 6 to 13 whose families received public assistance to the program. The researchers used a nonequivalent comparison group design in which some children were nonrandomly assigned to the program and others to a wait-list comparison group. The welfare department nonrandomly paired each volunteer mentor with a different child. At the end of the program, parent-rated behavior improved significantly and substan-
tially more for experimental children than for comparison children. However, changes in teacher-rated behavior were virtually the same for both experimental and control children, indicating no program effect from teacher reports. As the researchers noted, the teacher ratings were more objective measures of behavior than the potentially highly reactive parent ratings. The researchers did not report any information on the preintervention comparability of study groups.

Poorkaj and Bockelman (1973) evaluated a 1-school-year mentoring program in which community volunteers acted as supportive persons to children ages 9 to 12 at risk for delinquent behavior. Mentors were to involve mentees in meaningful community activities. The county probation department recruited mentors and, after screening and interview procedures, selected those individuals with positive, healthy attitudes and strong interpersonal skills. Mentors received several training sessions to learn general techniques for dealing with problem children.

At each of six schools in one southern California school district, a school staffperson identified for the study students considered to be “delinquency-prone.” The evaluation compared those students who received mentoring with those who did not. It is unclear how students were assigned to study groups, but from the evaluators’ report, experimental and comparison groups had roughly similar levels of misconduct at school and elsewhere prior to the program. The probation department assigned a different mentor to each of the experimental students. There was no significant difference between groups on self-reported misconduct, although the evaluators did not specify whether this result was based on pretest-posttest change scores or posttest scores only. Furthermore, the evaluation was based on a fairly small sample, and the report lacked information on program implementation. Fo and O’Donnell (1974) evaluated the Buddy System mentoring program designed for multi-ethnic youth ages 11 to 17 with behavior management problems. Mentors included men and women ranging in age from 17 to 65 who were diverse in terms of ethnicity and socioeconomic status. Each mentor was matched with three youth. Mentors met with the youth individually and as a group and participated in social and recreational activities together. Mentors were to develop respectful, trusting, and affective relationships with the youth. The program paid mentors up to $144 per month for contacting their mentees weekly, submitting weekly behavioral data on and completing weekly assignments with each of their mentees, submitting weekly log sheets, and attending biweekly training sessions. Mentors received 18 hours of training before the program began and biweekly training sessions on behavior management throughout the program.

In two Hawaiian cities, youth exhibiting behavior problems were referred to the program from the schools, police, courts, social welfare agencies, community residents, and parents for behavior problems such as truancy. The researchers used a true experimental design in which youth were randomly assigned to one of three experimental groups or a no-treatment control group. In the three experimental groups, mentors received $10 to spend on each mentee each month. The three experimental groups were as follows:

- Relationship only, where mentors established warm and positive relationships and spent the $10 per month on the mentee in a way not contingent on the mentee’s behavior.
- Social approval, where mentors responded to mentees warmly and positively contingent on appropriate and desired behavior, but spent the $10 monthly allotment for the mentee in a noncontingent manner.
- Social and material reinforcement, where mentors provided social approval and the $10 monthly allotment contingent on appropriate and desired behavior.

Study youth’s school attendance rates were monitored for three consecutive 6-week periods: baseline, first intervention period (when experimental youth received one of the three mentor interventions), and second intervention period (when all experimental youth received the social and material reinforcement mentoring intervention).

Truancy decreased significantly from baseline to the first intervention period for the social approval and social and material reinforcement experimental groups, but did not increase significantly for the
relationship-only experimental group and did not decrease significantly for the control group. During the first intervention period, the social approval and social and material reinforcement experimental groups had significantly lower truancy rates than the relationship-only and control groups. Truancy decreased significantly for the relationship-only group from the first intervention period to the second intervention period, when mentors used the social and material reinforcement intervention. There were no significant differences among experimental groups in truancy in the second intervention period, but each experimental group had significantly lower truancy rates than the control group. Thus, truancy was reduced when mentoring relationships included reinforcement contingent on appropriate behavior, but not when mentoring relationships did not include contingent reinforcement. This evaluation was limited by the short intervention periods, a very small sample (26 youth), and no information on implementation.

Truancy was reduced when mentoring relationships included reinforcement contingent on appropriate behavior, but not when mentoring relationships did not include contingent reinforcement.

Fo and O’Donnell (1975) also evaluated the effects of the Buddy System mentoring program on a much larger scale. Participants were multi-ethnic youth in Hawaii ages 10 to 17 who were referred to the program by the schools, police, courts, social welfare agencies, and community residents. This implementation of the program lasted 1 year. The evaluators used a true experimental design in which youth were randomly assigned to the experimental or the no-intervention control group. Youth in the experimental group with no court-recorded major offenses (e.g., auto theft, burglary, assault) in the year prior to the program were significantly more likely than controls to have a recorded major offense during the program year. However, experimental youth with one or more recorded major offenses in the year before the program were significantly less likely than controls to have a recorded major offense during the program year. Thus, the program had no preventive effects and, in fact, contributed to delinquency in those youth with no prior records of major offenses. In their report, the evaluators did not state whether the relationship-only, contingency, or both forms of the Buddy System were used in this implementation. The researchers suggested that the increased delinquency for experimental youth with no prior offense could have resulted from associating with other experimental youth during the program who had previous offenses. The evaluation did not include any information on the degree of implementation.

Green (1980) evaluated a Big Brothers program in Nassau County, New York. The program matched each volunteer mentor with a different boy. Mentors met with mentees once a week for at least half a day and engaged in activities of mutual interest. The program also sponsored social events and outings for groups of mentors and mentees. Mentor-mentee matches were made on the basis of pairs’ similarity on such characteristics as ethnic background, socioeconomic status, religion, and interests.

The researcher used a quasi-experimental design to assess program impacts on predominantly white, working-class boys from single-parent (father-absent) families. Experimental boys and their mothers were interviewed before the intervention and after 6 months of the program. Boys on the program’s waiting list served as comparisons, and they and their mothers were interviewed before the intervention and 6 months later as well. Over the course of the program, there were no significant differences between experimental and comparison boys in terms of changes in parent- and boy-rated number of friends, number of social contexts participated in, relations with family members, school adaptation, arguments with teachers, disruptive classroom behavior, or self-esteem. The researcher’s report did not present information on the comparability of study groups or the degree of program implementation.

Stanwyck and Anson (1989) evaluated a mentoring program for low-achieving high school seniors. Volunteer mentors were adult members of the business community. Mentors met with their mentees regularly and provided social support, encouragement, and career education advice. Mentors and program
students attended six 3-hour workshops on motivation, self-esteem, social and personal grooming skills, career awareness, and job seeking and “survival” skills. Program staff matched mentors and students at the beginning of the school year, and mentors were to continue meeting with their mentees throughout the summer after graduation.

The program was implemented in 20 Atlanta high schools attended by primarily low-income, African-American students. The evaluators used a non-equivalent comparison group design in which school counselors determined which students to invite to participate (the experimental group) or serve as alternates (the comparison group). Followup interviews were conducted approximately 10 months after students’ expected graduation. Most mentors met with mentees one to three times per month, according to mentors.

There were no significant differences between experimental and comparison students in academic achievement or graduation rate. At followup, experimental and control students showed no significant differences in participation in postsecondary education, employment, wages, job satisfaction, type of job, or length of tenure of current job. Comparison students had significantly more jobs following high school than experimental students. This evaluation had several limitations, including substantial attrition at followup, the lack of a clear description of sample characteristics and research design, and the absence of information on the preintervention comparability of study groups.

Rowland (1991) evaluated a mentoring program designed to improve the self-esteem of elementary school students, as well as their school performance and behavior. Each volunteer mentor was assigned to a different mentee. Mentors were business persons, community leaders, retirees, and other citizens, and most were also members of the local chamber of commerce. Mentors met with mentees at least 1 hour a week for a school year. Mentors received training about school rules, appropriate developmental activities for mentees, and confidentiality. Study children were elementary school students in grades one to five in San Antonio, Texas, who were identified by the school district as at risk. School personnel non-randomly matched students in terms of grade and sex and assigned students to experimental and comparison groups. According to mentor, parent, and teacher reports, most mentors listened to them and helped them with schoolwork and decisions about goals for the future. Few mentors helped mentees with problems at home. All mentors reported that they enjoyed the experience, and the large majority of parents and teachers indicated that the mentees also enjoyed having a mentor. No information was reported on the amount of time mentors actually spent with mentees.

The researcher compared changes in the experimental and comparison students’ grades, absences, and discipline referrals from the first to the second semester of the intervention year. There were no significant differences between experimental and comparison students’ changes in grades for six subjects. In three subjects, experimental students did not improve significantly more than comparison students, while comparison students did not improve significantly more than experimental students in the other three subjects. Experimental students’ attendance did not improve significantly more than comparison students from the first to the second semester, but the experimental students as a whole also did not significantly increase in the number of discipline referrals than comparison students as a whole.

Trained volunteer mentors contacted their mentees at least once weekly and met in person at least twice a month.

McPartland and Nettles (1991) evaluated Project RAISE, a program to prevent school dropouts that involved one-on-one mentoring and school-based advocacy. Seven community organizations (churches, businesses, universities, and a fraternity) each sponsored a different middle school program site. At each site, participants included entering middle school students considered to be at risk for dropping out who had attended the same elementary school. The program began working with students in the sixth grade and was designed to continue working with participants through high school. One paid advocate
was based at every middle school site. The advocate monitored participants’ attendance, grades, and behavior; built trusting relationships with participants; helped with troubleshooting for participants; and directed afterschool activities for participants such as tutoring, recreation, and special events like visits to the zoo or going to the movies. Trained volunteer mentors contacted their mentees at least once weekly and met in person at least twice a month. Mentors were expected to develop sustained, caring, trusting, and attentive relationships with their mentees and act as effective role models for positive personal development. The school-based advocates regularly gave mentors information on mentees’ school progress.

Program participants were identified in fifth grade apparently on the basis of below-grade reading level. The researchers used a nonequivalent comparison group design in which comparison students were drawn from the same middle school as experimental students but had not attended the same elementary school as participants. Outcomes were assessed before the beginning of the program at the end of the fifth grade and after 2 years of the program at the end of the seventh grade. Two sites fully implemented both the advocacy and mentoring components; two sites implemented only the advocacy component; and the other three sites fully implemented the advocacy component but only partially implemented the mentoring component.

Controlling for fifth grade academic achievement test scores, sex, race, and age, there were no significant differences at the end of seventh grade between experimental students as a whole and comparison students as a whole in math grades, overall grade point averages, promotion rates, or standardized academic achievement scores. Experimental students had significantly higher seventh grade attendance rates and English grades than comparison students, controlling for fifth grade academic achievement scores, sex, race, and age. The same analyses on attendance and English grades were conducted for each site separately. The direction of effects was inconsistent across sites. The increase in attendance associated with the program was significant at only one site, but mentoring was not implemented at this site. The increase in English grades associated with the program was significant and substantial at only two sites, including a site where mentoring was not implemented at all. The degree of implementation of mentoring at a site was not noticeably related to the direction or size of effects on these outcomes. Furthermore, this evaluation provided no information on the comparability of study groups prior to the program or on the procedure for matching mentors with students.

Slicker and Palmer (1993) evaluated a mentoring program for potential high school dropouts. Mentors in the 6-month program were school personnel, including teachers, principals, counselors, secretaries, and instructional aides. Each mentor worked with only one student. Mentors met with their mentees at least three times weekly, primarily at school during school hours. Mentors were encouraged to share their knowledge about school procedures and resources, recognize and encourage their mentees’ academic achievement, and give their mentees small gifts on birthdays and holidays. Throughout the program, mentors served as role models for their mentees in terms of conflict resolution, dependability, positive attitude, and academic achievement.

Study participants were 10th grade students in two suburban Houston high schools identified as at risk for dropout on the basis of several academic achievement indicators. The evaluators used a nonequivalent comparison group design to assess program impacts. Students determined to be most at risk for dropout were assigned to receive mentoring. Another set of students determined to be somewhat less at risk for dropout were matched as well as possible with the experimental students on sex, race, age in grade, and grade point average, and were designated the comparison group. Each mentor selected one mentee from the pool of experimental students. 

**Experimental students had significantly higher seventh grade attendance rates and English grades than comparison students, controlling for fifth grade academic achievement scores, sex, race, and age.**
Controlling for pretest grade point average and self-concept scores, there was no significant difference between study groups in posttest grade point average. Comparison students had significantly higher self-concept scores at posttest than experimental students, after controlling for pretest grade point average and self-concept scores. In addition, the dropout rates for the two study groups were not significantly different. Thus, there was no evidence of positive program effects. However, the study groups were not comparable in terms of academic achievement before the program, and no clear documentation of program implementation was provided.

**Summary.** The evidence from the 10 available evaluations consistently indicates that noncontingent, supportive mentoring relationships do not have desired effects on outcomes such as academic achievement, school attendance, dropout, various aspects of child behavior including misconduct, or employment. This lack of demonstrated effects has occurred whether mentors were paid or unpaid and whether mentors were college undergraduates, community volunteers, members of the business community, or school personnel. However, when mentors used behavior management techniques in one small, short-term study, students’ school attendance improved. This is consistent with the findings from studies of school behavior management interventions reported earlier. In another larger, longer term experimental evaluation by the same researchers, unspecified mentoring relationships significantly increased delinquency for youth with no prior offenses but significantly decreased recidivism for youth with prior offenses. However, more evaluations with randomized designs are needed to test these preliminary conclusions about mentoring.

**Afterschool Recreation Programs**

Afterschool recreation programs can address the risk factors of alienation and association with delinquent and violent peers. Protective factors may include opportunities for involvement with prosocial youth and adults, skills for leisure activities, and bonding to prosocial others.

Brown and Dodson (1959) evaluated the impact of a neighborhood Boys Club on delinquency in Louisville, Kentucky. The Boys Club provided various recreational activities, including clubs, sports, crafts, scouts, and summer camps. The evaluators tallied the delinquency rates for the program neighborhood and two demographically matched comparison areas for 2 years before the club began and the first 9 years of the club’s operation. The program area had a reduction in delinquency from the baseline period before the intervention to 9 years later, while the comparison areas experienced increases in delinquency over the same period. However, during the first few years of the club, shifts in delinquency rates for the comparison areas generally paralleled those of the program area. Although this pattern of results could have been due to a cumulative effect of the program, the lack of statistical tests performed on the data and the absence of other checks for threats to internal validity hamper the interpretation of these findings. Furthermore, the authors presented no data on program implementation.

The program area had a reduction in delinquency from the baseline period before the intervention to 9 years later, while the comparison areas experienced increases in delinquency over the same period.

Jones and Offord (1989) evaluated the effects of an afterschool recreation program that targeted low-income children ages 5 to 15 residing in a public housing project in Ottawa, Ontario. Program staff actively recruited all children in the housing development to participate in structured afterschool courses for improving skills in sports, music, dance, scouting, and other nonsport areas. After children reached a certain skill level, they were encouraged to participate in ongoing leagues or other competitive activities in the surrounding community. The 32-month program was evaluated with a nonequivalent comparison group design. The experimental housing project was matched with another public housing project with only minimal city-provided recreational services. Approximately halfway through the intervention period, a large Boys and Girls Club was built next to the comparison project, but the club did not aggressively recruit nonparticipating children from the project.
The program was fairly successful in recruiting project youth. During the program’s 3 years, 71 percent, 60 percent, and 49 percent of age-eligible children in the experimental complex participated in at least one program course. Youth in the experimental project advanced more levels in Red Cross swimming than youth in the comparison project, although the statistical significance of this difference was not reported. The number of arrests for juveniles residing in the experimental complex during the program declined significantly from the 2 years before the intervention compared with juvenile arrests for youth in the comparison project over the same time period (a 75-percent decrease in the experimental project but a 67-percent increase in the comparison project). There were no such differences, however, in the number of arrests for adults. In addition, the number of security reports due to juveniles at the experimental complex declined significantly after the intervention began, relative to the comparison complex. Sixteen months after the program had ended, these positive changes had diminished significantly. The reductions in antisocial behavior in the experimental complex did not carry over to home and school. Parent- and teacher-rated social behavior of experimental complex youth did not change significantly over the course of the intervention. The authors also showed that the financial benefits of the program far exceeded the program costs.

**Gang Prevention**

Gang prevention programs vary in content and approach. Three general strategies for preventing gang delinquency and violence have been evaluated: preventing youth from joining gangs, transforming existing gangs into benign neighborhood clubs, and mediating and intervening in crisis conflict situations between existing gangs. Components of gang prevention programs may address such risk factors as association with delinquent and violent peers, alienation and rebelliousness, favorable attitudes toward delinquency, community norms favorable to delinquency, and neighborhood disorganization. Protective factors addressed can include opportunities for prosocial involvement, skills for prosocial involvement, bonding to prosocial youth and adults, and healthy beliefs and clear standards.

Thompson and Jason (1988) evaluated a program designed to prevent high-risk youth from joining gangs. The two components of the program were a gang prevention curriculum and afterschool recreational activities. The curriculum included 12 classroom sessions conducted over 12 weeks that focused on background information on gangs, gang violence, and substance abuse in gangs; gang recruitment and methods of resisting recruitment; consequences of gang membership; and values clarification. Most sessions were led by project staff, but some were led by a prosecuting attorney and by ethnic minority guest speakers who held various occupations. The curriculum was taught to eighth grade students in Chicago middle schools located in lower- and lower-middle class areas with high gang activity. After the curriculum ended, youth considered to be at high risk for joining a gang were invited to participate in afterschool recreational activities, including organized sports clinics, competition with youth both in their own and other neighborhoods, job skills training workshops, educational assistance programs, and social activities. From the researchers’ report, it was not clear when in the school year the curriculum began.

The researchers used a nonequivalent comparison group design in which three pairs of public middle schools were matched on the basis that the same gang
actively recruited members from both schools in a pair. One school in each pair was nonrandomly assigned to be an experimental school, and the other was designated as a no-intervention comparison school. Project staff and teachers identified youth in experimental and comparison schools who were at risk for joining a gang but were not already gang members (as determined from gang rosters compiled by the project’s detached street gang workers from interviews with gang members). The researchers assessed gang membership again at the end of the school year (the intervention presumably was for 1 school year) by the same method. Fifty-one percent of experimental at-risk youth participated in the classroom curriculum and at least one afterschool program activity; the rest of the experimental at-risk youth received only the curriculum. Results showed that experimental youth were less likely to become gang members than comparison youth, but the difference was only marginally statistically significant ($p = .06$). This evaluation was limited by the short-term follow-up period and the relatively small sample size, given the prevalence of gang membership (4 of the 43 comparison youth had joined gangs by the end of the school year, while only 1 of the 74 experimental youth had).

Caseworkers arranged and facilitated job interviews for gang youth, gave them employment advice, encouraged them to stay in school and keep their jobs, and generally acted as law-abiding, productive citizen role models for the youth.

Early gang programs dealt with gang members directly, trying to transform criminal gangs into benign neighborhood clubs. Miller (1962) evaluated this type of program, which arose in response to uncontrolled gang violence in an area of Boston in the mid-1950’s. The 3-year program attempted to reduce delinquency and gang activity by increasing the social, economic, educational, and recreational opportunities of gang youth. Seven college-trained caseworkers each worked with a different gang. The caseworkers developed relationships with gang members and organized and led clubs composed of neighborhood gang members. These clubs adopted constitutions, met regularly, and carried out activities such as athletic contests, dances, and fundraising dinners. Caseworkers arranged and facilitated job interviews for gang youth, gave them employment advice, encouraged them to stay in school and keep their jobs, and generally acted as law-abiding, productive citizen role models for the youth. Caseworkers also served as go-betweens for gang youth and personnel in recreational, social service, juvenile justice, and law enforcement agencies and organizations. Other components of the program included the establishment of a district citizens’ council and a partially implemented psychotherapy intervention for “chronic problem” (i.e., high-risk) families.

The evaluation used a nonequivalent comparison group design. The experimental group included members of five neighborhood gangs in contiguous lower-class neighborhoods. Four gangs consisted of white males; the other gang’s members were African-American males. A total of 205 youth received services. The comparison group included members of 11 neighborhood gangs with similar sociodemographic characteristics who did not receive program services. The primary outcome measure was the number of criminal charges resulting in court appearances between ages 7 and 23 for experimental and comparison group youth. These data were supplemented by streetworkers’ daily records, which included reports of crimes committed by experimental gang youth during the program (and which were more complete than officially recorded offense records).

The author presented little systematic data on implementation, but from his description, the program appeared to be reasonably well implemented. Descriptive outcome data indicated very similar profiles of delinquent behavior (in terms of frequency and proportion of youth involved) for experimental and comparison youth before, during, and after the intervention. Miller did not directly assess program impact in terms of statistical significance, but all indications suggested no significant impact of the program on delinquent behavior. Additionally, according to streetworker records, experimental gang members, especially younger gang members, did not commit
significantly more major offenses in the last third of the project than in the first third.

Klein (1969) evaluated a similar gang intervention in Los Angeles that operated in the mid-1960’s. The 4-year program was designed to “de-isolate” gang members by integrating them more into the community and reducing their alienation. Five detached streetworkers each worked with a different gang in four lower- and lower-middle class African-American neighborhoods in Los Angeles. Streetworkers conducted informal casework with gang youth and, to a lesser degree, their parents, and organized and led weekly club meetings for members of a neighborhood gang. Club meetings focused on teaching democratic values, procedural mechanisms, activity planning, and “useful attitudes and behavior” and involved minimal counseling. Club activities—usually sporting events or recreational outings—involves gang members as a group and were held, on average, once every 2 weeks in a neighborhood. Casework, club meetings, and special activities occupied 20 percent of streetworkers’ time; the rest was spent on office work, transportation, and informal contacts with parents and other adults. Other components of the program included community organizing efforts, sponsorship of a gang club by a community group, an academic tutoring project, and a remedial reading project. Some of these latter components were introduced in only one or two program neighborhoods, and none was implemented to a significant degree.

The author used a reasonable, but complex, modification of a time-series design that controlled for differing age distributions of gang members throughout baseline and intervention periods. The baseline period was the 4 years before the 4-year intervention period. The principal outcome measure was the number of officially recorded offenses in probation records for gang youth in the target neighborhoods over the baseline and intervention periods. Other outcomes measured were the number of gang members in a gang (obtained from streetworker records) and intergang fights (obtained from multiple sources). Results showed that the program actually increased delinquency. Increases in programming were matched by increases in overall offenses, “companion” offenses (those offenses likely to be committed by multiple youth together), gang membership, and intergang fights. Decreases in programming were accompanied by decreases in each of these outcomes. The negative effects of program exposure were most pronounced for younger members (ages 12 to 15), the age group at which the program was most directly targeted. In addition, the program’s effect was equally negative on core and fringe members. Based on several lines of evidence, the increases in gang members’ offenses during the intervention period could not be reasonably explained by intensified police action against the gang members or demographic changes in project neighborhoods between the baseline and intervention periods (which were slight in most areas).

Both of these streetworker interventions with existing gangs failed to reduce the delinquency of gang members. Klein (1969) concluded that the streetworker program activities increased the cohesiveness of gang members and reinforced the identity of the gangs, which resulted in elevated delinquent behavior. These results suggest that interventions that increase gang cohesiveness and solidify gang identity are also counterproductive.

The primary component of the program was crisis intervention and mediation with youth gangs and young adults on the streets.

Spergel (1986) evaluated an intervention that also dealt with existing gang members. This program did not attempt to transform gangs into clubs but sought to intervene in crisis situations that could lead to intergang violence. The program assumptions were that gangs arose from youth’s failed transition from family to school and work, neighborhood disorganization hindered the development of adequate opportunities for youth and appropriate social controls over their behavior, and gang members were isolated from conventional local institutions. The 10-month program in Chicago employed nine part-time field staff, including former gang leaders and graduate students, and five administrative staff. The primary component of the program was crisis intervention and mediation with youth gangs and young adults on the streets. Staff patrolled the streets in a gang area (especially
locations where gang youth “hung out” and violence was likely to occur) every night from 6 p.m. to midnight or later and at other times as well. Staff distributed cards listing their pager numbers to gang members, neighborhood residents, and personnel of community agencies (e.g., police and schools). The pagers allowed quick communication of developing problems and conflicts to program staff. In the course of their interaction with gang youth, staff verified and corrected gang-related rumors on the street, passed on information and rumors that might serve to deter intergang violence, provided informal counseling to gang youth and their families, and dissuaded them from using violence in crisis situations. The dissuasion frequently entailed direct, indirect, or parallel mediation between the parties in conflict. Field staff also communicated with police about relevant gang news and topics.

The secondary components of the program included intensive counseling of a small subset of gang youth and their families referred from juvenile court, mobilizing local neighborhood groups to address the gang problem (e.g., organizing paintouts of gang graffiti), and establishing a community advisory group of key community leaders. The advisory group oversaw the project, facilitated interagency communication, held monthly meetings, and organized a conference on gangs for community leaders and residents.

The experimental area was a predominantly Puerto Rican, 3-square-mile, recently settled neighborhood in northwest Chicago with several opposing street gangs. During the early 1980’s, this lower- and lower-middle class neighborhood of approximately 70,000 people was undergoing substantial sociodemographic changes and significant disorganization, had a very high homicide rate, and had perhaps the highest level of gang violence in the city. The comparison area was a conglomerate of neighborhoods, including neighborhoods of similar sociodemographic composition that were adjacent to the experimental area and another neighborhood in the southwest part of Chicago. Some comparison neighborhoods were more stable residentially and had less crime (including gang crime) than the experimental area but were essentially comparable in economic terms. The evaluators collected outcome data on recorded gang crimes (primarily serious and violent offenses) from the city police Gang Crime Unit for the 10-month intervention period as well as for a baseline period in the year before the program corresponding to the same 10 months.

The crisis intervention and mediation component was well implemented, but the other components were less so. Most gang youth contacted by staff were ages 14 to 29. During the program, staff contacted about 400 gang members, 35 community residents, and 30 community agencies and groups a month; approximately 90 gang youth were contacted two or three times per week. Only 26 youth received intensive counseling. The average attendance at monthly advisory group meetings was 35, and 200 people attended the gang conference. During the intervention, no new community groups were created, nor did membership increase in any of the existing community organizations in the experimental area.

The rate of increase in serious gang crimes (homicide, robbery, aggravated assault, and aggravated battery) was significantly greater for the comparison area than the experimental area.

For both experimental and comparison areas, gang crimes and crimes in general increased from the baseline to the intervention period. However, the rate of increase in serious gang crimes (homicide, robbery, aggravated assault, and aggravated battery) was significantly greater for the comparison area than the experimental area. The rates of increase were not significantly different between experimental and comparison areas for less serious gang crimes (simple assault, simple battery, intimidation, gang recruitment, and unlawful use of a weapon). In the experimental area, more serious gang crimes accounted for a relatively smaller proportion of gang crimes overall during the intervention than either before the intervention or in the 5 months after the program ended. Furthermore, from baseline to intervention periods, more serious gang crimes accounted for proportionally fewer of all gang crimes in the experimental area. In the comparison area, however, more serious gang
crimes accounted for an increased proportion of all gang crimes. The data were too limited, however, to assess the statistical significance of these changes. These differences could reflect regression to the mean, since at baseline, more serious gang crimes accounted for 56 percent of all gang crimes in the experimental area, but only 41 percent in the comparison area. Within the experimental area, more intensively served neighborhoods experienced a significantly lower rate of increase in juvenile gang crimes and a significantly higher rate of increase in adult gang crimes than less intensively served areas. This suggests that more services had a desired effect on juvenile gang members’ violent activity but an undesired effect on adult gang members’ violent activity.

Summary. Irving Spergel and his colleagues recently conducted for OJJDP a national assessment of gang prevention, intervention, and suppression programs (Spergel, Chance, Ehrensaft, Regulus, Kane, Laseter, Alexander, and Oh, 1994). They suggested that the interrelated application of strategies of community mobilization and provision for social opportunities, combined to a lesser degree with suppression, organizational development, and social intervention, should lead to lower crime rates among youth gang members, particularly in rates of violent crime. They also suggested that broad-scale prevention approaches are likely to be less effective than targeting high-risk youth groups and applying appropriate deterrent and rehabilitative procedures. Spergel and his colleagues developed 12 program models that, together, constitute a comprehensive intervention and suppression approach. The gang prevention programs reviewed here were implemented to a fairly high degree, indicating that these programs are feasible. In most of these evaluations, risk factors for delinquency and violence were not assessed directly. Thompson and Jason’s (1988) evaluation of a program consisting of a gang prevention curriculum and afterschool recreational activities offered to eighth grade students suggests that this kind of intervention may hold promise for preventing youth at risk from joining gangs and perhaps associating with delinquent and violent peers more generally. In contrast, programs that attempt to redirect existing gangs and gang members toward more prosocial activities appear to be counterproductive (Miller, 1962; Klein, 1969). Spergel’s (1986) evaluation gave mixed support for the crisis-intervention and mediation approach to decreasing incidents of gang crime and violence. The rate of increase in serious juvenile gang crime in the experimental area was reduced, relative to the comparison area. However, there was no difference in the rate of less serious gang crimes between the study areas, and the rate of adult gang crime increased in intensively served experimental neighborhoods. Further, the somewhat questionable equivalence of experimental and comparison areas in that study and other equivocal findings suggest caution in drawing conclusions regarding the effects of this method of intervention with gangs.

Youth Service Programs

Youth service programs typically involve adolescents in unpaid activities that benefit others in their schools and communities, such as tutoring or providing assistance to senior citizens. Service-learning interventions may address the risk factors of alienation and lack of commitment to school and the protective factors of opportunities to participate in prosocial activities and interaction, skills for prosocial interaction, bonding to school and community, and healthy beliefs and clear standards for behavior.

Allen, Philliber, and Hoggson (1990) evaluated the Teen Outreach Program (TOP), which was directed at secondary school students (grades 7 to 12), many of whom were at risk for school dropout or teenage pregnancy. This 1-year program had two components:

- A classroom-based curriculum, led by trained facilitators, which involved discussion of values,
communication skills, family stress, human development, parenting, and sex education.

- Volunteer activities in a wide range of community and school settings.

TOP was implemented at 35 sites in 30 schools across the United States. The evaluators used a non-equivalent comparison group design to assess program impacts. Comparison students and experimental students were selected from the same schools and were matched on several demographic factors. Experimental students, however, were significantly more likely to live in single-parent households, have fathers with slightly less education, and have failed a course in the year before the program than comparison students. Approximately 70 percent of students in both groups were female, and about half were ethnic minorities. Students in both groups were surveyed at the beginning and end of the program.

**Over the course of the program, experimental students were significantly less likely to fail a course in school, drop out of school, or become pregnant or cause a pregnancy than comparison students.**

Program implementation varied across sites. The average participant received 72 hours of classroom instruction and worked 32 hours in volunteer activities during the program year. Over the course of the program, experimental students were significantly less likely to fail a course in school, drop out of school, or become pregnant or cause a pregnancy than comparison students. Multiple regression analyses suggested that the volunteer service component was more influential in reducing these problem behaviors than the classroom instruction. However, experimental students were volunteers, while comparison students were not, opening the possibility of selection bias.

Switzer, Simmons, Dew, Regalski, and Wang (1994) evaluated one implementation of the National Center for Service Learning’s Early Adolescent Helper Program. The program combined mandatory community-based service and weekly seminars at which participants discussed their service activities. About 25 percent of program participants tutored younger students or students for whom English was not a primary language or acted as companions and assistants to residents of a local senior citizen center in craft and oral history projects. The remaining participants served in other projects in the school or community. The program began in the late fall and lasted throughout the school year. Ten seventh grade classes of students at an ethnically and socioeconomically diverse urban junior high school in New York City were nonrandomly assigned by a school secretary to either the experimental or comparison group, with five classes in each group. Each study group included two classes identified as “intellectually advantaged” (as determined by standardized intelligence measures). Study youth were surveyed 2 weeks before and at the end of the program period. Study groups were comparable on most demographic characteristics, although experimental students came from families of slightly higher socioeconomic status. Experimental students participated in program activities for a mean of 3 hours per week (Switzer, personal communication, June 14, 1994).

There were no significant overall program impacts on any of the measured outcomes, including self-esteem, mastery, depressive affect, involvement in school and community activities (excluding program activities), attitudes toward school, and problem behavior at school. Further analysis showed that experimental boys—in comparison to experimental girls, comparison boys, and comparison girls as a group—improved significantly in their self-esteem, depressive affect, involvement in school and community activities, and problem behavior in school. There were no significant differences between experimental boys and other study youth in changes in mastery, attitudes toward school, and altruistic self-image outcomes. However, experimental boys were not specifically compared with comparison boys, so it is not clear whether the reported program impacts on boys could be due to the addition of experimental and comparison girls in the analysis. The evaluation also had a fairly low response rate (under 60 percent), and most respondents were middle class. Nonrespondents might have included a larger proportion of students at higher risk for delinquency and violence.
Summary. These two evaluations indicate that youth service programs may reduce risks and increase protection. The current evidence on the effectiveness of youth service interventions is mixed and somewhat unclear. The evaluation by Allen et al. (1990) showed significant positive outcomes, but these may have been due in part to selection bias. Switzer et al. (1994) did not observe significant program effects overall, although there may have been benefits for experimental boys. Further research with randomized experimental designs and thorough data analysis will clarify the preventive impacts, if any, of youth service programs.

Depending on their focus, vocational training and employment programs may address several risk factors, including academic failure, alienation and rebelliousness, association with delinquent and violent peers, and low commitment to school.

Vocational Training and Employment

Vocational training and employment programs are primarily intended to increase youth employment and participants’ earnings, although secondary program objectives frequently include improving participants’ social and educational functioning. Depending on their focus, vocational training and employment programs may address several risk factors, including academic failure, alienation and rebelliousness, association with delinquent and violent peers, and low commitment to school. Protective factors enhanced can include opportunities to acquire job experience, job skills, and recognition for work performed.

Hackler (1966) and Hackler and Hagan (1975) evaluated the Opportunities for Youth Project. This 1-year program targeted all 13- to 15-year-old male youth who lived in four public housing projects with high official delinquency rates in Seattle, Washington. Half of the youth in this target population participated in the study, and 57 percent of these youth were African-American. The evaluation used a true experimental design. In each housing project, youth were randomly assigned to one of four experimental groups or a control group. In two housing projects, youth in experimental groups received remedial education for 2 hours one afternoon a week, which involved studying with a teaching machine testing program under the supervision of a professional teacher. As part of the program, youth in experimental groups 1 and 2 worked on Saturdays in the housing project or city parks under either formal or informal adult supervision. Youth in experimental group 3 were provided with occasional jobs in the surrounding community but were not specifically supervised by the program. When summer was over, this component of the program was terminated because of the lack of sustained work for these youth. Youth in experimental group 4 were not provided with jobs but were invited to participate in the remedial education component if it was offered in their housing project. The program placed youth who lived in projects where remedial education was not offered on a waiting list for jobs. Control group youth did not receive jobs or remedial education. Study youth were assessed on outcome measures before and after the program and 3 years after its end.

Experimental youth in each group and as a whole showed no significant improvements over the program year relative to control youth on numerous outcome measures, including officially recorded delinquency, referrals to the school counselor, teacher ratings, self-image, and alienation. Experimental youth in the two housing projects with remedial education experienced slightly more favorable outcomes overall relative to controls, but the statistical significance of this result was not reported.

The evaluators also compared the proportion of youth in experimental and control groups who had an officially recorded delinquent offense before the program and in the 4 years after the program started. The proportion of youth in groups 1 and 2 who had an officially recorded delinquent offense in the 4 years after program entry was 6 percent less than the proportion of experimental youth with an offense in the preprogram period. The proportion of control youth with a recorded offense in the 4 years after program entry was 14 percent less than the proportion of control
youth with a preprogram offense. For experimental youth who received the teaching machine intervention, the prevalence of recorded offenses declined 18 percent from the preprogram period to the followup period. For youth who did not receive the teaching machine intervention, there was a 6 percent decrease. The work component of the program appears to have had small, undesirable long-term effects, while the teaching machine component may have decreased delinquency slightly. However, the statistical significance of the differences between groups in changes of offense prevalence over the study period was not reported.

Longstreth, Shanley, and Rice (1964) evaluated a school-based vocational training and employment program for males thought to be at risk for dropping out of a southern California senior high school. The program lasted 3 years, but students were involved with the program usually for only 1 year. There were three primary program components:

- A practical, vocationally oriented academic curriculum consisting of classes in English, mathematics, and social studies taught by the same teacher for a group of 15 students.
- A counselor available to students in the program.
- Paid afternoon jobs in the community for school credit. The jobs were typical part-time jobs, such as bagging groceries.

Program teachers had experience and good reputations in dealing with problem students. The potential dropouts were identified by their school records of low academic achievement and excessive tardiness and truancy.

Potential dropouts were matched in terms of level of aggressiveness, junior high school attended, age, and intelligence. Study youth were nonrandomly assigned to the experimental and comparison groups. Seventy-seven percent of experimental youth had a job at some point during the program, and these participants worked a median of 326 hours.

Following the interventions, there was no significant difference between experimental and comparison youth’s dropout rates. Relative to comparison students, experimental students increased their enjoyment of and attachment to school during their participation in the program. This improvement was limited to those who were considered to be aggressive as indicated by their pattern of school misconduct prior to the program. However, there was no significant difference between groups in the prevalence of police contacts from the 14 months before to the 14 months after entry into the program.

Potential dropouts were matched in terms of level of aggressiveness, junior high school attended, age, and intelligence.

Ahlstrom and Havighurston (1971) evaluated an employment program for socially and educationally maladjusted eighth grade males (ages 13 to 14) in schools serving students from low-income families in Kansas City, Missouri. Participants spent half of each day in academic instruction in small classes and the other half in a supervised work setting. During the first phase of the program, participants worked in groups on school and community projects and received nominal payment for their work. In the second phase of the program, participants worked at part-time paid jobs with private employers. A full-time project employment coordinator assisted participants with job placement, helped them with their adjustment problems, and observed and recorded their work progress. In the third phase of the program, participants left school altogether for full-time jobs in the community but remained in contact with the employment coordinator. Participants who completed the program did not receive a high school diploma; instead, they received a certificate of successful participation in a supervised youth work program. Eligible youth were randomly assigned to study groups. Twenty percent of the youth initially assigned to the experimental group dropped out because their parents did not consent to their participation. Youth in the comparison group attended regular junior high school programs. Eighty percent of program participants obtained part-time paid jobs with private employers in the second phase of the program, and 60 percent were placed in full-time jobs in the third phase of the program.
In each city, there were two intervention groups and a comparison group. The two intervention groups were “year-round” participants who had worked in the program for an average of 14 months (two summers and a school year) and “summer-only” participants who worked in the program only during a summer for an average of 8 weeks, but whose employment was terminated at the end of the summer due to budgetary reasons. In Cincinnati, the comparison group consisted of youth who had signed up to participate and were found eligible but were placed on a waiting list for participation when the evaluation was completed. Youth in Cincinnati were assigned randomly to the summer-only and comparison groups. In Detroit, comparison youth were those who had applied to the program but had been declared ineligible due to family incomes slightly above the program cutoff. In both cities, youth in the summer-only and comparison groups had applied to the program at essentially the same time (13 months before the measurement of outcomes) that the year-round participants began the program. Seven months after the end of the summer-only program, the author collected data on the youth’s recorded offenses from city police files and noted for each youth whether an offense was recorded before and after participation (for the year-round group) or application (for the summer-only and comparison groups). It was not clear from the evaluator’s report how much participants actually worked or met with their counselors.

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In both cities, for youth who had no offense history before participating in or applying to the program, there were no significant differences across groups in the proportion of youth who had offended after application or participation. Nor were there significant differences across study groups in the rates of delinquency during the intervention period for those youth who had offenses prior to participation or application. In sum, the program had no preventive impact on delinquency.

Betsey, Hollister, and Papageorgiou (1985) provided a detailed and comprehensive review of quasi-experimental and experimental evaluations of youth employment and training programs funded under the U.S. Youth Employment and Demonstration Projects Act (YEDPA). Only those program evaluations that measured program impacts on risk factors for delinquency and violence and for delinquency and violence outcomes are included here.
Mallar, Kerachsky, Thornton, and Long (1982) evaluated the Job Corps program. The Job Corps was a residential program for out-of-school, low-income youth between 14 and 21 years old. Program components included remedial education, vocational skills training, and health care. Participants usually moved from their home community to a program site in another area. The experimental group for the evaluation was a representative sample of Job Corps participants from 61 program sites. The comparison group consisted of youth who were eligible for the Job Corps and lived in geographic areas where Job Corps participation was low. Participants and comparison youth were matched on age, race, poverty status, and educational level. Participants, who were primarily ethnic minorities (75 percent), males (70 percent), and school dropouts (80-90 percent), participated in the program for an average of 30 weeks.

Within the first 6 months after the program, Job Corps participants were five times more likely to have earned a high school diploma or GED than comparison youth.

Within the first 6 months after the program, Job Corps participants were five times more likely to have earned a high school diploma or GED than comparison youth. In contrast to comparison youth, experimental youth experienced improved health, employment, and earnings outcomes over a 4-year period after the program. The program also was associated with reduced criminal behavior. During the program, participants had arrest rates significantly lower than comparison youth, and in the 4 years after the program, participants had significantly fewer arrests for serious crimes than comparison youth. Benefit-cost analyses also showed the Job Corps to be effective from a fiscal perspective. However, the evaluation could not rule out the possibility of a selection bias since experimental youth volunteered for the program, while comparison youth did not.

Maynard (1980) and Maynard, Cavin, and Schore (1982) evaluated the Supported Work program. Supported Work participants were assigned to work crews largely made up of other program participants. Work crews were closely supervised, and participants became accountable to increasingly higher performance standards during the program, with the standards eventually corresponding to those in unsubsidized jobs. High school dropouts between the ages of 17 and 20 could participate in the program for as long as 12 to 18 months. Ninety-two percent of participants were ethnic minorities, 88 percent were males, and many had a history of delinquency. Supported Work was implemented at five sites across the country. Eligible youth were randomly assigned to study groups and were interviewed at 9-month intervals for 3 years after the program (some study youth were interviewed up to 4 1/2 years after leaving the program). Most participants left before the maximum period allowed for participation.

The program significantly improved participants’ employment and earnings in the first year after the program, but these effects disappeared by the second year. Supported Work had no significant long-term impact on education, drug use, or criminal activity, although the program produced slight long-term reductions in participants’ dependence on public assistance. In addition, the costs of the program were larger than the estimated benefits.

A.L. Nellum and Associates (1980) evaluated the Summer Youth Employment Program (SYEP). The program provided low-income 14- to 21-year-old youth a 10-week summer work experience and supplemental services such as job counseling and/or vocational training at some sites. The evaluators studied program impacts on participants at eight urban, suburban, and rural SYEP sites. A random sample of participants at the eight sites constituted the experimental group, while the comparison group consisted of youth who were eligible for the program but were rejected on some unspecified basis. Sixty percent of the participants in the experimental group were ethnic minorities, and 54 percent were males. Participants were significantly older, less likely to be black, and more likely to have previously participated in Comprehensive Employment and Training Act (CETA) programs than comparison youth.

Three months after the program, participants were significantly more likely to be in school than comparison youth, although the difference was small.
Participants were also significantly more likely to be employed in part-time jobs than comparison youth, but there were no significant differences in terms of contact with the criminal justice system or attitudes toward such contact. In addition, program participants and staff reported mutually negative attitudes toward each other. The lack of comparability between experimental and comparison groups on several factors and the attrition (especially for comparison youth) at some sites limit the conclusions that can be made about the program’s effectiveness. Further, it was not clear how much participants actually worked while in the program.  

YIEPP participants were guaranteed full-time summer jobs and part-time jobs during the school year (mainly in the public sector) if they were enrolled in school or an approved alternative educational program.

Farkas, Smith, Stromsdorfer, Trask, and Jerrett (1982) and Farkas, Olsen, Stromsdorfer, Sharpe, Skidmore, Smith, and Merrill (1984) evaluated the Youth Incentive Entitlement Pilot Projects (YIEPP). All low-income youth ages 16 to 19 residing in target areas who had not graduated from high school were eligible to participate in the program. YIEPP participants were guaranteed full-time summer jobs and part-time jobs during the school year (mainly in the public sector) if they were enrolled in school or an approved alternative educational program. Participants earned the minimum wage in their jobs and some participants also received employment counseling. The program operated for 2 1/2 years and continued at reduced levels for another year, during which it provided jobs for only a minority of eligible youth. Three YIEPP experimental sites (including one rural and two urban locations) were matched with three comparison sites that had other large YEDPA programs in operation, but not YIEPP. The evaluators drew stratified random samples of eligible youth from both experimental and comparison sites, but the evaluation was based only on African-American youth ages 15 to 16 at the beginning of the program. These youth constituted 76 percent of participants. In addition, 44 percent of participants were males.

Experimental youth participated in the program for a mean period of 15 months. Approximately two-thirds of eligible youth at program sites participated at some time during the program period. The evaluators conducted followup interviews approximately 1 to 3 months after the program ended. During the program, employment and earnings increased significantly for eligible youth at program sites relative to those at comparison sites. Only the earnings effect remained at followup. No consistent effects on high school enrollment or graduation rates were associated with the program.

The Corporation for Public/Private Ventures (1983) evaluated the 70001 youth employment program, which targeted out-of-school youth ages 16 to 21. The program included job preparation workshops, job search training, and related services. Staff also conducted unspecified followup activities with youth after they found a job. According to Smith, Walker, and Baker (1988), “those without high school diplomas [were] provided with educational services, including GED instruction” (p. 52). Experimental youth were all participants in five program cities over a 15-month period, while comparison youth were “… drawn from Employment Service registers, school dropout lists, and other sources” (Betsey et al., 1985, p. 164). Forty percent of participants were males, and 87 percent were ethnic minorities. Program sites were chosen for the evaluation because of their higher placement rates compared to other sites where the program was implemented.

70001 participants received 32 hours of program services on average, and 50 percent were placed in jobs. Earnings were significantly higher for program youth than comparison youth in the short-term period after the program, but these differences vanished by the 24- to 40-month followup interview. By the time of the followup, significantly more participants had received a high school degree or GED (34 percent) than comparison youth (21 percent), but no effects on criminal behavior were associated with the program. As noted previously, however, the selection of experimental program sites for the evaluation was biased toward more successful sites, and comparison and experimental youth may not have been comparable.
There have been several evaluations of major youth employment and training programs since the comprehensive review by Betsey et al. (1985). Walker and Vilella-Velez (1992) evaluated the Summer Training and Education Program (STEP), which was developed for youth ages 14 and 15 who were behind academically and from low-income urban families. Youth in this program participated for 6- to 8-week periods during two consecutive summers. Participating youth worked half-time summer jobs (90 hours per summer) and received remedial reading and math instruction half-time (90 hours per summer). The educational component involved specially designed curriculums and innovative teaching approaches. Participating youth also attended a life skills class a few hours each week, which focused on decisionmaking and responsible health, sexual, and social behavior. During the school year, participating youth received 5 to 15 hours of support, such as recreational and other noneducational activities. Participants were paid the same wages for attending the remedial education and life skills classes as they were for working.

**Participating youth worked half-time summer jobs (90 hours per summer) and received remedial reading and math instruction half-time (90 hours per summer).**

The program was tested in five initial demonstration cities: Boston, Fresno, Portland, San Diego, and Seattle. The researchers used data from two cohorts of study youth (involving approximately 2,500 youth altogether) to evaluate the program. Youth were randomly assigned to the experimental or control group. Control group youth were offered one summer job through the Summer Youth Employment and Training Program, except at the San Diego and Seattle sites, where controls were offered summer jobs over two consecutive summers. The researchers tested the youth on math and reading skills and contraceptive knowledge before the program and at the end of both summer periods. The researchers also interviewed youth at followup 3 1/2 or 4 1/2 years after entry into the program (when youth were 17 to 19 years old), depending on the cohort. Data also were collected from school records throughout the intervention and followup periods.

STEP was implemented with high fidelity in all sites; however, the program required extensive outreach and recruitment to ensure that adequate numbers of youth participated. Seventy-five percent of experimental youth returned for the second summer of the program. Relative to control youth, experimental youth improved in their reading and math test scores and increased their contraceptive knowledge during the program. Over the long-term, however, there were no significant differences between experimental and control groups in terms of high school dropout, college entrance, teen pregnancy, and employment rates. Replications of the program in over 100 sites in 15 States with more than 20,000 participating youth have produced similar in-program improvements in academic skills.

Shapiro, Gaston, Hebert, and Guillot (1986) evaluated the Louisiana State Youth Opportunities Unlimited Program (LSYOU). For 8 weeks during the summer, economically disadvantaged youth (ages 14 to 16) who were at risk for dropping out of school lived in dormitories on the Louisiana State University campus. For half of each weekday, participants received academic instruction in reading and math and earned high school credit. During the other half of each weekday, participants worked at individually chosen, minimum-wage jobs at various sites throughout the university. In the evening, experimental youth participated in recreational activities and career, academic, and personal counseling. Weekend activities involved field trips, speakers, tutoring, and parent participation events (parents received transportation to and from the university). Other program components included providing health care to participants and requiring them to open savings accounts and deposit a designated amount each pay period.

The evaluators used a true experimental design in which Job Training Partnership Act-eligible program applicants from three parishes in Louisiana were randomly assigned to the experimental program or the control group. Control group youth participated in the Summer Youth Employment Program. Overall, experimental youth, relative to control youth, significantly improved academically and increased their
career maturity from pretest to posttest (as indicated by responses to a survey on career decisionmaking). In addition, experimental youth significantly increased their commitment to stay in school from pretest to posttest, while control youth did not. No long-term followup assessments were made.

Cave and Quint (1990) evaluated the Career Beginnings program. The program targeted high school juniors who displayed average academic achievement, satisfactory school attendance, personal motivation and commitment beyond school activities (such as working part-time or regularly participating in some form of school or community service), and no history of significant disciplinary problems. At each site, the program involved collaboration among a college or university (which served as the program sponsor), public schools, and the business community. Participants were offered jobs during the summer between their junior and senior years of high school. During that summer and the following school year, the program provided workshops, classes, and counseling on educational and career planning and preparation (including such topics as study skills, college entrance exams, and college and career alternatives). Another component of the program included mentors who served as role models and actively helped participants make career plans. The evaluators used a true experimental design to assess program impacts at seven sites across the United States (Santa Ana, California; Jacksonville, Florida; Gary and Indianapolis, Indiana; the Bronx and Rochester, New York; and Youngstown, Ohio). At each site, program applicants who met the eligibility criteria were randomly assigned to the experimental or control group.

The integrity of study groups was generally maintained, as 80 percent of experimental youth and 11 percent of control youth participated in Career Beginnings services. During the program period, a little over a third of both experimental and control youth received educational and job-related services not associated with Career Beginnings. The results indicated that experimental youth did not have a significantly higher graduation rate and were significantly more likely to be enrolled in a 2- or 4-year college at 1-year followup (53 percent) than control youth (48 percent). The target population for this intervention, however, was at fairly low risk for delinquency and violence.

Cave, Bos, Doolittle, and Toussaint (1993) evaluated JOBSTART, an employment program for urban, low-income, school dropouts ages 17 to 21. The program provided self-paced and competency-based instruction in basic academic skills, occupational skills training for specific jobs, training-related support services (some combination of transportation, child care, counseling, mentoring, tutoring, need-based and incentive payments, work readiness, and life skills instruction), and job placement assistance. The emphasis of these different components varied across program sites. At 13 sites across the United States, eligible youth were randomly assigned to experimental and control groups. Ninety-one percent of study youth were ethnic minorities, and 54 percent were females. Eighty-nine percent of experimental youth received at least some JOBSTART services, and the average participant received 400 hours of services. The median and mean lengths of participation in the program were 6 and 7 months, respectively.

At the 48-month followup, significantly more participants (42 percent) than controls (29 percent) had earned a GED or high school diploma.

The evaluators conducted followup surveys with study youth 12, 24, and 48 months after random assignment. Overall, the program did not significantly affect earnings or employment, except during program training. There were, however, significant long-term program impacts on reducing public assistance for women who did not live with their children but not for other study subgroups. At the 48-month followup, significantly more participants (42 percent) than controls (29 percent) had earned a GED or high school diploma. This result was reliable across numerous subgroups of youth defined by various demographic characteristics. Participants also were significantly more likely to have a trade certificate or license.

JOBSTART participants who had not been arrested between age 16 and entry into the program were significantly less likely to be arrested in the first year.
After random assignment (11 percent) than controls (18 percent). This effect, however, disappeared in
subsequent years (at the 4-year followup, 38 percent
of both experimental and control youth with no pre-
program arrests had been arrested at least once), and
there were no other program effects on criminal be-
behavior for study youth. In the fourth year after ran-
don assignment, a marginally significant smaller
percentage of participants (4 percent) than controls
(6 percent) used drugs other than marijuana. A lim-
ited benefit-cost analysis showed no overall economic
benefit from the program. This conclusion was not
based on all program outcomes (such as criminal
behavior and drug use) and may be premature, given
that the net overall benefits were steadily increasing
over the last 2 years of the 4-year followup period.

Bloom, Orr, Cave, Bell, Doolittle, and Lin (1994)
evaluated the impact of programs funded under Title
II–A of the Job Training Partnership Act (JTPA). The
programs included a diverse set of interventions for
out-of-school youth between the ages of 16 and 21,
including classroom training in occupational skills,
on-the-job training, job search assistance, remedial
education, and miscellaneous other services. In 16
urban and rural service areas across the United States,
JTPA applicants were randomly assigned to an experi-
mental or control group. Experimental youth partici-
pated in JTPA programs for an average of 6 months,
and approximately 60 percent of experimental youth
received JTPA services. Experimental youth were
about twice as likely to receive some employment and
training services than control youth.

Thirty months after random assignment, there were
no significant program impacts on earnings or em-
ployment (male youth who had been arrested were
excluded from these analyses). Female experimental
youth without a high school diploma or GED at ran-
don assignment were significantly more likely to
have received a diploma or GED within 30 months
than their control counterparts. There were no such
program effects for male youth, however, nor were
there any significant program impacts on the amount
of public assistance received. Female experimental
youth were no less likely to be arrested than female
control youth. There was a similar lack of program
effect for male youth who had been arrested before
random assignment. At 36 months after random
assignment, however, male experimental youth who
had not been arrested before random assignment were
significantly more likely to be arrested (26 percent)
than their control youth counterparts (19 percent).

A cost-benefit analysis showed that JTPA produced
greater costs than benefits from the perspective of
participants and U.S. society as a whole.

Branch, Leiderman, and Smith (1987) reviewed evalua-
tions of youth conservation and service corps. None of
the evaluations measured program impacts on either
known risk factors for delinquency and violence or
delinquency and violence outcomes. However, partici-
pating low-income youth, relative to nonparticipating
control youth, increased their earnings in the years
following participation.

Summary. Of the program areas reviewed, vocational
training and employment programs tended to be the
largest-scale interventions, and evaluations of these
programs were usually higher quality than other
evaluations. Youth employment and training pro-
grams generally could recruit participants success-
fully from hard-to-reach high-risk populations.
Program impacts on employment and earnings out-
comes were typically positive, although the effects
tended to last only during and immediately after the
program. Substantial improvements on educational
outcomes appeared only when the program included
a significant educational component (Mallar et al.,
1982; Corporation for Public/Private Ventures, 1983;
Shapiro et al., 1986; Cave and Quint, 1990; Walker and
Vilella-Velez, 1992; Cave et al., 1993). However, pro-
grams for secondary school students that replaced
academic instruction with vocational training did not
significantly improve educational outcomes
(Longstreth et al., 1964; Ahlstrom and Havighurst,
1971). Nine evaluations specifically assessed program
impacts on crime and delinquency. Six showed no significant program effects, and one (Bloom et al., 1994) actually indicated an increase in criminal behavior. For the two that reported positive effects, crime and delinquency prevention or reduction was essentially restricted to the period when participants were involved in intensive, largely educationally oriented programs that offered a comprehensive array of services to school dropouts (Mallar et al., 1982; Cave et al., 1993). Although the Mallar et al. (1982) evaluation indicated long-term program impacts on some crime outcomes, the initial crime prevention effect reported in the Cave et al. (1993) evaluation disappeared by the 4-year followup.

**Community Laws and Policies Related to Weapons**

A number of laws, regulations, and policies have been enacted to reduce firearm violence, and they can be categorized as shown below:

- Restrictions on the sale, purchase, and transfer of guns.
- Regulations on the place and manner of carrying firearms.
- Mandatory sentencing laws for felonies involving firearms.
- Firearm training and mandatory firearm ownership.
- Metal detectors in schools.

These interventions address the risk factors of firearm availability and norms tolerant of crime and violence and the protective factor of healthy beliefs and clear standards for behavior. Zimring and Hawkins (1992) discussed laws that restrict gun purchases by “dangerous persons” (e.g., former psychiatric patients or convicted felons) and sales of “dangerous guns” (e.g., semiautomatic weapons or guns without trigger locks). However, there are no available quasi-experimental or experimental evaluations of such laws.

**Restrictions on the sale, purchase, and transfer of guns.** The aim of restricting the sale, purchase, and transfer of guns is to reduce the number of guns available to potential offenders (Pierce and Bowers, 1981). The Federal Gun Control Act of 1968 was enacted to control the sale and purchase of guns by requiring that gun dealers obtain licenses (Cook, 1981; Kleck, 1991). Licensed gun dealers may sell firearms only to persons who can prove that they reside in the State in which the business is located. The law proscribes interstate gun sales (except to gun dealers) and the sale of firearms to classes of peoples defined as high risk due to their age, mental status, or criminal history (Cook, 1981). The Federal Gun Control Act prohibits dealers from knowingly selling a firearm to people under the age of 21 (18 for long guns), convicted felons, fugitives from justice, defendants in criminal cases, adjudicated or former mental hospital patients, drug abusers, persons with dishonorable discharges from the military, or illegal aliens. Buyers must sign statements that they do not fall into any of these categories, yet there is no requirement for the gun dealer to verify this information. Unfortunately, most homicides are committed by persons who probably would not be stopped by these restrictions (Zimring, 1986).

Several cities have enacted more restrictive regulations on the sale, purchase, and transfer of handguns within city limits.

Several cities have enacted more restrictive regulations on the sale, purchase, and transfer of handguns within city limits. In 1977, the District of Columbia implemented the Firearms Control Regulations Act, which prohibited the purchase, sale, transfer, and possession of handguns by civilians, except those who already owned handguns (Loftin, McDowall, Wiersema, and Cottey, 1991). People who owned guns prior to the law were required to reregister them within 60 days after the law went into effect. After this period, handgun registration was terminated, making new handgun purchases illegal except by law enforcement and military personnel. New purchasers of long guns had to register them with the police. Registrants had to be at least 21 years old; pass a written test on firearm laws and safety; have no record of mental illness, alcoholism, or violent/weapons-related criminal offenses; satisfy physical fitness requirements; and provide full-face photographs and fingerprints. The law further required registered gun
owners to have certification of registration whenever in possession of the firearm; report lost, stolen, destroyed, or transferred firearms to the police; keep guns unloaded and disassembled or bound by a trigger-locking device in their homes; and not transfer the gun to anyone other than a licensed firearms dealer. The penalty for violating this ordinance, which was initially a fine up to $300 and/or up to 10 days in jail, was increased in 1981 to a fine of $1,000 and 1 year in jail (Loftin et al., 1991).

In Washington, D.C., firearm homicides decreased significantly (25 percent) immediately following enactment of restrictive legislation and held steady at this lower level through 1987.

In their evaluation of the District of Columbia ordinance, Loftin et al. (1991) used a multiple time-series design to examine monthly frequencies of firearm homicide from 1968 to 1987 in Washington, D.C., and adjacent metropolitan areas in Virginia and Maryland. In Washington, D.C., firearm homicides decreased significantly (25 percent) immediately following enactment of the legislation and held steady at this lower level through 1987. Nonfirearm homicides in the District of Columbia did not decrease significantly by 4 percent after the law went into effect. In adjacent metropolitan areas, firearm homicides did not change significantly (7 percent decrease), but nonfirearm homicides increased significantly by 23 percent. Similar results were obtained when homicide rates, instead of frequencies, were used in the analysis. Furthermore, the decline in firearm homicides associated with the law could not be accounted for by decreasing firearm homicides in the District of Columbia in the years just prior to the law (from 1974 to 1976) (Loftin, McDowall, Wiersema, and Cottey, 1992). Loftin et al. (1991) did not report any data on enforcement of the law.

McDowall, Lizotte, and Wiersema (1991) evaluated the impact of a 1981 Morton Grove, Illinois, law that banned the sale of handguns and their possession by private citizens. The researchers conducted a time-series analysis of monthly burglary data from the small Chicago suburb for the 5 years preceding and following passage of the ordinance. They found that the ordinance received minimal enforcement, with only 8 arrests for violations of the law and 12 confiscated weapons in the 5 years after the law was enacted. Reported burglaries decreased significantly in Morton Grove after the ordinance went into effect. The researchers also mentioned in passing that there were no significant changes in assaults in Morton Grove.

A similar ordinance was adopted in Evanston, Illinois, another Chicago suburb, in 1982 (Jung and Jason, 1988; McDowall et al., 1991). This law banned the possession of all handguns, although residents could continue to own and use handguns if kept in gun clubs outside the city limits. The mandatory sentence for violating the law was a minimum $500 fine and a 6-month jail term. Kleck (1991, p. 410) reported that the law was only lightly enforced, as only 74 charges of violating the ordinance were made from 1983 through 1985. The police announced that they would rely on voluntary compliance and not actively search for violators. Two evaluations assessed the effects of this ordinance.

Jung and Jason (1988) used a multiple time-series design to examine intervention impacts on firearm assaults and firearm robberies in Evanston and Rock Island, a comparison city of approximately 150,000 persons in northwestern Illinois that was similar to Evanston in reported crime rate and ethnic composition. The law went into effect in October 1982, and the analysis was performed on monthly data from July 1981 through December 1983. In Evanston, reported firearm assaults decreased significantly during the preintervention period but showed no significant variation in the postintervention period. Jung and Jason (1988) attributed the preintervention decline to intense media coverage of the law. No intervention impact in Evanston was apparent when the number of firearm assaults was displayed over time. There was no significant variation in reported firearm robberies in Evanston in either the pre- or postintervention periods. The evaluators also mentioned that there were no significant substitution effects (i.e., replacing firearms with other weapons).
for assaults and robberies in Evanston. In Rock Island, the evaluators reported no significant variation in firearm assaults and firearm robberies in either the pre- or postintervention periods. This evaluation, however, did not include direct comparisons between pre- and postintervention periods for either city.

McDowall et al. (1991) conducted a longer-term time-series analysis of the Evanston law. They examined the monthly frequencies of reported burglaries in the 6 years before the law was enacted and the 4 years after it was enacted. Reported burglaries did not vary significantly between pre- and postintervention periods. Further, there were no significant changes associated with the ordinance in reported robberies or assaults.

Reported burglaries decreased significantly in Morton Grove after the ordinance went into effect.

Sloan, Kellerman, Reay, Ferris, Koepsell, Rivara, Rice, Gray, and LoGerfo (1988) compared rates of violent crime from 1980 to 1986 in two cities—Seattle, Washington, and Vancouver, British Columbia—that were similar in climate, geography, history, and demography, yet different in terms of gun control legislation. In Seattle, handguns could be purchased for self-defense purposes; permits for carrying a concealed weapon could be obtained after a 30-day waiting period; and few restrictions existed on the recreational use of handguns. In Vancouver, handguns could be purchased only by police and security personnel, members of legitimate gun clubs, and legitimate gun collectors. Handguns could be discharged only at licensed shooting clubs. In order to transport a handgun, handgun owners needed to obtain an additional permit for carrying a weapon. In addition, concealed weapons were not permitted. However, the two cities were alike in other gun-related legislation. Convictions for gun-related offenses and violent crimes carried similar penalties in both cities. The prevalence of firearms in Seattle was almost four times higher than in Vancouver, corresponding to the differences in legal access to firearms.

The two cities had similar overall rates of reported burglary, but Seattle had slightly higher rates of reported robbery, simple assault, and aggravated assault. The use of firearms in aggravated assaults was almost eight times higher in Seattle than in Vancouver, and this difference explained the overall difference between the two cities in aggravated assaults, as the cities did not differ significantly in the rate of aggravated assault involving other weapons. Similarly, the homicide rate was significantly higher in Seattle than Vancouver (age- and sex-adjusted relative risk = 1.63), and this difference was accounted for by the five times greater rate of firearm homicides in Seattle than in Vancouver. The two cities had similar rates of homicides involving other weapons. As the researchers noted, however, other possible differences between the cities (such as differences in illegal drug-related activity and illegal gun transfers) might confound the apparent relationship between firearm legislation and violent crime for these two cities.

Summary. The Loftin et al. (1991) evaluation of the District of Columbia law suggested that it reduced firearm homicides over an 11-year period. The comparison of Seattle and Vancouver by Sloan et al. also suggested that laws restricting the sale and purchase of handguns prevented violent gun-related crime. However, the evaluations of the handgun bans in Morton Grove and Evanston, Illinois (Jung and Jason, 1988; McDowall et al., 1991) did not show any reliable evidence of significant preventive effects on reported burglaries or gun-related crime. These outcomes may reflect weak enforcement of the ordinances in these cities. More research on well-implemented laws with long time-series and careful documentation of enforcement is needed to ascertain more fully the effects of these restrictions.

Regulations on the place and manner of carrying firearms. State and local governments have enacted regulations on the place and manner of carrying firearms to reduce the number of persons who carry and use firearms in public. O’Carroll, Loftin, Waller, McDowall, Bukoff, Scott, Mercy, and Wiersema (1991) evaluated a 1986 Detroit ordinance implemented at the beginning of 1987 that imposed a mandatory 30- to 90-day jail sentence and $100–$500 fine for anyone convicted of carrying a concealed, loaded pistol or carrying a loaded firearm in a car. The researchers
performed an interrupted time-series analysis of monthly homicide frequencies in Detroit from 1980 through 1987. Two time-series analyses were conducted: one compared inside (private) to outside (public) homicides, while the other compared gun homicides to nongun homicides. When the ordinance went into effect, homicides were increasing in Detroit. While the ordinance did not reverse the increasing trend in homicides, it was related to a lower rate of increase for outdoor homicides (10 percent increase, \( p = .418 \)) than for indoor homicides (22 percent increase, \( p = .006 \)). In addition, nongun homicides increased slightly but not significantly (16 percent) as did gun homicides (13 percent). Although 1,020 persons were charged under the ordinance in 1989, only 22 defendants were sentenced to jail. The researchers attributed the small positive effects to publicity on the ordinance.

In July 1974, Massachusetts enacted the Bartley-Fox Amendment, which prohibited carrying unlicensed and concealed firearms (Beha, 1977a; Deutsch and Alt, 1977). Before the law went into effect in April 1975, there was an intense 2-month publicity campaign to educate the public about the new law, although some publicity materials contained inaccuracies (usually overstating the scope of the law). According to the law, an individual had to obtain a Firearm Owner Identification (FOI) card before purchasing either a firearm or ammunition. To obtain an FOI card, applicants had to prove that they were nonalien and over 18 years of age with no felony convictions or hospitalizations for drug addiction, mental illness, or drunkenness. In addition, potential handgun owners had to prove their need to own a handgun to the police in order to obtain a special license to own and carry a handgun. The law prescribed a mandatory 1-year jail sentence (without the normal discretionary options of parole, suspension, or furlough) for persons convicted of carrying a handgun without a special license or purchasing or carrying a long gun without an FOI card.

Beha (1977a, b) assessed the implementation and enforcement of the Bartley-Fox law. Informal analysis showed that the police and courts enforced the law when appropriate. In addition, there was a dramatic increase in the number of FOI cards issued in the first year the law was in effect. From July 1973 through June 1974 (the year preceding adoption of the law), just over 42,000 FOI cards were issued, compared to over 190,000 cards issued from June 1974 through June 1975. Compliance with the requirement for a special license to carry a handgun increased dramatically, especially during the year following adoption of the law. In 1974, the number of special handgun licenses issued per month ranged between 1,000 and 3,300, but in April 1975 approximately 7,200 licenses were issued.

### Armed robberies and gun assaults decreased significantly after the law was enacted, but the monthly number of homicides did not change significantly in the period of the introduction, enactment, and enforcement of the law.

Several studies have evaluated the effects of the Bartley-Fox law. Deutsch and Alt (1977) evaluated the law’s impact on armed robbery, gun assault, and homicide with a time-series analysis of monthly reported crime data from January 1966 to October 1975 (6 months after the law went into effect). Armed robberies and gun assaults decreased significantly after the law was enacted, but the monthly number of homicides did not change significantly in the period of the introduction, enactment, and enforcement of the law. This analysis did not test for substitution effects (i.e., use of other weapons instead of guns) in armed robberies and homicides.

In a reanalysis of the same data using different time-series models, Hay and McCleary (1979) also found no intervention impact on homicide but, unlike Deutsch and Alt (1977), did not observe a significant reduction in armed robberies associated with the law. In addition, Hay and McCleary’s (1979) analysis showed that the decline in gun assaults associated with the law was only temporary and not constant, as suggested by Deutsch and Alt’s analysis.

Pierce and Bowers (1981) conducted a time-series analysis of monthly frequencies of reported armed
assault (gun and nongun) in Boston. They found that gun assaults decreased significantly the month before the law went into effect, and nongun armed assaults increased significantly the month after the law went into effect, which suggests a substitution effect. The evaluators did not report the specific time period for their analysis.

Jung and Jason (1988) evaluated the impact of an East St. Louis, Illinois, law that required a mandatory $500 fine and possible 6-month jail term for persons found carrying a firearm on the street. The researchers used a time-series design to examine intervention effects on firearm assaults and firearm robberies in East St. Louis and Rock Island, a city with a reported crime level similar to that of East St. Louis. The law went into effect in December 1981, and the analysis was conducted on monthly reported crime data from November 1979 through December 1983. In East St. Louis, firearm assaults declined significantly approximately 1 year before the law went into effect and then increased significantly approximately 5 months after the law went into effect. Changes in East St. Louis firearm robberies over time paralleled those for firearm assaults. The evaluators also mentioned that there were no significant substitution effects for assaults and robberies in East St. Louis. Jung and Jason (1988) suggested that the preintervention decline might be attributable to media coverage of the proposed law, although they did not report how much this coverage coincided with the decrease in gun-related crime. In Rock Island, no significant variation in firearm assaults and firearm robberies occurred in either the pre- or postintervention periods. This evaluation, however, did not include direct comparisons between pre- and postintervention periods for either city. In addition, no data were reported on enforcement of the East St. Louis law.

Summary. Three laws regulating the place and manner of carrying firearms have been evaluated. Overall, the evidence for the effectiveness of these laws is weak and mixed. The Detroit law may have slightly reduced the rate of increase in outside homicides (O’Carroll et al., 1991), and the East St. Louis law may have produced a short-term decrease in assaults and robberies involving guns (Jung and Jason, 1988). However, the Massachusetts Bartley-Fox law appeared to have few preventive effects on gun-related crime. The intervention impact on gun assaults was temporary and may have resulted in a substitution of other weapons in assaults (Hay and McCleary, 1979; Pierce and Bowers, 1981). These evaluations may not reflect the preventive potential of laws regulating the place and manner of carrying firearms, since significant enforcement may have been lacking for the Detroit and St. Louis laws.

The proportion of New Jersey homicides that involved firearms increased insignificantly from 1974 to 1980 but decreased significantly from 1980 to 1986.

Mandatory sentencing laws for felonies involving firearms. At both the Federal and State levels, mandatory sentencing laws have been enacted that impose more stringent sentences for offenders who use or carry a firearm during the commission of a felony. Fife and Abrams (1989) evaluated the effects of New Jersey’s 1981 Graves Amendment, which mandated a minimum prison sentence for any person convicted of one of several serious crimes (including murder, manslaughter, aggravated assault, kidnapping, aggravated criminal assault, aggravated criminal sexual assault, robbery, burglary, and escape) who carried or used a firearm during commission of the crime. The evaluators examined annual percentages of homicides that involved a firearm from 1974 to 1986 for New Jersey and the United States as a whole. The proportion of New Jersey homicides that involved firearms did not increase significantly from 1974 to 1980 but decreased significantly from 1980 to 1986. The difference between these rates of increase and decrease was significant. For the United States as a whole, the proportion of homicides that involved firearms decreased significantly in the preintervention period and decreased at a slightly smaller (but not significant) rate for the postintervention period. The difference between the pre- and postintervention decreases for the entire United States was not significant. However, the evaluators did not examine the patterns of firearm homicide rates over time and compare them with the
corresponding patterns of nonfirearm homicides. Additionally, the time-series included few (13) observations.

Loftin, Heumann, and McDowall (1983) evaluated the 1977 Michigan Felony Firearm Statute, which imposed a 2-year mandatory sentence for persons in possession of a firearm while committing a felony. Mandatory sentences were to be served consecutively to the sentence for the corresponding felony. The statute explicitly prohibited suspended, deferred, and withheld sentences, and parole was not possible until after the firearm sentence was served (McDowall, Loftin, and Wiersema, 1992). The law was publicized by a mass media campaign (McDowall et al., 1992). The researchers used a time-series design to examine the frequency of monthly homicide (gun and nongun) and aggravated assault (gun and nongun) from 1969 to 1979 and monthly reported robbery (armed and unarmed) from 1967 to 1979 in Detroit. Loftin et al. (1983) showed that the law was implemented partially. The prosecutor vigilantly prosecuted all violators of the law. People convicted of four kinds of felonies (not murder and criminal sexual conduct) who carried a gun during the crime received significantly longer prison sentences after the law went into effect (during 1977 and 1978) than in the year before (1976). This increase in sentence length was over and above the simple main effects of gun possession during the crime and the time the crime was committed, that is, before or after the law went into effect. The net effects of the law on sentence length (taking into account significant overall decreases in sentence length for most felonies after the law went into effect), however, amounted to approximately 9 months extra time, less than the 24 additional months expected from the law. Gun homicides decreased significantly and abruptly (almost 11 fewer each month) once the law went into effect. This pattern of change held whether the victim and offender were strangers, acquaintances, or close friends or relatives. The proportion of homicides involving a gun declined significantly by 5 percent after the law went into effect. However, there were no significant changes associated with the intervention for nongun homicides, armed robberies, unarmed robberies, gun assaults, or nongun assaults. The lack of consistent results across firearm-related felony categories thwarts a clear interpretation of the law’s overall impact.

Loftin and McDowall (1984) evaluated the effects of the 1975 Florida Felony Firearm law, which went into effect in October 1975. The law mandated a 3-year sentence for possessing a firearm while committing or attempting to commit any of 11 felonies (murder, sexual battery, robbery, burglary, arson, aggravated assault, aggravated battery, kidnapping, escape, breaking and entering with intent to commit a felony, and aircraft piracy). Suspended, deferred, and withheld sentences were prohibited until the 3-year sentence had been served. Supporters of the law organized a massive public information campaign to educate citizens about the law. Loftin and McDowall (1984) cited a 1977 survey by Burr that reported that 79 percent of convicted felons in five Florida correctional facilities were aware of the law.

Abrupt, permanent decreases in gun homicides associated with the law occurred in all three cities, but only in Tampa was the decline significant.

The evaluators used a time-series design to examine monthly frequencies of reported homicide (gun and nongun) from January 1968 to December 1978 and reported robbery (armed and unarmed) and aggravated assault (gun and knife) from January 1967 to December 1978 in Jacksonville, Miami, and Tampa. Abrupt, permanent decreases in gun homicides associated with the law occurred in all three cities, but only in Tampa was the decline significant. Nongun homicides did not increase significantly in each city after the law went into effect. Armed robberies did not decrease significantly in Tampa and Miami, but did not increase significantly in Jacksonville. In contrast, unarmed robberies increased in all three cities, and the increase was significant in Tampa and Miami. After the law went into effect, both gun and knife assaults did not decrease significantly in Jacksonville and Miami. In Tampa, however, gun and knife assaults increased, and the increase for gun assault was significant. These mixed results hamper a clear interpretation of the law’s effect on gun-related crime. The evaluators did not report any information on enforcement of the law.
McDowall et al. (1992) evaluated the impact of a mandatory sentencing law in Pennsylvania. The law, enacted in June 1982, imposed a 5-year mandatory sentence for committing any of seven felonies with the visible possession of a firearm. The mandatory sentence also applied if the defendant had been convicted of the same felony within the past 7 years or the felony was committed in or near public transportation facilities. As with the Michigan and Florida laws, suspended, deferred, and withheld sentences were explicitly prohibited, and parole was not possible until the mandatory firearm sentence was served. Using a time-series design, the researchers examined monthly frequencies of reported homicide (gun and nongun) from January 1970 through December 1984 for the city of Philadelphia and Allegheny County (which includes Pittsburgh). They also examined monthly frequencies of robbery (gun and nongun weapon) and aggravated assault (gun and nongun weapon) from January 1978 through December 1984 for Pennsylvania. Gun homicides decreased significantly in Philadelphia and Allegheny County after the law was enacted. Nongun homicides also declined in both cities after the law was adopted (significantly so in Philadelphia). In Pennsylvania, the drop in gun assaults and gun robberies was not significant, and the rise in nongun weapon assaults and nongun weapon robberies was not significant after the law was passed. No information on enforcement of the law was reported.

There is evidence that mandatory sentencing laws for crimes involving firearms prevented firearm homicides.

McDowall et al. (1992) and Loftin, McDowall, and Wiersema (1993) performed a meta-analysis of their evaluations of mandatory sentencing laws. The researchers combined the time-series results of intervention impacts on homicide, aggravated assault, and robbery in the five cities (Detroit, Jacksonville, Miami, Philadelphia, and Tampa) and Allegheny County. Gun homicides decreased in all six jurisdictions after mandatory enhancement sentencing laws were enacted, and the overall effect across studies was significant (mean effect size = -.69). Nongun homicides decreased only in two cities after mandatory sentencing laws were passed, and the overall effect across evaluations was virtually nonexistent (mean effect size = -.03). The effects of the sentencing laws on aggravated assault and robbery were estimated by cumulating results from Detroit, Jacksonville, Miami, Tampa, and the State of Pennsylvania. After the laws were adopted, gun assaults declined in four of the jurisdictions, but the overall intervention effect was modest and nonsignificant (mean effect size = -.36). Other types of assaults (nongun, knife, and nongun weapon assaults) decreased in only two of the five jurisdictions and did not change appreciably after the laws were passed (mean effect size = -.06). Armed robberies decreased in two of the jurisdictions, and the combined effect was essentially null (mean effect size = .08). Unarmed robberies increased in all five jurisdictions, and the aggregated effect was moderate but nonsignificant (mean effect size = .68). For each of these six subtypes of crimes, there was significant variation in the magnitude of intervention effects among the cities.

While the aggregate effects of the sentencing laws on aggravated gun assaults and armed robberies were not significant or large, they were more preventive than the aggregate effects for other assaults and unarmed robberies. As McDowall et al. (1992) noted, the homicide data are probably more completely and accurately reported than the assault or robbery data. Greater inaccuracies in the assault and robbery data might have masked the impact of the sentencing laws on these crimes. Furthermore, in these evaluations armed robbery did not specifically refer to robberies committed with a gun (except for the Pennsylvania data), and this additional imprecision in coding could further mask intervention effects.

Summary. There is evidence that mandatory sentencing laws for crimes involving firearms prevented firearm homicides. Such laws also may prevent other types of violent crime involving firearms, but the available evaluations do not yet permit this conclusion. McDowall et al. (1992) urged more research on the impact of sentencing laws with probability samples of jurisdictions to identify which mechanisms of the laws bring about the preventive impact.
Firearm training and mandatory gun ownership.
Using time-series analyses of reported crime data, McDowall et al. (1991) evaluated the preventive impacts of two firearm training programs and one mandatory gun ownership law. The former programs were designed to deter crime by increasing the number of citizens who know how to use guns properly. The latter law attempted to communicate the risk criminals face in committing a crime. From October 1966 to March 1967, an Orlando, Florida, firearm training program taught 2,500 women how to use a firearm. The program received a large amount of publicity in the local newspaper. The researchers examined annual frequencies of rape between 1958 and 1971. The number of rapes declined nonsignificantly in the year following the program (1967). The pattern of rapes in the Orlando standard metropolitan statistical area and the State of Florida (both excluding the city of Orlando) also showed nonsignificant decreases following the program, suggesting that the Orlando program was not responsible for the observed nonsignificant decrease in rapes.

Another firearm training program was implemented in Kansas City, Missouri, in response to concern about retail business robberies. From September to November 1967, the program taught 138 persons how to use guns. There was some degree of publicity about the program. McDowall et al. (1991) examined annual frequencies of robbery from 1961 to 1986 and found that the number of robberies decreased nonsignificantly in the year following the intervention (1968). A similar pattern over time was observed for robberies in the State of Missouri, suggesting that the nonsignificant reduction in robberies in Kansas City was not attributable to the training program.

McDowall et al. (1991) also evaluated an ordinance in Kennesaw, Georgia (a suburb of Atlanta), that required every household in the city to maintain a firearm. Enacted in March 1982, the law imposed no penalty for violators, and no violations were recorded in the 5 years after the law went into effect. The ordinance received extensive media coverage. The researchers examined monthly frequencies of burglaries from January 1976 to December 1986 and found that burglaries increased nonsignificantly after the law was passed.

Summary. None of the evaluations of firearm training programs or the mandatory gun ownership law demonstrated any significant intervention effects on crime or violence. More evaluation research using longer time-series with more observations would provide more definitive answers on the intervention impacts of these strategies.

Metal detectors in schools. Metal detector programs usually have security personnel or school staff use detectors to search some or all students for metal weapons, such as guns and knives. In 1992, 19 of the 115 public high schools in New York City had school-based metal detector programs (Ginsberg and Loffredo, 1993). In a school with a metal detector program, a team of security officers scanned randomly selected students with hand-held metal detectors as they entered the building. Ginsberg and Loffredo (1993) surveyed a representative sample of all New York City high school students, stratified by schools with and without metal detector programs. Sixty-seven percent of students in 3 schools with metal detector programs and in 12 schools without them participated in the survey, which included questions on weapon carrying over the past 30 days and being physically threatened or involved in fights over the past 30 days.

The students in schools with and without metal detector programs were virtually identical in terms of their self-reports of being threatened or involved in fights at school, on their way to and from school, or anywhere. Students in the two groups also were equally likely to report carrying a gun, knife, or other kind of weapon somewhere in the previous 30 days. However, self-reported weapon carrying at school was significantly less prevalent in schools with metal detector programs than those without. In schools without metal detector programs, students were approximately twice as likely to bring a gun, knife,
or other weapon to school as students in schools with metal detector programs. Although assignments of schools to implement a metal detector program were not random, students in all schools were very similar in their overall experience with interpersonal violence and weapon carrying. This suggests that the students in the two groups of schools were closely matched. The results from this survey imply that metal detector programs may have a site-specific impact on weapon availability, which might decrease the escalation and lethality of interpersonal conflicts at such sites.

**Policing Strategies**

Although many policing strategies such as foot patrols and citizen contact patrols are not new policing techniques, they are being implemented with a new goal that can make them an element of a law enforcement agency’s community policing strategy.

A police force that manages routine crime and processes criminals efficiently helps to prevent crime by enforcing laws and bolstering norms against criminal behavior. To illustrate, Sherman (1992, pp. 192–193, 201) discussed numerous instances of dramatic increases in crime and violence during police strikes in several cities across the world. Makinen and Takala (1980), for instance, documented elevated rates of assault, robbery, theft, and vandalism during a 17-day police strike in Finland in comparison to periods before and after the strike.

Research shows, however, that simply employing more police and allocating more funds for police services has no effect on crime. Wycoff (1982) reviewed numerous cross-sectional and panel studies conducted in the 1960’s and 1970’s and found that neither the numbers of police personnel nor rates of police expenditures correlated reliably to reported crime rates, clearances (crimes solved by police), or arrests.

In recent decades, various innovations in policing practices have been attempted to reduce crime. Several of these policing strategies have been evaluated and are reviewed here:

- Intensified motorized patrol.
- Field interrogation.
- Foot patrol and neighborhood storefront police stations.
- Citizen contact patrol.
- Community mobilization, including neighborhood block watch and citizen patrol.

These strategies address the risk factors of community disorganization and low neighborhood attachment and norms tolerant of crime and violence. Protective factors addressed include healthy beliefs and clear standards for behavior, opportunity for involvement with police, and bonding to police.

**Intensified motorized patrol.** Patrol strategies, in general, are designed to prevent crime by reducing the opportunities and increasing the perceived risks for engaging in criminal activity through the visible presence of police in the community (Wycoff, 1982). Four controlled evaluations of intensified motorized patrol have been done. The Kansas City, Missouri, Preventive Patrol Experiment was a well-documented, quasi-experimental evaluation of different levels of motorized patrol (Kelling, Pate, Dieckman, and Brown, 1974). The three patrol conditions were normal (one car per beat), reactive (police responded only to service calls, with only one car patrolling a beat’s perimeter), and intensive (two to three cars per beat). In all conditions, police cars were marked. There were five sets of three beats, and one beat in each set was assigned to a different patrol condition. All beats in a set were matched for level of crime, number of calls for service, ethnic composition, income, and transiency of population. Overall, the beats were diverse in terms of residents’ income level and ethnicity. The intervention lasted 12 months and was implemented with a high degree of fidelity.
To evaluate program impact, the evaluators collected data from a number of sources:

- Probability sample victimization surveys conducted in the month before the intervention and in the last month of the intervention.
- Reported crime rates for the intervention year and the 4 preceding years.
- Arrest rates for the intervention year and the 3 preceding years.
- Rates of traffic accidents for the intervention year and the 2 preceding years.

There were no significant differences between conditions in rates of victimization, officially reported crime, arrests for an array of offenses, including serious and violent crimes, or traffic accidents. There also were no significant differences across conditions in citizen and business perceptions of the police, quality of their interactions with police, or police response time to service calls.

Patrol strategies, in general, are designed to prevent crime by reducing the opportunities and increasing the perceived risks for engaging in criminal activity through the visible presence of police in the community.

Schnelle, Kirchner, McNees, and Lawler (1975) evaluated the effectiveness of an intensified motorized home-burglary patrol in Nashville, Tennessee. Over a period of 5 weeks, plainclothes officers patrolled experimental zones in unmarked cars at levels four to eight times greater than normal between 8 a.m. and 4 p.m. Patrolling officers also received information on suspects frequenting the patrol areas. Time-series analyses were conducted on officially recorded home burglaries for three experimental zones during the saturation patrol shift and during other shifts and for three randomly chosen comparison zones in the city. Weekly reported crime and burglary arrest data were available for the 43 weeks preceding the saturation patrol as well as the 9 weeks after. No significant changes in officially recorded burglaries were associated with the intervention in the experimental zones or in comparison zones. Burglary arrests increased significantly after the saturation patrols began in the experimental zones and increased nonsignificantly in the comparison zones.

Schnelle, Kirchner, Casey, Uselton, and McNees (1977) investigated another intensified motorized patrol intervention in Nashville, Tennessee. In this intervention, four additional marked patrol cars were assigned to patrol zones that normally had one patrolling car. Officers in these preventive saturation patrol cars were instructed not to respond to ordinary service calls, except for emergencies and crimes in progress. Saturation patrol cars were to patrol areas at sustained slow speeds. The saturation patrol was tested in four patrol zones with consistently high rates of serious crime. The researchers used a multiple baseline time-series design and collected daily reported crime and arrest data to evaluate the program's impact. Two patrol zones were randomly assigned to day saturation patrol (from 9 a.m. to 5 p.m.) and the other two zones were assigned to night saturation patrol (from 7 p.m. to 3 a.m.). The saturation patrols lasted for 10 days in each zone. Baseline periods ranged from 45 to 90 days and post-saturation patrol observation periods ranged from 13 to 35 days. The program was implemented as designed to a very high degree.

Reported serious crimes decreased significantly during night saturation patrols in comparison to the baseline and post-saturation patrol periods. There were no significant increases in crime in zones adjacent to those with night saturation patrol, so it is unlikely that this decrease in crime represented displacement of crime to other neighborhoods. However, there were no significant changes in reported serious crimes for day saturation patrols. Furthermore, the number of arrests did not change significantly in any of the patrol zones over the course of the experiment.

Sherman and Weisburd (1990; cited in Sherman, 1992) conducted a randomized trial of targeting patrol at very specific high-crime locations or “hot spots” in Minneapolis, Minnesota. These hot spots were characterized by high frequencies of reported crimes over a
2-year period. The hot spots were no larger than one-half block in each direction from an intersection, and no hot spot was visible from any other. Intensive hot spot patrols were to provide 3 hours of intermittent patrol presence between 11 a.m. and 3 a.m. Officers left the location to answer service calls but returned to the hot spot at unpredictable intervals to write reports, talk with pedestrians, and generally maintain a presence. The intervention lasted 1 year. The researchers used a true experimental design to evaluate the program. Hot spots were randomly assigned to intensive patrol or patrol as usual. Over the whole intervention period, experimental hot spots were patrolled almost three times as much as control hot spots, and police maintained an average of 2.5 hours’ presence at experimental hot spots per day. The intensive patrols did not significantly affect serious crimes overall, although the “...[intensive] patrol had a modest deterrent effect on robbery in the hot spots...” (Sherman, 1992, p. 194). This evaluation did not assess the possibility that crime was displaced to other areas.

Field interrogation. Boydstun (1975) evaluated the effects of field interrogation (FI) in San Diego, California. In FI, officers stopped persons who appeared to be suspicious to question them about their activities and sometimes search them and/or their vehicles. If the officer found the person’s explanations satisfactory, no record of the contact was made. If the explanations were unsatisfactory, however, the officer could file an FI report on the contact or arrest the person if there was probable cause to do so. FI was a regular part of motorized patrol officers’ activities in San Diego in the early 1970's.

The evaluators used a quasi-experimental design involving three comparison areas to assess program impacts. In one comparison area, FI was maintained as usual; in another comparison area, FI was maintained but patrolling officers received supplementary training in how to reduce friction between FI subjects and officers. In a third area, FI was discontinued entirely for 9 months. The three areas were noncontiguous patrol beats representative of the city in demographic, physical, and crime history characteristics. All three areas were matched on these variables. The evaluators collected data on reported crime rates for “suppressible” crimes (i.e., robbery, burglary, grand theft, petty theft, auto theft, assault and battery, sex crimes, and malicious mischief and disturbances) and total arrests in the three areas for 7 months prior to and 5 months after the 9-month intervention period. The evaluators also conducted separate probability sample surveys on residents’ victimization and attitudes toward police before and after intervention.

The researchers observed a significant increase during the intervention period in reported suppressible crimes in the area where field interrogation was discontinued compared to the areas where it was maintained.

The researchers observed a significant increase during the intervention period in reported suppressible crimes in the area where FI was discontinued compared to the areas where it was maintained. When FI was reinstated in the same area, reported crime decreased significantly. Arrest rates did not vary significantly as a result of the FI program. Experience with crime (as a witness or victim) and perceptions of the level of crime increased significantly in the FI-discontinued area and, counter to expectation, in one area where FI was maintained. Fear of crime also increased over time in the neighborhood where FI was discontinued. FI was not related to any changes in residents’ attitudes toward police.

Foot patrol and neighborhood storefront police stations. The largest field experiment on foot patrol was conducted in the late 1970's in Newark, New Jersey (The Police Foundation, 1981). The evaluation used a quasi-experimental design in which four beats without existing foot patrol added foot patrol and one beat in each of four pairs of beats with existing foot patrol (matched for proportion of residential units) was randomly assigned to discontinue foot patrol. The addition and discontinuation of foot patrols lasted 1 year. Foot patrols operated along commercial strips 8 to 16 blocks long from 4 p.m. to midnight on weeknights. Researchers gathered data on reported crime and arrests for the 5 years prior to the intervention and the intervention year itself and administered
separate probability sample victimization surveys in the 3 months before and after the intervention year.

The foot patrol intervention was reasonably well implemented. Residents were aware of the increase and decrease in foot patrols in foot patrol addition and discontinuation areas. The evaluation showed no significant changes between areas in reported crime, arrests, or victimization for any of several categories of offenses of varying severity. However, residents in areas with foot patrol perceived a significant decrease in crime and reported a significant increase in their use of crime prevention techniques and in favorable attitudes toward police and police services.

Pate, Skogan, Wycoff, and Sherman (1985) evaluated a program introduced in Newark, New Jersey, in the early 1980’s that combined foot patrol with efforts to reduce the physical “signs of crime.” This multicomponent program was based on Wilson and Kelling’s (1982) “broken windows” theory that neighborhood social and physical disorder are causally related to crime. The program began by establishing a storefront police station in a neighborhood. At the station, officers accepted reports of crime in the neighborhood, distributed crime prevention information, referred problems to other agencies, recruited members for block watch and other community organizations, and communicated informally with residents. For most of the 10-month intervention period, the station was open from 10 a.m. to 10 p.m., Monday through Saturday, and staffed by three police officers and other civilian staff. Early in the program, officers visited residents at their homes to identify crime-related fears and problems, give information about crime prevention and the station, and provide followup assistance and referral advice. Officers from the station also produced a newsletter that highlighted crime prevention, neighborhood and station activities, and news about solved crimes. Officers distributed the newsletters to neighborhood businesses, organizations, and apartment buildings.

The program’s other main components were foot patrol and cleanup activities. A separate group of foot patrol officers enforced disorderly conduct and loitering laws and maintained order on sidewalks and street corners. In addition, officers on foot patrol performed radar checks for speeding on city streets; bus checks “... to enforce ordinances and maintain order aboard public buses ...” (Pate, Skogan, Wycoff, and Sherman, 1985, p. 5); and road checks to serve warrants and apprehend drunk drivers, persons driving stolen vehicles, and persons driving without a license. The police conducted these operations at least three times a week on a random basis. The program also included cleanup activities such as removing graffiti, improving lighting, repairing streets, maintaining garbage collection, and cleaning streets and vacant lots. Cleanup activities were performed by city employees, juvenile offenders doing community service, and community residents.

One of five similar neighborhoods closely matched on several characteristics, including size, demographic composition, land use, and level of disorder was randomly selected to receive the intervention, and another was randomly selected to serve as a comparison area. In both experimental and comparison neighborhoods, residents primarily lived in apartments and most (97 percent or more) were African-American. The researchers carried out probability sample victimization surveys before and at the end of the program. The program was fairly well implemented. In their door-to-door visits, officers contacted more than half of the households in the neighborhood. Sixteen of 20 designated locations were cleaned up, and the level of officer hours spent in the program area per month was 45 percent of the level spent on intensive foot patrol in the 1981 Police Foundation experiment. Relative to comparison area residents, experimental area residents’ satisfaction with the neighborhood and evaluations of police service increased significantly, while their perceptions of neighborhood social disorder and worry about property crime decreased significantly. In spite of these positive effects, surveyed residents in the experimental area reported significantly increased crime victimization for both personal and property crimes relative to comparison area residents. However, time-series analyses showed significant reductions in reported serious crimes, personal crimes, auto theft, and outdoor offenses in the experimental area but not in the comparison area.

In the early 1970’s, Nashville, Tennessee, introduced an innovative policing strategy involving foot patrol and a neighborhood storefront police station. Schnelle et al. (1975) evaluated the effects of this program with a multiple-baseline time-series design. The target
zones for this intervention were two adjacent, low-income, predominantly African-American residential areas consisting of public housing. Six patrol officers for each zone operated out of a centralized storefront office between 9 a.m. and 5 p.m. The foot patrols were introduced sequentially in the two zones. The level of reported crime increased significantly in the two zones during the foot patrol program in comparison to the baseline periods. This increase, however, was due to more reports of minor offenses such as theft, simple assault, public drunkenness, and disorderly conduct. No increases in major crimes such as murder, rape, and burglary were observed. There was no significant change in the level of arrests for either zone between the baseline and intervention periods. It is possible that the increased police presence made it easier for residents to report minor crimes to police that would have otherwise gone unreported. It is unlikely that the observed increase in reported minor crime represents an upsurge in actual criminal behavior associated with foot patrol.

Three different policing interventions, including a neighborhood storefront police station, a citizen contact patrol, and a police-initiated community organization effort, were tested in separate evaluations during the early 1980's in Houston, Texas (Wycoff, Skogan, Pate, and Sherman, 1985a, b, c; Skogan and Wycoff, 1986). The evaluation of the community organization effort is described more fully in the next section on community mobilization. Each of these interventions was evaluated with a nonequivalent comparison group design. Four similar high-crime neighborhoods were designated as experimental areas, and another neighborhood was chosen as a comparison area that matched the experimental neighborhoods on size, demographic characteristics, land use, level of crime, and other characteristics. Approximately half of the residents in study areas were ethnic minorities, and most residents were renters and apartment dwellers. Each of the Houston interventions was implemented in a different experimental area. Three months before and 9 to 10 months after the interventions began, the evaluators conducted probability sample surveys on crime and neighborhood topics in experimental and comparison neighborhoods. Data analyses controlled for socioeconomic and demographic factors and preintervention levels of outcome measures.

The neighborhood storefront station was staffed by four police officers and police and civilian staff from 10 a.m. to 9:30 p.m. on weekdays and from 10 a.m. to 6 p.m. on Saturdays (Skogan and Wycoff, 1986; Wycoff et al., 1985c). Other police officers were responsible for routine patrol in the neighborhood, but station officers were responsible for service calls made to the neighborhood station. Station staff's activities included the following:

- Holding monthly community meetings (attended by an average of 150 residents) to discuss crime issues and present guest speakers.
- Maintaining regular contact with school officials, which resulted in officers' working on returning truant students to school and sometimes making counseling referrals.
- Fingerprinting neighborhood children who visited the station.
- Offering blood pressure readings monthly to area residents at the station.
- Offering ride-alongs with officers to members of neighborhood groups.
- Patrolling a neighborhood park known for disorder.
- Organizing recreational activities in the park during the summer.
- Distributing monthly newsletters discussing station activities to several hundred residents.

Station services were reasonably well implemented, and most residents were aware of the station. More affluent and established residents were the most likely to be aware of and contact the station. Results demonstrated that residents in the storefront station

It is possible that the increased police presence made it easier for residents to report minor crimes to police that would have otherwise gone unreported.
Addresses with high repeat-call records were randomly assigned to experimental and control groups. During the first 6 months of the program, experimental addresses had significantly fewer calls for police service than the control addresses. After a year, however, there were no significant differences between experimental and control addresses in terms of calls. No information was presented on implementation or the possibility of crime displacement caused by tenant evictions in the experimental group.

Perceived crime levels, social disorder, and fear of crime declined significantly in the experimental area, and satisfaction with the area and evaluations of police service rose significantly.

The Kansas City Police Department used intensified motorized patrol in high gun crime areas in a single patrol beat. A pair of two-officer cars patrolled the target beat between the hours of 7 p.m. and 1 a.m., 7 days a week. The emphasis of the patrol was the enforcement of laws regarding carrying concealed weapons. For 29 weeks, they focused their patrol efforts on gun crime “hot spots” identified through geographic distribution of gun crimes in the area. The patrol units “focused exclusively on gun detection through proactive patrol and did not respond to calls for service” (Sherman, Shaw, and Rogan, 1995, p. 4). Officers spent an average of 3.27 of the 12 car-hours (27 percent) in patrol activities. The other 73 percent of the time was spent processing arrests, patrolling other areas, and performing “other patrol-related duties.”

The program was evaluated through comparison to another patrol beat in the Kansas City area, matched on the number of drive-by shootings in 1991. The target and comparison beats were similar in several additional characteristics, including percent of population under 25; both had low proportions of white residents, similar patterns of home ownership and single family housing, and similar rates of firearm-related crimes. The areas also had several differences. The comparison area had almost twice the popula-

Citizen contact patrol. The citizen contact patrol involved patrol officers visiting residents at home in a 1-square-mile area with 1,390 households (Wycoff et al., 1985a). During these brief visits, officers typically asked residents about neighborhood crime problems, suggested solutions, left business cards, and sometimes followed up on complaints. Officers also put these residents on the mailing list for the police neighborhood newsletter. On each shift, one officer was responsible for making citizen contacts and could be called away from these duties only for service calls in the experimental area. Over the 10-month intervention, officers contacted 37 percent of the households in the area. Perceived crime levels, social disorder, and fear of crime declined significantly in the experimental area, and satisfaction with the area and evaluations of police service rose significantly. Experimental area residents also reported significantly less property crime victimization than residents of the comparison area. There were no significant differences between experimental and comparison areas in terms of personal crime victimization. Overall, the results suggest positive effects of the citizen contact patrol, although residents in the experimental area had more extreme values on outcome variables than comparison area residents before program implementation, indicating that regression to the mean may have contributed to the observed positive results.

Sherman (1990) summarized his evaluation of a program in which a five-officer unit focused on residential and commercial addresses responsible for a large proportion of police calls in Minneapolis, Minnesota. Police met with landlords to inform them about the addresses with a high number of calls, and some landlords used this information to buttress eviction petitions. Officers in the unit also met with resident managers to give them information on how to control problem tenants and tenant problems. In addition, at addresses where there had been repeated domestic disturbance calls, officers left letters on the doorsteps asking residents to call the unit.
tion, three times the land area, higher housing prices, and a greater proportion of high school graduates.

The program outcome was examined using several methods, including an examination of gun crimes before and during the intensified patrol and an examination using ARIMA methods to analyze weekly gun crimes over a longer period. Both methods demonstrated a significant reduction in gun crime in the target area. Further, community surveys before and after the intensified patrol showed that respondents in the intervention area became less fearful of crime and more satisfied with their neighborhood, perceived less physical and social disorder, and were more likely to say that neighborhood drug problems had gotten better compared to the nonintervention area. Finally, none of the adjacent beats demonstrated a significant increase in crime, perhaps indicating that gun crime had not spread to nearby neighborhoods. When the patrols were discontinued at the end of the 29 weeks, gun-related crime increased gradually. When the intensified patrol was re instituted 6 months later, it was associated with a drop in gun crimes, though not as dramatically as the first introduction of intensified patrol. The second drop in gun crimes may not have been as great because of the already reduced level over baseline when the second intervention period began. The authors caution that the study needs replication and that potential negative effects on police-community relations and risks to the officers’ safety should be monitored.

Community mobilization. Community mobilization strategies encompass a diversity of programs that seek to prevent crime and violence by organizing citizens for grassroots efforts. Community mobilization approaches address the risk factors of community disorganization, low neighborhood attachment, and laws and norms favorable to crime and violence. Protective factors include opportunities for involvement with police, bonding to police, skills to monitor and positively influence neighborhoods, and healthy beliefs and clear standards for behavior. To date, only two kinds of community mobilization approaches to crime and violence prevention have been evaluated: neighborhood block watch and citizen patrol.

Neighborhood block watch programs are based on the rationale that residents are in the best position to monitor suspicious activities and individuals in their neighborhood. Social connections among residents resulting from block watch meetings also might facilitate neighborhood monitoring and communication about suspicious events.

Lindsay and McGillis (1986) evaluated the effectiveness of a neighborhood block watch program in Seattle, Washington. Professional community organizers affiliated with the city police department initiated the formation of block watch groups by recruiting interested residents through announcements to local civic groups and church organizations, telephone calls and letters to neighborhood residents, and door-to-door canvassing. After the recruitment phase, block watch groups held organizing meetings during which the professional community organizer discussed neighborhood burglary problems and residential burglary prevention techniques, including property marking. The organizer also distributed information about home security and made appointments for the use of a project property engraver. In addition, during the meeting, residents elected a block watch captain and exchanged telephone numbers.

In the weeks following the initial meeting, organizers gave participants who had marked their property window decals to warn intruders that household property was marked. Organizers also visited participating residents’ homes to perform brief home security inspections to identify burglary vulnerabilities and make recommendations on correcting them. To maintain these initial block watch activities, project organizers also produced a newsletter and organized followup meetings.

The evaluation used a nonequivalent comparison group design. A few census tracts in Seattle with high burglary rates were targeted to receive the intervention. Two tracts were designated as comparison areas, which were adjacent and similar in burglary rates to some of the experimental tracts. The program was implemented as designed to a fairly high degree. At least 40 percent of the households in the experimental areas participated in at least two of the three main program services (block watch, property marking, and home security inspection). The evaluators conducted probability sample victimization surveys for the year before intervention and the first year of intervention. Program participants in experimental areas reported significant reductions in burglary to their
residences, but this finding could be due to a selection bias since residents volunteered to participate in the neighborhood block watch. There was a 33 percent reduction in burglary victimization overall in experimental tracts compared with a 5 percent reduction in adjacent comparison tracts, although neither of these reductions was statistically significant. The authors did not directly compare the experimental and comparison areas for changes in victimization over time.

Rosenbaum, Lewis, and Grant (1986) tested a similar block watch program implemented in middle and lower-middle class neighborhoods in Chicago, Illinois. The intervention lasted 1 year and consisted of block watch meetings every month or few months. In their evaluation, the researchers used a quasi-experimental design with five experimental areas selected on the basis of having well-established volunteer community organizations, interest in a block watch program, and resources and support to carry out such a program. One set of comparison neighborhoods included areas that met only the first criterion. Another set of citywide comparison areas was selected for each program area, including three census tracts with similar demographic characteristics (ethnicity, age, percentage rentals, home value, and rental rate) chosen randomly from a set of tracts throughout the city sharing these characteristics. The researchers carried out probability panel sample victimization surveys at the beginning and end of the program.

Analysis of the survey data controlled for several covariates (sex, race, education, occupancy status, victimization history, and acquaintance with a crime victim). The intervention did not produce any consistent changes in residents’ crime prevention activities or neighborhood social cohesion. Overall, there were no program effects on victimization or perceived disorder. Residents in experimental areas reported significant increases in perceived crime and fear of crime and displayed significant decreases in attachment to their neighborhoods relative to residents in comparison areas. Furthermore, in one experimental area, blocks in which the program had been implemented as designed to a high degree were compared to blocks in which the program had not been implemented. No significant differences in outcomes were found. In sum, this block watch program produced no significant effects on crime, victimization, or attitudes toward the neighborhood.

A neighborhood mobilization intervention similar to block watch programs was the police-initiated community organization in Houston (Wycoff et al., 1985b). (The preceding section on community policing gives details of this study’s design and methodology.) Program staff, including four police officers and an urban planner, canvassed 12 percent of the households in the experimental neighborhood to ask about area problems and their willingness to host neighborhood meetings. During an 8-month period, program staff helped organize 13 small neighborhood meetings attended by 6 to 18 residents and 2 to 3 officers. The program also mailed newsletters about neighborhood crime problems to approximately 8 percent of area households. Approximately 20 residents from the neighborhood meetings agreed to form a neighborhood task force that worked without program staff’s direct involvement. This neighborhood task force held a drug information seminar, designated 30 “safe houses” where children could go for assistance, organized a 1-month trash and junk cleanup effort in the neighborhood, and promoted property marking and resident ride-alongs with police officers. There were no previously existing neighborhood organizations in the experimental area.

During an 8-month period, program staff helped organize 13 small neighborhood meetings attended by 6 to 18 residents and 2 to 3 officers.

Survey results showed that residents in the experimental area perceived significantly decreased crime and social disorder and significantly increased police service relative to comparison area residents. However, no decreases in victimization or increases in satisfaction with the area were associated with the program. The authors discussed several difficulties in implementing the program, including the lack of a permanent organization location or office, only moderate levels of perceived crime in the experimental area, the lack of neighborhood organizations, and program staff’s lack of familiarity with the area.
Another community mobilization strategy advocated by some is the active patrolling of neighborhoods by citizens who are not law enforcement officers. One controlled study has evaluated the impact of the Guardian Angels, a nonprofessional foot patrol organization (Pennell, Curtis, Henderson, and Tayman, 1989). The Guardian Angels consist of unarmed, racially diverse youth who wear red berets and patrol the streets. The organization specifically seeks to prevent or deter crimes that involve force or personal injury. Using a quasi-experimental design, Pennell et al. (1989) compared an experimental area patrolled by Guardian Angels with an unpatrolled area in San Diego, California. The authors did not provide details on the study areas. The researchers obtained data on the reported crimes for a baseline period 6 months prior to the onset of the Guardian Angels’ patrol and for 3 years of Guardian Angels’ patrol. The level of patrol over the 3-year period was less than that recommended in the Guardian Angels’ guidelines. Outcomes indicated a 22 percent decline in major violent offenses in the experimental area but a 42 percent decline in the comparison area. For property crimes, there was a 25 percent decline in the experimental area and a 15 percent reduction in the comparison area. Statistical significance was not reported for any of these results.

Summary. In general, the innovative policing interventions decreased residents’ perceived crime and fear of crime and in many cases improved citizen evaluations of the police. Four evaluations examined physical and social disorder and satisfaction with the area (Pate et al., 1985; Skogan and Wycoff, 1986; Wycoff et al., 1985a; Sherman et al., 1995), and all four studies documented reduced physical and social disorder; three studies reported positive effects on resident satisfaction with the area.

In spite of these changes in perceptions of crime, the police, and the neighborhood, three of the seven evaluations demonstrated no preventive effect on crime itself. Two evaluations showed some positive program effects on officially reported crime (Pate et al., 1985; Sherman et al., 1995). Pate et al. (1985) found increased crime victimization among surveyed residents in the experimental area relative to the comparison area. Another study indicated that the experimental addresses targeted by the program generated significantly fewer police service calls than control addresses in the program’s first 6 months, but that this effect disappeared by the end of the intervention year (Sherman, 1990). Only one of the four evaluations with victimization data showed reductions in victimization rates, generally regarded as one of the best measures of crime. The main component of this program (Wycoff et al., 1985a) was a citizen contact patrol in which police officers visited residents at their homes to inquire about crime problems.

The three controlled evaluations of block watch programs did not produce evidence of significant effects on crime in experimental neighborhoods. The only available evaluation of a citizen patrol also failed to demonstrate a significant preventive effect on crime. Clearly, additional evaluations with more rigorous, randomized research designs are required to determine the preventive effects of these community mobilization approaches. Furthermore, other types of community organizing, such as strategies involving community leaders and grassroots citizens in comprehensive crime risk assessment and risk reduction planning and action strategies, should be evaluated for their potential to prevent delinquency and violence.

Of the various policing strategies reviewed, the most promising tactics appear to be intensified (motorized) patrol in marked cars at night in specific high-crime locations and field interrogations. These results suggest that increased police presence must be judiciously directed at high-risk times, areas, and persons in order to deter crime. Simply increasing the number of police is not likely to prevent crime. However, replications of these results in larger studies using more rigorous experimental research designs are necessary to bolster confidence in the effectiveness of these strategies.

Many of the policing strategies described in the previous section can be considered elements of a community-oriented policing strategy. However, a law enforcement agency that simply implements a foot patrol program or uses storefront substations or initiates a community watch program may not be implementing a fully developed community-oriented policing strategy.

According to Goldstein (1994, p. viii), the term *community policing* is used “to encompass practically all innovations in policing, from the ambitious to the mun-
dane, from the most carefully thought through to the most casual.” The Department of Justice’s Office of Community Oriented Policing Services (COPS) describes community policing as a new concept in police reform in which the foundation for a successful community policing strategy is close, mutually beneficial ties between police and community members. This strategy consists of two complementary core components: community partnership and problem solving.

One of the key components of many community-oriented policing strategies is enhanced communications between the police and the community, as well as other public and social service agencies. The community must be viewed as an active partner with the police in defining which problems are to be addressed, which tactics are to be used, and how success is to be measured. The problem-solving approach targets persistent or recurring problems in communities and looks for long-term solutions to identified problems. Using this approach, law enforcement agencies go beyond individual crimes and service calls and take on the underlying problems that create them.

The problem-solving approach as a component of community policing has demonstrated some success. Many anecdotal examples of implementation success stories exist and give reason to believe that comprehensive community policing strategies can be effective.

Although many policing strategies such as foot patrols and citizen contact patrols are not new policing techniques, they are being implemented with a new goal that can make them an element of a law enforcement agency’s community policing strategy.

None of the available controlled studies reviewed evaluated a comprehensive community policing strategy that included both community partnership and problem-solving components of community policing. Typical evaluations of policing programs and strategies have relied on reported crimes and victimization surveys. Success and failure were measured by the decrease or increase in reported crime. However, the goals of community policing often include preliminary steps toward crime prevention and do not always begin with crime reduction.

As Eck and Rosenbaum (1994, p. 15) pointed out, community policing places an increased emphasis on responding to emergencies, reducing fear, mobilizing communities, and enhancing security for the community—variables measured by indicators other than crime statistics. Future evaluations of community-oriented policing strategies will have to overcome these inherent definitional problems in measuring outcomes as well as crime reduction.

**Conclusion**

Part II has explored early intervention programs for the period from conception to age 6 and prevention programs for the developmental period from kindergarten to high school. Together these sets of programs complement one another and constitute promising approaches for preventing delinquency and violence.

The quality of the evaluation research is uneven for the program areas reviewed above. As a result, scientifically based conclusions regarding program effectiveness are limited for many program areas.

There are, however, some areas in which evaluations of well-implemented programs used relatively strong research designs and included thorough and appropriate data analysis. Program effects in these areas also were replicated or documented in evaluations with large samples. Evaluations of several interventions consistently demonstrated positive effects on risk and protective factors for delinquency and violence. Effective (or proven) interventions include those listed below:

- Reductions of class size for kindergarten and first grade classes.
- Continuous progress instructional strategies.
- Cooperative learning.
- Tutoring.
- Computer-assisted instruction.
- Diagnostic and prescriptive pullout programs.
- Ability grouping within classes in elementary school.
- Nongraded elementary schools.
- Classroom behavior management techniques.
• Behavioral monitoring and reinforcement of school attendance, academic progress, and school behavior.
• Parent training.
• Marital and family therapy.
• Youth employment and vocational training programs with an intensive educational component.

Several interventions have also had long-term preventive effects on delinquency, including two types of family therapy, two multicomponent programs involving parent training, and a combination of proactive classroom management, interactive teaching, cooperative learning, and parent training. In addition, mandatory sentencing laws for felonies involving a firearm have prevented gun-related violent crime.

Evaluations of other interventions showed no or negative effects on risk and protective factors. These ineffective programs include the following:
• Humanistic and developmental instructional strategies.
• Teacher aides.
• Tracking or between-class ability grouping.
• Nonpromotion of students to the next grade.
• Special educational placements for disruptive, emotionally disturbed, learning-disabled, and/or educable developmentally disabled elementary school students.
• Peer counseling.
• Youth employment and vocational training programs without an intensive educational component.

Interventions of the last type also failed to prevent crime and delinquency.

Other types of programs have not been evaluated adequately to permit classification as either effective or ineffective. However, the evidence in the currently available evaluations suggests that the following programs are not effective:
• Mentoring relationships that are noncontingent and uncritically supportive.
• Gang streetworkers.
• Firearm training and mandatory firearm ownership.
• Citizen patrol.

In general, very little program development has occurred in the above areas. Additionally, it is recognized that while some programs may not be effective with respect to delinquency prevention, they may still be of benefit for other purposes.

For a number of interventions, the available evaluations, though inadequate, have indicated at least some positive program effects. The amount of empirical support for the effectiveness of the interventions varies widely across these program areas. The following are potentially promising program areas:
• Structured playground activities.
• Behavioral consultation for schools.
• Special educational placements for disruptive secondary school students.
• Conflict resolution and violence prevention curriculums.
• Peer mediation.
• School organization.
• Mentoring relationships that include behavior management techniques.
• Afterschool recreation.
• Gang prevention curriculums.
• Gang crisis intervention and mediation.
• Youth service.
• Restrictions on the sale, purchase, and transfer of guns.
• Regulations on the place and manner of carrying firearms.
• Metal detectors in schools.
• Intensified motorized patrol.
• Field interrogations.
• Community policing.
• Neighborhood block watch.

More rigorously designed research is needed to determine the preventive effects of these interventions. Overall, the evaluation research reviewed could be improved with stronger research designs, longer term followups, and better documentation of program implementation.

Contacts for More Information on Effective Programs

Programs: Reductions in class size for kindergarten and first grade classes, continuous progress instructional strategies, cooperative learning, tutoring, computer-assisted instruction, diagnostic and prescriptive pullout programs, and ability grouping within classes in elementary schools.

Contact: Dr. Robert Slavin
Johns Hopkins University
Center of Social Organization of Schools
3505 North Charles Street
Baltimore, MD 21218

Program: Classroom behavior management techniques.

Contact: Dr. Sheppard G. Kellam
Prevention Research Center
Department of Mental Hygiene
School of Hygiene and Public Health
Johns Hopkins University
Mason F. Lord Building, Suite 500
Francis Scott Key Medical Center
4940 Eastern Avenue
Baltimore, MD 21224

Program: Cooperative learning, classroom behavior management techniques, and parent training.

Contact: Dr. J. David Hawkins
Social Development Research Group
School of Social Work
University of Washington
146 North Canal Street, Suite 211
Seattle, WA 98103

Program: Behavioral monitoring and reinforcement of attendance, academic progress, and school behavior.

Contact: Dr. Brenna Bry
Graduate School of Applied and Professional Psychology
Rutgers University
Piscataway, NJ 08855–0819

Program: Parent training.

Contact: Dr. Gerald Patterson
Oregon Social Learning Center
207 East 5th Avenue, Suite 202
Eugene, OR 97401

Program: Parent training and social skills training for children.

Contact: Dr. Richard E. Tremblay
Professeur Titulaire
Université de Montréal
Directeur
750 Boulevard Gouin Est
Montreal, Quebec
CANADA H2C 1A6

Program: Brief behavioral family systems therapy.

Contact: Dr. James F. Alexander
Department of Psychology
University of Utah
Salt Lake City, UT 84112

Program: Vocational training with an intensive educational component.

Contact: Dr. George Cave
Manpower Demonstration Research Corporation
Three Park Avenue
New York, NY 10016
Program: Mandatory sentencing laws for felonies involving a firearm.

Contact: Dr. Colin Loftin
Violence Research Group
Institute of Criminal Justice and Criminology
University of Maryland
2220 Lefrak Hall
College Park, MD 20742–8235

Contacts for More Information on Promising Programs

Program: Peer mediation.

Contact: Dr. Eleanor Reardon Tolson
Jane Addams College of Social Work
University of Illinois
Box 4348
Chicago, IL 60680

Program: Structured playground activities.

Contact: Dr. H. Allen Murphy
Department of Psychology
Florida State University
Tallahassee, FL 32306

Program: Behavioral consultation for schools.

Contact: Dr. G. Roy Mayer
Department of Counselor Education
California State University, Los Angeles
Los Angeles, CA 90032

Program: Special educational placements for disruptive secondary students.

Contact: Dr. Daniel J. Safer
9100 Franklin Square Drive
Rosedale, MD 21237

Program: Conflict resolution and violence prevention curriculum.

Contact: Dr. Di Bretherton
Department of Psychology
University of Melbourne
Parkville VIC 3052
Australia

Program: Conflict resolution and violence prevention curriculum.

Contact: Committee for Children
172 20th Avenue
Seattle, WA 98122

Program: School organization.

Contact: Dr. James Comer
Child Study Center
Yale University
230 South Frontage Road
New Haven, CT 06510–8009

Program: School organization.

Contact: Dr. Robert D. Felner
Institute of Government and Public Affairs
Center for Prevention, Research, and Development
University of Illinois
Champaign, IL 61820

Program: School organization.

Contact: Dr. Gary D. Gottfredson
Center for Social Organization of Schools
Johns Hopkins University
3505 North Charles Street
Baltimore, MD 21208

Program: School organization and antibullying program.

Contact: Dr. Dan Olweus
Department of Personality Psychology
University of Bergen, Box 25
N–5014 Bergen, Norway

Program: Mentoring with behavioral management techniques.

Contact: Dr. Clifford R. O’Donnell
Department of Psychology
University of Hawai‘i
Honolulu, HI 96822

Program: Afterschool recreation.

Contact: Dr. Marshall B. Jones
Department of Behavioral Science
M.S. Hershey Medical Center
Hershey, PA 17033
Program: Metal detectors in the schools.
Contact: Linda Loffredo
Office of the Executive Director
Division of School Safety
New York City Public Schools
P.S. 64, Third Floor
600 East Sixth Street
New York, NY 10009

Program: Intensified motorized patrol.
Contact: Dr. John F. Schnelle
Borun Center, Multicampus Division of Geriatrics
Department of Medicine
University of California, Los Angeles
10833 Leconte Avenue
Los Angeles, CA 90024–1687

Program: Field interrogations, community policing.
Contact: Dr. Galen Switzer
Western Psychiatric Institute
University of Pittsburgh
3811 O’Hara Street
Pittsburgh, PA 15213

Program: Youth service.
Contact: Dr. Irving Spergel
Hope Haven/Madonna Manor
1101 Barataria Boulevard
Marrero, LA 70072–3085

Program: Gang crisis intervention and mediation.
Contact: Dr. David W. Thompson
School of Social Service Administration
969 East 60th Street
University of Chicago
Chicago, IL 60637

Program: Gang prevention curriculum.
Contact: Police Foundation
1909 K Street, NW.
Washington, DC 20006

Program: Restrictions on the sale, purchase, and transfer of guns; regulations on the place and manner of carrying firearms.
Contact: Dr. Colin Loftin
Violence Research Group
Institute of Criminal Justice and Criminology
University of Maryland
2220 Lefrank Hall
College Park, MD 20742–8235
Part III: Graduated Sanctions for Serious, Violent, and Chronic Juvenile Offenders

This part summarizes the state of the art in graduated sanctions for serious, violent, and chronic juvenile offenders. It begins by setting forth the core principles of a system of graduated sanctions, followed by a review of relevant research literature that includes studies of individual programs and broad meta-analyses of studies in the field. Part III concludes with guidelines for graduated sanctions programs and descriptions of model programs identified through an extensive national search.

Core Principles of a System of Graduated Sanctions

There is no graduated sanctions system in operation today that can be identified as a perfect model. Nevertheless, a consensus exists among juvenile justice professionals about the core principles of a model system. These core principles were summarized by Wilson and Howell (1993) in OJJDP’s Comprehensive Strategy for Serious, Violent, and Chronic Juvenile Offenders: Program Summary.

According to Wilson and Howell, a model graduated sanctions system combines treatment and rehabilitation with reasonable, fair, humane, and appropriate sanctions, and offers a continuum of care consisting of diverse programs. The continuum includes the following:

- Immediate sanctions within the community for first-time, nonviolent offenders.
- Intermediate sanctions within the community for more serious offenders.
- Secure care programs for the most violent offenders.
- Aftercare programs that provide high levels of social control and treatment services.

A model graduated sanctions system combines treatment and rehabilitation with reasonable, fair, humane, and appropriate sanctions.

Juveniles should move along the continuum through a well-structured system of phases that addresses both their needs and the safety of the community. At each level of the continuum, offenders should be subject to more severe sanctions if they continue in their delinquent activities. A smaller group of violent offenders, or those offenders who have proven themselves to be unresponsive to juvenile justice system treatment, may warrant criminal sanctions and require waiver to the criminal justice system.

Objective risk assessments, described in Part IV, should be employed to determine the most appropriate sanction for each youth, with assessments based on the risk the offender poses to society, the nature of the offense for which the youth is committed, the number and nature of prior offenses, and the presence of other risk factors.

All programs must be small enough to ensure that youth receive individualized attention. Treatment plans need to be appropriate for each youth, and they should involve families whenever possible. Residential programs must have a strong aftercare component to involve the family and the community in reintegrating the youth into the community. Finally, a model graduated sanctions program should address
the same risk and protective factors described in detail in Part I.

**Overview of Research on Graduated Sanctions**

A review of the graduated sanctions research literature reveals that there is solid research in some areas but not in others. In areas in which limited research has been conducted, there is not enough information to draw significant conclusions.

One reason for this lack of research is the relatively small numbers of serious, violent, and chronic juvenile offenders. Small samples make it problematic for researchers to identify statistically significant differences. As a result, it is difficult to draw meaningful conclusions from studies of graduated sanctions, particularly those examining programs for the most serious offenders.

Another common problem for researchers conducting studies on graduated sanctions programs is finding a comparable control group. Practitioners often resist studies with random assignment. Yet without random assignment, researchers must identify a control group that is comparable to the experimental group. Such control groups often are not carefully selected, or the differences between the two groups are not taken into account in the analysis. As a result, it is unclear whether differences between the outcomes of experimental and control groups in such studies result from differences between the experimental and control programs or from differences between the youth each program serves.

However, some types of graduated sanctions programs have been well researched. For example, highly structured alternative programs for youth who would otherwise be incarcerated have been tested fairly extensively and reliable studies are available on intensive supervision programs (ISP’s). Examples of both program types are described in the model programs that follow.

Many large gaps still exist, however, in the body of research on programs for delinquent youth. Very little research has been conducted on violent juvenile offenders (the Violent Juvenile Offender study described in the model programs section of this report being one exception), and there is a shortage of high-quality research on aftercare.

The least research has been conducted in the area of immediate sanctions. Most of these programs have been poorly evaluated or not evaluated at all. Only a few studies exhibit a strong evaluation, substantial positive results, and a clear enough theoretical rationale to make the results understandable or replicable. Moreover, even where evaluations are reasonably strong, measures of effectiveness vary widely, and followup periods are short.

**Community-based graduated sanctions programs appear to be at least as successful as traditional incarceration in reducing recidivism, and the most well-structured graduated sanctions programs appear to be more effective than incarceration.**

Although the body of research on graduated sanctions is clearly limited, some conclusions can be drawn. Community-based graduated sanctions programs appear to be at least as successful as traditional incarceration in reducing recidivism, and the most well-structured graduated sanctions programs appear to be more effective than incarceration. In addition, community-based programs often cost significantly less than their traditional counterparts. However, more research is needed to determine more definitively the most effective approaches in dealing with serious, violent, and chronic offenders. What follows is an overview of the most relevant research conducted to date.

**Research on Individual Programs**

In the 1970’s, the claim that “nothing works” with juvenile offenders (Martinson, 1974) was widely disseminated among criminal justice researchers. Martinson and his followers argued that it was fruitless to attempt to rehabilitate serious, violent, and chronic juvenile offenders; they recommended instead
released from training schools throughout the State. The two groups that had remained in the community had recidivism rates lower than those of the training school group. The probation groups averaged 2.4 new arrests during the 4-year tracking period while the training school group averaged 5.3. The intensive probation group fared significantly better than the traditional probation group, although their differences leveled out after 1 year.

A study by Murray and Cox (1979) of the Unified Delinquency Intervention Services (UDIS) programs in Chicago included a new outcome measure—the "suppression effect," or reductions in the frequency of reoffending. The study compared youth assigned to a UDIS alternative program with youth sent to traditional Department of Corrections facilities. Both groups showed large reductions in the incidence of reoffending. The most intensive of the UDIS programs produced suppression effects comparable to institutionalization.

An evaluation by Greenwood and Turner (1993) of experimental aftercare programs in Detroit and Pittsburgh found little support for the effectiveness of aftercare. The two experimental programs shared common core features based on a Massachusetts model. These features included prerelease planning by the aftercare worker, youth, and family; an intensive level of supervision including several daily contacts; efforts to resolve family problems and to involve the youth in community activities; and highly motivated caseworkers. Youth in the program were released from residential placement 2 months early and received intensive aftercare supervision for the next 6 months. Researchers found that the experimental programs were implemented largely as planned.

Youth in the study, all of whom were returning home from residential placement, were randomly assigned to either the experimental programs or to traditional postrelease supervision. There were no significant differences between the experimental and control groups in number of rearrests, number of reconvictions, and severity of reoffenses. There were also no significant differences between the groups in self-reported offenses. The authors explained these disappointing results by noting the difficulty, as discussed earlier, in finding significant differences

Studies conducted since the 1960's have shown that community-based programs are at least as effective as traditional correctional programs. In the 1960's, the California Youth Authority, in a study carried out as part of the Community Treatment Project (CTP), randomly assigned youth to either an intensive community treatment program (with caseloads no larger than 12) or to traditional training schools. Palmer's early results (1971) concluded that the community-based group did better than the traditional group. After 1 year, the rate of parole failure for the former group was 18 percent, compared with 35 percent for the traditional group. After 2 years, the community-based group had a parole failure rate of 39 percent, compared with 60 percent for the traditional group. A later study, although critical of the level of success claimed earlier, concluded that the community-based group fared no worse than the traditional group (Lerman, 1975).

The Silverlake experiment, conducted by Empey and Lubeck (1971), studied juvenile offenders from Los Angeles County who were randomly assigned to either a county correctional facility (control group) or a small, community-based program emphasizing daily school attendance and intensive group therapy (experimental group). The re-arrest rates for the two groups were virtually identical—60 percent for the experimental group versus 56 percent for the control group. Empey and Lubeck concluded that enhanced community-based programs were as effective as traditional correctional placements. Significantly, the community program cost $1,700 per youth per year, considerably less than the traditional program, which cost $4,600 per youth per year.

Empey and Erickson (1972) conducted a similar study in Provo, Utah. Youth were randomly assigned either to traditional probation or intensive probation with daily counseling. The two groups were compared with one another and with another group of youth released from training schools throughout the State. By the late 1970's and afterwards, however, Martinson's conclusion had begun to be critically scrutinized. A substantial and growing body of evidence now suggests that some rehabilitation programs do work with juvenile offenders, and Martinson himself has renounced his earlier views (Martinson, 1979).

A greater focus on deterrence and incapacitation. By the late 1970's and afterwards, however, Martinson's conclusion had begun to be critically scrutinized. A substantial and growing body of evidence now suggests that some rehabilitation programs do work with juvenile offenders, and Martinson himself has renounced his earlier views (Martinson, 1979).
among small sample sizes. Each site had a sample of approximately 50 experimental and 50 control youth.

Taken together, these studies show that community-based programs can serve as safe, cost-effective alternatives to incarceration for many youth. Even the less favorable studies show community-based programs to be as effective as traditional training schools in reducing recidivism, and more encouraging studies suggest that carefully conceived and well-implemented alternative programs can be more effective than training schools. Additional studies of individual programs are discussed in this chapter’s model programs section.

**Taken together, these studies show that community-based programs can serve as safe, cost-effective alternatives to incarceration for many youth.**

**Research on State Systems**

In addition to studies of individual programs that provide alternatives to incarceration, studies have been conducted of State systems that emphasize alternative approaches. The Massachusetts Department of Youth Services (DYS) places less emphasis on incarceration than perhaps any other State in the Nation. In 1972, Massachusetts closed its traditional training schools. Today, the State relies on a sophisticated network of small, secure programs for violent youth coupled with a broad range of highly structured community-based programs for the majority of committed youth. Most of these community-based programs are operated by private, nonprofit agencies under contract with DYS. Secure facilities are reserved for the most serious offenders (approximately 15 percent of all commitments). The largest of the secure programs includes just 20 offenders.

The Massachusetts system was studied initially by Coates, Miller, and Öhlin (1978), who compared the outcomes of youth released in 1974 from the newly established community-based programs with a group released in 1968 from training schools before the 1972 reforms were enacted. The researchers reported that the average recidivism rates for youth in the community-based programs sample were higher than those for the training school sample (74 percent versus 66 percent). This finding may be partially explained by a decrease in less serious offenders being committed to DYS. In any case, a closer analysis of the data revealed that in those parts of the State where community programs were properly implemented, recidivism rates were equal to or slightly lower than those for the training school sample. The authors concluded that “regions that most adequately implemented the reform measures with a diversity of programs did produce decreases in recidivism over time . . . ” (p. 177). In addition, youth participating in community programs throughout the State developed more positive attitudes than did institutionalized youth.

In 1989, NCCD completed a second study of the Massachusetts community-based system (Krisberg, Austin and Steele, 1989) which revealed recidivism rates that were equal to or better than most jurisdictions throughout the country. Compared to their pre-DYS period, youth showed a significant decline in the incidence and severity of offending in the 12 months after entry into DYS community programs. These declines in offending were sustained during the next 2 years. NCCD also found that the Massachusetts approach was cost-effective: Massachusetts saved an estimated $11 million annually by relying on community-based care.

NCCD (Krisberg, Austin, Joe, and Steele, 1988) also completed a study of the Utah juvenile justice system, which, like Massachusetts, relies on community-based programs for most committed youth. Using a pre- and posttest design, the study found that although a high proportion of youth were rearrested, there was a substantial “suppression effect”; youth showed large declines in the frequency and severity of offending after correctional intervention.

Gottfredson and Barton (1992) found different results in a study of the closing of the Montrose Training School in Maryland. The experimental group consisted of youth who were committed to the Maryland Division of Youth Services (DYS) and placed in community-based programs after Montrose had been closed. The control group was made up of youth who had been incarcerated in Montrose before it was
closed. The researchers found that the control group outperformed the experimental group on most recidivism measures. This result is similar to that of the original Massachusetts study completed by Coates et al. (1978) although they did find positive results in the regions with strong program implementation. The Maryland study, like the original Massachusetts study, was conducted immediately after the closing of a training school when community-based programs were at the earliest stage of implementation. It may be that community-based programs need to operate and improve for several years before positive results will be found. Indeed, NCCD’s later Massachusetts study found such positive results.

Rivers and Trotti (1989) conducted a study of 39,250 males born between 1964 and 1971 who had official delinquency records in South Carolina. The researchers traced the number of these youth who were incarcerated or placed on probation as adults. Time at risk varied from approximately 1 year for the 1971 cohort to approximately 8 years for the 1964 cohort. The study found that institutionalization as a juvenile substantially increased the chances that a delinquent would reoffend as an adult. The recidivism rate for delinquent youth who were never institutionalized was 14 percent, compared with 46 percent for youth who were institutionalized. Moreover, this percentage increased with each additional institutionalization, to a rate of 67 percent for youth with four or more institutionalizations. The study also found an increase in recidivism rates with increased delinquency referrals and increased delinquency adjudications. The authors concluded that their findings “effectively underscore the need to bolster programming for early, effective intervention in order to prevent the recurrence of delinquent behavior” (p. 17).

The studies of State systems highlighted above, in conjunction with the studies of individual programs discussed earlier, suggest that well-structured community-based programs are at least as effective as, and sometimes more effective than, traditional training schools, and at a lower cost. Community-based programs address two other important issues: overuse of incarceration and racial disparity in the incarcerated population. NCCD’s Juveniles Taken Into Custody (JTIC) study (DeComo, Tunis, Krisberg, and Herrera, 1993), which analyzed data from 28 State juvenile correctional systems, found that only 14 percent of the juveniles in State institutions were committed for serious and violent crimes. More than half of those in State institutions were committed for property and drug crimes and were experiencing their first confinement in a State institution. Another study of incarcerated youth in 14 States found that depending on the State, only 11 percent to 44 percent of the youth were committed for serious and violent offenses (Krisberg et al., 1993). This study determined that based on objective public safety risk factors, an average of 31 percent of incarcerated juveniles in these States could be safely placed in less secure settings and that many youth are needlessly incarcerated.

A study of incarcerated youth in 14 States found that depending on the State, only 11 percent to 44 percent of the youth were committed for serious and violent offenses.

The JTIC data also indicated that minority youth are disproportionately incarcerated in State institutions (Austin, Krisberg, DeComo, Del Rosario, Rudenstine, and Elms, 1994). This finding is based on prevalence rates, which measure the estimated proportion of the at-risk population that will be taken into State custody at least once as juveniles. The prevalence rate for African Americans is 5 times that for whites (3.01 percent to 0.59 percent, respectively). For young African-American males, this rate is even higher—1 in 18 African-American males (5.52 percent) are taken into custody before they reach adulthood. This is 5 times higher than the prevalence rate for white males (1.05 percent). Prevalence rates for African-American males are particularly high in New Hampshire (18.96 percent, or 1 in 5), Iowa (15.44 percent), and Wisconsin (14.98 percent). The overincarceration of minority youth in State institutions is another reason States should consider decreasing their reliance on traditional training schools.
**Meta-Analyses**

Through meta-analyses, researchers can synthesize the results of multiple program evaluations. Several recent meta-analyses challenge the claim that “nothing works” with juvenile offenders and support the notion that rehabilitation can be effective. They also identify specific strategies that appear most promising.

Mark Lipsey (1992) has completed the most comprehensive meta-analysis of delinquency studies to date. His analysis incorporates 443 such studies, 373 of which were published between 1970 and 1987. It includes studies of both institutional programs and community-based programs. All of the studies had experimental or quasi-experimental designs. Lipsey found that 64 percent of the study outcomes favored the treatment group, 30 percent favored the control group, and 6 percent favored neither group. The primary outcome measure in 85 percent of the studies was formal contact with the police or juvenile justice system (arrests, police contact, court contact, probation contact, parole contact, institutionalization, or institutional disciplinary contact). One such outcome measure was selected per study to be included in the meta-analysis. Lipsey’s study tested the factors that had the greatest impact on program outcomes. Factors associated with the evaluation method (such as sample size, outcome measure, and equivalence of treatment and control groups) and factors associated with the type of treatment (such as length of treatment, location of treatment, and nature of treatment) were included in a multiple regression analysis. The results showed that both evaluation method and treatment type influence juvenile delinquency studies. Collectively, the evaluation method variables appeared to be more influential than the treatment variables. However, of the individual variables, the type of treatment was the most influential. Programs employing behaviorally oriented, skill-oriented, and multimodal treatment methods produced effects larger than those of other treatment approaches. Deterrence and “shock” approaches were associated with negative results. In addition, Lipsey found that the successful treatment approaches produced larger positive effects in community as opposed to institutional settings.

Garrett (1985) analyzed 111 quasi-experimental studies of adjudicated delinquents conducted between 1960 and 1983. Most of the studies (81 percent) were from institutional treatment programs; the rest (19 percent) were from community residential treatment programs. Diversion, probation, and parole programs were not included in the analysis. Three-fourths of the studies involved a control group; the remaining one-fourth used a pre- and post-design with no comparison group. The majority of studies (52 percent) employed “more rigorous” experimental designs (random, matched, pretest-design equation assignment procedures); 48 percent were “less rigorous” (convenience sample, pre- and post-design with no controls, and other nonrandom). The outcome measures used varied from study to study and included recidivism, institutional adjustment, psychological adjustment, and academic performance.

*Garrett concluded that the results are “encouraging in that adjudicated delinquents were found to respond positively to treatment on many criteria. The change was modest in some cases, substantial in others, but overwhelmingly in a positive direction.”*
than did psychodynamic treatment or life skills treatment. The individual treatment approaches with the largest positive effects were contingency management (+.86), family therapy (+.81), and cognitive-behavioral (+.58). Garrett concluded that “the results of the meta-analysis suggest that treatment of adjudicated delinquents in an institutional or community residential setting does work” (p. 287).

Davidson, Gottschalk, Gensheimer, and Mayer, 1984; Gottschalk, Davidson, Gensheimer, and Mayer, 1987; Gensheimer, Mayer, Gottschalk, and Davidson, 1986; and Mayer, Gensheimer, Davidson, and Gottschalk, 1986, analyzed 90 studies of institutional and community-based programs completed between 1967 and 1983. The results of their analyses were inconclusive. The researchers found that 60 percent of the studies favored the experimental group over the control group. However, when the effect sizes were analyzed, the difference between the two groups did not reach conventional levels of statistical significance. Behavioral interventions were found to have greater positive effects than other types of interventions such as group psychotherapy and educational/vocational.

Another less encouraging study, Whitehead and Lab’s (1989) meta-analysis of 50 studies of institutional and community-based programs, concluded that “correctional treatment has little effect on recidivism” (p. 291). This conclusion, however, was based on adopting an extremely rigid definition of success. Andrews et al. (1990) challenged this conclusion in a meta-analysis that included 45 of the 50 studies used by Whitehead and Lab and added 35 additional studies of both juvenile and adult programs. The researchers coded the programs into four categories:

- Programs with “appropriate” correctional service.
- Programs with “inappropriate” correctional service.
- Programs with unspecified correctional service.
- Programs with nonservice criminal sanctioning.

The appropriate correctional service group included:

- Service delivery to higher risk cases.
- All behavioral programs (except those involving delivery of service to lower risk cases).

- Comparisons reflecting specific responsivity-treatment comparisons.
- Nonbehavioral programs that clearly stated that criminogenic need was targeted and that structured intervention was employed (p. 379).

The inappropriate correctional service included:

- Service delivery to lower risk cases and/or mismatching according to a need/responsivity system.
- Nondirective relationship-dependent and/or unstructured psychodynamic counseling.
- All milieu and group approaches that emphasized within-group communication but lacked a clear plan for gaining control over procriminal modeling and reinforcement.
- Nondirective or poorly targeted academic and vocational approaches.
- “Scared Straight” (p. 379).

The authors reaffirmed the importance of rehabilitation, concluding that “appropriate correctional service appears to work better than criminal sanctions not involving rehabilitative service and better than services less consistent with . . . principles of effective rehabilitation.”

Andrews, Zinger, Hoge, Bonta, Gendrew, and Cullen (1990) found that programs with appropriate correctional service had the most positive outcomes, followed by unspecified correctional service. Inappropriate service and nonservice criminal sanctioning were both associated with negative outcomes. The authors reaffirmed the importance of rehabilitation, concluding that “appropriate correctional service appears to work better than criminal sanctions not involving rehabilitative service and better than services less consistent with . . . principles of effective rehabilitation” (p. 384).
In a comprehensive review of existing meta-analyses, Palmer (1992) summarized the findings in four main points:

• When individual programs were grouped together and analyzed as a single, generic approach (e.g., counseling), many approaches did not seem to successfully reduce recidivism.

• Despite this finding, there were many individual programs that appeared to be successful. The experimental group outperformed the controls in many or most individual programs. Specifically, experimentals significantly outperformed controls in at least 25 to 35 percent of all programs, while controls significantly outperformed experimentals in just under 10 percent. Statistically successful individual programs could be found in almost every generic program category, even if the category as a whole appeared to be unsuccessful.

• Although generic approaches did not have better outcomes, some were associated with equal outcomes. Such approaches seem to be as effective as traditional approaches and often cost much less.

• At the generic level, the interventions considered most successful were behavioral, cognitive-behavioral, skill or life-skills oriented, multimodal, and family oriented.

Palmer concluded that “the large number of positive outcomes that have been found in the past three decades with studies whose designs and analysis were at least adequate leaves little doubt that many programs work” (p. 76).

**Literature on the Characteristics of Effective Programs**

Two sets of researchers have identified what they believe are the critical components of successful programs for delinquent youth. Altschuler and Armstrong (1984) cited six key components:

• Continuous case management.

• Emphasis on reintegration and reentry services.

• Opportunities for youth achievement and involvement in program decisionmaking.

• Clear and consistent consequences for misconduct.

• Enriched educational and vocational programming.

• A variety of forms of individual, group, and family counseling matched to youth’s needs.

Greenwood and Zimring (1985) also identified several features essential for program success. These features, similar to those noted by Altschuler and Armstrong, include the following:

• Opportunities for success and development of a positive self-image.

• Youth bonding to prosocial adults and institutions.

• Frequent, timely, and accurate feedback for both positive and negative behavior.

• Reduced influence of negative role models.

• Recognition and understanding of thought processes that rationalize negative behavior.

• Opportunities for juveniles to discuss childhood problems.

• Program components adapted to the needs of individual youth.

Armstrong and Altschuler (1994) later described the critical components of a model aftercare program in an OJJDP-funded study. Their Intensive Aftercare Program (IAP) model is particularly important because there is “an almost total lack of published information about juvenile aftercare, especially with regard to high-risk offenders . . . ” (pp. 189–190). Armstrong and Altschuler began their study with an assessment of the current state of juvenile aftercare. The assessment focused on a review of the aftercare literature, a description of innovative aftercare programs identified through a national survey, and an analysis of site visits to these programs.

Based on findings from the assessment stage, Armstrong and Altschuler developed their IAP model. IAP is a balanced, highly structured, and comprehensive model of intervention for serious, violent, and chronic juvenile offenders returning to the community following a residential placement. It incorporates intensive intervention strategies for both surveillance
and rehabilitation. The model is theory driven and provides a framework of individual assessment and differential response designed to meet the needs of juvenile offenders.

The IAP model is based on the following five fundamental principles:

• Preparing youth for progressively increased responsibility and freedom in the community.

• Facilitating youth-community interaction and involvement.

• Working with both the offender and targeted community support systems (e.g., families, peers, schools, and employers) on qualities needed for constructive interaction and the youth’s successful community adjustment.

• Developing new resources and support where needed.

• Monitoring and testing the youth and the community concerning their ability to deal with each other productively.

Case management is central to the IAP model. Case management components include assessment, classification, and selection criteria; individual case planning that incorporates a family and community perspective; a mix of intensive surveillance and services; a balance of incentives and graduated consequences coupled with the imposition of realistic, enforceable conditions; and brokering of services with community resources and linkages with social networks. The model stipulates that aftercare case managers become actively involved with the juvenile at the beginning of secure confinement.

Armstrong and Altschuler discuss two other key elements of the IAP model. Organizational and structural characteristics refer to the context in which the IAP will operate. This context will vary from jurisdiction to jurisdiction; different jurisdictions will have different types of institutions and agencies involved in IAP; and cooperation among institutions and agencies will be crucial to IAP success. The final elements of the IAP model are development of a management information system and ongoing program evaluation.

Guidelines for Effective Programs

Through an extensive program search discussed below, NCCD studied the characteristics of hundreds of juvenile programs. Information gained from the program search complements the findings of the research literature in identifying the crucial components of successful graduated sanctions programs.

NCCD found that the most effective programs are those that address key areas of risk in the youth’s life, those that seek to strengthen the personal and institutional factors that contribute to healthy adolescent development, those that provide adequate support and supervision, and those that offer youth a long-term stake in the community. These principles apply to youth at all stages of the continuum of care. What makes for effectiveness in aftercare or in residential treatment also works in diversion programs. What is most important, the research suggests, is not the particular stage of intervention, but the quality, intensity, direction, and appropriateness (see Andrews et al., 1990) of the intervention itself.

Although this might seem obvious, emphasis on the quality and nature of the intervention has not usually driven the development of graduated sanctions programs, particularly immediate intervention programs. Most of the discussion about how to respond to youth (including serious, violent, and chronic offenders) who have come into contact with the justice system has a laundry-list character. It lumps together everything that is not either primary prevention or
“tertiary” involvement with the system—a variety of unrelated and often inadequately evaluated strategies ranging from peer juries to school counseling to informal probation to intensive outreach and tracking programs.

The laundry-list approach fails to differentiate between substantive interventions (e.g., counseling, remedial education) and procedural or administrative categories (e.g., diversion). A greater problem is that there is no coherent concept of youth development—even a broad, eclectic one—underlying the numerous programs that are lumped together. Therefore, it is often difficult to determine why the programs were expected to be effective. It is therefore essential to examine the emerging literature to gain a more coherent sense of which strategies appear to be effective, which appear ineffective, and which appear promising but require more research.

The strategies that appear not to work include conventional individual psychological counseling in or out of the juvenile justice system; deterrence approaches such as Scared Straight; and most peer-group counseling strategies in which offenders talk together without substantial interventions to address their underlying issues (Dryfoos, 1990, pp. 145–147).

Slightly more effective strategies are short-term community service, restitution, and mediation programs, among others. However, the effectiveness of such programs in reducing recidivism or deflecting delinquent careers is slight at best. There is only limited evidence, for example, that restitution programs have reduced offending (Schneider, 1986). On the other hand, some evaluations suggest that they increase both the offenders’ and the victims’ satisfaction with the justice process, deliver significant restitution in the form of financial repayments and/or community service, and make victims less fearful of being victimized again (Umbreit and Coates, 1992).

There are common threads among programs that produce negative or inconclusive findings. Such programs often provide only one-time or short-term contact with offenders. Programs of shorter duration fail to address the key social or personal problems that contribute to the youth’s delinquent behavior, and if they do address key issues, they often treat them as isolated problems separate from the rest of the young person’s life. Ineffective programs rarely have a clear underlying developmental rationale. They seldom attempt to alter the youth’s “ecological” or institutional situation by improving family functioning, for example, or improving work opportunities, or matching youth with appropriate schools. Programs that appear to make a difference in youth behavior are those that engage individual problems and deficits, have an underlying developmental rationale, and attempt to alter the youth’s ecological and institutional conditions. Earlier reviews of the evidence (e.g., Wright and Dixon, 1977; Sechrest, White, and Brown, 1979) have repeatedly found that overall implementation factors such as the consistency and integrity of the intervention are more important than the specific intervention model or its specific theoretical underpinning. Within that general framework, however, some crucial themes are common to the most successful and carefully evaluated programs:

- They are holistic (comprehensive or multi-systemic), dealing simultaneously with many aspects of youth’s lives.
- They are intensive, often involving multiple contacts weekly, or even daily, with at-risk youth.
- They operate mostly, though not exclusively, outside the formal juvenile justice system, under a variety of auspices: public, nonprofit, or university.
- They build on youth’s strengths rather than focusing on their deficiencies.
- They adopt a socially grounded approach to understanding a youth’s situation and treating it rather than an individual or medical-therapeutic approach.

These themes apply at the substantive level. On the process or implementation level, the programs that work are usually those that, as with other successful interventions into problematic behavior, are relatively long-term and intensive, are delivered by energetic and committed though not necessarily highly trained staff, and are consistent in achieving what they set out to do.

Successful programs also have a case management component that begins at intake and follows youth through various program phases until discharge. Case management also involves the development of indi-
Individual treatment plans to address the needs of each youth. These treatment plans are updated on a regular basis. Successful programs provide frequent feedback, both positive and negative, to youth on their progress. Positive behavior is acknowledged and rewarded, while negative behavior results in clear and consistent sanctions.

Other essential program components include effective education, vocational training, and counseling strategies tailored to the individual needs of juveniles. The most effective type of counseling seems to be a cognitive-behavioral approach. In addition to individual and group counseling, the counseling component must include family counseling because many problems of youth are caused or exacerbated by family dysfunction.

Successful programs provide frequent feedback, both positive and negative, to youth on their progress.

In addition to family issues, successful programs also typically address youth’s community, peers, school, and work. Research findings suggest that youth should be treated in the least restrictive environment possible, preferably while living with their families or remaining within their communities. However, for public safety reasons, community-based treatment is not always appropriate, nor is family-based treatment when the family is dysfunctional or nonexistent.

Other key components of successful programs concern the intensity of services for youth who remain in the community. Successful community programs have low caseloads to ensure that youth receive constant and individualized attention. Frequent face-to-face contacts, telephone contacts, and contacts with parents, teachers, and employers are essential to provide close monitoring and consistent support for youth. This support is most successful if its intensity is diminished gradually over a long period.

Finally, successful programs reintegrate youth into their homes and communities gradually. Intensive aftercare services are crucial to program success, particularly for residential programs.

Effective Programs

The principles enunciated thus far can be illustrated by examining specific intervention programs that are based on these principles. The illustrations that follow are examples of successful programs and approaches that have been carefully conceived, adequately implemented, and rigorously evaluated. Although the evidence of success is not absolutely conclusive, research on the programs has been careful and well designed, and the findings match the evidence accumulating from broader meta-analyses of delinquency intervention programs. The findings have added strength because programs found to be successful have many crucial elements in common. Evidence that one program works, therefore, is buttressed by similar evidence from the others.

Program Search Methodology

In December 1993, NCCD initiated an exhaustive search of prevention and intervention programs for serious, violent, and chronic juvenile offenders. Groups contacted by NCCD included Federal agencies, OJJDP State Advisory Groups (SAG’s), State youth correctional officials, and child welfare organizations and foundations. NCCD also contacted major national professional organizations, including the American Probation and Parole Association, Police Executives’ Research Forum, National Association of Black Law Enforcement Executives, International Association of Chiefs of Police, National Council of Family and Juvenile Court Judges, American Correctional Association, National Juvenile Detention Association, National Governors Association, National Conference of State Legislatures, National District Attorneys Association, National Association of Juvenile Correctional Agencies, and International Association of Residential and Community Alternatives. Letters were also sent to foundations involved in violence issues including the Robert Wood Johnson Foundation, Ford Foundation, Pew Charitable Trusts, Annie E. Casey Foundation, Edna McConnell Clark Foundation, and California Wellness Foundation. Finally, NCCD posted announcements about the
program search and requests for program information in the Criminal Justice Newsletter and Juvenile Justice Coalition News.

NCCD contacted the programs identified by the search and requested four types of information:

- Program description.
- A clear statement of the program philosophy, including the risk and protective factors addressed by the program.
- Target population.
- Evaluation data.

NCCD requested the same information from programs identified through the database for the National Center for Juvenile Justice’s (NCJJ) OJJDP-funded project “Juvenile Prevention and Treatment Programs: What Works Best and For Whom.” In addition, NCCD contacted all of the programs that won OJJDP Gould-Wysinger Awards in 1992 and 1993. A final source of program information was Attorney General Reno, who in public appearances around the Nation requested that people send her information on innovative juvenile programs. Program information received by the Attorney General’s office was forwarded to NCCD.

The program search yielded information from 209 programs, including 122 intervention programs, 38 prevention programs, and 49 programs that had both prevention and intervention components. The most promising programs—based on both descriptive information and evaluation data—are discussed below. These programs, though imperfect, embody the core principles set forth in this document.

Immediate Sanctions Programs

The lack of consistent intervention with juvenile offenders soon after their initial contact with the police or other authority has long been recognized as perhaps the largest single gap in services for troubled youth.

Too often, the juvenile justice system’s response to young offenders is either too much or too little. The system may resort too quickly to secure confinement or to out-of-home placement; or it may let offenders off without significant consequences, often because facilities are overcrowded or needed services are not available; or it may shunt youth into ordinary probation in overburdened agencies that are unable to provide supervision or support.

This is not to say that every young offender needs intensive, protracted intervention. Some clearly do not, and attempting to extend such a response to the more than 1 million juveniles arrested each year would strain resources to the breaking point.

But for some youth, the failure to intervene—strategically and appropriately—means that they fall through the cracks of the juvenile justice system and of social agencies that might act on their behalf. For youth on a trajectory toward serious or repeated offending, lack of intervention can be disastrous, resulting in an all-too-common pattern: several encounters with authorities; short-term detentions with no coherent, intensive interventions; repeated offenses; and eventual incarceration in juvenile or adult corrections facilities. Another ineffective but common pattern is placement of youth in secure confinement not because community safety requires it but because it is the only way to ensure that they receive even minimal services. This practice is harmful to youth, detrimental to community safety, and enormously costly—in missed prevention opportunities and in confinement costs.
Immediate sanctions programs provide the crucial first rung on the ladder of graduated sanctions. Here are examples of four promising immediate sanctions programs.

**Bethesda Day Treatment Center**

The Bethesda Day Treatment Center, a private, non-profit corporation established in West Milton, Pennsylvania, in 1983, provides intensive day treatment for preadjudicated and adjudicated youth who have committed delinquent or status offenses. Youth are referred to Bethesda from nine Pennsylvania counties.

Bethesda provides up to 55 hours of services per week to youth who reside at home. It administers both school and afterschool programs. The school program operates from 8:30 a.m. to 2:30 p.m. each day; the afterschool program operates from 3 p.m. to 7:45 p.m. Some youth attend both programs; others attend regular school during the day and come to Bethesda for the afterschool program.

The school program provides individualized education; the afterschool program focuses on a variety of treatment services. Clients’ families are integrally involved in the treatment process. Treatment services include individual, group, and family counseling; drug and alcohol counseling; life skills development; and opportunities for employment. Work experiences are provided for all clients of working age; clients are required to contribute the majority of their paychecks to pay restitution, court costs, and fines.

Bethesda serves as an alternative to residential placement for some youth. For other youth returning to the community from residential placements, the program serves as part of an aftercare plan. The average length of participation at Bethesda is approximately 6 months, although some youth continue with the program for up to 12 months. The staff-to-client ratio is 1 to 3.

A preliminary study of the Bethesda program revealed a recidivism rate of only 5 percent in the first year after discharge, far lower than State and national norms. This finding, while impressive, must be viewed with extreme caution because the sample size was very small (n=20), and the study did not incorporate a control group.

**Choice Program**

The Choice program is an intensive monitoring and multiple-service program for high-risk youth at five sites in and around Baltimore, Maryland. It is similar to the Key Tracking Program that originated in Massachusetts in the 1970’s in response to the State’s deinstitutionalization of most young offenders. The Key program in Massachusetts has not been carefully evaluated, despite considerable statewide support and anecdotal evidence of success. Baltimore’s Choice program, however, has recently undergone an encouraging, if preliminary, evaluation.

Choice is an intensive, home-based, family-oriented program operating under the auspices of the Shriver Center of the University of Maryland at Baltimore County (UMBC). The program addresses the problem of youth in the context of their families and wider communities and develops highly individualized treatment plans for each participant. Youth are referred to Choice from Maryland’s Department of Juvenile Services and other public agencies. Program participants include numerous status offenders and youth arrested for minor delinquent activities. More serious, violent offenders are excluded from the program, as are youth requiring residential substance abuse treatment.

*An intensive, month-long assessment period enables caseworkers to sort out the range of problems the referred youth is facing—at home, at school, or with physical health—and to identify and coordinate the resources needed to deal with them.*

Choice is distinctive in the intensity of contact between caseworkers and clients—three to five contacts per day during the initial stages—and in the limits placed on length of service for caseworkers who usually are recent college graduates. To avoid the burnout that often accompanies long service in a program working with difficult clients, caseworkers remain with the program for approximately 1 year.
An intensive, month-long assessment period enables caseworkers to sort out the range of problems the referred youth is facing—at home, at school, or with physical health—and to identify and coordinate the resources needed to deal with them. The caseworker meets regularly with family members and school personnel and may call on outside experts including psychologists and substance abuse counselors when needed. The close and intensive daily contact allows caseworkers to closely track the client’s progress and the obstacles that arise and also enables caseworkers to function as role models—offering consistent guidance and support. The typical length of participation is 4 to 6 months.

A preliminary evaluation by the UMBC psychology department, although based on relatively few cases and a short-term followup, is quite positive. The evaluation (Maton, Seifert, and Zapert, 1991) compared 75 youth referred to Choice with 39 controls taken from a computerized database of all arrested youth in Baltimore, matched by sex, race, age, and offense type. About two-thirds of both groups were African-American, and slightly over three-fourths were male, with a mean age of just over 15. About 40 percent of each group had been arrested for what the evaluators termed medium offenses, including thefts and simple assaults; small proportions (1 percent and 3 percent respectively for Choice and controls) had been arrested for major offenses, including assault with intent to maim, murder, or rape, and for felony weapons charges; the rest had been arrested for minor offenses including alcohol and loitering violations.

There were strong and statistically significant differences between the Choice group and the control group on both number and seriousness of arrests while in the program. Twenty-one percent of Choice youth were arrested during the intervention period, compared with 44 percent of control youth; 9 percent of Choice clients were arrested more than once compared with 15 percent of control youth. Sixteen percent of the Choice youth were arrested for medium or major offenses compared with 31 percent of control youth, although the one major offense arrest was a Choice youth.

At a 6-month followup evaluation after leaving Choice, the sample size had dwindled considerably, making the results more tentative. But of 33 former Choice youth and 20 matched control youth, 76 percent of the Choice youth had no arrests within 6 months, compared with 55 percent of the control youth. Somewhat fewer Choice youth (24 percent compared with 30 percent) had been arrested for medium or major offenses.

**Michigan State Diversion Project**

Like Choice, the Michigan State Diversion Project for arrested juveniles uses college students as the principal caseworkers. The program was based on three recurring themes in research and program experience with juvenile offenders: they respond better if treated outside the juvenile justice system; the youth’s community and family are the natural context for intervention; and service delivery by nonprofessionals may be both more effective and less costly than relying on credentialed professionals (see similar early findings in Wright and Dixon, 1977).

Early research (Davidson, Seidman, Rappaport, Berck, Rapp, Rhodes, and Herring, 1977) found significant decreases in recidivism in a community-based diversion program in Michigan when active behavioral interventions were compared with a control group of similar youth released outright. In a later evaluation, Davidson and his coworkers (1987) extended this analysis, randomly assigning a sample of more than 200 young offenders to one of five separate treatment strategies, while a control group received normal juvenile justice services.

The youth workers in the program were college students who received 8 weeks of training in behavioral intervention and advocacy and then worked one on one with clients in the community. The average age of offenders in the study was 14. Twenty-six percent were members of minority groups with an average age of 14. Their offense histories were more serious than those of the Choice youth. They averaged 1.5 petitions to court for a wide range of person, property, and status offenses; nearly three-fifths were charged with either larceny or breaking and entering.

Referred youth were randomly sorted into several treatment strategies, each lasting about 18 weeks and involving 6 to 8 hours per week of contact with the caseworkers in the juveniles’ home, school, and
Thus, active, hands-on intervention of several kinds worked better than normal processing of offenders through the juvenile system, but only if they were thoroughly separated from the system. Even a nonspecific strategy that provided youth with steady attention from a stable caseworker (the Placebo Condition) had a positive impact, but results were better, in terms of recidivism, in the three more active strategies implemented outside the juvenile justice system. The researchers note that these findings should be interpreted with caution because the samples were small and because no significant effects were found for measures of self-reported delinquency. Nevertheless, the research provides additional evidence of the effectiveness of intensive approaches that serve delinquent youth on their own turf, the importance of diverting appropriate youth from the formal juvenile justice system, and the value of basing programs on a coherent model with effective training and supervision.

The North Carolina Intensive Protection Supervision Project

The North Carolina Court Counselors Intensive Protective Supervision Project (IPS), another well-evaluated program, shares several key features with the programs already mentioned, but with some interesting differences. Unlike the other programs, IPS intervened within the juvenile justice system. Caseworkers worked intensively (initially up to several contacts a day) with offenders and arranged for additional professional services when needed. The program was designed for status offenders deemed at high risk of becoming serious, violent, and chronic offenders.

The project operated at four sites in North Carolina during the late 1980’s and included an independent, randomized experimental evaluation by a team of researchers from Duke University. Each site employed a counselor who received training in the goals of the project but little special training in counseling, supervision, or therapeutic techniques. This was a deliberate choice based on the premise that if the program succeeded, it would be replicable elsewhere without the need to hire highly trained, expensive professionals. Instead, counselors would arrange for specialized services.

Youth referred to the program were deemed undisciplined by the North Carolina Juvenile Services Division and were randomly assigned to either intensive...
Intermediate Sanctions Programs

Intermediate sanction programs are designed for youth whose offenses are too serious for placement in immediate sanction programs but not serious enough for placement in secure corrections. Such youth are usually repeat property offenders or first-time serious offenders. Intermediate sanctions encompass a diverse range of programs, both nonresidential and residential. Types of intermediate sanctions include intensive supervision programs, boot camps, wilderness programs, and community-based residential programs.

Family and Neighborhood Services Project

The Family and Neighborhood Services (FANS) project is a public program in South Carolina that employs the principles of “multisystemic” therapy—a “highly individualized family- and home-based treatment” designed to deal with offenders in the context of their family and community problems (Henggeler et al., 1992). Based in a community mental health center, the program represents a cooperative effort between the State’s Department of Youth Services and Department of Mental Health. FANS attempts to avoid the institutionalization of seriously troubled youth. The program is rooted in a developmental model derived partly from Urie Bronfenbrenner’s “ecological” approach—the idea that the adolescent is “nested” in a series of institutions (family, school, peers, and community) and that work with the youth must involve several or all of those institutions, hence multisystemic.

Youth referred to FANS from the Department of Youth Services were at imminent risk of out-of-home placement because of the seriousness of their offense histories. They averaged 3.5 previous arrests and 9.5 weeks of previous incarceration. Over half had at least one arrest for a violent crime, including manslaughter, assault with intent to kill, and aggravated assault. Seventy-seven percent of the sample were male, and 56 percent were African American. More than one-quarter lived with neither biological parent.

The program employed therapists with master’s degrees who were assigned small caseloads of four families each. The therapists worked with the families

The IPS project caseloads were small—no more than 10 youth per counselor compared with 35 to 50 per counselor in regular probation.

Sixty-seven percent of the sample youth were age 14 or younger, two-thirds were white, and two-thirds were female. About 20 percent had a prior referral for a status offense, and 15 percent had a prior referral for a delinquent offense. A sophisticated project evaluation (Land et al., 1990) found considerable success in keeping participants from moving from status offenses to delinquency. Participation in the IPS group reduced the likelihood of a delinquent offense during the course of the program by about 60 percent compared with the regular probation control group. The effect was not significant, however, for IPS youth with a prior referral for delinquency.

Once again, the findings must be taken cautiously, given the small samples and relatively short followup. The researchers’ statement that the IPS project “must be judged a success” (Land et al., 1990, p. 604) was tempered by their later finding that widespread burnout among counselors prevented the program from continuing to demonstrate clear successes (Land, McCall, and Williams, 1992). The findings do suggest, however, that when properly implemented, consistent, intensive interventions can help prevent the escalation of minor offenses into serious delinquency.

protective supervision or ordinary probation services. In the IPS project, caseloads were small—no more than 10 youth per counselor compared with 35 to 50 per counselor in regular probation. Among other advantages, this allowed IPS counselors to spend more time working with families and maintaining intensive contact with clients. During the formal assessment period, counselors met regularly with youth and their families and arranged for an external evaluation by a mental health professional. This professional identified appropriate service providers, who were then brought together in a meeting to define an individualized service plan. For up to a year, the counselor, along with contracted service providers, made regular home visits.
on average for just over 4 months. Treatment integrity was maintained through a brief training program in the principles of multisystemic therapy and regular supervision and feedback from the program’s directors. The caseworkers were available on a 24-hour basis and saw the juvenile and the family as often as once daily, most often in the juvenile’s home.

The project was evaluated using a random-assignment design that compared program participants with youth who received the regular services provided by the Department of Youth Services. The latter youth received normal probation treatment, including at least once-monthly visits with probation officers; some who did not comply with probation orders were sent to institutions. Though many of the “usual services” youth were referred by DYS for mental health services, few substantive services were delivered because of the relative lack of serious alternative programs in the community (Henggeler et al., 1992, p. 955).

The evaluation findings were very encouraging despite considerable attrition, especially in the usual services group. Fifty-nine weeks after the initial referral, there were significant positive differences in incarceration, arrests, and self-reported offenses between FANS and control youth. FANS participants had slightly more than half as many arrests as the usual services control youth: 68 percent of control youth experienced some incarceration compared with 20 percent of the FANS group, and 58 percent of FANS youth had no arrests compared with 38 percent of control youth. These findings were reinforced by self-report measures and by favorable changes among the FANS group regarding family cohesion and reduced aggression with peers.

Moreover, these effects were found equally among youth of varying ethnic backgrounds and both genders, as well among youth with differing arrest and incarceration histories. The results are particularly noteworthy because the referred youth were serious offenders who, with their families, “presented extremely serious and long-standing problems” (Henggeler et al., 1992, p. 958). Even given the intensity of the intervention, costs were relatively low, averaging $2,800 per client for a period of several months, compared with more than $16,000 for the usual course of institutionalization in South Carolina.

Lucas County Intensive Supervision Unit

The Lucas County, Ohio, Intensive Supervision Unit (ISU), begun in 1987, is operated by the juvenile court as part of the court probation department. Nonviolent felony offenders committed to the Ohio Department of Youth Services for the first time are the target population. The program does not accept youth convicted of drug trafficking or weapons offenses.

The theoretical basis for the program is the belief that delinquency is related to a breakdown of family functioning and other environmental factors. Thus, it is crucial that youth remain in their own homes and communities while they address these issues.

Fifty-nine weeks after the initial referral, there were significant positive differences in incarceration, arrests, and self-reported offenses between FANS and control youth.

ISU uses case management and surveillance services and includes four phases. Youth begin the program in Phase I under house arrest. As they exhibit increased responsibility and socially appropriate behavior—measured by number of credit days earned—they move to successive phases. With each new phase, youth gain more freedom and privileges. At the start of each phase, a juvenile must pass a test on the rules and expectations of that phase.

The ISU is designed to provide control and treatment for youthful offenders. While the level of control diminishes as the youth progresses through the four phases, the treatment components remain high throughout the program. A comprehensive treatment plan is developed for each youth. The plan may include individual, family, and group counseling; psychological assessment for the youth and family; assessment for chemical dependency of the youth and family members; school evaluations and testing; random urinalysis; and restitution and community service.

ISU has a maximum enrollment of 60 youth. ISU probation officers have average caseloads of 15 youth.
Initially, probation officers monitor their clients closely. The level of surveillance decreases as the juvenile moves to successive phases. In Phase I, there are two random surveillance contacts per day, two counselor contacts per week, and one meeting with the family per week. In Phase IV, there are 20 surveillance contacts, 2 counselor contacts, and 1 family meeting per month.

NCCD’s independent evaluation of ISU (Wiebush, 1993) used a quasi-experimental design to compare the outcomes of ISU youth (n=81) with a group of youth who were eligible for ISU but instead were incarcerated and then released to parole supervision (n=76). Analysis of the youth’s preprogram characteristics showed that there were few differences. Outcome measures included rearrest, readjudication, and incarceration. All youth were tracked during their first 18 months in the community. For ISU youth, tracking began with program placement; for incarcerated youth, tracking began with release to parole.

The results showed that there were no significant differences between the two groups in the extent or seriousness of recidivism, except that the ISU youth had more technical violations. It was concluded that ISU was as effective as incarceration for serious offenders. Moreover, the ISU cost $6,020 per youth per year, compared with $32,320 per youth per year for incarceration.

**Wayne County Intensive Probation Program**

The Wayne County Intensive Probation Program (IPP) in Detroit, Michigan, is administered by the juvenile court and operated by the court probation department and two private, nonprofit agencies under contract with the court. The IPP target population is adjudicated delinquents between ages 12 and 17 who have been committed to the State Department of Social Services (DSS). The State funded program was begun in 1983 to reduce the level of delinquency commitments.

Youth referred to IPP are placed in one of three programs for casework services and supervision: the Probation Department’s Intensive Probation Unit (IPU); the In-Home Care Program, operated by Spectrum Human Services, Inc.; or the State Ward Diversion Program, operated by the Comprehensive Youth Training and Community Involvement Program, Inc. (CYTCIP). The last two programs are operated by private agencies. Maximum enrollment for all three programs is 220 (170 for IPU, 100 for Spectrum, and 50 for CYTCIP).

The IPU program has the most traditional intensive supervision model of the three programs. It is characterized by low caseloads (a maximum of 10 youth per probation officer) and frequent probation officer contacts and surveillance activities. IPU operates through a system of four steps, with diminishing levels of supervision as the juvenile demonstrates more responsibility and lawful behavior. Probation officers must have two to three weekly face-to-face contacts with youth during the first phase, and at least one face-to-face contact per week during the subsequent phases. In addition, telephone contacts to check school attendance, curfew adherence, and home behavior are made on a regular basis. Youth remain in the program from 7 to 11 months.

The two private programs have different approaches. The In-Home Care Program employs a family-focused services and treatment approach based on the philosophy that comprehensive family treatment using community resources is needed to alleviate the causes of delinquent behavior. In-Home Care provides comprehensive services including supervision; individual, family, and group counseling; educational planning; recreational activities; and comprehensive employment training and placement activities. Maximum caseload ratios are one family worker for every eight juveniles. Family counselors meet with the juvenile and their families 3 to 5 times per week during the early stages of the program, and a minimum of once per week as youth demonstrate progress in the program. The length of the program is from 9 to 12 months.

The State Ward Diversion Program is a day treatment program actively involved in several key areas of youth’s lives—home, family, school, employment, and community. An onsite alternative education program offers classes every weekday for 5 hours, 12 months per year. In addition to the education component, the program provides the following services: ongoing individual and group counseling; youth information groups; group parenting sessions; psychological...
evaluations; preemployment preparation for older youth; family outings; and structured group activities. In addition to seeing the youth onsite every weekday, the probation counselor meets with youth and parents at least once per week. Program enrollment is for a minimum of 11 months and generally does not exceed 15 months.

Barton and Butts evaluated the Wayne County program in 1988. The experimental group consisted of youth assigned to one of the three intensive supervision probation programs; the control group included youth placed in a State institution. Youth were randomly assigned to one of the two groups. The length of the followup period was 2 years.

**Barton and Butts found that the IPP program was as effective as incarceration at less than one-third the cost. The program saved an estimated $8.8 million over 3 years.**

The overall performances of the experimental and control groups were comparable. Institutionalized youth were slightly less likely to reappear in court than were intensive probation youth; however, this difference disappeared when time at risk in the community was taken into account. The IPP youth committed less serious crimes than the institutional youth, performed better on self-report tests, and were less likely to commit violent crimes measured both by court records and self-report data. Barton and Butts found that the IPP program was as effective as incarceration at less than one-third the cost. The program saved an estimated $8.8 million over 3 years. The IPP study shows that a variety of program models can be successful in serving high-risk juvenile offenders in the community.

**About Face**

About Face is a boot camp for nonviolent males ages 14 to 17 who were adjudicated of cocaine trafficking. Participants are sentenced to the program by the Memphis juvenile court. About Face participants spend 3 months in a nonsecure residential facility (the Memphis Naval Air Station, an active military base) followed by 6 months of aftercare. During 2 years, a total of 344 youths participated in the program.

About Face's residential program has four main components.

- Military training conducted by current and former Navy and Marine personnel. The training includes discipline, drill, physical conditioning, and leadership; however, it intentionally avoids the abusive, punitive aspects usually associated with military boot camps.
- Counseling based on a cognitive-behavioral model. Youth participate in 2 hours of group counseling each day and a minimum of 1 hour of individual counseling per week.
- Education using Navy-designed reading and math immersion techniques, computer-assisted learning, and individualized instruction. Youth receive 6 hours of education services per day, not including study time.
- Spiritual support that includes voluntary attendance at religious services conducted twice a week by members of local African-American churches.

During the About Face aftercare component, youth attend weekly 2-hour group counseling sessions and receive continued educational assistance.

A formal evaluation of the About Face program conducted by researchers from Memphis State University showed some promising results; however, the lack of a control group makes interpreting the outcomes difficult.

An evaluation of in-program changes measured for 245 youth indicated that the youth:

- Significantly increased their average overall achievement scores, from a grade level of 5.9 to 6.7.
- Significantly improved their performance in math, English, vocabulary, and spelling.
- Significantly improved in 4 of 11 psychological measures: life purpose, addiction risk, law and order, and authoritarianism.
Participants also improved in their understanding of societal obligations and principled behavior. As previously noted, however, these results must be viewed with caution because of the lack of a control group.

Recidivism data were based on 121 participants who were tracked for 20 months from program entry, including time spent in the residential component, in aftercare, and after discharge. Almost half (47 percent) of the youth were rearrested during the 20-month period. However, this rate compares favorably with recidivism rates for other programs that handle similar types of offenders. Moreover, the later charges were significantly less serious than those incurred in the 12 months preceding program entry. In addition, although 99 percent of the youth had originally been convicted of a cocaine offense, only 6 percent were charged with a cocaine offense during the followup period.

Similar to About Face is the Boot Camps for Juvenile Offenders program, launched by OJJDP in 1992 to create alternative intermediate sanctions for nonviolent juvenile offenders. This program emphasizes discipline, treatment, and work. The program has four phases: a screening phase to determine program eligibility; a 90-day residential phase that includes military-style drills and discipline, educational and vocational services, and drug counseling; an aftercare phase in which youth return to the community under close supervision; and a final phase with decreased emphasis on supervision and increased emphasis on education and job training. The program was launched at three sites: Mobile, Alabama; Denver, Colorado; and Cleveland, Ohio. Although an experimental evaluation design is in place at each site, the results of the evaluation are not yet available.

**Spectrum Wilderness Program**

The Spectrum Wilderness Program is a 30-day therapeutic outdoor program for delinquent and otherwise troubled youth operated by the Touch of Nature Environmental Center at Southern Illinois University.

Each Spectrum course includes an Immersion Phase, a Training Expedition, a Major Expedition, and a Solo Experience. The specific outdoor activities vary from course to course but include backpacking, canoeing, spelunking, taking initiative, team courses, rock climbing, and community service projects. Students also participate in daily chores including making camp, cooking, and cleaning.

In addition to outdoor skills, the program emphasizes academic skills such as reading, writing, and problem solving. Youth must write daily in both personal and group journals. They also select passages from books and read them aloud to the group.

The Spectrum program has a strong counseling component based on the group “circle” method. Circle groups meet daily to address youth’s behavior problems and to recognize their successes. Conflicts that arise during the program are viewed as group problems and are worked out in the Circle. Counselors use reality therapy techniques for solving interpersonal problems through the Circle.

Spectrum groups vary in size from 7 to 11 participants. A staff team includes from three to five full-time staff with occasional support staff. The instructor-to-student ratio is normally 1 to 3. Staff provide 24-hour supervision. They lead the Circle group, provide individual counseling, give frequent feedback, teach outdoor skills, and serve as role models for the youth.

All participants have an individualized performance contract that is drawn up before the program begins. Spectrum staff, participating youth, the youth’s families, and representatives from the agency that referred the youth all provide input into the individual behavior goals that make up the contract. Within 2 weeks after the course ends, Spectrum staff hold a followup meeting with these same parties to assess the juvenile’s performance.

An evaluation of the Spectrum program showed some promising results. Forty-eight adjudicated delinquents who completed a Spectrum Wilderness Course were compared with a similar group of delinquent youth who participated in more traditional programs (e.g., group homes, counseling, work camps). The outcome measures were the number and type of delinquency petitions filed. The tracking period was 7 months after program completion. The Spectrum group had a total of 11 petitions (23 percent) filed against them while the control group had 19 petitions (39 percent). In addition, the petitions for the Spectrum group were significantly less serious than those
for the control group. The Spectrum Group was not petitioned for any Class 1 felonies, while 42 percent of the control group’s petitions were for Class 1 felonies.

A different evaluation examined the extent in program change for Spectrum participants (n=36) on 40 measures of asocial behavior. The evaluation used a nonequivalent control group (n=36) whose members were provided mentoring services. Results showed that the wilderness program participants significantly reduced asocial behaviors, while the control group did not. These results were found to be valid even when preexisting differences between the groups were statistically controlled.

**Results showed that the wilderness program participants significantly reduced asocial behaviors, while the control group did not.**

**VisionQuest**

VisionQuest, founded in 1973, is a national program that provides an alternative to incarceration for serious juvenile offenders. VisionQuest youth spend 12 to 15 months in various challenging outdoor impact programs. Typically, the program sequence involves 3 months in an orientation wilderness camp, 5 months in an adventure program, and 5 months in a community residential program.

Most VisionQuest youth are committed to the program by the juvenile court. VisionQuest staff interview youth prior to placement to ensure that they are appropriate candidates. Youth must make four commitments before entering the program:

- To complete three high impact programs.
- To abstain from drugs, sex, alcohol, and tobacco.
- To participate for a minimum of 1 year.
- To face their problems.

The first phase of the VisionQuest program is a wilderness camp. Youth live outdoors in tepees, with a tepee family of 6 to 10 youths and 1 counselor. Here, juveniles receive an orientation to the program and undergo educational, psychological, and behavioral evaluations. They also undergo an intensive physical conditioning program in addition to their regular school work.

Next, youth may participate in an adventure program, such as a wagon train. On a wagon train, youth travel across the western States on mule-drawn wagons and assume responsibility for everything from feeding the animals to setting up nightly camps. Each wagon train consists of approximately 50 youth and 50 staff. The wagon train experience teaches juveniles the value of cooperation, self-discipline, and the work ethic.

In addition to the wagon train, youth may engage in various quests that differ in theme, scope, and duration. Examples of quests include ocean voyages, cross-country bike trips, hikes through wilderness, and breaking mustangs or camels.

After completing two wagon train or quest experiences, VisionQuest youth enter the residential program. Living in group homes prepares youth to return to their own homes by focusing on educational goals, family relationships, and plans for the future. HomeQuest offers support to youth when they return to their families and neighborhoods. This intensive program monitors school progress and home curfew, provides family counseling, and offers alternative recreational activities.

VisionQuest youth have a consistent educational plan that extends through each stage of the program. They also have individual treatment plans that are constantly reevaluated and updated.

The RAND Corporation conducted an evaluation of the San Diego VisionQuest program in 1987 (Greenwood and Turner, 1987). The outcomes for 89 VisionQuest graduates were compared with those of 177 delinquent youth who had been placed in a traditional county correctional institution. Although the experimental VisionQuest group consisted of more serious offenders than the control group, the VisionQuest group outperformed the control group members. VisionQuest youth were substantially less likely to be rearrested in the first year after release than the traditional group (55 percent compared with
71 percent). When differences in group characteristics were statistically controlled, first-year rearrest rates for VisionQuest youth were about half that of the control youth.

Thomas O’Farrell Youth Center

The Thomas O’Farrell Youth Center (TOYC) is located in rural Maryland, 45 minutes from Baltimore. It is a 38-bed, unlocked, staff-secure residential program for male youth committed to the Maryland Department of Juvenile Services (DJS). TOYC is operated by the North American Family Institute (NAFI), a nonprofit multiservice human service agency with headquarters in Danvers, Massachusetts. The typical TOYC youth has many prior court referrals, generally for property crimes and drug offenses. On average, youth stay at the center for 9 months, followed by 6 months of community aftercare.

**The study showed a dramatic decline in the number of offenses committed by youth after their stay at TOYC.**

The TOYC philosophy is to create a community of dignity and respect for all of its members. This positive social environment is at the core of all TOYC activities. Residents are asked to take responsibility for their behavior and to provide encouragement to fellow residents.

TOYC employs the Normative Model, a treatment theory that recognizes the importance of norms (social rules and expectations) in creating bonds among individuals. TOYC norms focus on creating and fostering expectations that respect the individual, the community, and the program. In the early stages of the Normative Model, the staff play a central role in teaching, modeling, and encouraging community values. Over time, TOYC residents assume responsibility for teaching community norms to new members and for dealing with violations of them.

The group process is at the heart of the TOYC community. Several times each day the community engages in small group discussions and problem solving.

TOYC is divided into four groups of up to 10 youth each. Each group lives in separate dormitory areas, eats meals together, engages in work details as a unit, and participates in group therapy.

TOYC has a strong education program because many of its youth have special education needs. Class sizes are small, and instruction is highly individualized. Educational staff are closely involved with the other aspects of the program.

Individual and group successes, both large and small, are openly recognized at TOYC. The program uses a point system that rewards youth for excellent behavior.

The TOYC program begins with an orientation phase of at least 28 days. Orientation youth live together and participate in group sessions led by staff members who were former residents and can serve as role models. The juveniles’ major task during orientation is to learn the dynamics of the group process. During phase 1, which lasts for approximately 60 days, youth acquire more knowledge about TOYC and its normative system. To move from phase 1 to phase 2, residents must demonstrate consistent and positive behavior in all aspects of TOYC life, including school attendance, work details, group meetings, and meal times. In phase 2, the resident is expected to demonstrate even higher levels of expertise in group process and community activities, including teaching the program to others. Phase 2 youth must demonstrate high levels of success in on-campus jobs and are encouraged to find part-time employment in the community. They also meet with aftercare workers to develop a community treatment aftercare plan.

TOYC operates an intensive aftercare program for participants. Each youth who completes the TOYC residential program has a specialized aftercare plan and receives postrelease services from two aftercare workers—including assistance in reentering school, vocational counseling, crisis intervention, family counseling, transportation, and mentoring. Aftercare lasts for 6 months, during which time aftercare workers contact the youth at least 12 days per month.

An NCCD study found that the majority (55 percent) of the first 56 TOYC graduates had no further court
referrals in the postrelease period (an average of 11.6 months). The study showed a dramatic decline in the number of offenses committed by youth after their stay at TOYC. In the 12 months prior to placement in TOYC, the 56 youth were charged with 219 offenses, an average of almost four court referrals each. However, in the year after leaving TOYC, these youngsters were charged with just 51 offenses, a decline of 77 percent. NCCD also observed that youth who committed new crimes after leaving TOYC were likely to commit less serious offenses than before. Even though no control group was employed in this study, making interpretation of results problematic, these findings are promising in that the TOYC recidivism rate compares favorably with that of the best community-based youth corrections programs nationwide.

Secure Corrections

Some offenders pose such a threat to society that they must be placed in locked, secure facilities. Such secure corrections programs should be reserved for only the most serious and violent offenders. Youth in secure programs should be provided with a wide range of rehabilitation services. Research has shown that the most effective secure corrections programs allow only a small number of participants and provide them with individualized services; large training schools have not proven to be effective in rehabilitating juvenile offenders. Examples of secure corrections programs follow.

The Violent Juvenile Offender Program

The Violent Juvenile Offender (VJO) program provided a continuum of care for violent male juvenile offenders at four urban sites: Boston, Detroit, Memphis, and Newark. VJO youth were initially placed in small, secure facilities and were gradually reintegrated into the community through community-based residential programs followed by intensive neighborhood supervision. Case management was continuous, beginning in secure care and extending through the reintegration phases.

The VJO model sought to strengthen youth’s bonds to prosocial people and institutions, provide realistic opportunities for achievement, employ a system of rewards for appropriate behavior and sanctions for inappropriate behavior, and provide individualized treatment. Youth who had been adjudicated for a Part 1 index felony and who had a prior adjudication for a major felony were eligible for the program.

Fagan (1990) conducted an indepth evaluation of the VJO program that included a study of VJO implementation at the four urban sites. He found the program to be well implemented in Boston and Detroit, but poorly implemented in Memphis and Newark. Fagan’s evaluation compared outcome measures from VJO programs with those from traditional juvenile corrections programs. Eligible youth had been randomly assigned either to experimental VJO programs or to more traditional ones. Outcome measures included the frequency, severity, and timing of rearrests; the rate of reincarceration; and self-report measures of delinquency. Outcome data showed that in Boston and Detroit, the two sites with the strongest implementation of the VJO program design, VJO youth had significantly fewer and less serious rearrests than the control group when time at risk was taken into account. In addition, youth at these two sites had significantly longer intervals until their first rearrest, regardless of time at risk. Fagan concluded that “the principles and theories built into [VJO] programs can reduce recidivism and serious crime among violent juvenile offenders” (p. 254).

Florida Environmental Institute

The Florida Environmental Institute (FEI), also known as “The Last Chance Ranch,” targets Florida’s most serious juvenile offenders. It is operated by Associated Marine Institutes (AMI), a network of affiliated residential and nonresidential programs that operates in seven States. FEI is located in a remote area of the Florida Everglades. It has a capacity of 40 youth—20
in the residential portion of the program and 20 in the nonresidential aftercare component.

FEI receives two-thirds of its referrals from the adult justice system. Under Florida law, a juvenile who has been found guilty as an adult may be returned to the juvenile justice system for treatment. FEI-referred youth average 18 prior offenses and 11.5 prior felonies. Almost two-thirds (63 percent) are committed for crimes against persons, the rest for chronic property or drug offenses.

Although FEI handles serious offenders, it is not a locked facility. Nevertheless, it is considered a secure facility because it is in an extremely remote location completely surrounded by forests and swamp. This physical isolation, in addition to a low staff-to-student ratio, protects the public’s safety.

The average length of participation in FEI is 18 months, with a residential stay of at least 9 months. All but a handful of participants return to their communities after they have met strict educational, social, and behavioral objectives.

The FEI philosophy reflects the following imperatives:

- Treat youth in the least restrictive setting that is appropriate.
- Focus on education as a means of reducing recidivism.
- View hard work as therapeutic and a way to increase vocational skills.
- Employ a system of rewards for positive behavior and sanctions for inappropriate behavior.
- Promote bonding with staff role models.
- Provide a strong aftercare component.

The FEI program begins with a 3-day orientation program, during which case treatment plans are established, work projects are assigned, and the bonding process between staff and students begins. Phase 1, which emphasizes work and education, has a low staff-to-student ratio of 3 or 4 to 1. Students must earn points to move on to the second phase, where they can participate in paid work projects to help with restitution payments. Near the end of the second phase, the program’s community coordinator takes the students back to their communities to assist aftercare job placements and to work on rebuilding family relationships.

In the third phase, students live in the community but maintain constant contact with the institute. Aftercare staff, with small caseloads of six, contact the students at least four times per week. They assist with job searches, family problems, and other issues. The youth must adhere to a strict curfew. If they break curfew or engage in criminal activity, they are returned to the residential part of the program.

The Florida Environmental Institute, also known as “The Last Chance Ranch,” targets Florida’s most serious juvenile offenders.

Outcome data on a sample of 21 FEI graduates are quite promising. A 3-year followup study found that only one-third of the sample were convicted of new crimes during this extended period. While no control group was used in this study, making it difficult to assess program effectiveness, studies of training school releases indicate much higher recidivism rates—50 to 70 percent.

FEI outcome data were also included in a 1992 Florida Department of Health and Rehabilitative Services (DHRS) study of recidivism among committed youth in seven residential programs for high-risk offenders. The study compared youth outcomes from all seven programs and revealed impressive results, with some qualifiers: None of the programs was specifically designed as a control group for any of the others; the FEI sample was small (n=11); and outcome data were based on returns to the juvenile system only. Nevertheless, the 1-year outcomes of the FEI youth were promising. Slightly over one-third (36 percent) were referred again to juvenile court, compared with 47 to 73 percent for the other six programs. Moreover, none of the FEI youth were readjudicated or recommitted to DHRS during the followup period, while the readjudication rates in the other facilities ranged from 20 to 50 percent.
Capital Offender Program

The Capital Offender Program (COP) at Giddings State Home and School in Texas, begun in 1988, is an innovative group treatment program for juveniles committed for homicide. It is an intensive, 16-week program involving a group of eight juveniles and two or three staff members. The group meets twice a week for approximately 3 hours each session. Recently, a residential treatment component has been added to COP: the eight students live together in the same cottage until their release. Most program participants are incarcerated at Giddings for an average of 2 1/2 to 3 years.

Youth must meet four criteria to be eligible for the COP program:

- They must be committed for homicide (capital murder, murder, or voluntary manslaughter).
- They must have been at Giddings for at least 12 months and have at least 6 months remaining on their sentences.
- They must be at either a senior or prerelease level at Giddings.
- They cannot be diagnosed as psychotic or mentally retarded, or have a pervasive developmental disorder.

The primary goals of the COP program are to promote verbal expression of feelings, to foster empathy for victims, to create a sense of personal responsibility, and to decrease feelings of hostility and aggression.

The COP treatment approach focuses on group psychotherapy with an emphasis on role-playing. In addition to role-playing their life stories, participants role-play their homicidal offense, reenacting the crime first from the perpetrator’s perspective and then from the victim’s.

Two COP groups run concurrently, each led by a Ph.D.-level psychologist and a master’s-level cotherapist. Psychologists are also available for individual counseling should a student have emotional reactions requiring more intensive support. COP psychologists receive extra training before participating in the program.

COP has been rigorously evaluated by the Texas Youth Commission to determine both in-program effects on personality measures and postrelease outcomes. While in the program, youth displayed significant changes in the following areas:

- Levels of hostility and aggression.
- Extent of internal control and ability to assume responsibility.
- Degree of empathy for their victims.

To assess COP’s impact on recidivism, the evaluators compared COP participants’ rearrest and reconviction rates at 1- and 3-year intervals after release with those of a control group of untreated capital offenders. The control group consisted of youth who were not served by the program because of space limitations.

At 1 year after release, the COP participants (n=51) showed a significantly lower rearrest rate than the control youth (n=77), 22 percent versus 40 percent, as well as a lower rate of reincarceration, 0 percent versus 13 percent.

At 1 year after release, the COP participants (n=51) showed a significantly lower rearrest rate than the control youth (n=77), 22 percent versus 40 percent, as well as a lower rate of reincarceration, 0 percent versus 13 percent. After 3 years, however, these differences disappeared. COP youth (n=17) had rearrest rates nearly equal to those of control youth (n=23), 35 percent compared with 39 percent. Also, they were not significantly less likely to be reincarcerated, 6 percent versus 22 percent. Still, both the in-program changes and the short-term impact on recidivism suggest that COP should be considered a promising strategy for violent offenders.
Conclusion

The results of NCCD’s intensive review of programs, along with the findings of 15 years of careful research, point the way toward an understanding of the crucial elements of success in graduated sanctions programs for young offenders. A number of past and current programs across the country have achieved credible results using some combination of these crucial elements. It can be said with confidence that some programs do work when they are carefully conceived, properly implemented, and provided with enough resources to do the job they set out to do.

Nevertheless, the evidence suggests that a new generation of programs is needed to build on these successes and move beyond them to address aspects of youth’s lives that even the more effective graduated sanctions efforts typically neglect. While the successful outcomes described earlier are encouraging, they are only partial: Positive results too often deteriorate after clients leave the programs. This does not mean that the programs do not work or that their replication should become a lower priority. Rather, it means that programs for serious offenders must be enhanced and extended, especially in ways that improve offenders’ chances of succeeding in the long term and becoming full, participating members of their communities.

Put simply, the effects of even good intervention programs are bound to be weakened or nullified if youth are simply returned to communities with shrinking opportunities for work, self-sufficiency, and social contribution. One of the most effective ways to address this all-too-common problem is to build a more substantial employment component into intervention programs for young offenders. The importance of employment, to be sure, varies with age (Huizinga et al., 1994): The value of a job to a 14-year-old first-time offender is likely to be less important than to a 17-year-old. By late adolescence, employment is a crucial factor in development and one of the most important predictors of later adjustment (Sampson and Laub, 1993). Yet employment is arguably the least consistently addressed component in conventional interventions with delinquent youth. However, less conventional programs suggest the positive potential of including a systematic employment component in strategies aimed at high-risk youth.

The most interesting effort, and one with a fairly convincing evaluation, is the vocationally oriented psychotherapy program for low-income high school dropouts in Massachusetts, initiated by Milton Shore and Joseph Massimo (1963, 1973) in the early 1960’s. The program strategy was simple and inexpensive. Troubled youth with a history of failure in other service programs were contacted by a trained therapist within 24 hours of dropping out of school. The core of the therapy was to place them in a steady job and to use the job placement as an entree for other services, including psychotherapy and remedial education.

The services, as in the successful programs described above, were individualized, intensive, and flexible. Followup comparisons with a comparable untreated group at 5 and 10 years revealed striking differences. For example, at 10 years after the intervention, only 2 of 10 participants were deemed to have made an adequate adjustment, with one incarcerated and one in a mental institution. The rest had experienced relatively stable employment, most had no arrests, and most were married with families. The fate of the 10 control youth, on the other hand, was bleak and virtually the opposite of the treated group: only two were judged as having made an adequate adjustment; only two were arrest-free; and five had spent time in prison, jail, or a drug rehabilitation center (Shore and Massimo, 1973, pp. 129–131).

This program never received the attention it deserved, although it is one of several employment-oriented efforts with positive results included in Wright and Dixon’s review of prevention programs in the late 1970’s. The small size of the samples means that the results, though striking, must be treated cautiously. The findings are supported, however, by evaluations of other work programs for disadvantaged youth. Especially relevant is the experience of the Job Corps, which has been shown to prevent a substantial amount of serious, violent crime. Though not specifically aimed at youthful offenders, the Job Corps serves a population of high-risk youth, many with a substantial history of delinquency. Another related example is the Associated Marine Institutes (AMI) program in Florida and several other States. In addition to providing support services and remedial education, AMI uses a vocationally oriented approach to teach marine-related skills.
What all these programs have in common—and what seems to account for their effectiveness—is the combination of a solid focus on a real job or serious skills training with intensive support services. The importance of real work as a strategy for preventing serious and violent juvenile offenses and deeper penetration into the justice system fits with everything known about adolescent development and the factors that protect against a variety of problematic behavior.

Yet a work component has had only a sporadic place in program development up until now. That must change. Preparation for stable employment and placement in real jobs should have a prominent place in programming for older adolescents.

In designing appropriate training and placement strategies, it is important to note another frequent finding: programs tend to work better if they combine offenders with nondelinquent peers rather than isolating delinquents in one group (see Feldman, Caplinger, and Wodarski, 1983).

Linking young offenders to a broader community-oriented youth work program—perhaps modeled on existing Conservation Corps programs—could be a critical part of a comprehensive or multisystemic approach.

**Contacts for More Information on Effective Programs**

**Bethesda Day Treatment Center**
Dominic Herbst  
Managing Director  
Bethesda Day Treatment Center  
P.O. Box 270  
Central Oak Heights  
West Milton, PA  17886  
(717) 568–1131

**Choice Program**
Mark Shriver  
Executive Director  
The Choice Program  
The Shriver Center  
5401 Wilkens Avenue  
Baltimore, MD  21228  
(410) 455–2494

**Michigan State Diversion Project**
William Davidson  
Professor  
Department of Psychology  
135 Snyder Hall  
Michigan State University  
East Lansing, MI  48824–1117  
(517) 353–5015

**North Carolina Intensive Protection Supervision Project**
Tom Danek  
Administrator  
Juvenile Services Division  
Administrative Office of the Courts  
Justice Building  
P.O. Box 2448  
Raleigh, NC  27602  
(919) 662–4300

**Family and Neighborhood Services Project**
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4900 North Lamar  
P.O. Box 4260  
Austin, TX 78765  
(512) 483–5152
Descriptions of and Contacts for Promising Programs

In the program search that identified the effective graduated sanctions programs described earlier in this part, NCCD also compiled a list of promising programs. The programs listed in this section contain one or more of the elements associated with effective graduated sanctions programs and have been judged to be effective by officials in the jurisdictions where they have been implemented.

However, these programs do not yet have evaluation results. Some of them are currently undergoing evaluations and more information on their effectiveness will soon be available. The following section contains brief descriptions of these promising programs and identifies the specific target population that each one serves.

Immediate Sanction

Adolescent Substance Abuse Program (ASAP)

Type: Immediate Sanction
Subtype: Diversion Program
Target Population: Adjudicated, substance-abusing delinquents

This program identifies substance abusers and refers them to appropriate treatment. Drug abuse users are referred to an outpatient treatment facility; low- or moderate-risk youth may undergo urinalysis and attend a “drug school” with their parents. Youth selling drugs may be placed in a special program for drug dealers.

Contact: David Kilmer
Program Coordinator
Jefferson County Family Court
120 Second Court North
Birmingham, AL 35204
(205) 325–5996

Community Service Early Intervention Program

Type: Immediate Sanction
Subtype: Diversion Program
Target Population: Preadjudicated first-time offenders

This program provides supportive guidance, counseling, academic education, and community service work for first-time offenders classified as at-risk youth and school failures. Primary interventions include community service, skill development, and academic education.

Contact: Tami Runkle
Early Intervention Coordinator
Marion County Juvenile Court
1440 Mt. Vernon Avenue
Marion, OH 43302
(614) 389–5476

Diversion Program

Type: Immediate Sanction
Subtype: Diversion Program
Target Population: First-time, nonviolent, nonfelony offenders

This program aims to keep high-risk youth away from the formal court system by linking them with social, medical, and psychological service agencies. Direct services include needs assessment, problem solving, youth advocacy, and family support. Skill development, counseling, and mentoring are the program’s primary intervention strategies.

Contact: Shari Bukowski
Diversion Officer
Diversion Services
Room 209, City-County Building
Gaylord, MI 49735
(517) 732–6484
**First Offenders Program**

**Type:** Immediate Sanction  
**Subtype:** Diversion Program  
**Target**  
**Population:** First-time offenders

In this program, first-time offenders and their parents attend a 7-week program that addresses family communication, peer pressure, the juvenile justice system, substance abuse, pregnancy prevention, AIDS education, and how to access other youth service support systems.

**Contact:**  
Lydia Ashanin  
Communications Specialist  
Youth Development, Inc.  
6301 Central NW.  
Albuquerque, NM 87105  
(505) 831–6038

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**Juvenile Diversion Program**

**Type:** Immediate Sanction  
**Subtype:** Diversion Program  
**Target**  
**Population:** First-time, nonviolent offenders

This program offers an optional counseling program as an alternative to the court process. Youth are referred to appropriate community-based counseling agencies that provide case management, advocacy followup, and progress assessment.

**Contact:**  
Ruth Budelman  
Director  
Juvenile Diversion Program  
Museum Place  
One East India Square  
Salem, MA 01970  
(508) 745–6610

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**Juvenile Alcohol and Marijuana Diversion**

**Type:** Immediate Sanction  
**Subtype:** Diversion Program  
**Target**  
**Population:** First-time, substance-abusing offenders

This program targets juveniles apprehended on first-time drug and alcohol possession charges. The program requires that offenders and parents attend chemical awareness class or else face juvenile court proceedings. The diversion program is considered a cost-effective alternative for handling first-time substance abuse violators.

**Contact:**  
Diane Anderson  
Legal Assistant  
Dakota County Judicial Center  
1560 West Highway 55  
Hastings, MN 55033  
(612) 438–4438
**Partnership for Learning**

Type: Immediate Sanction  
Subtype: Diversion Program  
Target Population: Learning disabled, nonviolent, first-time juvenile offenders  

This program screens first-time offenders to identify and assist those who are learning disabled. Identified youth may participate in an intensive 90-day counseling program having a minimum of 60 hours of remedial tutoring as an alternative to prosecution. Successful participants have their cases dismissed.  

Contact: Delgreco Wilson  
Program Coordinator  
206 Mitchell Courthouse  
110 North Calvert Street  
Baltimore, MD 21202  
(410) 396-5092  

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**Youth Forensic Services**

Type: Immediate Sanction  
Subtype: Diversion Program  
Target Population: First-time offenders with mental health problems  

This program aims to reduce recidivism by providing predispositional evaluations and treatment. The target population includes youth with problems stemming from serious mental illness, dysfunctional home lives, severe school difficulties, substance abuse, or youth who are very young. Services include individualized treatment and child- and family-focused intervention.  

Contact: Debra Deprato  
Director  
Youth Forensic Services  
3101 West Napoleon Avenue, Suite 110  
Metarie, LA 70001  
(504) 838–5216  

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**Partners**

Type: Immediate Sanction  
Subgroup: Mentoring Program  
Target Population: Delinquent and at-risk youth  

This mentorship program matches adult volunteers with youth ages 8 to 18. The mentoring relationship promotes positive change by allowing youth to observe an alternative way of living. The program provides training, counseling, and support groups for youth and parents; recreational/educational activities; health and dental care; and community service projects.  

Contact: Tina Shaffer  
Marketing Coordinator  
Partners  
910 16th Street, Suite 426  
Denver, CO 80202  
(303) 595–4400  

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**Y-Cap**

Type: Immediate Sanction  
Subtype: Diversion Program  
Target Population: Juvenile offenders ages 9–16  

This program provides intensive services and treatment to high-risk offenders and families referred by the school system and the juvenile court. The program includes group counseling, tutoring, parent skills, recreation, and a big brother program. Primary interventions include individual/family counseling, mentoring, and academic education.  

Contact: Mark Dickerson  
Family Intervention Coordinator  
Y-CAP: Metro Juvenile Court  
802 Second Avenue  
Nashville, TN 37210  
(615) 862–8068
YouthWorks
Type: Immediate Sanction
Subtype: Mentoring Program
Target
Population: First-time offenders under age 15

This program, sponsored by the Louisville District of the United Methodist Church, matches adult volunteers with youth ordered by the court to participate in the program for 6 months. Volunteers provide guidance, support, and recreational activities to discourage delinquent activity. Primary interventions are mentoring, skill development, and individual/family counseling.

Contact: Kelly Lopez
Program Coordinator
YouthWorks
1228 South Jackson Street
Louisville, KY 40203
(502) 637–5648

Peer Jury Program
Type: Immediate Sanction
Subtype: Peer Jury Program
Target
Population: First-time, nonviolent offenders

This program is a joint community effort that seeks to foster change in the lives of young offenders by offering them the option of participating in community service. The program recognizes that community service provides an offender with appropriate role models for socially acceptable behavior and helps to prevent the youth from having a police record.

Contact: Donald Cundriff
Chief of Police
Police Department
1200 Gannon Drive
Hoffman Estates, IL 60194
(708) 882–1818

Teen Court
Type: Immediate Sanction
Subtype: Peer Jury Program
Target
Population: Misdemeanor offenders ages 14–17

This is a diversion program for youth who have committed a first misdemeanor or truancy. A teen jury and adult judge hear cases and determine sentencing, which may include counseling, community service, or service on the teen court. The program’s goals are to provide positive peer pressure, to keep youth out of the juvenile justice system, and to familiarize participants with the legal process.

Contact: Terri Vickers
Teen Court Coordinator
P. O. Box 1000
County Courthouse
Bradenton, FL 34206
(813) 749–1800

Y-Teen Court
Type: Immediate Sanction
Subtype: Peer Jury Program
Target
Population: Minor misdemeanor offenders

This diversion program targets youth accused of minor misdemeanors, such as truancy, curfew violation, possession of alcohol, and traffic violations. A teen jury and an adult judge hear cases and determine sentences, which may include counseling, community service, or service on the teen court. The program provides positive peer influences and keeps youth out of the juvenile justice system while familiarizing them with the legal process.

Contact: Bob Fleming
YMCA of Greater Houston
7903 South Loop East
Houston, TX 77012
(713) 659–5566
**Earn-It**

Type: Immediate Sanction  
Subtype: Restitution Program  
Target Population: Nonviolent, low-risk offenders  

This sentencing alternative program arranges work opportunities for young offenders to enable them to pay for damages they have caused. Youth allocate two-thirds of their earnings to restitution and keep one-third as an incentive. The program has an 80 to 85 percent success rate for keeping youth out of court and from becoming repeat offenders.

Contact: Judith Sadoski  
Earn-It Program Manager  
City Hall  
3 Washington Street  
Keene, NH 03431  
(603) 357–9811

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**Kingman Youth Service Corps**

Type: Immediate Sanction  
Subtype: Restitution Program  
Target Population: Delinquent and at-risk males ages 13–15  

This 8-week summer program (40 hours per week) involves work, education, and recreation. Participants receive a $10 daily stipend, half of which is designated for restitution payments. Besides work skills, the program teaches basic values, independent living, leadership, and physical training.

Contact: Dean Moore  
Programs Coordinator  
Mohave County Probation Department  
515 East Beale Street  
Kingman, AZ 86401  
(602) 753–1741

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**Juvenile Work Restitution Program**

Type: Immediate Sanction  
Subtype: Restitution Program  
Target Population: Delinquent youth  

This program targets youth performing court-ordered community service. Youth are assigned to worksites where they learn positive work habits under the supervision of adult volunteers who work at the site. Youth ages 13–16 are required to attend a 6-hour self esteem and job training course. Participants must also write apology letters to their victims.

Contact: Tammy Cobb  
Director  
Almanac Friends of Youth  
124 West Elm Street  
Graham, NC 27253  
(910) 228–7563

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**Madison County Restitution/Community Service Program**

Type: Immediate Sanction  
Subtype: Restitution Program  
Target Population: Delinquents  

This program targets youth who have committed property destruction, theft, assault, alcohol and drug offenses, and less serious crimes. It teaches offenders that they are responsible for their misdeeds and that they must make restitution to the community and to their victims. Juveniles work without pay at public or nonprofit agencies for an assigned number of hours.

Contact: Barbara Dooley  
Director  
Juvenile Court Services  
224 Lexington Avenue  
Jackson, TN 38301  
(901) 423–6140
Tuscaloosa Restitution Program
Type: Immediate Sanction
Subtype: Restitution Program
Target Population: Nonviolent offenders
This program offers a balanced approach to juvenile restitution through emphasis on victims and victim services as well as offender accountability and employment opportunities. The program’s goals are to provide damage compensation to victims, reduce recidivism of juvenile offenders, and increase public confidence in the juvenile justice system.

Contact: John Upchurch
Director of Court Services
Juvenile Court of Tuscaloosa County
6001 12th Avenue East
Tuscaloosa, AL 35405
(205) 758–1668

Adelphoi Village Day Treatment
Type: Immediate Sanction
Subtype: Day Treatment
Target Population: Delinquents ages 13–18
This program provides delinquent youth with individual, group, and family counseling services; along with education and life skills training in a nurturing environment. The program enables youth to develop a positive self-image and paves the way for them to unite with their families.

Contact: John Bukovac
Executive Director
Adelphoi Village
354 Main Street
Latrobe, PA 15650
(412) 537–3052

Community Intensive Treatment for Youth (CITY)
Type: Immediate Sanction
Subtype: Day Treatment
Target Population: Delinquents ages 12–18
This State-run, nonresidential program provides academic education, social functioning, positive behavior skills, employment skills training, consumer education, success planning, and counseling to youth offenders. Families receive assistance through linkages with community agencies.

Contact: Ed Earnest
Program Director
CITY Programs of Alabama
3420 Second Avenue North
Birmingham, AL 35222
(205) 251–2489

Kids in Need of Development (KIND) Programs
Type: Immediate Sanction
Subtype: Day Treatment
Target Population: Delinquent youth ages 12–18
This program provides comprehensive day treatment to delinquent youth and their families. Services include individual and family counseling, case management, and advocacy. A followup assessment is conducted 1 year after youth complete the program. Reality therapy and academic education are primary intervention techniques.

Contact: Steve Munz
Program Coordinator
KIND Programs
208 North Hood Street
Lake Providence, LA 71254
(318) 559–0653
Manito Incorporated

Type: Immediate Sanction  
Subtype: Day Treatment  
Target Population: Delinquent and at-risk youth ages 13–17

Manito Incorporated operates day treatment programs for up to 120 adolescents. The programs provide individualized education, case planning, social and life skills development, and counseling. The program subscribes to a restorative justice model, emphasizing a balance of community protection, offender accountability, and competency development.

Contact: Robert Whitmore  
Executive Director  
Manito Incorporated  
7564 Browns Mill Road  
Chambersburg, PA  17201  
(717) 375–4733

PACE Center for Girls

Type: Immediate Sanction  
Subtype: Day Treatment  
Target Population: Delinquent and otherwise troubled girls ages 12–18

This program provides comprehensive education and treatment services including individual and family counseling, accredited education, career planning, pregnancy prevention, cultural awareness, life skills, and volunteer opportunities.

Contact: Gail Henson  
Program Development Manager  
PACE Center for Girls  
9250 Cypress Green Drive, Suite 106  
Jacksonville, FL  32256  
(904) 737–3275

Probation Fields

Type: Immediate Sanction  
Subtype: Day Treatment  
Target Population: Delinquents ages 12–18 at risk of being removed from the home

This 6-month program serves youth referred by the juvenile court and aims to deter them from future delinquent activity. Program components include guided group interaction, vocational training, and basic skills education. Participants must attend school or obtain full-time employment following program completion.

Contact: George Sullivan  
Supervising Probation Officer  
Passaic County Probation Department  
182 First Street  
Passaic, NJ  07055  
(201) 881–2808

Specialized Training and Remedial Tutoring (START)

Type: Immediate Sanction  
Subtype: Day Treatment  
Target Population: Juvenile offenders who have dropped out of school

This program uses video and group discussions to teach crime avoidance to juveniles in diversion, in detention, or on academic probation. The program develops decisionmaking skills and helps youth cope with peer and family issues. Primary interventions are skill development, academic education, and individual/family counseling.

Contact: Gerald David  
Intake Supervisor  
Calcasieu Parish Juvenile Court  
Box 5544 Drew Station  
Lake Charles, LA 70606  
(318) 478–1550
The Day Program
Type: Immediate Sanction  
Subtype: Day Treatment  
Target
Population: Youth ages 13–18 with a history of juvenile court contact, chronic truancy, or substance abuse

This comprehensive youth services program provides individualized attention to troubled youth and their families. Services include academic remediation, GED preparation, behavioral modification, counseling, and employment training.

Contact:  
Elizabeth Morris  
Director  
The Day Program  
P. O. Box 1811  
Alabaster, AL  35007  
(205) 664–1600

Intermediate Sanction

Alternative Rehabilitation Communities (ARC), Inc. Day Treatment
Type: Intermediate Sanction  
Subtype: Day Treatment  
Target
Population: Adjudicated offenders ages 13–18

This treatment program is for serious and chronic juvenile offenders in need of supervision, counseling, and education. Youth receive services in a community-based setting as an alternative to placement in a remote facility.

Contact:    
Daniel Elby  
Executive Director  
Alternative Rehabilitation Communities, Inc.  
2743 North Front Street  
Harrisburg, PA  17110  
(717) 238–7101

Missouri Day Treatment Program
Type: Intermediate Sanction  
Subtype: Day Treatment/Aftercare  
Target
Population: Serves as a diversion program for low-risk, committed youth and as an aftercare program for moderate- and high-risk committed youth returning to the community from residential placement.

This year-round program provides a structured educational alternative to the public school system for youth at risk of residential placement. The program includes academic courses, GED classes, career planning, job placement, and community service. Youth receive individual attention.

Contact:    
Mark Steward  
Director  
Division of Children and Youth Services  
P.O. Box 447  
Jefferson City, MO  65102  
(314) 751–3324

Pinellas Marine Institute (PMI)
Type: Intermediate Sanction  
Subtype: Day Treatment  
Target
Population: Delinquents ages 15–18

This program provides treatment and aftercare services to youth adjudicated delinquent by juvenile courts. It focuses on individualized education and marine activities such as scuba diving and sailing. A 12-week aftercare program is provided following completion of the 6-month PMI program.

Contact:    
Bob Weaver  
President  
Associated Marine Institutes  
5915 Benjamin Center Drive  
Tampa, FL  33634  
(813) 887–3300
Texas Key Day Treatment
Type: Intermediate Sanction
Subtype: Day Treatment
Target Population: Delinquent youth
This program provides probation services to juveniles who have committed crimes and aftercare services to juveniles released from a corrections facility. The 12-hour per day program includes education, counseling, vocational skills, training, and recreation programming. Youth are tracked after hours as well.

Contact: Carla Ventura
Special Assistant to the Executive Director
The Texas Key Program
3000 South IH-35, Suite 410
Austin, TX  78704
(512) 462–2181

Adolescent Sex Offender Treatment Program
Type: Intermediate Sanction
Subtype: Outpatient Sex Offender Program
Target Population: Low-risk youth adjudicated for a sex offense
This program, an alternative to institutional treatment, provides assessment and treatment services to youth charged with sex-related offenses. It encourages offenders to accept responsibility for their actions and to acquire skills for healthier ways of coping with emotional needs. Primary interventions include group therapy, individual and family counseling, and skill development.

Contact: Ginny Vanderzee
Therapist
Adolescent Sex Offender Treatment Program
Kent County Juvenile Court
1501 Cedar Street NE.
Grand Rapids, MI  49503
(616) 336–3700

Juvenile Sex Offender Treatment Program
Type: Intermediate Sanction
Subtype: Outpatient Sex Offender Program
Target Population: Adjudicated juvenile sex offenders who can be safely treated in the community
This program aims to deter corrections placement and to reduce the number of sex offender victims by providing offense-specific group counseling for juvenile sex offenders who are at low to moderate risk of reoffending. The program uses a cognitive approach to treatment and focuses on offense cycles and relapse prevention through the use of skill development, individual and family counseling, and mentoring.

Contact: Debbie Cunningham
Coordinator
Juvenile Sex Offender Treatment Program
Coles County Mental Health Center
1300 Charleston Avenue, Box 1307
Mattoon, IL  61938
(217) 234–6405

Sexual Behavior Problems Program
Type: Intermediate Sanction
Subtype: Outpatient Sex Offender Program
Target Population: Adjudicated sex offenders who can safely remain in the community
This group therapy program is sex-offense specific and seeks to provide youth with understanding and control of their sexual behavior. Program staff, families, and community agencies cooperate in holding individuals accountable for their behavior. Services include monitoring, risk assessment, outpatient treatment, and therapy.

Contact: Deborah Hartlaub
Coordinator
Sexual Behavior Problems Program
Akron Child Guidance Center
312 Locust Street
Akron, OH 44302
(216) 762–0591
**Specialized Treatment of Perpetrators (STOP)**

**Type:** Intermediate Sanction  
**Subtype:** Outpatient Sex Offender Program  
**Target Population:** Adjudicated sex offenders

This program’s mission is to intervene with sex offenders and stop their sexually victimizing behaviors by promoting offender accountability, victim empathy, and trust. Youth learn more effective methods of meeting emotional needs. Services include evaluation, psycho-education, treatment, counseling, and long-term case management.

**Contact:**  
Vicki Wallace  
Psychological Services Administrator  
STOP  
201 North Eugene  
Greensboro, NC 27401  
(919) 373–3630

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**Family-Based Services (FBS)**

**Type:** Intermediate Sanction  
**Subtype:** Family Preservation  
**Target Population:** Youth in contact with the juvenile justice system

This program provides in-home therapy to youth and families for up to 12 weeks to preserve the family unit and to avoid out-of-home placement. Caseworkers and families address problems and attempt to strengthen areas of weakness through counseling, skill development, and mentoring.

**Contact:**  
William Boley  
Human Resources Development Council  
Box 1509  
Havre, MT 59501  
(406) 265–6743

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**Family Ties**

**Type:** Intermediate Sanction  
**Subtype:** Family Preservation  
**Target Population:** Delinquent youths who would otherwise be placed out of the home

This program attempts to avert placement of adjudicated youth in juvenile justice facilities. Counselors trained in family preservation work intensively with youth and their families for 4 to 8 weeks to address problems that contribute to the child’s delinquency. If the outcome is successful, placement in a facility is avoided.

**Contact:**  
Eric Parsons  
Chief of Staff  
Department of Juvenile Justice  
365 Broadway  
New York, NY 10013  
(212) 925–7779

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**Prime Time Program**

**Type:** Intermediate Sanction  
**Subtype:** Family Preservation  
**Target Population:** Delinquent or at-risk substance abusers ages 10–17

This program provides treatment to youth and families who abuse drugs and alcohol. It seeks to strengthen the family and reduce family contacts with the juvenile justice system. Services include Family School Group involvement, family counseling, substance abuse education and treatment, and home visits.

**Contact:**  
Mellie Baron  
Supervisor  
Prime Time Program  
The House Next Door  
121 West Pennsylvania Avenue  
DeLand, FL 32720  
(904) 734–7571
**Turning Point**

**Type:** Intermediate Sanction  
**Subtype:** Family Preservation  
**Target Population:** Chronic, serious offenders with prior out-of-home placements  

This program helps troubled families stay together by providing skills to halt the cycle of violence, abuse, and neglect. Counselors provide intensive in-home counseling and case management services. Mentors provide educational, recreational, and social activities.

**Contact:**  
Karen Percy  
Director  
Public Relations and Marketing  
Family Preservation Services  
3330 Bourbon Street, Suite 126  
Fredericksburg, VA 22408  
(703) 372–8709

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**Arizona Key Outreach and Tracking**

**Type:** Intermediate Sanction  
**Subtype:** Intensive Supervision  
**Target Population:** Adjudicated youth ages 10–18 on probation or parole  

This program provides probation services to juveniles who have committed crimes and aftercare services to juveniles released from a corrections facility. Services include daily contacts, strict supervision, counseling, advocacy, crisis intervention, and curfews.

**Contact:**  
Melissa Jenkins-Simon  
Regional Director  
Arizona Key Program  
827 North Fifth Avenue  
Phoenix, AZ 85003  
(602) 256–9552

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**Advancing Youth Project (AYP)**

**Type:** Intermediate Sanction  
**Subtype:** Intensive Supervision  
**Target Population:** Youth on parole, probation, or at risk of future criminal behavior  

This program provides targeted youth with comprehensive social services and vocational training. Its purpose is to assist them in making the transition from school to jobs, higher education, or independent living by providing support and training.

**Contact:**  
H.D. Bud Fredericks, Ed. D.  
Research Professor and Associate Director  
Teaching Research Division  
Western Oregon State College  
Monmouth, OR 97361  
(504) 838–8391

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**Community Corrections Program**

**Type:** Intermediate Sanction  
**Subtype:** Intensive Supervision  
**Target Population:** Juvenile offenders who would otherwise be incarcerated  

This program provides presentencing alternatives for youth who might otherwise be institutionalized. The program treats juvenile offenders in the community by providing supervision and support services to the offender and to the family.

**Contact:**  
Lydia Ashanin  
Communications Specialist  
Youth Development, Inc.  
6301 Central NW.  
Albuquerque, NM 87105  
(505) 831–6038
Community Intervention Services (CIS) Program
Type: Intermediate Sanction
Subtype: Intensive Supervision
Target Population: Serious offenders who would otherwise be incarcerated

This program is designed to divert hardcore, serious offenders from institutional placement and, instead, allow rehabilitation in the community. Services include counseling, supervision and monitoring, lifeskills courses, prevocational counseling, adventure-based outings, recreation, and community service.

Contact: Sherry Seal
CIS Program Manager
East Tennessee Human Reserve Agency
1835 North Cumberland
Morristown, TN 37814
(615) 581–7402

Community Caseworker Program
Type: Intermediate Sanction
Subtype: Intensive Supervision
Target Population: Adjudicated and at-risk youth

This program provides multiple services to youth and families to preserve the family unit. Caseworkers with small caseloads work with clients in the community to address individual, family, social, educational, and vocational needs. Services include skill development, counseling, and special education.

Contact: Frank Janakovic
Executive Director
Alternative Community Resource Program
726 Franklin Street
Johnstown, PA 15901
(814) 536–5611

Community Commitment, Inc.
Type: Intermediate Sanction
Subtype: Intensive Supervision
Target Population: Delinquent adolescents

This nonresidential program for delinquent or emotionally abused youth emphasizes counseling, education, recreation, and living skills. Counselors interact personally with clients and make appropriate service linkages for clients and their families.

Contact: Peter Stollery
Executive Director
Community Commitment, Inc.
4125 Swamp Road
Doylestown, PA 18901
(215) 348–9809

Families in Need of Support (FINS) Program
Type: Intermediate Sanction
Subtype: Intensive Supervision
Target Population: Delinquent and otherwise troubled youth ages 12–18

This program aims to avert out-of-home placement and to strengthen families. Clients meet with counselors once a week. Counselors conduct home visits and help the family develop education, vocational, and recreational plans. At the end of 6 months, clients develop an aftercare plan.

Contact: Cecilia Halverson
Developmental Director
Volunteer Counseling Service
151 South Main Street
New City, NY 10956
(914) 634–5729
High Intensity Treatment Supervision (HITS) Program

Type: Intermediate Sanction  
Subtype: Intensive Supervision  
Target Population: Chronic serious offenders ages 13–18

This program provides an alternative to incarceration for juvenile offenders. The target group includes repeat serious offenders whose behavior is not altered by traditional probation. The program provides intense supervision, monitoring, and treatment services to youth and families.

Contact: Brenda Mosley  
Clinical Program Director  
HITS Program  
Superior Court of the District of Columbia  
409 East Street NW., B Room 302  
Washington, DC  20001  
(202) 508–1627

House Arrest Program

Type: Intermediate Sanction  
Subtype: Intensive Supervision  
Target Population: Probation violators and minor offenders

This program targets youth who are not in control of their behavior. The program provides intensive supervision through electronic monitoring, home telephone calling, or self-reporting. Youth must report for daily group meetings, attend school, and adhere to a curfew.

Contact: Michael Spangler  
Casework Supervisor  
Juvenile Division  
Elkhart County Court Services  
County Courts Bldg.  
315 South Second Street  
Elkhart, IN  46516  
(219) 523–2203

Intensive Probation Program

Type: Intermediate Sanction  
Subtype: Intensive Supervision  
Target Population: Youth ages 10–18 who are having problems on regular probation

This program targets juveniles who have committed serious offenses but have demonstrated a desire to change their behavior. It provides more supervision and support than regular probation. Program components include weekly contacts, curfew checks, and school attendance monitoring.

Contact: Doris Lucy  
Program Director  
Intensive Probation Department  
141 Tuscaloosa Street  
Mobile, AL  36607  
(205) 476–1450

Intensive Case Monitoring

Type: Intermediate Sanction  
Subtype: Intensive Supervision  
Target Population: Low-risk, first-time offenders and medium-risk youth returning to the community from residential placement

In this program, college students assist case managers as intensive case monitors. The college students monitor school attendance and curfew compliance and serve as mentors and role models.

Contact: Mark Steward  
Director  
Division of Children and Youth Services  
P.O. Box 447  
Jefferson City, MO  65102  
(314) 751–3324
Intensive Probation Supervision (IPS) Program

Type: Intermediate Sanction
Subtype: Intensive Supervision
Target Population: Nonviolent youth who would otherwise be incarcerated

This program is a community-based sentencing alternative for high-risk and serious offenders. It emphasizes frequent contacts, mandatory school attendance, and community service. Client selection depends partly on family support, positive attitude, and positive response to past probation.

Contact: William Sifferman
IPS Program Coordinator
Circuit Court of Cook County
1100 South Hamilton Avenue
Chicago, IL  60612
(312) 738–8200

Juvenile Intervention Program

Type: Intermediate Sanction
Subtype: Intensive Supervision
Target Population: First-time, nonviolent offenders

This program provides positive direction to first-time offenders. Volunteer sheriff’s deputies track and counsel youth. Program requirements include school attendance, a curfew, and community service. Successful participation may mitigate the need to file criminal charges.

Contact: A. J. Johnson
Sheriff
Office of the Sheriff
P.O. Box 359
Eagle County, CO  81631
(303) 328–6611

Juvenile Community Intervention Services

Type: Intermediate Sanction
Subtype: Intensive Supervision
Target Population: Delinquent youth who would otherwise be incarcerated

This program serves chronic offenders and their families in the home. The program’s goals are to empower parents to resolve problems without relying on the court system and to monitor youth compliance so they will not further burden the system.

Contact: Erin Creal
Program Manager
Juvenile Community Intervention Services
P.O. Box 909
Dunlap, TN  37327
(615) 949–2191

Juvenile Intensive Supervision Program (JISP)

Type: Intermediate Sanction
Subtype: Intensive Supervision
Target Population: Incarcerated youth returning to the community

This program targets a select group of juvenile offenders posing a minimal risk to the public. Applicants earn the privilege of entering and remaining in the program by continuous adherence to a series of short-term goals and to obligations such as education, employment, and personal accountability.

Contact: Philip Hill
Director
Juvenile Intensive Supervision Program
Administrative Office of the Courts
CN–987
Trenton, NJ  08625
(609) 633–6547
**Juvenile TASC**

**Type:** Intermediate Sanction  
**Subtype:** Intensive Supervision  
**Target**  
**Population:** Delinquent youth with substance abuse problems

This program prescreens first-time offenders and frequently tests them for drug and alcohol use. The program links the juvenile justice system and community treatment providers. Program components include screening, assessment, referral, case management, surveillance, and drug testing.

**Contact:**  
Sandy McIntire  
TASC Director  
Preble County Juvenile Division  
204 North Barron Street  
Eaton, OH 45320  
(513) 456–3443

**Key Outreach and Tracking**

**Type:** Intermediate Sanction  
**Subtype:** Intensive Supervision  
**Target**  
**Population:** Delinquent youth who would otherwise be placed in a residential program

This program serves both as a sentencing alternative and as an aftercare program. Services include daily contact with the youth and family, frequent surveillance, advocacy with other community resources, and referrals for clinical services such as counseling.

**Contact:**  
William Lyttle  
President  
The Key Program  
670 Old Connecticut Path  
Framingham, MA 01701  
(508) 877–3690

**Special Services Unit (SSU)**

**Type:** Intermediate Sanction/Secure Corrections  
**Subtype:** Intensive Supervision Program/Community-Based Residential  
**Target**  
**Population:** Adjudicated sex offenders, institutionalized and noninstitutionalized

This program seeks to demonstrate the viability of community-based residential treatment for high-risk sex offenders and to prevent their recidivism by managing and treating sexual aggression. Probation officers provide specialized aftercare services for institutionalized youth and specialized supervision and treatment of youth on probation.

**Contact:**  
Ronald Seyko  
Supervisor  
Northern Probation Center  
906 Western Avenue  
Pittsburgh, PA 15233  
(412) 321–0365

**Special Probation Program**

**Type:** Intermediate Sanction  
**Subtype:** Intensive Supervision  
**Target**  
**Population:** Adjudicated delinquents who are about to be committed

This program is based on a comprehensive, individualized treatment plan and on frequent treatment-focused contacts. During the first month of the program, juveniles are monitored continuously, often via electronic monitoring. The level of supervision decreases during the last 5 months of the program.

**Contact:**  
Austin Suits  
Manager  
Family Court of St. Louis County  
501 South Brentwood Boulevard  
Clayton, MO 63105  
(314) 889–3400
**STAR Project**

**Type:** Intermediate Sanction  
**Subtype:** Intensive Supervision  
**Target**  
**Population:** Junior high school youth who have committed detainable offenses

This program combines an educational component with supervision by the county probation department. Program goals include keeping the offender in school, reducing disruptive behavior, and instilling pride and self-discipline in program participants. School expulsion is used only as a last resort.

**Contact:** Melvin Brown  
Executive Director  
STAR Project  
County Administration Building  
301 North Thompson  
Conroe, TX 77301  
(409) 760–6995

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**Texas Key Outreach and Tracking**

**Type:** Intermediate Sanction  
**Subtype:** Intensive Supervision  
**Target**  
**Population:** Delinquent youth

This program provides probation services to juveniles who have committed crimes and aftercare services to juveniles released from a corrections facility. Services include daily contacts, strict supervision, counseling, advocacy, crisis intervention, and curfews.

**Contact:** Carla Ventura  
Special Assistant to the Executive Director  
The Texas Key Program  
3000 South IH–35, Suite 410  
Austin, TX 78704  
(512) 462–2181

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**Tracker Program**

**Type:** Intermediate Sanction  
**Subtype:** Intensive Supervision  
**Target**  
**Population:** Youth released from Maine Youth Correctional Center

The goals of this program are to shorten the time youth spend in correctional institutions and to reduce recidivism by reintegrating youth with their families and communities. Juveniles are released to the program with an individualized case plan that may include a curfew, substance abuse counseling, family counseling, school attendance, and volunteer work.

**Contact:** Roxy Hennings  
Planning Coordinator  
The Texas Key Program  
3000 South IH–35, Suite 410  
Austin, TX 78704  
(512) 462–2181

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**Violence Intervention Program (VIP)**

**Type:** Intermediate Sanction  
**Subtype:** Intensive Supervision  
**Target**  
**Population:** Violent offenders who would otherwise be incarcerated

This program serves youth ages 13–15 who have committed violent offenses such as homicide, battery, assault, and robbery, and who have been placed on probation. Services include daily contact, drug testing, curfew, and education.

**Contact:** Melinda Smith  
Executive Director  
New Mexico Center for Dispute Resolution  
620 Roma NW, Suite B  
Albuquerque, NM 87102  
(505) 247–0571
Youth Advocacy

Type: Intermediate Sanction
Subtype: Intensive Supervision
Target Population: Adjudicated chronic offenders who would otherwise be incarcerated

This program targets mostly youth convicted of property-related crimes or assault, providing intensive case management and community-based technical assistance to youth and their families for 1 year. The program incorporates individualized planning, advocacy, and unconditional care of youth.

Contact: Marsha Weissman
Executive Director
Center for Community Alternatives
430 East Genesee Street, Suite 205
Syracuse, NY 13202
(315) 422–5638

Community Intensive Supervision Project (CISP)

Type: Intermediate Sanction
Subtype: Electronic Monitoring
Target Population: Chronic male juvenile offenders who would otherwise be institutionalized

This program serves as an alternative to incarceration for male offenders ages 10–18 who recidivate while on probation. Most participants are property or crack cocaine offenders. Sex offenders are ineligible for the program. Youth are tracked constantly through electronic monitoring. During the day, they attend school or work jobs, and in the evening go to CISP classes where they receive a full range of programming.

Contact: Joseph Daugerdas
Director of Court Services
Family Division—Juvenile Section
3333 Forbes Avenue
Pittsburgh, PA 15213
(412) 578–8210

Early Release Program

Type: Intermediate Sanction
Subtype: Electronic Monitoring
Target Population: Committed delinquents

This program facilitates early release of appropriate youth from institutions. The program provides intensive counseling services to youth and families. Clients undergo electronic monitoring and receive intensive team supervision by probation staff.

Contact: Virginia Perfetta
Program Coordinator
Juvenile Justice Department
Court Administration Office
Pottsville, PA 17901
(717) 628–1245

Nokomis Challenge Program

Type: Intermediate Sanction
Subtype: Outdoors Program
Target Population: Adjudicated felony offenders ages 14–18

This program includes an 84-day residential component that provides youth with prosocial, life management, and academic skills by using a cognitive/behavioral approach and wilderness experiences. A 9-month community surveillance and treatment component helps reintegrate youth with their families and communities.

Contact: John Castle
Director
Nokomis Challenge Program
6300 South Reserve Road
Prudenville, MI 48651
(517) 366–5368
**Project Challenge**

**Type:** Intermediate Sanction  
**Subtype:** Outdoors Program  
**Target**  
**Population:** Delinquent youth  
This program targets substance-abusing youth referred from a locked residential facility. It is designed to reintegrate youth into the community and provide activities to improve self-esteem, education, decision-making, and social skills.

**Contact:**  
Lisa Rae Galm  
Program Director  
Project Adventure  
P.O. Box 2447  
Covington, GA 30209  
(404) 784–9310

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**Challenge Program**

**Type:** Intermediate Sanction  
**Subtype:** Boot Camp  
**Target**  
**Population:** Adjudicated males ages 14–16  
This sentencing alternative program consists of three phases: 90 days in a secure residential facility with emphasis on discipline and education, 120 days in a halfway house with counseling and job skills training, and aftercare with services and monitoring.

**Contact:**  
Jesus Chavez  
Supervisor  
Challenge Program  
Juvenile Probation Department  
6400 Delta Drive  
El Paso, TX 79905  
(915) 772–2133

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**Lead Program**

**Type:** Intermediate Sanction  
**Subtype:** Boot Camp  
**Target**  
**Population:** Committed youth and first-time parole violators  
This program uses a treatment continuum that begins with a short-term, intensive, and highly structured institutional program modeled on a military boot camp. This initial phase is followed by an intensive parole phase with graduated supervision levels. Services include physical training, education, and counseling.

**Contact:**  
William Kolender  
Director  
Department of the Youth Authority  
421 Williamsbourgh Drive  
Sacramento, CA 95823  
(916) 262–1467

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**New Start Program**

**Type:** Intermediate Sanction  
**Subtype:** Boot Camp  
**Target**  
**Population:** Chronic property offenders  
During this 6-month program, residents spend the first 12 weeks at the Lloyd E. Rader Center, where they are assigned in groups of eight. There, physical training, recreational therapy, and communication activities build self esteem. Group interactions provide real-life material for group counseling. The next 12 weeks of the program include closely supervised community tracking.

**Contact:**  
Larry Dobbs  
Program Director  
New START Program  
Lloyd Rader Center  
Route 4, Box 9  
Sand Springs, OK 74063  
(918) 245–2541
**Harborcreek Youth Services Residential Program**

**Type:** Intermediate Sanction  
**Subtype:** Community-Based Residential  
**Target Population:** Delinquent males ages 10–18

This program uses a system of rewards and punishments to modify youth behavior. Individualized counseling and bonding between each resident and his counselor are integral parts of the rehabilitation process. Program services include group and family counseling, drug and alcohol treatment, and psychological and sexual counseling.

**Contact:** Jerome Pelkowski  
Executive Director  
Harborcreek Youth Services  
5712 Iroquois Avenue  
Harborcreek, PA 16421  
(814) 899–7664

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**Abraxas I Drug Sellers Program**

**Type:** Intermediate Sanction  
**Subtype:** Community-Based Residential  
**Target Population:** Nonviolent delinquent males ages 14–18 charged with or involved in drug sales

This program is run in an open residential facility that provides a nurturing, structured environment for residents to make positive changes in their behaviors and attitudes that will help them remain drug- and crime-free. Therapeutic activities include individual, group, and family counseling; clinical study; and life-skills education.

**Contact:** Jack Godlesky  
Administrator/Regional Director  
Abraxas I  
Abraxas High School  
Blue Jay Village  
Box 59  
Marienville, PA 16239  
(814) 927–6615

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**Abraxas I Intensive Treatment Program**

**Type:** Intermediate Sanction  
**Subtype:** Community-Based Residential  
**Target Population:** Nonviolent delinquent males ages 14–18 with substance abuse issues

This program provides a safe, structured environment where residents can make positive changes in their behaviors, leading to recovery. The program uses a comprehensive approach to treatment and rehabilitation and enforces mandatory compliance with program rules. Firm intervention enables clients to increase their self-awareness and provides motivation to change.

**Contact:** Jack Godlesky  
Administrator/Regional Director  
Abraxas I  
Abraxas High School  
Blue Jay Village  
Box 59  
Marienville, PA 16239  
(814) 927–6615

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**Adelphoi Village Group Homes**

**Type:** Intermediate Sanction  
**Subtype:** Community-Based Residential  
**Target Population:** Delinquents ages 12–17

This group home program provides supervision and life management skills to youth unable to return home because of the severity of their individual cases. Program components include independent living skills, education, counseling, job readiness, vocational planning, and intensive supervision.

**Contact:** John Bukovac  
Executive Director  
Adelphoi Village  
354 Main Street  
Latrobe, PA 15650  
(412) 537–3052
**Alliance House**

**Type:** Intermediate Sanction  
**Subtype:** Community-Based Residential  
**Target**  
**Population:** Newly committed males ages 13–17

This short-term (up to 60 days) residential assessment and intervention program has as its goals stabilization, diagnosis, and short-term counseling. The secure environment it provides encourages responsibility and respect for others through skill development, community service, and mentoring.

**Contact:** Peter Downey  
Program Director  
Alliance House  
38 Pleasant Street  
Stoneham, MA 02180  
(617) 438–6880

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**Arizona Boys’ Ranch**

**Type:** Intermediate Sanction  
**Subtype:** Community-Based Residential  
**Target**  
**Population:** Delinquent and otherwise troubled boys ages 8–18

This family-centered program emphasizes education, recreation, vocational counseling, and work programs. These activities, along with the relationships youth develop with staff members, are designed to reinforce the juveniles’ sense of self worth and responsibility.

**Contact:** Denice Fitchie  
Assistant Director  
Arizona Boys’ Ranch  
Boys’ Ranch, AZ 85242  
(602) 987–9700

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**Anchor House Ministries, Inc.**

**Type:** Intermediate Sanction  
**Subtype:** Community-Based Residential  
**Target**  
**Population:** Delinquent or otherwise troubled males ages 12–18 who have been emotionally or physically abused

This nonsecure, structured residential program provides counseling, individualized education, life-skills training, work assignments, cultural activities, and recreation for all its clients. Males 16 to 18 years old also receive predischarge employment and independent living skills training.

**Contact:** Mark Rivera  
Director  
Anchor House Ministries  
P.O. Box 625  
Auburndale, FL 33823  
(813) 665–1916

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**Arrowhead Ranch**

**Type:** Intermediate Sanction  
**Subtype:** Community-Based Residential  
**Target**  
**Population:** Nonviolent, delinquent, and troubled boys ages 13–18

This private, nonprofit treatment facility provides a safe and caring environment that encourages responsibility, trust, and a positive work ethic for clients. Services include group treatment, individualized education, family therapy, recreation, independent living skills training, community service involvement, and aftercare.

**Contact:** Ted Amlong  
Treatment Director  
Arrowhead Ranch  
12200 104th Street  
Coal Valley, IL 61240  
(309) 799–7044
Bowling Brook
Type: Intermediate Sanction
Subtype: Community-Based Residential
Target Population: Serious, chronic male offenders ages 16–19

This secure, rural program provides academic, prevocational, social skills, and athletic training in addition to general care and intensive supervision. Program services are designed to change client behavior from negative to prosocial and to develop these life skills necessary to sustain behavioral change.

Contact: Mike Sunday
Executive Director
Bowling Brook
P.O. Box 94
Middleburg, MD 21768
(410) 775–7881

Civic Conservation Corps (CCC)
Type: Intermediate Sanction
Subtype: Community-Based Residential
Target Population: Delinquent and otherwise troubled males ages 16–18

This is a paramilitary-style program for delinquent youth referred from throughout the country. The program provides work ethic and vocational training, social skills development, GED preparation, and group and individual counseling.

Contact: Denice Fitchie
Assistant Director
Arizona Boys’ Ranch
Boys’ Ranch, AZ 85242
(602) 987–9700

Genesis Residential Treatment Facility
Type: Intermediate Sanction
Subtype: Community-Based Residential
Target Population: Delinquent and otherwise troubled males ages 13–18

This program provides a positive, homelike environment for adolescent males unable to remain in their own homes. Residents receive an individualized treatment plan; undergo individual, group, and family therapy; attend a school program; and receive services from appropriate community agencies. Length of stay ranges from 29 days to 18 months, or more.

Contact: Paula Mortensen
Program Manager
Genesis Residential Treatment Facility
Campus Avenue, P.O., Box 7291
Lewiston, ME 04243
(207) 777–8944

George Junior Republic
Type: Intermediate Sanction
Subtype: Community-Based Residential
Target Population: Delinquent and otherwise troubled adolescent males

This program helps boys develop a positive self-image by accentuating positive traits and working to eliminate negative ones. The program teaches youth how to select and achieve career goals in both academic and vocational fields. Project staff serve as positive role models to foster productive growth.

Contact: Daniel Baker
Assistant Social Services Director
George Junior Republic
P.O. Box 471
Grove City, PA 16127
(412) 458–9330
Gulf Coast Trades Center
Type: Intermediate Sanction
Subtype: Community-Based Residential
Target
Population: Adjudicated youth ages 16–18
This residential and vocational institution rehabilitates youth by helping them to become economically independent. The program includes an assessment, basic skills classes, GED preparation, vocational training, counseling, substance abuse education, driver’s education, work experience, job referral, discharge planning, and aftercare.
Contact: Thomas Buzbee
Executive Director
Gulf Coast Trades Center
P. O. Box 515
New Waverly, TX 77358
(409) 344–6677

Idaho Youth Ranch Short-Term Residential Program
Type: Intermediate Sanction
Subtype: Community-Based Residential
Target
Population: Chronic serious offenders with three or more felony convictions
This diversion program focuses on youth who have been sentenced to the State training school. The program serves youth and their families in the community. Behavior management, restitution, school, peer groups, and parental effect are the focal points throughout treatment. The program enables youth to maintain family contact and to reunite with support faster than if they had been incarcerated.
Contact: Jeffrey Schatz
Director
Idaho Youth Ranch
4403 East Locust Lane
Nampa, ID 83686
(208) 467–1750

Mill Street Project
Type: Intermediate Sanction
Subtype: Community-Based Residential
Target
Population: Delinquent and otherwise troubled youth
The goal of this program is to provide youth with positive alternative lifestyles. Program services include individual, group, and family counseling; education; and 24-hour medical services. Project staff include a certified social worker, licensed chemical dependency counselor, and others.
Contact: John Warren
Director
Johnson County Juvenile Services
116 South Mill Street
Cleburne, TX 76031
(817) 556–6880

New Dominion, Inc.
Type: Intermediate Sanction
Subtype: Community-Based Residential
Target
Population: Delinquent and otherwise troubled males
This program provides treatment and accredited academics in a camp-like setting. Students live in therapeutic groups consisting of 10 or 11 boys, 2 full-time counselors, and support staff. Each group builds its own structure in which to live, plans projects and activities, and takes wilderness trips. The natural environment allows students to experience the rewards and consequences of their actions.
Contact: Tim Snyder
Director
New Dominion, Inc.
P.O. Box 8
Oldtown, MD 21555
(301) 478–5721
Nicholas Residential Treatment Center

**Type:** Intermediate Sanction  
**Subtype:** Community-Based Residential  
**Target Population:** Delinquent males ages 11–16

This program serves youth who have been adjudicated delinquent or unruly and who are unresponsive to school programs and outpatient counseling services. The program fosters growth and achievement, provides a positive educational environment, and develops positive decisionmaking skills to help youth avoid delinquent behavior.

**Contact:**  
Lee Townsel  
Director  
Nicholas Residential Treatment Center  
5581 Dayton-Liberty Road  
Dayton, OH 45418  
(513) 496-7100

Ocean Tides

**Type:** Intermediate Sanction  
**Subtype:** Community-Based Residential  
**Target Population:** Delinquent males ages 13–17

This residential, group home program provides specialized treatment services for adjudicated delinquent males. Program services include education, family therapy, skill development, and a 3-month aftercare component.

**Contact:**  
Timothy Balfe  
Director of Social Service  
Ocean Tides  
635 Ocean Road  
Narragansett, RI 02882  
(401) 789–1016

Paint Creek Youth Center

**Type:** Intermediate Sanction  
**Subtype:** Community-Based Residential  
**Target Population:** Serious felony offenders ages 15–18

This program draws on such treatment philosophies as positive peer culture, reality therapy, and critical thinking processes. By adhering to well-defined behavior goals, residents move through successive phases characterized by increased privileges and responsibilities. Security is achieved through structure and constant staff presence.

**Contact:**  
Elizabeth Baldwin  
Ohio DYS  
51 North High Street  
Columbus, OH 43266  
(614) 466–4314

Scarseth House

**Type:** Intermediate Sanction  
**Subtype:** Community-Based Residential  
**Target Population:** Nonviolent substance abusers who have completed a residential placement

This program provides youth released from an institution with a transitional living environment. Accepted residents typically have completed a primary substance treatment program and have maintained 30 days of sobriety. Services include substance abuse education, counseling, and skill development.

**Contact:**  
Cheryl Coleman  
Executive Director  
Scarseth House  
535 South 17th Street  
La Crosse, WI 54601  
(608) 785–1270
**Senior Tutors for Youth**

**Type:** Intermediate Sanction  
**Subtype:** Community-Based Residential  
**Target**  
**Population:** Delinquents in residential placements  

This program uses senior citizen volunteers as tutors and mentors for youth. Program goals are to provide one-on-one academic assistance, to encourage youth to achieve, and to provide supportive role models who help youth develop social skills and self-esteem.

**Contact:**  
Pauline Johns  
Associate Program Director  
Senior Tutors For Youth  
3640 Grand Avenue, Suite 205  
Oakland, CA  94610  
(510) 839–1039

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**Sexual Counseling Services**

**Type:** Intermediate Sanction  
**Subtype:** Community-Based Residential  
**Target**  
**Population:** Adjudicated male sex offenders  

This program provides offense-specific treatment for such sex-related crimes as rape, child molestation, involuntary deviate sexual intercourse, and indecent assault. Violent offenders are excluded from the program, which seeks to modify maladaptive behaviors.

**Contact:**  
Richard Ferko  
Administrator  
Sexual Counseling Services  
Harborcreek Youth Services  
5712 Iroquois Avenue  
Harborcreek, PA  16421  
(814) 899–7664

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**Specialized Treatment Services**

**Type:** Intermediate Sanction  
**Subtype:** Community-Based Residential  
**Target**  
**Population:** Emotionally disturbed, delinquent males, ages 12–18  

This program focuses on behavior related to sex offenses. Clients receive psychiatric evaluations and individual treatment plans. Program services include family, group, and individual counseling; GED preparation; religious and recreational activities; nutrition education; and aftercare.

**Contact:**  
Edward Vogelsong  
Clinical Director  
Specialized Treatment Services  
P.O. Box 484  
Mercer, PA  16137  
(412) 662–1277

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**Texas Key Residential Program**

**Type:** Intermediate Sanction  
**Subtype:** Community-Based Residential  
**Target**  
**Population:** High-risk delinquents  

This diversion program provides a secure and nurturing environment to juveniles assigned there by the juvenile court. Program components include education, individual and family therapy, recreation, vocational training, life skills, and individualized attention.

**Contact:**  
Carla Ventura  
Special Assistant to the Executive Director  
The Texas Key Program  
3000 South IH-35, Suite 410  
Austin, TX  78704  
(512) 462–2181
Three Springs Residential Treatment Center
Type: Intermediate Sanction
Subtype: Community-Based Residential
Target Population: Male sex offenders ages 12–17 with emotional and behavioral disorders

This program emphasizes supervision and structure, using a multidisciplinary team approach to provide individualized treatment, educational services, and recreational therapy. The program seeks to teach juveniles to manage aggressive sexual behaviors and to arrest the development of habitual patterns of aggression.

Contact: Mike Watson
President
Three Springs Treatment Programs
247 Chateau Drive
Huntsville, AL 35801
(205) 880–3339

Secure Corrections
Cheltenham Young Women’s Facility
Type: Secure Corrections
Subtype: Community Confinement
Target Population: Adolescent females adjudicated for serious and violent offenses

This secure treatment program provides education, vocational training, counseling, individualized case management, and recreation for up to 28 females. The treatment modality is a four-level behavior modification program. Average length of stay is from 4 to 6 months.

Contact: Herman Ingram
Superintendent
Cheltenham Young Women’s Facility
P.O. Box 160
Cheltenham, MD 20623
(301) 782–4223

Robert F. Kennedy School
Type: Secure Corrections
Subtype: Community Confinement
Target Population: Serious offenders

This small, secure program for serious offenders provides individual and group therapy, individualized educational services, and recreational activities. The psycho-educational curriculum includes sex offender therapy, drug and alcohol counseling, health education, and violence prevention.

Contact: Edward Kelley
Executive Director
RFK Action Corps
11 Beacon Street
Boston, MA 02108
(617) 227–4138

Weaversville Intensive Treatment Unit
Type: Secure Corrections
Subtype: Community Confinement
Target Population: Chronic violent male offenders

This intensive group psychotherapy program uses a delinquency-specific model that is directive and psycho-educational, emphasizing personal prosocial development and accountability. Services include academic and vocational programs; recreational, social, religious, and work programs; and a family therapy program.

Contact: Arthur Eisenbush
Project Director
Weaversville Intensive Treatment Unit
Career Systems Development Corporation
6710 Weaversville
Northampton, PA 18067
(215) 262–1591
Dunbar and Kincaid Cottages
Type: Secure Corrections
Subtype: Incarceration
Target Population: Adjudicated sex offenders

This program assists juveniles in processing their denial and assuming responsibility for sexually offending behaviors. The program offers three weekly groups for sex offenders, a weekly community meeting, and weekly meetings with assigned primary staff. Students also attend a specially designed program at a local school.

Contact: Robert Jester  
Acting Superintendent  
MacLaren School  
2630 North Pacific Highway  
Woodburn, OR 97071  
(503) 982–4476

Free Venture Program
Type: Secure Corrections
Subtype: Incarceration
Target Population: Incarcerated youth

In this program, private industries operate their businesses within the correctional institution, using offenders as employees. Offenders receive meaningful job training, and victims receive restitution payments. The program teaches occupational skills and positive work habits and attitudes.

Contact: Frederick Mills  
Administrator  
Free Venture Program  
Department of the Youth Authority  
4241 Williamsbourgh Drive  
Sacramento, CA 95823  
(916) 262–1467

Independent Living Program
Type: Secure Corrections
Subtype: Incarceration
Target Population: Incarcerated males and females ages 16–18 about to return to the community

This program provides youth with an 8-week prerelease program and with financial assistance after release. Prior to their release, youth must meet a specific set of performance measures that include adult skills training, community service, employment, special offender treatment, and a transition plan.

Contact: Tom Tye  
Chief of Independent Living  
Texas Youth Commission  
4900 North Lamar, P.O. Box 4260  
Austin, TX 78765  
(512) 483–5122

Intensive Sexual Intervention System (ISIS)
Type: Secure Corrections
Subtype: Incarceration
Target Population: Sex offenders committed to the Gibault School for Boys

This two-tiered program provides 80 to 100 hours of group counseling for less severe sexual offenders and more intensive treatment for multiple sex offenders. Both tiers provide individualized counseling, treatment plans, and therapeutic assignments in an effort to build up a morality base, empathy, responsibility, and social skills in offenders.

Contact: Norbert Gottschling  
Director of Programs  
Gibault School for Boys  
6301 South U.S. Hwy. 41, P.O. Box 2316  
Terre Haute, IN 47802  
(812) 299–1156

Minority Youth Concerns Program
Type: Secure Corrections
Subtype: Incarceration
Target Population: Incarcerated, gang-involved minority youth

This program promotes self- and social awareness by challenging minority students to evaluate and redefine their values. Intervention techniques include reality therapy, problem solving, guest speakers, and role playing.
Secure Intensive Treatment Program
Type: Secure Corrections
Subtype: Incarceration
Target Population: Violent offenders

This program provides offense-specific treatment and educational along with vocational services. The program is housed in a self-contained, 20-bed maximum security unit with an inhouse school, shop, and gym. Treatment focuses on holding students responsible for their behavior and on helping them develop new behavior patterns.

Contact: Robert Jester
Acting Superintendent
MacLaren School
2630 North Pacific Highway
Woodburn, OR 97071
(503) 982–4476

Vermont Intensive Treatment Program for Aggressive Adolescents
Type: Secure Corrections
Subtype: Incarceration
Target Population: Serious violent offenders requiring secure care

This program is designed to eliminate criminal relapse, develop positive relationships with adults, and promote long-term personal change. Program components include education, treatment, skill development, monitoring, recreation, and community service work.

Contact: Stephen Coulman
Director
Woodside Juvenile Rehabilitation Center
26 Woodside Drive East
Colchester, VT 05446
(802) 655–4990

Sex Offender Treatment Program
Type: Secure Corrections
Subtype: Incarceration
Target Population: Incarcerated male sex offenders

This program focuses on youth adjudicated for sexual and aggravated assault and seeks to modify behavior and reduce risk of reoffending. Release requirements are performance related. Treatment addresses denial, sexual assault cycle, relapse prevention, behavior and skills training, victimization, and empathy.

Contact: Linda Reyes
Chief of Mental Health
Texas Youth Commission
4900 North Lamar, P. O. Box 4260
Austin, TX 78765
(512) 483–5152

Young Men as Fathers Program
Type: Secure Corrections
Subtype: Incarceration
Target Population: Incarcerated fathers

This program works with wards, parenting experts, State agencies, and community-based organizations to improve the parenting skills of incarcerated males. The program contracts with community-based organizations and local service providers to implement culturally sensitive parenting classes that total 60 hours.

Contact: William Kolender
Director
Department of the Youth Authority
4241 Williamsbourgh Drive
Sacramento, CA 95823
(916) 262–1467
Part IV: Risk Assessment and Classification for Serious, Violent, and Chronic Juvenile Offenders

Background

The success of a comprehensive continuum of interventions and sanctions depends on proper identification of specific types of offenders for placement in the various levels of intervention. For example, what criteria will be used to determine which noncourt-involved youth require preventive services? Similarly, when confronted with a first-time violent offender, on what basis will the decision be made to place the youth under probation supervision as opposed to a more restrictive placement? And at what point does a chronic, nonviolent offender become eligible for secure care as opposed to a highly structured community-based program?

These questions relate directly to assessment and classification issues. The answers are central to the success not only of the individual programs and interventions within a continuum model, but also to the model itself. It is our contention that any system predicated on graduated, differential interventions must include the following components:

- Clearly specified selection criteria for the various programs and levels of intervention.
- Adequate methods for assessing the degree to which individual youth meet those criteria.
- A selection process that ensures that youth intended for a particular level of intervention will in fact be served at that level.

When assessment and classification procedures consistently fail to link youth with the interventions designed for them, there are a number of potentially negative consequences.

Consequences include the following:

- Increased risk to public safety, because high-risk and/or violent youth are placed in a setting that is not sufficiently restrictive to control their behavior.
- Inefficient use of resources resulting from the placement of nonviolent youth or youth who are not high-risk in overly restrictive settings.
- Inequities resulting from placing youth with similar offense, risk, and need characteristics at different levels of intervention.
- Negative or inconclusive evaluation of the system and/or individual interventions because of “net-widening” or other evidence of failing to serve intended target populations.

Risk Assessment and Classification

Broadly defined, risk assessment and classification in juvenile justice refer to the process of estimating an individual’s likelihood of continued involvement in delinquent behavior and making decisions about the most appropriate intervention for the identified risk level. Classification decisions based on risk assessment are made at all levels of the juvenile justice process including reporting, arrest, intake, detention,
prosecution, disposition, and placement. For example, in making detention decisions, intake staff attempt to assess whether juveniles pose a danger to the community or themselves and whether they are likely to appear for subsequent court hearings. Judges routinely weigh offender risk when determining whether a youth should be placed on probation or in secure care or should be given some type of intermediate sanction. In making security and custody decisions, correctional facility staff must assess the likelihood that an offender will try to escape, commit suicide, or assault someone. The assessment of risk and other factors leads directly to a classification decision. As Glaser (1987, p. 251) has noted, “Risk assessment always involves case classification since the person about whom a judgment must be made is implicitly or explicitly equated with others in a more or less clearly conceived group who are categorized as relatively safe or dangerous individuals.”

Historically, risk assessment and classification have been informal, highly discretionary procedures performed by individuals with varying philosophies about juvenile justice, different levels of experience and knowledge, and different criteria for making assessments. Such informal procedures have been criticized because they lead to decisions that may be erroneous, inconsistent or inequitable, and that lack accountability as a result of the “invisible” rationale and criteria used by the decision maker (Baird, 1984; Clear, 1988; Glaser, 1987).

Increasingly, such criticisms have prompted the criminal and juvenile justice systems to adopt more formal procedures for decisionmaking, including sentencing guidelines, standardized risk and needs assessment instruments, and structured classification systems. Although empirical data are not available to document this phenomenon, there is evidence that structured decisionmaking is now widespread, if not the norm, in juvenile justice agencies. For example, Barton and Gorsuch (1989) conducted a survey to determine the extent to which risk assessment tools are being used by State juvenile corrections agencies. Of the States responding (n=37), almost half (47 percent) used formal risk assessment tools to make classification decisions. An additional 30 percent of the reporting agencies used formal classification procedures that did not include risk assessment. Only 22 percent reported they do not use formal assessment or classification instruments. Another indicator of the trend toward formal decisionmaking is the growing number of jurisdictions that have worked with the National Council on Crime and Delinquency (NCCD) to develop, implement, or revise risk assessment and classification systems. Between 1990 and 1993, NCCD worked with 20 to 25 State and local jurisdictions on these issues.

If risk assessment and classification are to be the cornerstones of a systematic response to serious, violent, and chronic juvenile offending, it is imperative to clearly define risk assessment.

Purpose and Format

Despite the increasing use of formal assessment and classification tools in juvenile justice, relatively little attention has been given to variations in system design, especially differences in how tools are used among the distinct levels of the juvenile justice system. If risk assessment and classification are to be the cornerstones of a systematic response to serious, violent, and chronic juvenile offending, it is imperative to clearly define risk assessment, to understand the rationale for structured decisionmaking and to identify how this approach is being used or could be used to enhance the response to juvenile delinquency.

This part provides an overview of the assessment and classification systems in current use, including the problems the systems are designed to address, the general principles upon which they are based, and their roles in case decisionmaking. The different tools and procedures used at various stages in the juvenile justice process are also discussed. For each decision point, promising approaches are identified based on the literature and known assessment and classification systems. The emphasis is on risk assessment, although some discussion of needs assessment is included.
The following section examines the rationale and goals of risk assessment and classification in juvenile justice. The discussion includes definitions of different types of assessment scales, their intended uses and methods of development, commonly included variables, and the basic principles of all successful classification systems. Subsequent sections focus on risk assessment at the prevention stage (including risk assessment at the community level and in child welfare agencies) and at different decision points in the juvenile justice system. These decision points include detention, placement, probation/parole supervision, and institutional custody. The final section provides a brief summary and highlights a set of key design and implementation issues.

Risk Assessment and Classification: Rationale, Goals, and Uses

The primary rationale for using formal assessment and classifications systems is twofold:

- To provide greater validity, structure, and consistency to the assessment and decisionmaking processes.

- To allocate limited system resources more efficiently by directing the most intensive and intrusive interventions to the most serious, violent, and chronic offenders.

Structure and Consistency

As mentioned previously, traditional approaches to decisionmaking in juvenile justice have been highly discretionary, subjective, and intuitive. The information selected to assess a particular case and how that information is evaluated varies among individual decisionmakers not only according to their philosophy and experience, but also according to their assumptions about what factors are most relevant (Wagner, 1992). For example, one probation officer may determine how closely an offender should be supervised based on the seriousness of the offense, a second officer might make the decision based on a certain risk factor such as the extent of substance abuse, and a third officer might determine the level of supervision based on the client’s need for services. Such variations in assessment and classification criteria result in inconsistency among decisionmakers and unequal treatment for similarly situated offenders.

Structured assessment procedures are designed to address this problem by identifying a limited number of factors known or believed to be the most relevant to the decision being made and incorporating them into a simple, standardized format (a “tool”). The assessment instrument is then applied to all cases by all decisionmakers and the results are used to classify offenders according to predetermined decision rules (e.g., everyone with a score of 20 or more points is to receive intensive supervision).

An example of a well-known and widely used risk assessment instrument is shown in Figure 14. Developed as one component of a Model Case Management System for juveniles (Baird, 1984), this instrument is used to determine the level of community supervision for probationers and/or parolees. It includes eight items that were determined through research to be predictive of recidivism. The points given to an offender for each item are added together to derive a total risk score, with higher scores indicating a greater likelihood of committing a new offense. The range of possible risk scores is divided into three groups to discriminate among those with a “low,” “moderate,” or “high” likelihood of committing another offense.

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This type of instrument has several benefits:

- It ensures that the same factors are taken into account by all decisionmakers in all cases, thereby creating greater consistency in the assessment process.
**Figure 14: Juvenile Probation and Aftercare Assessment of Risk**

Select the highest point total applicable for each category.

1. **Age at First Adjudication**  
   - 16 or older ..................................................................................................................................... 0  
   - 14 or 15 ........................................................................................................................................... 3  
   - 13 or younger ................................................................................................................................ 5  

2. **Prior Criminal Behavior**  
   - No prior arrests ............................................................................................................................ 0  
   - Prior arrest record, no formal sanctions ................................................................................... 2  
   - Prior delinquency petition sustained; no offenses classified as assaultive ......................... 3  
   - Prior petition sustained for an assaultive offense ................................................................. 5  

3. **Institutional Commitments or Placements of 30 Days or More**  
   - None............................................................................................................................................... 0  
   - One ................................................................................................................................................. 2  
   - Two or more .................................................................................................................................. 4  

4. **Drug/Chemical Use**  
   - No known use or no interference with functioning ............................................................... 0  
   - Some disruption of functioning ................................................................................................. 2  
   - Chronic abuse or dependency.................................................................................................... 5  

5. **Alcohol Abuse**  
   - No known use or no interference with functioning ............................................................... 0  
   - Occasional abuse, some disruption of functioning ................................................................. 1  
   - Chronic abuse, serious disruption of functioning ................................................................... 3  

6. **Parental Control**  
   - Generally effective ....................................................................................................................... 0  
   - Inconsistent and/or ineffective .................................................................................................. 2  
   - Little or none................................................................................................................................. 4  

7. **School Disciplinary Problems**  
   - Attending, graduated, GED equivalence ................................................................................. 0  
   - Problems handled at school level .............................................................................................. 1  
   - Severe truancy or behavioral problems ................................................................................... 3  
   - Not attending/expelled ................................................................................................................ 5  

8. **Peer Relationships**  
   - Good support and influence ...................................................................................................... 0  
   - Negative influence, companions involved in delinquent behavior ....................................... 2  
   - Gang member ............................................................................................................................. 4  

- The empirical basis for the instrument increases the validity of the risk assessment process.
- The results of the assessment directly inform the classification decision, which means that classification and case-handling decisions are more objective and equitable.
- Unlike subjective methods where the decision process is unknown, the rationale for every decision is visible and explicit. Ultimately, this makes both the individual decisionmaker and the agency more accountable.
- Because the instrument uses a limited number of relatively objective criteria, it is easy to complete and can expedite the decisionmaking process.
Optimized Resource Allocation

The second major rationale for structured assessment and classification is that they provide a mechanism for more efficient allocation of system and agency resources. Clearly, all juvenile offenders arrested by the police do not need to be detained; all those placed on probation do not need intensive supervision; and all those committed to the custody of a State correctional agency do not require secure care placement. Although differential intervention is a hallmark of juvenile justice, traditional, unstructured classification methods lead to interventions that have questionable congruence with more objectively determined levels of risk or seriousness. The result is that high-risk offenders may not get the level of intervention required to protect public safety, while lower risk offenders may receive overly intrusive and expensive interventions. In either event, assessment and classification systems that result in inappropriate placements represent serious inefficiencies in resource allocation.

The results of three recently completed studies illustrate these problems. One study focused on the case classification practices for community supervision in Oklahoma’s juvenile corrections agency (Wiebush, Wagner, Prestine, and Van Gheem, 1993). The study examined the relationship between the assigned level of supervision (determined informally by the probation officer and the supervisor) and the level of supervision indicated by the results of a structured risk assessment. The results showed that under current practices, only 2 percent of the community-supervised youth were assigned to the “intensive” supervision level, while 73 percent were assigned to the “low” level of supervision. In contrast, the formal risk assessment results indicated that 27 percent of the youth were high-risk (and therefore should have received intensive supervision) and that just 29 percent were low-risk. These extraordinary discrepancies between actual and risk-indicated levels of supervision showed that the use of informal methods resulted in a significant degree of underclassification. In turn, this finding raised important public safety issues because such a small percentage of high-risk offenders were actually receiving the highest level of supervision.

The second study involved an analysis of offense histories and risk characteristics of training school populations in 14 different States (Krisberg et al., 1993). In each State, researchers had worked with juvenile justice officials to develop a structured risk assessment tool that incorporated the key factors (determined by consensus) in placement decisionmaking. The identified factors reflected an emphasis on public safety concerns and included measures of offense seriousness, offense history, and risk of recidivism. The researchers then applied the instrument to the actual training school population to determine the proportion of incarcerated youth who, according to the guidelines, fell into each of the following categories:

- Required long-term placement in a secure facility.
- Required short-term secure care (1–3 months) followed by movement to a less restrictive setting.
- Could be placed directly into a community-based setting.

The identified factors reflected an emphasis on public safety concerns and included measures of offense seriousness, offense history, and risk of recidivism.

The results showed that in every State at least one-third of the training school population scored “low” or “medium” on the scale and, therefore, did not require long-term stays in secure care. If placement decisions in these States were made strictly according to the agreed-upon public safety criteria, far fewer youth would be assessed as requiring secure care. Moreover, because States commonly spend between $35,000 and $60,000 per year to incarcerate a youth (Camp and Camp, 1990), the reductions in training school placements would result in considerable cost savings. The savings in turn could be used to develop alternative intervention programs.

The OJJDP-sponsored Juveniles Taken Into Custody (JTIC) statistical reporting program provides a third source of information on the use of juvenile corrections resources. This annual survey collects and analyzes individual-level data on the characteristics of
youth admitted to State juvenile corrections agencies, including the nature of offenses for which youth were commited, number of prior admissions, and length of stay. Analysis of 1992 data (Austin et al., 1994) supports the basic conclusions of the Krisberg study discussed above. For example, the data on the nature of the most serious committing offense show that the vast majority of youth in State custody are not violent offenders. Based on 39,000 admissions in 29 States, Austin et al. found that less than one-third (29 percent) of the admissions were for person offenses, while 42 percent were for property offenses, 10 percent were for drug offenses, and 13 percent were for public order offenses. The JTIC data were also used to create “severity profiles” of admitted youth that incorporated measures of offense severity and number of prior admissions to State custody. The results showed:

- Only 14 percent of the youth taken into custody in the 29 States had been admitted for what were identified as “serious and violent” offenses.¹

- Another 27 percent did not have a current “serious or violent” offense but had been previously placed into State custody (recommitments).

- Just over half (51 percent) of the admissions involved youth who did not commit a serious or violent offense and who were never previously in State custody.

- Eight percent of the youth had been admitted for what were considered minor offenses.²

These data raise the issue of whether we are using our most intensive and expensive resources in the most efficient manner, because it appears that State corrections facilities are not reserved for the “dangerous few”, but rather are overloaded with relatively less serious juvenile offenders.

The results of these studies emphasize the two primary purposes for using structured assessment and classification approaches—more consistent decisions and more effective resource allocation. These purposes inform all formal classification systems, regardless of the particular instruments used or the point in the system at which those instruments are applied.

### Types of Assessment Instruments

A wide variety of tools are used to assess and classify juvenile offenders. The instruments vary in purpose, structure, content, and method of development. This section provides an overview of the key characteristics of the most frequently used assessment instruments and discusses their similarities and differences.

#### Risk Assessment Instruments

As used here, risk assessment instruments are tools that are (1) designed to estimate the likelihood that an identified juvenile offender will subsequently commit another offense within a specified followup period (e.g., 18–24 months) and (2) are based on the statistical relationship between youth characteristics and recidivism rates. These instruments generally are used to determine the level of supervision for probationers and parolees, although they have also been integrated into classification systems for sentencing and placement decisions.

Although there are two basic approaches to risk assessment—actuarial and clinical—our definition and focus exclude the latter type for two reasons. First, clinical predictions are typically based on the interpretation and judgment of staff and are not organized in a structured format. Second, clinical risk assessment repeatedly has been demonstrated to be less accurate than empirically derived tools (Dawes, Faust, and Meehl, 1989; Meehl, 1954; Monahan, 1981).

The actuarial approach to risk assessment is similar to that used to determine automobile insurance rates. Historical data on offender (or driver) characteristics and outcomes (new offenses or accidents) are analyzed to determine the set of characteristics most closely correlated with negative outcomes. After those factors are identified, all newly referred offenders (or drivers) are assessed to determine the extent to which their characteristics are similar to those who have had

---

¹. Included murder, manslaughter, homicide, forcible rape, other violent sex offenses, sodomy, kidnapping, endangerment, robbery (with priors), and assault (with priors).

². Included shoplifting, minor public order and traffic offenses, status offenses, and technical probation/parole violations.
low, medium, or high failure rates in the past. In other words, the individual’s future behavior is estimated based on the known outcomes of a group of individuals with similar characteristics (Baird, 1984; Wagner, 1992).

Because risk instruments are developed from group data, their utility is based on knowledge of aggregate outcomes rather than on the accuracy of prediction for a single individual. The ability to predict an individual offender’s behavior is extremely limited. Even the best risk assessment instruments may produce substantial prediction errors. Many identified high-risk offenders never commit another crime while many low-risk offenders do. Therefore, the corrections field has shifted the emphasis in risk assessment from “prediction” to “classification.” The classification goal suggests that the key issue in risk assessment is the extent to which it is able to identify groups of offenders with widely different rates of reoffending. Well-designed instruments are typically able to identify a group of high-risk offenders who are four or five times more likely to commit a new offense than the identified low-risk offenders. For example, in an instrument developed for the State of Michigan, the recidivism rate among Wayne County high-risk juvenile offenders was 76 percent, while the rate among medium- and low-risk offenders was 39 percent and 19 percent respectively. This ability to discriminate risk potential for different subgroups of offenders provides the basis for targeting interventions and resources on those at the highest level of risk, while reducing efforts for those at the lowest level (Baird, 1991; Clear, 1988).

**Well-designed instruments are typically able to identify a group of high-risk offenders who are four or five times more likely to commit a new offense than the identified low-risk offenders.**

Risk predictors. A core set of variables has been identified repeatedly in the research literature as recidivism predictors for juvenile offenders. These variables include age at first referral or adjudication, number of prior referrals or arrests, number of out-of-home placements or institutional commitments, school behavior and attendance, substance abuse, family stability, parental control, and peer relationships, among others (Baird, 1984; Farrington, 1983; Farrington and Hawkins, 1991; Hawkins, Catalano, and Miller, 1992). In developing the model risk assessment tool, Baird (1984) found that the factors identified above provided the best prediction model for a large sample of probationers and parolees in five different sites. However, an examination of research-based risk instruments currently in use shows a great deal of variation in some of the predictive items. We compared the items from eight different empirically based scales developed for use in probation and parole during the past decade. These scales include Baird’s model; the instruments developed for county probation agencies in Calhoun County (Michigan), Cobb County (Georgia), Cuyahoga and Lucas Counties (Ohio); and those developed for statewide use in Indiana, Michigan, and Wisconsin. The results of this analysis appear in Table 5. “School functioning” is the only item that appears on all eight instruments. Age at first referral, number of priors, substance abuse, peers, and family functioning were also typically found to be predictive—each appear on at least five of the eight instruments. The remaining items were included as predictors on half or fewer of the scales.

This comparison suggests that a core set of factors appears repeatedly—if not universally—on validated scales. However, some items increase the prediction or classification power of the scales in some jurisdictions but not in others. This finding suggests that there are site-specific factors that influence either recidivism or the measurement of it. Therefore, an instrument developed for one site may not be transferable to another jurisdiction without first being validated by the adopting agency (Wright, Clear, and Dickson, 1984).

Risk and offense seriousness. Discussions of risk assessment often involve confusion about the relationship between risk and offense seriousness; specifically, whether the seriousness of the presenting offense is predictive of a subsequent offense and whether risk assessment instruments can predict violent behavior.
Policymakers and practitioners frequently assume that youth who commit serious or violent offenses are more likely to commit subsequent offenses than those who do not. However, risk research has usually found that the seriousness of the current offense is not highly correlated with, and is often inversely related to, a negative outcome (Clear, 1988). Of the eight instruments reviewed above, only four included seriousness of the current offense as a predictive item. On two of the four instruments (Calhoun and Cuyahoga), youth who committed felony offenses—but not necessarily violent offenses—were found to have higher recidivism rates than those who committed misdemeanor offenses. However, on the other two scales that incorporated this measure, seriousness was inversely related to repeat offenses. In Lucas County, a misdemeanor offense had a stronger relationship to recidivism than did a felony offense. In Michigan, nonassaultive offenses were predictive, while assaultive offenses were not. Based on the literature and these scales, it appears that offense seriousness is generally not predictive when measured by violence or the felony-misdemeanor dichotomy, although an association was found in some sites.

Another area of confusion is whether risk instruments are able to predict “dangerousness.” Because it is much more difficult to predict recidivism for a specific type of crime than it is to predict repeat criminal behavior generally, most risk instruments have been designed to predict only a reoccurrence. The problem with predicting violent behavior is that the proportion

<table>
<thead>
<tr>
<th>Table 5: Comparison of Risk Predictors in Eight Jurisdictions</th>
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<tbody>
<tr>
<td>Risk Item</td>
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<tr>
<td></td>
</tr>
<tr>
<td>Age 1st Referral</td>
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<tr>
<td>Number Priors</td>
</tr>
<tr>
<td>Current Offense</td>
</tr>
<tr>
<td>Prior Assault</td>
</tr>
<tr>
<td>Prior Out of Home Placement</td>
</tr>
<tr>
<td>Drug or Alcohol Abuse</td>
</tr>
<tr>
<td>School Problems</td>
</tr>
<tr>
<td>Special Ed.</td>
</tr>
<tr>
<td>Peers</td>
</tr>
<tr>
<td>Mental Health Stability</td>
</tr>
<tr>
<td>Family Problems/Parent Control</td>
</tr>
<tr>
<td>Runaway</td>
</tr>
<tr>
<td>Victim Abuse/Neglect</td>
</tr>
<tr>
<td>Gender</td>
</tr>
<tr>
<td>Prior Supervision Adjustment</td>
</tr>
<tr>
<td>Other</td>
</tr>
</tbody>
</table>
Each of these uses is discussed in greater detail later in this part.

The factors incorporated in placement or custody decisionmaking instruments are different from those found in risk instruments because the goals of the assessment and classification process differ. For example, in making placement decisions, judges and corrections officials not only must assess the juvenile’s likelihood of reoffending, they also must consider “just desserts” and public sensitivity issues. As a result, instruments designed to guide the selection of an appropriate placement typically include measures of current and prior offense severity. They also give these items relatively greater weight than the predictive factors in the scale (see Figure 15). If a “pure” risk instrument were used to guide placement decisions, it would not capture other dimensions that are relevant to the decision.

Detention screening instruments also have a unique purpose. They focus on the juvenile’s short-term threat to public safety and the likelihood that the individual will abscond prior to an adjudicatory hearing. Because the issue is not whether the youth is likely to reoffend during the succeeding 18 months, applying risk assessment instruments developed for probation and/or parole supervision is not appropriate for detention decisions. Instead, these tools typically include measures of current and prior offense severity, the frequency and recency of past offenses, and stability measures such as a history of escapes or runaways.

Finally, custody assessments used within correctional facilities are concerned primarily with a juvenile’s “risk” to himself or others while in the institution. Such assessments help determine whether a youth needs a maximum, moderate, or minimum security living environment. In this situation, risk is defined and measured by the potential for disruptive behavior generally, as well as specific behavior such as assaults on staff or peers, escape, or suicide.

The methods used to develop placement and custody instruments are frequently consensus-based rather than empirically based. This is particularly true for placement assessment instruments, in which policy...
Figure 15: Colorado Security Placement Instrument

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Severity of Current Offense</td>
<td></td>
</tr>
<tr>
<td>Murder, rape, kidnap, escape</td>
<td>10</td>
</tr>
<tr>
<td>Other violent offenses</td>
<td>5</td>
</tr>
<tr>
<td>All other offenses</td>
<td>0</td>
</tr>
<tr>
<td>2. Severity of Prior Adjudication</td>
<td></td>
</tr>
<tr>
<td>Violent offense</td>
<td>5</td>
</tr>
<tr>
<td>Property offense</td>
<td>3</td>
</tr>
<tr>
<td>Other/none</td>
<td>0</td>
</tr>
<tr>
<td>3. Number of Prior Adjudications</td>
<td></td>
</tr>
<tr>
<td>Two or more</td>
<td>5</td>
</tr>
<tr>
<td>Less than two</td>
<td>0</td>
</tr>
<tr>
<td>Total Items 1–3</td>
<td></td>
</tr>
</tbody>
</table>

Total Items 1–3. If score is 10 or higher, score as **secure placement**. If less than 10, score remaining stability items.

<p>| | |</p>
<table>
<thead>
<tr>
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<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>4. Age at First Referral</td>
<td></td>
</tr>
<tr>
<td>12–13 years of age</td>
<td>2</td>
</tr>
<tr>
<td>14+</td>
<td>0</td>
</tr>
<tr>
<td>5. History of Mental Health Outpatient Care</td>
<td></td>
</tr>
<tr>
<td>Yes</td>
<td>1</td>
</tr>
<tr>
<td>No</td>
<td>0</td>
</tr>
<tr>
<td>6. Youth Lived Alone or With Friends at Time of Current Adjudication</td>
<td></td>
</tr>
<tr>
<td>Yes</td>
<td>1</td>
</tr>
<tr>
<td>No</td>
<td>0</td>
</tr>
<tr>
<td>7. Prior Out-of-Home Placements</td>
<td></td>
</tr>
<tr>
<td>Yes</td>
<td>1</td>
</tr>
<tr>
<td>No</td>
<td>0</td>
</tr>
<tr>
<td>Total Items 1–7</td>
<td></td>
</tr>
</tbody>
</table>

Apply score to the following placement scale.

- 10+ Consider for Secure
- 5–9 Short-term Placement
- 0–4 Immediate Community

* Detention screening tools are usually developed using the consensus approach. Although risk of absconding or committing a new offense while awaiting adjudication could be measured, the low base rate has precluded (to our knowledge) the development of a research-based detention screening device. Empirical custody assessments have been developed and are described later in this part.

Concerns are predominant.* Generally, the developmental process involves a cross section of juvenile justice decisionmakers (e.g., prosecutors, judges, corrections administrators). They determine what items will be included in the scale and how they will be weighted, how the seriousness of offenses will be ranked, and what type of placement will be associated with various assessment scores.

**Needs Assessment Instruments**

The third type of basic assessment tool used in juvenile justice is the needs assessment instrument. Frequently administered with risk or placement/custody assessment instruments, this instrument is used to systematically identify critical offender problems.
Needs assessment tools serve multiple purposes, including:

- **Consistency**—They ensure that certain types of problems are considered by all staff for all youth in the assessment process.

- **Conciseness**—They provide a “quick read” of a juvenile’s problems for the case manager, other staff and supervisors, and service providers from other agencies.

- **Case planning**—Assessment results provide the foundation for the service plan.

- **Workload priorities**—Needs scores can provide an additional basis for classification in community settings. Those with the highest scores are usually considered to be more time consuming and are presumed to need more contact.

- **Management information**—Aggregated needs information provides a database for agency planning and evaluation, especially regarding the sufficiency of available treatment resources.

Risk and/or custody assessments are used to decide the level of supervision or type of placement, while needs assessments help determine the specific program interventions to be delivered within the designated custody/supervision level.

Because of the increased emphasis in recent years on public protection and offender accountability, needs assessment results often are not used to make classification decisions. Instead, risk and/or custody assessments are used to decide the level of supervision or type of placement, while needs assessments help determine the specific program interventions to be delivered within the designated custody/supervision level.

Because needs assessment instruments are designed to describe a juvenile’s functioning rather than to predict outcomes, they are not developed through research. Most agencies use a consensus approach to identify and select the service issues most frequently encountered in the client population. A typical needs assessment tool is shown in Figure 16.

**Needs Assessment Items**

The similarities and differences found in needs assessment scales from several different jurisdictions, including the scale developed as part of the Model Case Management System, are shown in Table 6. The table illustrates that needs assessment tools from different sites tend to incorporate similar sets of factors. For example, all nine instruments include items related to substance abuse, family functioning or relationships, emotional stability, school attendance and behavior, and peer relationships. The majority also include measures of health/hygiene, intellectual ability or achievement, and learning disability.

There are also important differences among the scales that reflect potential differences in offender populations and/or in staff perceptions of the important variables in assessment and case planning. For example, there are variations in the measurement of specific concerns such as parental problems (substance abuse, mental health, and criminal behavior); family housing or financial issues; the juvenile’s history of abuse or neglect; vocational/employment issues; and involvement in structured activities.

The specific items included on needs assessment instruments may be less important than the scale’s format and the extent to which item scoring is clearly defined. Most of the scales reviewed here are 1-page documents that measure 10 to 15 items and that are easy to complete. More complex assessments typically provide more information, but they are also more time consuming and the additional information gained may not be directly relevant to case planning. Whatever the number or nature of the items, they must be clearly defined because many needs issues are subject to wide interpretation (e.g., emotional stability and family functioning). The instrument must include clear definitions to guide scoring or consistency in the assessment process will be limited.
### Figure 16: Lucas County Juvenile Court Needs Assessment

1. **Family Relationships**
   - Stable/Supportive ................................................................. 0
   - Some Disorganization/Stress .............................................. 3
   - Major Disorganization/Stress ............................................. 6

2. **Parental Problems** (Check all that apply/add points)
   - Inadequate Discipline ....................................................... 1
   - Emotional Instability ....................................................... 1
   - Criminality ........................................................................ 1
   - Substance Abuse ............................................................ 1
   - Physical/Sexual Abuse ...................................................... 1
   - Family Violence ............................................................... 1
   - Marital Discord ............................................................... 1

3. **Support System**
   - Youth Has Support System or None Needed .................. 0
   - No Family/External Support ............................................. 1

4. **School Attendance**
   - No Problem ....................................................................... 0
   - Some Truancy .................................................................... 1
   - Major Truancy .................................................................... 2

5. **School Behavior**
   - No Problem ....................................................................... 0
   - Some Problem ................................................................... 1
   - Major Problem ................................................................... 2

6. **Substance Abuse**
   - No Use .............................................................................. 0
   - Experimenter ..................................................................... 1
   - Former Abuse/In Recovery ............................................... 3
   - Occasional Use ............................................................... 4
   - Abuse .............................................................................. 8

7. **Emotional Stability**
   - No Problem ....................................................................... 0
   - Some Problem, Occasional Interference ......................... 1
   - Major Problem, Serious Interference ............................... 2

8. **Peer Relationships**
   - Good Support/Influence .................................................... 0
   - Associations with Occasional Negative Results ............ 1
   - Associations Primarily Negative .................................... 2

9. **Health**
   - No Problem ....................................................................... 0
   - Some Health Problems ................................................... 1
   - Major Handicap/Illness ..................................................... 2

10. **Sexual Adjustment** (check all that apply, enter highest)
    - No Problem ....................................................................... 0
    - Prostitution ........................................................................ 1
    - Sex Offense ....................................................................... 1
    - Sexual Identity/Awareness Problems .............................. 1
    - Pregnant/Has Child ......................................................... 3
    - Aggressive/Assaultive Sex Offense ................................. 4

11. **Structured Activities**
    - Involvement ..................................................................... 0
    - No Involvement ............................................................... 1

    **Total Score**
<table>
<thead>
<tr>
<th>Need Item</th>
<th>Model Needs</th>
<th>County Systems</th>
<th>State Systems</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Cuyahoga</td>
<td>Lucas</td>
</tr>
<tr>
<td>Substance Abuse</td>
<td>x</td>
<td>x</td>
<td>x</td>
</tr>
<tr>
<td>Family Relationships</td>
<td>x</td>
<td>x</td>
<td>x</td>
</tr>
<tr>
<td>Parent Problems*</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Parent Skills</td>
<td>x</td>
<td>x</td>
<td>x</td>
</tr>
<tr>
<td>Mental Health Stability</td>
<td>x</td>
<td>x</td>
<td>x</td>
</tr>
<tr>
<td>Intellectual Ability/</td>
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<tr>
<td>Academic Achievement</td>
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<tr>
<td>Special Education</td>
<td>x</td>
<td>x</td>
<td>x</td>
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<tr>
<td>Employment/</td>
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<tr>
<td>Vocational Skills</td>
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<tr>
<td>School Problems</td>
<td>x</td>
<td>x</td>
<td>x</td>
</tr>
<tr>
<td>Peer Relationships</td>
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<td>x</td>
<td>x</td>
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<tr>
<td>Health/Hygiene</td>
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<td>x</td>
</tr>
<tr>
<td>Sexual Adjustment</td>
<td>x</td>
<td>x</td>
<td>x</td>
</tr>
<tr>
<td>Victimization</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Housing/Finances</td>
<td>x</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Structured Activities</td>
<td>x</td>
<td>x</td>
<td></td>
</tr>
<tr>
<td>Independent Living Skills</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

* Includes substance abuse, criminality, and/or mental health.
Risk Assessment and Prevention

This section focuses on the use of risk assessment at the prevention stage. It includes a discussion of a communitywide risk assessment strategy and risk assessment in child welfare programs. Traditionally, juvenile justice interventions take place only after a youth has been arrested and referred to the juvenile court. However, a comprehensive and cost-effective approach to serious, violent, and chronic juvenile offenders must also include preventive strategies. Because research on the etiology of delinquency has consistently identified a set of risk indicators at the community, family, and individual level (Elliott, Huizinga and Ageton, 1985; Farrington and Hawkins, 1991; Huizinga et al., 1994), this knowledge can be used as the basis for prevention activities. Moreover, many problems identified as precursors to delinquency have also been determined to be risk indicators for other adolescent behavior problems such as drug and alcohol abuse, school dropout, and teenage pregnancy.

Many problems identified as precursors to delinquency have also been determined to be risk indicators for other adolescent behavior problems such as drug and alcohol abuse, school dropout, and teenage pregnancy.

Essential Properties of Assessment and Classification Systems

Regardless of the instruments chosen or the way they are used to structure decisions, a classification system must embody the following principles to be successful:

• **Validity**—Validity exists when an assessment system achieves agency goals. Many systems are statistically based and predictive in nature. These instruments must actually predict what they purport to predict. However, a valid system can also be policy driven and does not have to be statistically valid to achieve agency goals. For example, if placement assessment tools are used to identify the chronic or violent offenders who require secure care, they can be considered valid if they result in secure care populations that consist predominantly of chronic and violent offenders.

• **Reliability**—Reliability requires clearly specified criteria and staff trained in their use and consistent application. Unreliability flows from widespread discretion and nonstandardized criteria. All youth must be handled in the same way regardless of who is making the decision and youth with similar characteristics must be treated similarly.

• **Equity**—Assessment and classification systems must be both fair and justifiable. Fairness refers to the system’s ability to provide equal, nondiscriminatory treatment. Justifiable systems are consistent with broader social values. Although factors such as race or IQ may be predictive of reoffending, their inclusion in a risk instrument would violate fairness requirements and would not be justifiable. Although it may not be possible to eliminate all bias, systems must be tested against relevant offender subpopulations and be revised as necessary to control potential bias.

• **Utility**—All tools and associated classification protocols should be easy for staff to use and understand. Complex, confusing, or time-consuming systems will be rejected by staff regardless of their conceptual attractiveness or their efficacy in fulfilling the other principles.
research has consistently shown a strong link between maltreatment and subsequent delinquency (Burgess, Hartman, and McCormack, 1987; Mouzakatis, 1981; Sandberg, 1989; Zingraff, Leiter, Meyers, and Johnson, 1993), including violent delinquent behavior (Thornberry, 1994; Widom, 1989). Because of this link, risk assessment to estimate the likelihood of reabuse in identified child welfare cases can be used as a strategy for both primary delinquency prevention and secondary abuse prevention.

**Risk Assessment and Prevention at the Community Level**

Hawkins and Catalano (1992) developed a comprehensive prevention model (Communities That Care) formulated by identifying the factors that increase and mitigate the likelihood of delinquent involvement and other dysfunctional behaviors. The model emphasizes the need for communitywide efforts to ameliorate those risk factors. Based on their own work in the areas of delinquency and substance abuse, and extensive reviews of the empirical literature on these and related problems, Hawkins and Catalano have identified 19 risk factors in five areas that place youth at risk for one or more problem behaviors. The areas identified include the following:

- **Community Risk Factors**—These factors include the availability of drugs and firearms and the norms that support their use, community disorganization and low attachment and commitment to traditional neighborhood institutions, extreme economic deprivation, and high rates of mobility.

- **Family Risk Factors**—These factors include multigenerational involvement in crime, substance abuse and school dropout; poor parenting practices such as lack of supervision, inconsistent or overly punitive disciplinary practices, or high levels of family conflict; and parental attitudes or behaviors that condone activities such as delinquent behavior or substance abuse.

- **School Risk Factors**—These factors include antisocial and aggressive behavior in the early elementary grades; disruptive behavior and truancy in the early adolescent years; the experience of failure in late elementary school; and a lack of commitment to learning and attachment to the school setting.

- **Individual and Peer Risk Factors**—These factors include withdrawal from or rebelliousness toward conventional social norms such as alienation and lack of bonding; association with peers who are involved in delinquency or have other problem behaviors; favorable attitudes toward such behaviors; and early onset of negative behaviors.

Although the presence of these factors increases the likelihood of adolescent involvement in delinquency, countervailing forces—or protective factors—can reduce the impact of the risk factors. These protective factors may also change the way individuals respond to the risks. The empirical evidence suggests that protective factors fall into three basic categories:

- **Individual characteristics.**

- **Attachment and commitment to prosocial persons, institutions, and values.**

- **Healthy beliefs and clear standards for behavior in families, schools, and communities.**

The prevention model developed by Hawkins and Catalano emphasizes the need for community interventions that are designed to strengthen protective factors, thereby mitigating the influence of the risk factors. The prevention model developed by Hawkins and Catalano emphasizes the need for community interventions that are designed to strengthen protective factors, thereby mitigating the influence of the risk factors. Certain personal/psychological buffers at the individual level such as temperament and intelligence may not be readily amenable to change; however, prevention programs can increase the extent to which clear prosocial standards operate in the community and in families. They can also promote child and adolescent bonding to prosocial persons and institutions. In fact, prevention programs must address these two factors simultaneously. It does little good to facilitate youth attachment or commitment to persons who do
not have prosocial values. Conversely, attempts to promote the development of prosocial family and community norms will have little impact unless mechanisms are also devised to facilitate strong adolescent attachments to those holding the positive norms.

A detailed description of the conceptual and operational components of the prevention model is beyond the scope of this discussion. However, it is important to recognize that this approach is a comprehensive community development strategy based on a communitywide risk assessment, rather than a program or series of programs. Based on a public health model, this approach attempts to influence the total community environment by reducing risk and adopts a long-term perspective. The methods of the Communities That Care model also differ significantly from those of traditional program development efforts in juvenile justice. These methods include preparation of a communitywide risk and resources assessment, extensive use of the media, community education strategies, and widespread grassroots community involvement. The goal of the CTC model is not only to develop specific programs but also to change community norms.

A critical first step in community prevention efforts is to conduct a community risk and resources assessment to identify the risk factors faced by various community subgroups and to determine how much impact current programs have on those risk factors. A task force of community leaders and residents often conducts the survey following a detailed protocol that addresses risk factors at the community, school, family, and individual level. They use measures that are both quantitative (e.g., domestic violence and school dropout rates) and qualitative (e.g., the clarity of community standards regarding substance abuse and school policies on assaultive behavior). The task force then analyzes the results, establishes priorities of the risk factors, and examines the impact of current programs on them. The result is a community-specific risk profile and a comprehensive plan to address the risk indicators. In developing the plan, the task force is able to review nationally tested alternative intervention models for applicability to the local community.

The community risk assessment approach described above differs both conceptually and operationally from the assessment techniques described in subsequent sections. Most risk assessment tools evaluate individuals who have already become involved in the official system. The purpose of these instruments is to shape the juvenile justice system’s response by determining the offender’s relative level of risk of continued involvement and to allocate available resources accordingly. Although the risk-focused prevention model is also concerned with assessing relative levels of risk, it focuses on the community rather than the individual in an effort to ward off the onset of problematic behavior. However, the empirical bases for both types of risk assessment are nearly identical.

Although the risk-focused prevention model is also concerned with assessing relative levels of risk, it focuses on the community rather than the individual in an effort to ward off the onset of problematic behavior.

This process raises the question of whether individual risk assessment tools should be developed for prevention as well. In other words, if we can identify those individuals who are most likely to become serious offenders, why not use that information to intervene before an offense occurs? Although this concept is attractive, there are two significant problems. First, risk assessment technology for identifying individuals in the general population who will become chronic or violent offenders has limitations. For example, longitudinal cohort studies like those conducted by Wolfgang et al. (1972) found that only 7 percent of the cohort eventually commit five or more delinquent offenses. This low base rate makes it difficult to accurately classify who will and who will not become delinquent offenses. Second, the difficulty of identifying offenders also raises the problem of selecting “false positives”—juveniles identified in advance as high-risk chronic or violent offenders who, in fact, never become such offenders. Currently, the best risk instruments have been developed on samples of
youth already identified as delinquent. However, even these tools typically have a false positive rate of 40 to 50 percent. In other words, half the high-risk delinquents do not commit another offense.

For risk tools developed for the general youth population, the false positive rate can be expected to be even higher. This dilemma suggests the need for caution when applying risk assessment methods to identify high-risk individuals for preventive intervention. Problems of labeling, net widening, and the criminogenic effects of juvenile justice system involvement raise serious questions about attempts to prevent delinquent behavior in individuals who have not committed a crime.

This does not mean that individual intervention should be avoided altogether in prevention efforts. In fact, both individuals and groups experiencing high levels of risk (or who are engaged in behaviors that are both current problems and predictors of future delinquency) are candidates for selective and indicated prevention efforts (Institute of Medicine, 1994). To illustrate, aggressive behavior in the classroom in the early elementary grades inhibits learning and increases the risk for later substance abuse, crime, and violence. Individuals with serious conduct problems in kindergarten through the second grade may require selective intervention, whether through parents (Patterson, Chamberlain, and Reid, 1982; Webster-Stratton, 1984), specialized skills training activities (Coie and Krehbiel, 1984; Greenberg and Kusche, 1993), or a combination of interventions to achieve significant improvements in conduct.

To the extent that intervention measures are taken to address current conduct problems and implemented in a way that avoids the potential negative effects mentioned above, they can be an important element of a comprehensive risk reduction strategy. However, the justification for intervention should be the current problem behavior rather than what might occur in the future based on an assessment of the individual’s characteristics. The comprehensive community-focused model described earlier is the preferred risk assessment approach for prevention, rather than the individual-focused models typically used in formal juvenile justice settings.

### Risk Assessment in Child Welfare

There is a well-established empirical link between child maltreatment and subsequent delinquency that provides a strong rationale for viewing child welfare interventions, in part, as delinquency prevention. Consequently, the relatively recent use of risk assessment tools and risk-based case management strategies in child welfare agencies is a positive sign. Through more consistent and accurate identification of children who are most likely to suffer continued maltreatment, child welfare interventions can accomplish two complementary purposes—child protection and delinquency prevention.

**Abuse and neglect referrals to child welfare agencies increased dramatically in the 1980’s, which created additional pressure to find more efficient and effective ways to manage heavy caseloads.**

The expanded use of risk assessment and classification in child welfare emerged from many of the same pressures and concerns that precipitated their use in juvenile justice. Abuse and neglect referrals to child welfare agencies increased dramatically in the 1980’s, which created additional pressure to find more efficient and effective ways to manage heavy caseloads. At the same time, public officials were demanding greater accountability regarding agency decisions and actions. The introduction of risk assessment addressed both concerns by providing a structured mechanism for determining which cases should receive service priority and by explicitly stating the criteria used for making those decisions.

Risk assessment in child welfare can have different meanings depending on the goals of the system decision points, such as response priority, removal during investigation, case opening, level of service for opened cases, foster care placement, or reunification. Although there is a need for structured decision-making and validated tools at many of these junctures, progress in developing them has been uneven (Wald and Wolverton, 1990). One notable exception is
in assessing families’ longer term potential for repeated abuse or neglect. Recent research has provided child welfare with the risk information necessary to make fully informed decisions regarding case opening and level of service.

Two basic child welfare risk assessment models have been developed and widely implemented. One model is a consensus-based approach that has been popular because it has face validity and is comprehensive. However, it has also been criticized for being cumbersome and time consuming to use. In addition, some tests of the reliability and the predictive and classification power of consensus models have had marginal results (Weedon, Torti, and Zunder, 1988). The second model, which is empirically based, has been shown to effectively discriminate among low-, medium-, and high-risk child welfare cases. The National Center on Child Abuse and Neglect (NCCAN) has endorsed the empirical approach to risk assessment because it has been judged “superior to consensus models in predicting reoccurrence” and because empirical models “lead to more effective use of available services” (NCCAN, 1993). The development and use of this model is highlighted below.

**The Children’s Research Center Model**

The Children’s Research Center (CRC) of the National Council on Crime and Delinquency has developed a risk assessment and classification model as part of a larger case management system that includes the following components:

- Risk and need assessments and reassessments.
- Service standards that define different levels of case contacts, based on risk level.
- A workload accounting system that translates service standards into staff resource requirements.
- An information system that uses classification and workload data for monitoring, planning, and budgeting (CRC, 1993).

CRC developed research-based risk tools for child welfare agencies in Alaska, Michigan, Oklahoma, Rhode Island, and Wisconsin. The instruments are designed to identify the relative degree of risk for continued abuse or neglect among families that have a substantiated abuse or neglect referral. The degree of risk is used to set a service level for opened cases, and in some States it is used as a key criterion in the case opening decision.

Each instrument was based on an analysis of the relationship between family characteristics and case outcomes using large samples (e.g., 1,000–2,000 families) of previously substantiated cases. Negative outcomes were defined as a subsequent referral or substantiation for abuse or neglect within 18 to 24 months of the original referral. CRC created two separate risk scales for each jurisdiction because predictive factors differed for subsequent incidents of abuse and subsequent incidents of neglect. In practice, the higher of the two risk assessment scores is used to make case classification decisions.

Figures 17, 18, 19, and 20 provide examples of the family risk assessment scales developed for child welfare agencies. Each scale has 9 to 12 items that are highly correlated with risk of reabuse or reneglect. Predictive items include objective measures of the nature of the current incident, the number of prior referrals, and the number and/or ages of the children and adults in the home when the incident occurred. The scales also include subjective measures (e.g., family stability, self-esteem, and social isolation), and scoring is determined by definitional guidelines. Because the instruments are completed subsequent to the investigation, workers have comprehensive information to use when scoring an item.

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**The National Center on Child Abuse and Neglect has endorsed the empirical approach to risk assessment because it has been judged “superior to consensus models in predicting reoccurrence” and because empirical models “lead to more effective use of available services.”**
<table>
<thead>
<tr>
<th>Case Name</th>
<th>SCR#</th>
<th>CYCIS #</th>
<th>Unit</th>
<th>Staff Person</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Neglect</th>
<th>Score</th>
<th>Abuse</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. No</td>
<td></td>
<td>a. No</td>
<td></td>
</tr>
<tr>
<td>b. Yes</td>
<td>+1</td>
<td>b. Yes</td>
<td>+1</td>
</tr>
<tr>
<td>N2.</td>
<td></td>
<td>A2.</td>
<td></td>
</tr>
<tr>
<td>a. No</td>
<td></td>
<td>a. None</td>
<td></td>
</tr>
<tr>
<td>b. Yes</td>
<td>+1</td>
<td>b. One</td>
<td>+1</td>
</tr>
<tr>
<td>N3.</td>
<td></td>
<td>A3.</td>
<td></td>
</tr>
<tr>
<td>a. None</td>
<td></td>
<td>a. None</td>
<td></td>
</tr>
<tr>
<td>b. One</td>
<td>+1</td>
<td>b. One</td>
<td>+1</td>
</tr>
<tr>
<td>c. Two</td>
<td>+2</td>
<td>c. Two</td>
<td>+2</td>
</tr>
<tr>
<td>a. None</td>
<td>-1</td>
<td>a. No</td>
<td></td>
</tr>
<tr>
<td>b. One</td>
<td>+1</td>
<td>b. Yes</td>
<td>+1</td>
</tr>
<tr>
<td>c. Two</td>
<td>+1</td>
<td>c. Three</td>
<td>+3</td>
</tr>
<tr>
<td>N5.</td>
<td></td>
<td>A5.</td>
<td></td>
</tr>
<tr>
<td>a. None</td>
<td></td>
<td>a. One</td>
<td></td>
</tr>
<tr>
<td>b. One</td>
<td>+1</td>
<td>b. Two</td>
<td>+1</td>
</tr>
<tr>
<td>c. Two</td>
<td>+3</td>
<td>c. Three</td>
<td>+2</td>
</tr>
<tr>
<td>a. No</td>
<td></td>
<td>a. No</td>
<td></td>
</tr>
<tr>
<td>b. Yes</td>
<td>+1</td>
<td>b. Yes</td>
<td>+1</td>
</tr>
<tr>
<td>a. No</td>
<td></td>
<td>a. No</td>
<td></td>
</tr>
<tr>
<td>b. Yes</td>
<td>+2</td>
<td>b. Yes</td>
<td>+2</td>
</tr>
<tr>
<td>a. No</td>
<td></td>
<td>a. No</td>
<td></td>
</tr>
<tr>
<td>b. Yes</td>
<td>+1</td>
<td>b. Yes</td>
<td>+1</td>
</tr>
<tr>
<td>a. No</td>
<td></td>
<td>a. No</td>
<td></td>
</tr>
<tr>
<td>b. Yes</td>
<td>-1</td>
<td>b. Yes</td>
<td>-1</td>
</tr>
<tr>
<td>N10.</td>
<td></td>
<td>A10.</td>
<td></td>
</tr>
<tr>
<td>a. No</td>
<td></td>
<td>a. No</td>
<td></td>
</tr>
<tr>
<td>b. Yes</td>
<td>+1</td>
<td>b. Yes</td>
<td>+1</td>
</tr>
<tr>
<td>c. Yes</td>
<td>+2</td>
<td>c. Yes</td>
<td>+2</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Initial Abuse/Neglect Classification</th>
</tr>
</thead>
<tbody>
<tr>
<td>Assign the family’s A/N classification based on the higher of the abuse of neglect scores, using the following chart:</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>A/N Classification</th>
<th>Neglect Score</th>
<th>Abuse Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>Low</td>
<td>-3 to 1</td>
<td>-6 to -3</td>
</tr>
<tr>
<td>Medium</td>
<td>2 to 4</td>
<td>-2 to 0</td>
</tr>
<tr>
<td>High</td>
<td>5 to 7</td>
<td>1 to 3</td>
</tr>
<tr>
<td>Intense</td>
<td>8 to 16</td>
<td>4 to 14</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Total Neglect Score</th>
<th>Total Abuse Score</th>
</tr>
</thead>
</table>

**Figure 17: Rhode Island DCYF Initial Family Assessment of Abuse/Neglect**
### Neglect Score

<table>
<thead>
<tr>
<th>N1. Current investigation confirmed</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Abuse ........................................... 0</td>
</tr>
<tr>
<td>b. Neglect ........................................... 2</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>N2. Prior CPS referral history</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Prior confirmed neglect.................. 2</td>
</tr>
<tr>
<td>b. Any prior referral for abuse/neglect...... 1</td>
</tr>
<tr>
<td>c. None .............................................. -1</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>N3. Age of primary caretaker</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. 33+ ........................................... 0</td>
</tr>
<tr>
<td>b. 24–32 years old .............. 1</td>
</tr>
<tr>
<td>c. Less than 24 years old ....... 3</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>N4. Number of Children/Caretakers Involved in Abuse/Neglect Incident</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. One child ........................................... 0</td>
</tr>
<tr>
<td>b. Two + children, two caretakers .............................. 1</td>
</tr>
<tr>
<td>c. Two + children, unassisted primary caretaker ............. 2</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>N5. Child is Provided Inadequate Physical Care by Primary Secondary Caretaker</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. No .............................................. 0</td>
</tr>
<tr>
<td>b. Yes, secondary caretaker ...................... 1</td>
</tr>
<tr>
<td>c. Yes, primary caretaker .......................... 2</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>N6. Child is Inadequately Supervised by Either Caretaker</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. No .............................................. 0</td>
</tr>
<tr>
<td>b. Yes, primary or secondary caretaker ................. 1</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>N7. Primary Caretaker’s Emotional Stability Limits Adequate Functioning as Caretaker</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. No .............................................. 0</td>
</tr>
<tr>
<td>b. Yes .............................................. 1</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>N8. Primary Caretaker Needs Assistance in Caretaking Role Because of Intellectual/Reasoning Capacity</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. No .............................................. 0</td>
</tr>
<tr>
<td>b. Yes .............................................. 1</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>N9. Primary Caretaker Characteristics</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Not motivated to improve parental skills ........ 1</td>
</tr>
<tr>
<td>b. Childhood history of abuse or neglect ............ 1</td>
</tr>
<tr>
<td>c. Has impulse control problem ................. 2</td>
</tr>
<tr>
<td>d. None of the above ......................... 0</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>N10. Caretaker(s) Viewed the Current Abuse/Neglect Incident at least as Seriously as the Investigating Worker</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Yes, primary caretaker ................................ -1</td>
</tr>
<tr>
<td>b. Yes, secondary caretaker .............................. -1</td>
</tr>
<tr>
<td>c. Neither caretaker ...................................... 0</td>
</tr>
</tbody>
</table>

#### Total Neglect Score

### Abuse Score

<table>
<thead>
<tr>
<th>A1. Current Investigation Confirmed</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Neglect only .................................... 0</td>
</tr>
<tr>
<td>b. Abuse ........................................... 1</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>A2. Prior CPS Referral History</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Prior investigated referral for abuse........ 2</td>
</tr>
<tr>
<td>b. Any prior referral for abuse/neglect ......... 1</td>
</tr>
<tr>
<td>c. None of the above ...................... -1</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>A3. Child Characteristics</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Female .................. 1</td>
</tr>
<tr>
<td>b. Mentally retarded or history of delinquency .. 2</td>
</tr>
<tr>
<td>c. None of above ........... 0</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>A4. Number of Children Involved in the Abuse/Neglect Incident</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. One ........................................... 0</td>
</tr>
<tr>
<td>b. Two ........................................... 1</td>
</tr>
<tr>
<td>c. Three + .............. 2</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>A5. Household Address Changes Last 12 Months</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. None or one ................................... 0</td>
</tr>
<tr>
<td>b. Two or more ................................... 1</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>A6. A Child in the Household was Placed Outside the Home Prior to this Incident</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. No ............................................ 0</td>
</tr>
<tr>
<td>b. Yes ........................................... 1</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>A7. Caretaker(s) have Unrealistic Expectations of Child</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. No ............................................. 0</td>
</tr>
<tr>
<td>b. Yes, primary or secondary caretaker ................ 1</td>
</tr>
<tr>
<td>c. Yes, both caretakers ................................ 2</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>A8. Caretaker(s) use Excessive/Inappropriate Discipline</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. No ............................................. 0</td>
</tr>
<tr>
<td>b. Yes, primary or secondary caretaker .................. 1</td>
</tr>
<tr>
<td>c. Yes, both caretakers ................................ 2</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>A9. Primary Caretaker has an Alcohol or Drug Abuse Problem that Contributed to the Incident</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. No ............................................ 0</td>
</tr>
<tr>
<td>b. Yes, drug or alcohol use ......................... 1</td>
</tr>
<tr>
<td>c. Yes, both drug and alcohol use ........... 2</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>A10. Primary Caretaker’s Ability to Provide the Child with Emotional Support and Discipline</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Effective in meeting child’s minimum needs ... 0</td>
</tr>
<tr>
<td>b. Not effective in some areas .......... 1</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>A11. Primary Caretaker has a History of Abuse or Neglect as a Child</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. No ............................................. 0</td>
</tr>
<tr>
<td>b. Yes ........................................... 1</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>A12. Primary Caretaker’s Relationship Problems with Other Adults</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Domestic violence/severe problems .................... 2</td>
</tr>
<tr>
<td>b. Harmful relationships ................................... 1</td>
</tr>
<tr>
<td>c. Not applicable/limited adult relationships 0</td>
</tr>
<tr>
<td>d. No serious problems ...................................... 1</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>A13. Caretaker(s) are Strongly Motivated to Improve Parenting Skills</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Yes, primary or secondary caretaker is strongly motivated ........ 1</td>
</tr>
<tr>
<td>b. Neither primary nor secondary caretaker ........................... 0</td>
</tr>
</tbody>
</table>

#### Total Abuse Score

---

**Initial Service Classification**

Assign the family’s service classification based on the highest score on either scale, using the following charts:

<table>
<thead>
<tr>
<th>Service Level</th>
<th>Neglect Score</th>
<th>Abuse Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>Very Low</td>
<td>-3 – 0</td>
<td>-3 – 0</td>
</tr>
<tr>
<td>Low</td>
<td>1 – 3</td>
<td>1 – 3</td>
</tr>
<tr>
<td>Medium</td>
<td>4 – 6</td>
<td>4 – 6</td>
</tr>
<tr>
<td>High</td>
<td>7 – 10</td>
<td>7 – 10</td>
</tr>
<tr>
<td>Very High</td>
<td>11 – 19</td>
<td>11 – 21</td>
</tr>
</tbody>
</table>

**Overrides**

Policy: Override to very high. Circle appropriate reason.

1. Sexual abuse cases where the perpetrator is likely to have access to the child victim.
2. Cases with nonaccidental physical injury or life-threatening neglect to an infant.

**Discretionary: 5. Reason**

**Perpetrator(s) (check):**

- Primary Caretaker
- Secondary Caretaker
- Other Nonresident
- Other Household Resident

**Final Service Classification:**

- Very Low
- Low
- Medium
- High
- Very High

---

3. Serious nonaccidental physical injury or neglect requiring hospital or medical treatment.
4. Child born into a condition of dependence on a controlled dangerous substance or total alcohol syndrome (medically diagnosed).
<table>
<thead>
<tr>
<th>Factor</th>
<th>Description</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1. Emotional Stability</strong></td>
<td>a. Appropriate responses</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>b. Both parents or single parent, some problems</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>c. Chronic depression, severely low esteem, emotional problems</td>
<td>5</td>
</tr>
<tr>
<td><strong>2. Parenting Skills</strong></td>
<td>a. Appropriate skills</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>b. Improvement needed</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>c. Destructive/abusive parenting</td>
<td>5</td>
</tr>
<tr>
<td><strong>3. Substance Abuse</strong></td>
<td>a. No evidence of problem</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>b. One caretaker with some substance problem</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td>c. One caretaker with a serious problem or both caretakers with some substance problems</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>d. Problems resulting in chronic dysfunction</td>
<td>5</td>
</tr>
<tr>
<td><strong>4. Domestic Relations</strong></td>
<td>a. Supportive relationship/single caretaker</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>b. Marital discord, lack of cooperation</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td>c. Serious marital discord/domestic violence</td>
<td>4</td>
</tr>
<tr>
<td><strong>5. Social Support System</strong></td>
<td>a. Adequate support system</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>b. Limited support system</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td>c. No support or destructive relationships</td>
<td>4</td>
</tr>
<tr>
<td><strong>6. Interpersonal Skills</strong></td>
<td>a. Appropriate skills</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>b. Limited or ineffective skills</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td>c. Hostile/destructive</td>
<td>4</td>
</tr>
<tr>
<td><strong>7. Literacy</strong></td>
<td>a. Adequate literacy skills</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>b. Marginally literate</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td>c. Illiterate</td>
<td>3</td>
</tr>
<tr>
<td><strong>8. Intellectual Capacity</strong></td>
<td>a. Average or above functional intelligence</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>b. Some impairment, difficulty in decisionmaking skills</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td>c. Severe limitation</td>
<td>3</td>
</tr>
<tr>
<td><strong>9. Employment</strong></td>
<td>a. Employed or no need</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>b. Unemployed, but looking</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td>c. Unemployed, not interested</td>
<td>2</td>
</tr>
<tr>
<td><strong>10. Physical Health Issues</strong></td>
<td>a. No problem</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>b. Health problem or handicap that affects family</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td>c. Serious health problem or handicap that affects ability to provide for or protect child</td>
<td>2</td>
</tr>
<tr>
<td><strong>11. Resource Availability/ Management</strong></td>
<td>a. Sufficient income to meet needs</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>b. Income mismanagement</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td>c. Financial crisis</td>
<td>3</td>
</tr>
<tr>
<td><strong>12. Housing</strong></td>
<td>a. Adequate housing</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>b. Some housing problems, but correctable</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td>c. No housing, eviction notice</td>
<td>2</td>
</tr>
<tr>
<td><strong>13. Sexual Abuse</strong></td>
<td>a. No evidence of problem</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>b. One or both caretakers have abused children sexually</td>
<td>5</td>
</tr>
<tr>
<td><strong>14. Child Characteristics</strong></td>
<td>a. Age appropriate, no problems</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>b. Minor physical, emotional, intelligence problems</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td>c. Significant problems that put strain on family</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td>d. Severe problems resulting in dysfunction</td>
<td>3</td>
</tr>
</tbody>
</table>
Research Results

Table 7 shows the results of risk research in Rhode Island, Alaska, and Oklahoma in terms of the proportion of families at each level of predicted risk with subsequent incidents of abuse or neglect during the followup period. The data indicate that the instruments used in the respective jurisdictions successfully identified dramatic differences in the risk potential of the client population. In Rhode Island, for example, almost two-thirds of the identified high-risk clients had subsequent incidents, while only about 1 in 20 (6 percent) of the identified low-risk cases had subsequent incidents. In other words, the high-risk families had a return rate that was 10 times greater than that of the low-risk families. Similar findings occurred at the other sites. These findings support the risk assessment rationale for child welfare: by using empirically derived instruments to identify different levels of risk, agency resources can be targeted to higher risk families where the potential is greatest for reducing subsequent maltreatment.* See Table 7 below.

Child Welfare Needs Assessment

Needs assessment instruments have been developed for child welfare systems to support and complement risk tools. As discussed earlier, needs assessments identify critical problems in the family. They provide a concise, yet thorough evaluation of client circumstances that provide a foundation for service planning and intervention. In some States, need and risk results are used together to determine the level of family service to be provided.

Needs assessment tools typically have been developed using a staff consensus-building model in which the staff identifies the 10 or 15 most common and/or important intervention issues. Unlike the needs scales used in juvenile justice, child welfare instruments focus almost exclusively on the caretaker and the family, rather than on the individual child. Figure 19 is a typical child welfare needs assessment scale.

Risk Assessment for Detention Decisions

In 1990, more than 550,000 juveniles in the United States were placed in detention facilities. This figure represents a 20 percent increase over 1986 admissions (DeComo et al., 1993). Although it might be expected that recent increases in juvenile arrests for violent crime have fueled the expanded use of detention,
national statistics show:

- Less than one-fourth (23 percent) of detainees were charged with violent offenses.
- Only 9 percent were charged with drug offenses.
- Nearly half (47 percent) of the youth were detained for a property offense.
- Over 21 percent were charged with public order offenses (DeComo et al., 1993).

Increased and often inappropriate use of detention (Pappenfort and Young, 1976) has resulted in overcrowded facilities, lawsuits charging violation of constitutional rights, and a severe strain on local budgets (Dale and Sanniti, 1993; Schwartz, Barton, and Orlando 1991; Soler, Shotten, Bell, Jameson, Shaufer, and Warboys, 1990). These conditions have prompted some jurisdictions to turn to risk-screening devices to control populations and introduce greater objectivity into the detention decision. In a recent major detention reform initiative, the Casey Foundation recognized the usefulness of these tools and required participating sites to develop objective assessment procedures as key components of their reform efforts.

Existing detention risk instruments typically are not based on the results of research on youth outcomes for two reasons:

- Detention decisions focus on whether a youth represents an immediate threat to the community (i.e., in the period between arrest and adjudication) and whether the youth is likely to abscond to avoid court processing. Because less than 5 percent of nondetained youth commit a new offense or abscond prior to court appearance (Smykla and Selke, 1982), the low base rate prohibits the development of an empirically based risk tool.
- Although some jurisdictions have risk tools that were developed for probation or parole populations, using such an instrument to guide detention decisions would be inappropriate because the rationale for detention has little to do with the long-term risk of committing a new offense.

As a result, jurisdictions using risk screening for detention have relied on statutory requirements and the identification of criteria that reflect public safety and youth stability issues. As shown in Figures 20 and 21, typical measures of risk include the seriousness of the current offense (with a particular emphasis on violence), the recency and frequency of prior offenses, and whether the youth was under court supervision at the time of the current offense. These measures reflect agreed-upon policy choices regarding who should or should not be detained and are used to structure the detention decision.

**Impact of Risk Screening on Detention**

Recent research results show that the use of risk assessment can have a significant impact on the size and composition of detention populations. Sacramento County (a Casey Foundation site) developed detention admission and risk-screening criteria almost identical to that shown in Figure 20. To determine the potential impact on admissions, the criteria were applied to a sample of 396 youth who were admitted to detention in 1992 and who were eligible for diversion. Results of the study were as follows:

- Just 155 youth or 39 percent of the sample would have been admitted to detention using the 4 basic admission guidelines.
- Of youth who met the admission criteria, 10 percent received risk scores that made them eligible for an unrestricted release, and an additional 11 percent received scores indicating that they could be released to a nonsecure detention alternative.
- If admission criteria and risk guidelines had been in place during 1992, they would have resulted in a 45 percent decrease in the number of detention beds required (NCCD, 1993).

Equally dramatic evidence was found in Broward County, Florida. In response to a class action suit, juvenile justice system officials developed structured risk-screening criteria and created alternatives to secure detention (Dale and Sanniti, 1993; Schwartz et al., 1991). In 1988, prior to the implementation of the screening guidelines, the 109-bed detention center had an average daily population (ADP) of 166 youth, of which less than 10 percent were violent offenders. Because of the crowded conditions, youth slept on floors and in classrooms converted into dormitories. Applying the screening instrument to their popula-
**Figure 20: Broward County Detention Risk Assessment**

I. Admission Criteria (If each of the following 4 items are answered no the youth must be released. If any of the items are answered yes, complete the risk assessment)

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>No</td>
<td>1. Youth is alleged to be an escapee/absconder from a commitment program, community control program, furlough or aftercare; or youth is wanted in other jurisdiction for felony level offense.</td>
</tr>
<tr>
<td>Yes</td>
<td>No</td>
<td>2. Youth charged with delinquent act/law violation and requests detention for protection from imminent physical threat to his/her personal safety.</td>
</tr>
<tr>
<td>Yes</td>
<td>No</td>
<td>3. Youth charged with capital, life, first degree or second degree felony or any violent felony.</td>
</tr>
<tr>
<td>Yes</td>
<td>No</td>
<td>4. Youth charged with burglary, grand theft auto, any offense involving use of firearm, or any second or third degree felony drug charge and:</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Yes</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Yes</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Yes</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Yes</td>
</tr>
</tbody>
</table>

II. Risk Assessment

A. Most Serious Current Offense

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>All capital, life and first degree felony PBL ................................................................. 15</td>
<td></td>
</tr>
<tr>
<td></td>
<td>All other first degree felonies, vehicular homicide, violent second degree felonies, or youth wanted by other jurisdiction for felony offense .................................................. 12</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Second degree felony drug charge, escape/abscond, any third degree felony involving use of firearm, burglary of occupied residence ..................................................... 10</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Violent third degree felony ............................................................................................................... 9</td>
<td></td>
</tr>
<tr>
<td></td>
<td>All other second degree felonies (except dealing stolen property) ............................................ 8</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Dealing stolen property; third degree felonies that qualify for detention .................................. 7</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Reckless display, unlawful discharge of firearm ........................................................................... 4</td>
<td></td>
</tr>
</tbody>
</table>

B. Other Current Offenses and Pending Charges (separate incidents)

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Each felony ................................................................................................................................. 2</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Each misdemeanor .......................................................................................................................... 1</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Prior felony arrest within last 7 days .......................................................................................... 6</td>
<td></td>
</tr>
</tbody>
</table>

C. Offense History

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Three felony adjudications or withheld adjudications last 12 months ..................................... 4</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Two felony adjudications or withheld adjudications last 12 months ........................................ 2</td>
<td></td>
</tr>
<tr>
<td></td>
<td>One felony adjudication or withheld adjudication or misdemeanor adjudication or withheld adjudication ................................................................................................................... 1</td>
<td></td>
</tr>
</tbody>
</table>

D. Legal Status

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Committed or detention ................................................................................................................. 8</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Active community control case and last adjudication within 90 days ........................................ 6</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Active community control case and last adjudication more than 90 days ago .......................... 2</td>
<td></td>
</tr>
</tbody>
</table>

E. Aggravating/Mitigating Factors

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Aggravating Factors (add 1–3 points to score; document reasons fully)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Mitigating Factors (subtract 1–3 points; document reasons fully)</td>
<td></td>
</tr>
</tbody>
</table>

Total Score (add A through E)

Detain/Release Decision:

- 0–6 = Release
- 7–11 = Nonsecure or home detention
- 12+ = Secure detention

* Contains slight modifications to format and language.
### Figure 21: Los Angeles County Detention/Release Scale

1. **Most Serious Present Offense**
   - Serious/Violent Offenses
     - WIC 707(b) Offense .............................................................. 10
     - Other Violent Offenses (battery, assault)............................. 7
   - Serious Property/Drug Offenses: Burglary, Grand Theft, MV theft, Sale of Narcotics ........ 5
   - All Other Crimes .................................................................. 3
   - Status Offenses, Noncriminal Violations .............................. 0

2. **Number Sustained Petitions, Last 12 Months**
   - Two or more ........................................................................ 5
   - One ..................................................................................... 3
   - None ................................................................................... 0

3. **Youth Residing With:**
   - Out-of-Home (institution, group home, etc.) ................. 2
   - In-Home (parent, guardian, relative) ................................ 0

4. **Under Influence of Drugs/Alcohol at Time of Arrest?**
   - Yes .................................................................................... 2
   - No ..................................................................................... 0

5. **Probation Status**
   - Active Probation, New Criminal Offense Alleged ....................... 4
   - Active Probation, No Criminal Allegation .............................. 2
   - Not on Active Probation ............................................................ 0

6. **Warrant Status**
   - Minor is Subject of Active Bench Warrant .......................... 10

**Detain/Release Scale**
- 0–9 = Release
- 10+ = Consider for Home Detention, DAAP or Secure Detention

---

**Risk Assessment and Classification in Placement Decisionmaking**

The problems confronting juvenile detention facilities are even more pronounced among the Nation’s training schools. Admissions to public and private training schools increased by 6 percent and 68 percent respectively between 1982 and 1990. Institutions are severely overcrowded, with many operating at 150 to 200 percent over capacity. Suits have been filed regarding overcrowding and/or institutional conditions in a number of States including Rhode Island, Louisiana, Indiana, Delaware, and Florida. However, budget restrictions have limited the capacity to build new...
facilities or to address deteriorating conditions in the existing facilities. At the same time, however, research has demonstrated that, in spite of increases in violent juvenile crime, the majority of offenders in training schools are not violent offenders. For example, Krisberg’s review of the offense characteristics of incarcerated juveniles in 14 States in 1992 revealed that the proportion of admissions accounted for by violent offenders ranged from a high of 44 percent to a low of 11 percent (Krisberg et al., 1993).

In seeking answers to overcrowding, inappropriate placements, and cost inefficiencies, an increasing number of States have turned toward a continuum of care model such as that pioneered in Massachusetts and Utah and subsequently implemented, in whole or in part, in a number of other States. This approach emphasizes reserving secure care placement for only the most violent and serious offenders. Other youth are served through a broad array of intermediate sanctions and community-based supervision and services. The model has wide-ranging appeal because it makes intuitive and fiscal sense, and because it is consistent with the juvenile court’s philosophy of providing treatment in the least restrictive setting possible without jeopardizing public safety.

However, in States that have adopted such an approach, there has been considerable initial disagreement about which youth should be defined as “violent or serious” and therefore about where youth should be placed along the various stages of the continuum. Typically, juvenile justice officials have addressed this dilemma by designing formal classification systems that incorporate agreed-upon risk and offense-severity factors to guide placement decisionmaking. Such systems ensure that the custody or supervision needs of each youth are defined in the same manner, regardless of where the case is processed or who does the assessment. This chapter discusses the central features of these structured assessment systems.

Note that the term “placement decisionmaking” includes decisions about the correctional placement of adjudicated youth regardless of whether those decisions rest with judicial or administrative authorities. That is, the tools discussed here can and have been implemented to structure judges’ dispositions or the decisions of State/local juvenile corrections agencies.

**Types of Placement Decision Tools**

Well-designed classification instruments used for structuring placement decisions are based on factors that reflect public safety considerations. Usually these factors include the severity of current and prior offenses and several measures that assess a youth’s potential for reoffending. Consequently, they reflect the twin concerns of those making the placement decision: (1) the proportionality of the level of restrictiveness to the severity of the offense (“just desserts”), and (2) the level of control necessary to manage risk. As with other classification devices, these instruments almost always incorporate “override” provisions. This mechanism allows the decisionmaker—in unique case circumstances—to place a youth in a facility or program other than that indicated by the assessment results. Finally, although needs assessments may be completed, they do not usually play a major role in deciding the level of custody or security. Instead, program-specific decisions are most often made after the custody level has been determined.

The primary differences in placement decision tools are related to the number and type of predictive variables taken into account and the extent to which their formats separate issues related to the severity of offenses from those related to risk. The placement decision instruments that traditionally have been called “risk assessment” combine offense severity and risk measures on a single scale that uses point totals to determine the classification and associated level of security. This type of instrument has, with few exceptions, resulted from a consensus-building process that
involves judges, prosecutors, corrections officials, child advocates, program providers, and other key actors in the juvenile justice system. Examples of such instruments are provided by Colorado (see Figure 15) and Louisiana (see Figure 22). Both instruments are designed to classify youth into one of three categories. Those youth with the highest total scores are considered primary candidates for secure care, while an immediate community-based placement is indicated for those with the lowest scores. Youth in the middle category are considered for a short-term stay in secure care (e.g., 1–3 months) followed by a less restrictive placement. The Colorado and Louisiana tools both include measures of current and prior offense severity and tend to give these variables higher weights relative to the other measures. In fact, the offense severity weights and the classification cutoff scores have been designed to ensure that youth committing the most serious offenses are automatically indicated for secure placement. The primary differences between the two instruments are that Louisiana has more items related to offense history (use of weapon or multiple felonies in the present adjudication, or number of priors), and that Louisiana places a greater emphasis on the success of prior interventions as indicators of risk.

The second type of placement decision tool also incorporates measures of offense severity and risk. However, the assessment format is a matrix and the placement classification decision requires a two-step process. The first step is the completion of an empirically derived risk assessment tool that measures the likelihood of reoffending. The second step involves cross-indexing the level of risk with the nature of the current and most serious prior offenses. A matrix developed for the Michigan juvenile services agency is shown in Figure 23.

The matrix approach has important advantages. First, the two underlying and separate issues informing placement decisions (proportionality and risk) are treated as distinct assessment dimensions, thereby eliminating possible confusion about the meaning of “risk assessment.” Second, the inclusion of a complete risk assessment score provides a more accurate measure of the likelihood of recidivism than do the three or four risk-related items found in the more traditional instruments. Third, the matrix format provides the opportunity to create a larger number of classifications and therefore, refine the precision with which offenders are assigned to different security levels or programs.

To illustrate the last point, a placement matrix developed for the Juvenile Division of the Indiana Department of Corrections is shown in Figure 24. Instead of simply determining which of three security levels should be associated with each cell in the matrix, the Indiana instrument takes advantage of the model’s inherent flexibility by linking classification results to a full range of security and program options. Consequently, distinctions can be made among youth who commit violent offenses but have different levels of risk. Similarly, the model allows high-risk offenders to be treated differently based on the severity of their presenting offense. In effect, Indiana officials have developed a blueprint for a continuum of care that is integrally tied to the risk assessment and classification process.

Impact of Classification on Placement Decisions and Resource Needs

A study completed in 1993 by Krisberg and associates—highlighted earlier—examined the results of classification studies conducted in 14 States. Briefly, the results showed that when structured assessment tools were applied to the States’ secure care populations, a minimum of one-third of the youth were classified as low or medium risk, indicating that they did not require long-term secure care. Now we will examine the implications of the study results for correctional bedspeace needs.

Although instrument design (e.g., items, weights, and cutoff scores) varied across the study sites, all used a three-tiered classification scheme that sorted youth into low-, medium-, and high-risk. In each site, high-risk youth were considered to need long-term secure care. Table 8 shows how youth in six of the States were distributed across the three risk categories.

Although the proportion of youth in each risk category varied widely from State to State, all States placed a substantial percentage of youth in secure care who did not need to be there. Note that these results were based on assessment criteria developed by juvenile justice officials in the respective locations.
<table>
<thead>
<tr>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Severity of Present Adjudicated Offense</td>
</tr>
<tr>
<td>Level 0 Felony ................................................................. 10</td>
</tr>
<tr>
<td>Level 1 Felony ................................................................. 7</td>
</tr>
<tr>
<td>Level 2 Felony ................................................................. 5</td>
</tr>
<tr>
<td>Level 3 Felony ................................................................. 3</td>
</tr>
<tr>
<td>Level 4 Felony ................................................................. 1</td>
</tr>
<tr>
<td>All Other ................................................................. 0</td>
</tr>
<tr>
<td>2. If Present Adjudication Involves</td>
</tr>
<tr>
<td>Possession/Use of Firearm .................................................. 2</td>
</tr>
<tr>
<td>Multiple Felonies ............................................................. 2</td>
</tr>
<tr>
<td>3. Number Prior Adjudications</td>
</tr>
<tr>
<td>Two or More Felony Adjudications ........................................ 2</td>
</tr>
<tr>
<td>One Felony or Two + Misdemeanors ...................................... 1</td>
</tr>
<tr>
<td>None ................................................................. 0</td>
</tr>
<tr>
<td>4. Most Serious Prior Adjudication</td>
</tr>
<tr>
<td>Level 0 or Level 1 Felony ................................................... 5</td>
</tr>
<tr>
<td>Level 2 Felony ................................................................. 3</td>
</tr>
<tr>
<td>Level 3 or below ............................................................. 0</td>
</tr>
<tr>
<td>5. For Offenders With Prior Adjudications</td>
</tr>
<tr>
<td>Age at First Adjudication</td>
</tr>
<tr>
<td>Age 13 or younger .......................................................... 2</td>
</tr>
<tr>
<td>Age 14 ................................................................. 1</td>
</tr>
<tr>
<td>Age 15 and older ............................................................. 0</td>
</tr>
<tr>
<td>6. History of Probation/Parole Supervision</td>
</tr>
<tr>
<td>Offender Currently On Probation/Parole ................................ 2</td>
</tr>
<tr>
<td>Offender With Probation/Parole Revocation .............................. 1</td>
</tr>
<tr>
<td>7. History of In-Home/Nonsecure Residential Intervention</td>
</tr>
<tr>
<td>Three or More Prior Failures ................................................ 3</td>
</tr>
<tr>
<td>One or Two Prior Failures .................................................. 1</td>
</tr>
<tr>
<td>None ................................................................. 0</td>
</tr>
<tr>
<td>8. If the Offender Had a Prior Placement in OJS ......................... 2</td>
</tr>
<tr>
<td>9. Prior Escapes or Runaways</td>
</tr>
<tr>
<td>From Secure More Than Once .............................................. 3</td>
</tr>
<tr>
<td>From Secure Once or Nonsecure 2+ ..................................... 2</td>
</tr>
<tr>
<td>From Nonsecure Once ................................................... 0</td>
</tr>
<tr>
<td>Total Score</td>
</tr>
</tbody>
</table>

**Recommended Action**

0–6 = consider nonsecure placement
7–8 = consider short-term secure placement
9+ = consider secure placement
### Figure 23: Michigan Initial Security Matrix for Delinquency

<table>
<thead>
<tr>
<th>Most Serious Committing Offense</th>
<th>Prior Class I or II Adjudication</th>
<th>Risk Level</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Low</td>
<td>Medium</td>
</tr>
<tr>
<td>Class I or II</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Class III</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Class IV or V</td>
<td>Yes</td>
<td>No</td>
</tr>
</tbody>
</table>

### Figure 24: Indiana Juvenile Corrections Placement Matrix (Proposed Model)

<table>
<thead>
<tr>
<th>Offense Severity</th>
<th>Risk Level</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>High</td>
</tr>
<tr>
<td>1. Violent Offenses</td>
<td>Violent Offender Program</td>
</tr>
<tr>
<td></td>
<td>Assaultive Sex Offender Program</td>
</tr>
<tr>
<td></td>
<td>Staff Secure Residential</td>
</tr>
<tr>
<td>2. Serious Offenses</td>
<td>Boot Camp Staff Secure Residential</td>
</tr>
<tr>
<td></td>
<td>Job Corps</td>
</tr>
<tr>
<td></td>
<td>Intermediate Sanction Program</td>
</tr>
<tr>
<td>3. Less Serious Offenses</td>
<td>Intermediate Sanction Program Day Treatment Specialized Group Homes</td>
</tr>
<tr>
<td>4. Minor Offenses</td>
<td>Proctor Program Tracking Community Supervision</td>
</tr>
</tbody>
</table>
Table 8: Risk Classification Results for Selected Training School Populations

<table>
<thead>
<tr>
<th>Risk Level</th>
<th>Arizona</th>
<th>Delaware</th>
<th>Georgia</th>
<th>Illinois</th>
<th>Louisiana</th>
<th>Oregon</th>
</tr>
</thead>
<tbody>
<tr>
<td>Percent High</td>
<td>23</td>
<td>59</td>
<td>67</td>
<td>51</td>
<td>46</td>
<td>16</td>
</tr>
<tr>
<td>Percent Medium</td>
<td>49</td>
<td>23</td>
<td>28</td>
<td>37</td>
<td>19</td>
<td>31</td>
</tr>
<tr>
<td>Percent Low</td>
<td>28</td>
<td>18</td>
<td>5</td>
<td>12</td>
<td>35</td>
<td>53</td>
</tr>
</tbody>
</table>

To develop estimates of the potential reduction in bed needs that would result from structured decision-making, Krisberg et al. (1993) modeled the flow of cases through each State’s training schools. They used classification results in conjunction with admissions data and assumptions about length of stay in secure care for each classification group. For example, the Louisiana classification results showed that of the juvenile agency’s 900 annual admissions, 413 (46 percent) would be classified as high, 171 (19 percent) as medium, and 315 (35 percent) as low. For modeling purposes, researchers assumed that high-risk youth would stay in secure care for 12 months, that medium cases would remain in secure care for an average of 3 months, and that low-risk youth would remain in secure care for about 1 month. The number of youth in each group was multiplied by their expected length of stay to estimate the total number of beds needed each year. In Louisiana, applying this calculation indicated a need for 482 training school beds which was 296 beds fewer than the 778 beds actually operated by the State, a reduction of 38 percent.

The same modeling process was used for all 14 States included in the study. The results showed that the percentage reduction in secure bed needs ranged from a low of 5 percent (in Rhode Island) to a high of 68 percent (in Nebraska), with an average reduction across all States of 31 percent.

Subsequent studies were conducted in Michigan, Indiana, and the District of Columbia with similar results. All of these studies underscore the utility of using highly structured and public-safety oriented criteria when making placement decisions. Using such criteria ensures that decision-making is more consistent, and also reduces the number of inappropriate placements, thereby improving cost effectiveness.

Risk Assessment and Classification in Probation and Parole Supervision

Each year approximately 57 percent of all youth adjudicated delinquent by the Nation’s courts are placed on formal probation supervision. In 1992, this percentage translated into approximately 316,100 juveniles, or twice the number of offenders placed out of the home (Butts, Snyder, Finnegan, Aughenbaugh, Tierney, Sullivan, Poole. In press.). The perception among juvenile probation staff that their case-loads include many more serious offenders now than in the past is supported by available data. The proportion of youth placed on probation for person-related offenses increased by 50 percent between 1988 and 1992. Faced with static or diminishing resources, probation and parole agencies need to improve the methods used to identify those youth who pose the greatest risks to the community and manage available resources so that they are targeted to the highest risk offenders. As a result of these needs, risk assessment and classification systems have become major case management tools for community supervision.

The risk-based aftercare system developed by the Ohio Department of Youth Services (ODYS) in 1987 provides a powerful example of the rationale for using classification in probation/parole. The aftercare system used an empirically derived risk scale to classify parolees into one of three risk levels. It also incorporated differential service standards (expressed as the frequency of monthly face-to-face supervision contacts) for each risk category.

This risk instrument enabled ODYS to clearly identify youth most and least likely to commit a new offense within 18 months of their release to parole. Table 9 shows that recidivism rates for youth classified at the intensive level was more than three times that of youth classified at the low level of supervision (75 percent versus 22.5 percent). These findings provide a
compelling rationale for directing staff effort and available resources to those at the highest level of risk.

Prior to implementing the new system, parole officers were expected to meet all youth a minimum of twice per month. Consideration of risk levels dramatically altered supervision expectations. As shown in Table 9, youth at the highest risk level were expected to receive a minimum of six contacts per month instead of the traditional two. Conversely, contacts for those least likely to recidivate were reduced to one every other month. Moreover, this redirection of staff energies was accomplished without additional resources.

Table 9: Recidivism and Contact Standards for Ohio Parolees*

<table>
<thead>
<tr>
<th>Risk/Supervision Category</th>
<th>Percent Releases</th>
<th>Percent Recidivism</th>
<th>Minimum Contacts/MO</th>
</tr>
</thead>
<tbody>
<tr>
<td>Intensive</td>
<td>21.7</td>
<td>75.0</td>
<td>6</td>
</tr>
<tr>
<td>Regular</td>
<td>56.9</td>
<td>48.4</td>
<td>2</td>
</tr>
<tr>
<td>Low</td>
<td>21.4</td>
<td>22.5</td>
<td>.5</td>
</tr>
</tbody>
</table>

* Contact standards as of 1988–89

Two basic types of risk assessment instruments have been used to determine the level of supervision for probationers and parolees, the primary distinction being the method of development. Either the instruments were developed from research conducted in the local jurisdiction, or they were developed by modifying an existing instrument that was borrowed from another jurisdiction. Many agencies have adopted the Model Case Management risk scale and modified it to reflect local concerns. The advantage to adopting a preexisting instrument—and the reason most agencies do it—is that it saves the time and resources needed to conduct local risk research.

The main disadvantage of this approach is that juvenile justice officials never really know whether the tool adopted from another agency is valid for their population. As discussed previously, although research-based risk instruments contain common items, each scale also has important variations in predictive variables that result from differences in offender populations, system policies and practices, and information sources. In other words, there is no guarantee that risk scales are directly transferrable between jurisdictions. Even the developers of the Model Case Management risk scale, while advocating its adoption, include the caveat that validation research would be required at the local level to ensure accurate results. Unfortunately, most jurisdictions that have adopted or adapted tools have not validated them.

Figures 25 and 26 show examples of instruments validated through site-specific research for use with probationers. Figure 25 is a risk instrument developed for the Michigan youth services agency and used in the Michigan placement matrix previously discussed. Figure 26 is a risk assessment scale developed for use at the county level in Wisconsin.

As shown in Table 10, these two instruments are able to discriminate among groups of probationers with varying degrees of risk. The data are based on youth from the largest jurisdiction in each State—Wayne County and Milwaukee County. The table shows the percentage of youth at each classification level who were rearrested within a specified period of time (30 months in Michigan and 18 months in Wisconsin) following their assignment to probation supervision. The recidivism rate of youth classified at the highest risk levels in both jurisdictions is almost twice that for youth classified at the medium level of risk. Recidivism rates for youth at the highest levels were approximately four times (Wayne County) and three times (Milwaukee County) higher than youth at the lowest levels.

**Relationship of Risk and Needs in the Classification Decision**

Probation and parole agencies vary in the way they use risk and needs assessment results to influence the classification process. Variation is largely a matter of agency philosophy. Those agencies that stress public
### NCCD Michigan Delinquency Risk Assessment Scale

**Score**

<p>| | | | | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Age at First Adjudication</td>
<td>11 or under</td>
<td>3</td>
<td>12–14</td>
<td>2</td>
<td>15</td>
</tr>
<tr>
<td>2. Number of Prior Arrests</td>
<td>None</td>
<td>0</td>
<td>One or two</td>
<td>1</td>
<td>Three or more</td>
</tr>
<tr>
<td>3. Current Offense</td>
<td>Nonassaultive offense (i.e., property, drug, etc.)</td>
<td>2</td>
<td>All others</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>4. Number of Prior Out-of-Home Placements</td>
<td>One or fewer</td>
<td>0</td>
<td>Two or more</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>5. History of Drug Usage</td>
<td>No known use or experimentation only</td>
<td>0</td>
<td>Regular use, serious disruption of functioning</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>6. Current School Status</td>
<td>Attending regularly, occasional truancy only, or graduated/GED</td>
<td>0</td>
<td>Dropped out of school</td>
<td>1</td>
<td>Expelled/suspended or habitually truant</td>
</tr>
<tr>
<td>7. Youth was on Probation at Time of Commitment to DSS</td>
<td>No</td>
<td>0</td>
<td>Yes</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>8. Number of Runaways from Prior Placements</td>
<td>None</td>
<td>0</td>
<td>One or more</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>9. Number of Grades Behind in School</td>
<td>One or fewer</td>
<td>0</td>
<td>Two or three</td>
<td>1</td>
<td>Four or more</td>
</tr>
<tr>
<td>10. Level of Parental/Caretaker Control</td>
<td>Generally effective</td>
<td>0</td>
<td>Inconsistent and/or ineffective</td>
<td>1</td>
<td>Little or no supervision provided</td>
</tr>
<tr>
<td>11. Peer Relationships</td>
<td>Good support and influence; associates with nondelinquent friends</td>
<td>0</td>
<td>Not peer-oriented or some companions with delinquent orientations</td>
<td>2</td>
<td>Most companions involved in delinquent behavior or gang involvement/membership</td>
</tr>
<tr>
<td><strong>Total Score</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Risk Assessment**

- 0–8  Low Risk
- 9–13 Moderate Risk
- 14–18 High Risk
### Figure 26: Wisconsin Delinquency Risk Assessment Scale

<table>
<thead>
<tr>
<th>Score</th>
<th>1. Age at First Referral to Juvenile Court Intake</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>13 or under .................................................. 2</td>
</tr>
<tr>
<td></td>
<td>14 ........................................................................ 1</td>
</tr>
<tr>
<td></td>
<td>15 or over ..................................................... 0</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Score</th>
<th>2. Prior Referrals to Juvenile Court Intake</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>None ...................................................... 0</td>
</tr>
<tr>
<td></td>
<td>One or two ............................................... 1</td>
</tr>
<tr>
<td></td>
<td>Three or more .......................................... 2</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Score</th>
<th>3. Prior Assaults (includes use of a weapon)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Yes ...................................................... 2</td>
</tr>
<tr>
<td></td>
<td>No ........................................................ 0</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Score</th>
<th>4. Prior Out-of-Home Placements</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>None or one ...................................... 0</td>
</tr>
<tr>
<td></td>
<td>Two or more ...................................... 2</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Score</th>
<th>5. Prior runaways (from home or placement)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>None or one ......................................... 0</td>
</tr>
<tr>
<td></td>
<td>Two or more ......................................... 2</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Score</th>
<th>6. School Behavior Problems (includes truancy)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>None or only minor problems ........................ 0</td>
</tr>
<tr>
<td></td>
<td>Serious problems noted ................................ 2</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Score</th>
<th>7. History of Physical or Sexual Abuse as a Victim</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Yes .......................................................... 1</td>
</tr>
<tr>
<td></td>
<td>No ........................................................... 0</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Score</th>
<th>8. History of Neglect as a Victim</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Yes ................................................. 2</td>
</tr>
<tr>
<td></td>
<td>No .................................................... 0</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Score</th>
<th>9. History of Alcohol or Other Drug Abuse</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Yes .................................................. 2</td>
</tr>
<tr>
<td></td>
<td>No .................................................... 0</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Score</th>
<th>10. History of serious emotional problems</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Yes .................................................. 1</td>
</tr>
<tr>
<td></td>
<td>No .................................................... 0</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Score</th>
<th>11. Peer Relationships</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Good support and influence .................................. 0</td>
</tr>
<tr>
<td></td>
<td>Negative influence; some companions involved in delinquent behavior or lack of peer relationships .......... 1</td>
</tr>
<tr>
<td></td>
<td>Strong negative influence; most peers involved in delinquent behavior, such as gang involvement ......... 2</td>
</tr>
</tbody>
</table>

**Total Risk Score**

**Risk Classification:**
- 0–5  Low Risk
- 6–9  Medium Risk
- 10–13 High Risk
- 14 or Above Very High Risk
Table 10: Recidivism by Risk-Classification Level

<table>
<thead>
<tr>
<th>Risk Classification</th>
<th>Percent Rearrested Wayne County</th>
<th>Percent Rearrested Milwaukee County</th>
</tr>
</thead>
<tbody>
<tr>
<td>Low</td>
<td>19</td>
<td>24</td>
</tr>
<tr>
<td>Medium</td>
<td>39</td>
<td>35</td>
</tr>
<tr>
<td>High</td>
<td>76</td>
<td>43</td>
</tr>
<tr>
<td>Very High</td>
<td>N/A</td>
<td>60</td>
</tr>
</tbody>
</table>

Figure 27: Lucas County Risk and Needs Score Matrix

<table>
<thead>
<tr>
<th>Risk Score</th>
<th>Needs Score</th>
<th>High</th>
<th>Medium</th>
<th>Low</th>
</tr>
</thead>
<tbody>
<tr>
<td>High</td>
<td>High</td>
<td>Supervision</td>
<td>High</td>
<td>Supervision</td>
</tr>
<tr>
<td>Medium</td>
<td>High</td>
<td>Supervision</td>
<td>Regular</td>
<td>Supervision</td>
</tr>
<tr>
<td>Low</td>
<td></td>
<td>Regular</td>
<td>Supervision</td>
<td>Sole</td>
</tr>
</tbody>
</table>

safety and risk control tend to use risk score results to determine the assigned supervision level. The same agencies typically use needs assessments, but the purpose is to inform case planning rather than classification decisions. Other agencies stress the need for balancing public safety issues and youth service needs when classifying juvenile offenders. Where this is the case, either the higher of the risk/need scores is used to classify the youth or, as shown in Figure 27, the assessment results are integrated in a matrix to determine appropriate supervision level.

The Lucas County (Toledo, Ohio) classification matrix shown in Figure 27 uses both risk and needs to place youth at one of four levels of supervision as follows:

- Youth scoring low on both risk and needs are diverted from formal probation and placed under the supervision of volunteer probation staff.
- Youth receiving a high-risk or high-needs score are placed in the highest level of supervision, unless their other score falls into the low category, in which case they are placed in regular supervision.
- Youth scoring medium on risk and medium or low on needs are also assigned to regular supervision.
- Youth at low risk and medium need are assigned to low supervision.

As with the matrixes used for determining placements, this approach allows agencies to carefully delineate their policy choices regarding the relative influence that risk and needs measures should have on classification decisions.

Overrides

Virtually all classification systems for probation and parole include provisions for staff or supervisors to override the indicated level of supervision. Overrides may be mandatory or discretionary. Mandatory overrides reflect agency policies toward certain types of offenders. Typically, youth convicted of serious offenses (e.g., rape or armed robbery), even though placed on probation, cannot with good conscience be placed at a low supervision level regardless of their risk/needs scores. In some jurisdictions, policy overrides are built into an instrument’s scoring system (e.g., by giving violent offenders 15 points), while in others they are acknowledged as superseding the instrument’s results.
Discretionary overrides are critical to the success of classification systems because they allow decisions to be influenced by individual case factors that may not be captured on the risk or needs assessment tools. For example, a sophisticated drug dealer may never have been involved in the delinquency system and may not have many of the problems identified on risk/needs scales. Discretionary overrides provide for additional staff input into the formal decisionmaking process and therefore serve to strengthen it. However, such overrides must be carefully monitored to ensure that staff do not simply return to subjective assessment and classification methods. One rule of thumb suggests that not more than 15 percent of classification decisions should be the result of overrides.

**Reassessment**

Periodic and routine reassessment of risk and needs should be an integral component of case management systems. A youth’s circumstances and problems may change frequently, resulting in a need for adjustments in supervision requirements and case plans. In the juvenile justice system, these structured reassessments are generally completed every 90 days. Case progress (or lack thereof) determines whether a youth should be assigned to a lower or higher supervision level during the next supervision period.

A risk reassessment instrument used by the Indiana Department of Corrections Juvenile Division is shown in Figure 28. All items on the reassessment were also on the initial assessment scale, except the last item. It should be noted, however, that historical factors (which do not change) are separated from predictive items that focus on behavior (which can change over time). These items are scored for the most recent supervision period.

The “Response to Supervision” question is weighted more than any other item, thereby playing a major role in determining the subsequent supervision level.

**Risk Assessment and Classification for Institutional Custody**

A central concern of institutional administrators is ensuring that:

- Inmates, staff, and the community are protected from harm.
- Offender treatment needs are appropriately matched with available programs.
- Available resources are allocated and used in the most efficient manner.

As a result, classification for security, custody, and/or treatment is crucial to institutional operations (Brennan, 1987; Clements, 1986). Historically, formal classification systems in juvenile facilities have focused on treatment needs (Baird, 1984), while custody decisions have been made using informal methods and criteria such as age, physical size, or mental health status. However, in recent years juvenile institutions have become overcrowded and inmate populations have “hardened.” The need for order and safety has become paramount. These developments have expanded administrators’ interest in formal custody classification methods based on risk assessment.

Risk assessment for security and custody purposes differs from community supervision assessment because the goals are different. Community supervision is concerned primarily with an offender’s risk of committing a new offense, while custody decisions focus on the risk of disruptive behavior, assaultiveness.
### Figure 28: Indiana Department of Corrections, Juvenile Division: Risk Reassessment for Community Supervision

1. **Age at First True Finding**
   - 16 or older ......................................................................................................................................... 0
   - 13–15 .................................................................................................................................................. 2
   - 12 or younger ................................................................................................................................... 3

2. **Prior Institutional Commitments or Placements**
   - None .................................................................................................................................................. 0
   - Post-Adjudication Commitment ................................................................................................... 1
   - Residential
     - Prior Parental Placement(s) ........................................................................................................ 1
     - Court/Welfare Placement(s) ......................................................................................................... 2
   - Any State’s DOC .............................................................................................................................. 3

3. **Prior Supervision Behavior**
   - No Prior Supervision ...................................................................................................................... 0
   - Reoffended After Previous Supervision Ended .......................................................................... 1
   - Reoffended During Previous Supervision ................................................................................... 2

4. **Number of Prior Offenses**
   - None .................................................................................................................................................. 0
   - 1 to 2 .................................................................................................................................................. 1
   - 3 or more ........................................................................................................................................... 2

### Rate the Following Since the Last Classification

5. **Substance Abuse**
   - No Known Use ................................................................................................................................. 0
   - Experimental Use ............................................................................................................................ 1
   - Some Disruption .............................................................................................................................. 2
   - Serious Disruption ........................................................................................................................... 3

6. **School/Employment**
   - No Problems ..................................................................................................................................... 0
   - Moderate Problems ......................................................................................................................... 1
   - Serious Problems ............................................................................................................................. 2
   - Not Enrolled or Not Employed ..................................................................................................... 3

7. **Peers**
   - No Problems ..................................................................................................................................... 0
   - Some Delinquents ............................................................................................................................ 1
   - Mostly Delinquents ......................................................................................................................... 2

8. **Parental/Guardian Supervision**
   - Effective ............................................................................................................................................. 0
   - Inconsistent or Ineffective .............................................................................................................. 1
   - No Supervision ............................................................................................................................... 2
   - Contributes to Delinquency ........................................................................................................... 4

9. **Response to Supervision**
   - No Significant Problems ................................................................................................................. 0
   - Moderate Compliance Problems .................................................................................................... 3
   - Major Compliance Problems, Commits New Delinquent Act ...................................................... 6

**Total Score**

### Cutoff Scores

- 0–12 Low
- 13–19 Medium
- 20+ High
to staff and other inmates, escape potential, and victimization potential. As a result, risk assessment procedures that assess the probability of a juvenile “committing a new offense within the next 18 months” have little relevance to custody decisions. The concern is with behavior while in the institution.

Two examples of research-based custody assessment instruments are discussed below. Each could be used to determine the particular facility to which a youth would be assigned within a larger system, or to decide the specific housing unit/cottage within a single facility.

**The Illinois Institutional Custody Scale**

In 1990, the Juvenile Division of the Illinois Department of Corrections (IDOC) developed an initial classification instrument for use at its seven youth centers. System goals were to move youth through the correctional process in an efficient and effective manner and to place youth in the least restrictive secure environment possible, while simultaneously matching program needs with available resources. Specifically, by identifying the predictors of institutional misconduct, the IDOC’s objective was to place youth at the lowest security level possible while reducing the risk of major rule violations (Eich and Joyce, 1991).

IDOC researchers selected a sample of more than 200 admissions from a 3-month period in 1989 and tracked their institutional behavior for the following 6 months. Youth characteristics were analyzed to determine their relationship to the number and severity of disciplinary “tickets” they received during the followup period. Correlation and regression analyses identified four factors that are predictive of institutional adjustment. These factors are as follows:

- Prior aggressive behavior against peers or staff in school, detention, or the reception and classification unit (this item alone accounted for 56 percent of the explained variance).
- The number of property offenses committed.
- The presence or absence of parental control.
- The youth’s mental health needs (determined by a clinical evaluation).

Researchers applied the resulting scale to the admissions sample and sorted them into three indicated custody levels (minimum, medium, maximum) according to the outcome measure of success or failure. The distribution of the institutionalized youth across the levels of custody is shown in table 11.

The scale discriminated well among varying levels of risk for institutional misconduct. The failure rate among those identified as high-risk (42 percent) was twice that of the youth classified as medium-risk (20 percent) and six times that of the youth identified as low-risk (7 percent failure). Another important finding was that only 18 percent of the IDOC youth required maximum custody and that one-third could be considered candidates for minimum security settings.

<table>
<thead>
<tr>
<th>Custody Classification Risk Score</th>
<th>Number of Youth</th>
<th>Percent of All Youth</th>
<th>Percent Failures</th>
</tr>
</thead>
<tbody>
<tr>
<td>Minimum 0–2</td>
<td>68</td>
<td>33</td>
<td>7</td>
</tr>
<tr>
<td>Medium 3–9</td>
<td>99</td>
<td>49</td>
<td>20</td>
</tr>
<tr>
<td>Maximum 10+</td>
<td>36</td>
<td>18</td>
<td>42</td>
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</table>
It was not possible to establish a connection between youth characteristics and escapes based on this research study because of the low base rate. Therefore, the final assessment instrument included four additional items believed to be associated with the likelihood of escape. Currently, IDOC officials use both the risk assessment and escape assessment results to determine the final custody level assignment. A copy of the IDOC custody scale is shown in figure 29.

### The Model Case Management System

**Institutional Custody Scale**

The Model Case Management System (Baird, 1984) includes an institutional custody assessment scale that was developed using data from multiple sites. Baird examined the relationship between offender characteristics and major disciplinary reports and found that the following eight factors were moderately correlated with institutional adjustment:

- Number and seriousness of prior offenses.
- Seriousness of the committing offense.
- Age at first adjudication.
- Emotional stability.
- Family problems.
- School problems.
- Intellectual ability.
- Substance abuse.

The selection of scale items was influenced by two important considerations, including lack of cross-site consistency in data, especially on some of the more subjective measures (e.g., family problems), and the inappropriateness of including nonbehavioral measures (e.g., intellectual functioning). The Initial Custody Classification Scale is shown in Figure 30.

The model also included a custody reassessment scale, to be administered at 90-day intervals. Like community supervision reassessments, custody reassessments provide for routine evaluations of a youth’s adjustment and allow the agency to move the juvenile from one security level to another. The reassessment instrument emphasizes actual behavior during a specific time period on a range of institutional adjustment measures. An example of a reassessment tool is shown in figure 31.

### Conclusion

If the Nation’s juvenile justice system is to develop an enhanced response to serious, violent, and chronic juvenile offenders, it must design a comprehensive array of interventions and sanctions. But it must also develop the capacity to accurately assess and classify juvenile offenders so that the impact of those interventions will be maximized, while at the same time conserving scarce resources. Well-designed assessment procedures improve our ability to accurately and consistently identify those who are, or may become, serious, violent, and chronic juvenile offenders. Carefully crafted classification systems ensure that the system’s response is equitable and graduated. They also provide for a direct linking of an offender’s need for control and services with the most appropriate intervention.

This section discussed the rationale and goals of structured risk assessment and classification and presented key issues and promising approaches at several levels of the system. These assessment and classification models have demonstrated their ability to structure the juvenile justice system’s responses so that decisions are more consistent, rational, and cost effective. Particularly promising approaches include:

- Communitywide risk assessment and prevention strategies such as CTC developed by Hawkins and Catalano.
- Empirically based risk assessment tools developed for child welfare and juvenile probation/parole that identify youth and families with dramatically different levels of risk.
- Structured placement and custody decisionmaking instruments that (1) serve to reduce inappropriate placements in detention and training schools and (2) have the potential to clearly articulate the intended connection between identified levels of risk/seriousness and a range of placement and program options.

Research findings clearly support the continued development and application of structured decision-
### Figure 29: Illinois DOC Juvenile Custody Risk Assessment

#### 1. Prior Aggressive Behaviors
- No prior aggressive behavior ................................................................. 0
- Aggressive toward peers in school, detention, R&C .................................. 2
- Aggressive behavior toward staff in school, detention, R&C ..................... 6
- Aggressive behavior toward peers and staff ............................................. 8

#### 2. Number of Petitioned Property Offenses
- Less than 11 .......................................................................................... 0
- More than 11 ........................................................................................ 6

#### 3. Parental Control
- Parent has some control over youth ...................................................... 0
- Parent has no control or supports anti-social activity or no parental involvement with youth ..................................................... 3

#### 4. Needs Level (Based on clinical evaluation)
- No need: no clinical done or no need .................................................. 0
- Minimal: needs 2–4 monthly contacts with MH professional ................. 1
- Moderate: needs weekly contact ......................................................... 2
- Urgent: needs more than one contact weekly ....................................... 3

**Total Score**

#### Classification:
- 0–2 = Minimum
- 3–9 = Medium
- 10+ = Maximum

<table>
<thead>
<tr>
<th>Escape/Security/Risk</th>
<th>Minimum</th>
<th>Medium</th>
<th>Maximum</th>
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</thead>
<tbody>
<tr>
<td>1. Nature of the Offense</td>
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<tr>
<td>Comments:</td>
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<tr>
<td>2. Run History</td>
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<td></td>
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<tr>
<td>Comments:</td>
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<td></td>
<td></td>
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<tr>
<td>3. Outstanding Charges/Warrants</td>
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<tr>
<td>Comments:</td>
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<td></td>
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<tr>
<td>4. Time to Serve</td>
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<td></td>
<td></td>
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<tr>
<td>Comments:</td>
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Making systems. However, a number of key issues must be considered in the design and development of risk assessment and classification models. Unless these issues are addressed, juvenile justice systems risk implementing approaches that will not achieve the intended goals and may in fact subvert them. Of particular concern is the need to:

- Distinguish the goals of assessment and classification at different decision points in the system. Different goals require the use of different assessment criteria. Consequently, instruments developed for one application at one point in the system may not be valid for making decisions about offenders at another point in the system. For example, an instrument designed to determine whether a youth should be detained will not provide useful information about the likelihood of recidivism among parolees.

- Maintain the distinction between “risk” and “seriousness” in the assessment and classification process, as well as the distinction between risk of recidivism generally and risk of future violence.
**Figure 30: Initial Custody Classification Scale**

<table>
<thead>
<tr>
<th>Name</th>
<th>Number</th>
<th>Last</th>
<th>First</th>
<th>MI</th>
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<table>
<thead>
<tr>
<th>Date of Admission</th>
<th>Staff Person</th>
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<table>
<thead>
<tr>
<th>1. <strong>Severity of Current Offense</strong>*</th>
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<tbody>
<tr>
<td>Highest</td>
<td>6</td>
</tr>
<tr>
<td>High</td>
<td>5</td>
</tr>
<tr>
<td>Moderate</td>
<td>3</td>
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<tr>
<td>Low</td>
<td>1</td>
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<table>
<thead>
<tr>
<th>2. <strong>Most Serious Prior Offense</strong>*</th>
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<tbody>
<tr>
<td>Highest</td>
<td>7</td>
</tr>
<tr>
<td>High</td>
<td>5</td>
</tr>
<tr>
<td>Moderate</td>
<td>3</td>
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<tr>
<td>Low</td>
<td>1</td>
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<thead>
<tr>
<th>3. <strong>Number of Prior Offenses</strong></th>
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<tbody>
<tr>
<td>8 or more</td>
<td>6</td>
</tr>
<tr>
<td>5-7</td>
<td>4</td>
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<tr>
<td>3-4</td>
<td>2</td>
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<tr>
<td>2 or fewer</td>
<td>0</td>
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<thead>
<tr>
<th>4. <strong>Age at First Adjudication</strong></th>
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<tbody>
<tr>
<td>12 or under</td>
<td>5</td>
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<tr>
<td>13-14</td>
<td>3</td>
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<tr>
<td>15</td>
<td>2</td>
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<tr>
<td>16 or older</td>
<td>0</td>
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<tr>
<th>5. <strong>Prior Assaultive Behavior</strong></th>
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<tbody>
<tr>
<td>Assault leading to adjudication</td>
<td>6</td>
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<tr>
<td>Assault on authority figure, no conviction</td>
<td>5</td>
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<tr>
<td>Fighting resulting in injury to others or suspension from school</td>
<td>4</td>
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<tr>
<th>6. <strong>Prior Escapes/Runaways (Within last 12 months)</strong></th>
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<tbody>
<tr>
<td>None</td>
<td>0</td>
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<tr>
<td>Runaway (attempts) from parents’ home</td>
<td>2</td>
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<tr>
<td>Runaways from group or foster home placement</td>
<td>4</td>
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<tr>
<td>Escape from secure facility (jail or correctional facility)</td>
<td>6</td>
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<th>7. <strong>Emotional Stability</strong></th>
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<tbody>
<tr>
<td>No serious problems</td>
<td>0</td>
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<tr>
<td>Moderate problems (aggressive acting out or withdrawal)</td>
<td>3</td>
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<tr>
<td>Major problems (excessive responses, limits functioning)</td>
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<tr>
<th><strong>Total Score</strong></th>
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*Each jurisdiction should assign offenses to the appropriate category.*
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<tbody>
<tr>
<td><strong>Figure 31: Custody Reclassification Scale</strong></td>
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<td><strong>1. Severity of Current Offense</strong></td>
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<td>Highest</td>
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<td>Low</td>
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<td><strong>2. Most Serious Prior Offense</strong></td>
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<td><strong>3. Number of Prior Offenses</strong></td>
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<td>8 or more</td>
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<td>4 or fewer</td>
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<td><strong>4. Escapes/Attempts (Last 3 months)</strong></td>
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<td>1 or more</td>
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<td>None</td>
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<td><strong>5. Number of Major Misconduct Reports (Last 3 months)</strong></td>
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<td>3 or more</td>
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<td>1–2</td>
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<td>None</td>
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<td><strong>6. Most Serious Misconduct Report Received (Last 3 months)</strong></td>
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<td>Low</td>
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<td><strong>7. Program Participation/Adjustment (Last 3 months)</strong></td>
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<tr>
<td>Major problems reported</td>
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<tr>
<td>Moderate problems</td>
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<tr>
<td>Full participation/no significant problems</td>
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<td><strong>8. Furlough/Days Off Experience</strong></td>
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<tr>
<td>Completed 3 or more successfully</td>
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<tr>
<td>Completed 1 or 2 successfully</td>
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<td><strong>Total Score</strong></td>
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*Each jurisdiction should assign offenses and infractions to the appropriate category.*
Offense seriousness is a major consideration in placement and custody decisions; however, it should not be confused with measuring the likelihood of a person committing a new offense. The fact that a juvenile has committed a serious crime does not mean that he is more likely than other youth to commit a new offense. Conversely, a youth assessed as high-risk is not necessarily more likely than other youth to commit a serious or violent crime in the future. These distinctions exist because most risk instruments have been designed using rearrest or readjudication for any new offense as an outcome measure and generally do not measure potential for violent behavior.

- Be aware of the limitations of risk instruments for predicting an individual’s behavior. The state of the art in risk assessment is such that predictive accuracy is relatively weak. The primary intent of risk assessment is to classify offenders into groups based on estimated aggregate outcomes. One practical implication is that risk of recidivism should never be used alone for decisions having major consequences for the individual, such as whether or not they will be placed in a training school.

- Conduct the research necessary to validate any instrument adapted or adopted from another jurisdiction or an instrument designed locally through consensus. These instruments might have some degree of face validity, but only empirical testing will establish their predictive validity.

- Involve key actors from related systems in the development of any classification system that has widespread implications for how cases are handled. For example, an instrument used to determine placements for youth committed to a corrections agency will more likely be implemented successfully if judges, prosecutors, and others are involved in the development.

- Do not expect that the development and implementation of a valid risk assessment and classification system for placement or custody decisions will automatically reduce the correctional facility population. Classification for placement assumes that well-structured alternatives to secure care are in place. If they are not, strategies for developing them must accompany the effort to develop the classification system.
References

The page(s) where the following references are cited in the Guide are noted in italics following each item. Some publications have been included in the References because of their relevance to the Comprehensive Strategy even though they are not cited specifically in the text. These publications are not followed by an italic page number.


Schneider, A. 1986. “Restitution and Recidivism Rates of Juvenile Offenders: Results from Four Experimental Studies.” *Criminology* 24(3). p. 142


Ventura County Children’s Mental Health Services Demonstration Project. 1987b. “A Report and Commentary on the Ventura Model for Children’s Mental Health Services.” Ventura County, CA: Department of Mental Health Services.


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