

Improving the Operation of Juvenile Justice Systems by Taking a New Approach on Evidence-Based Practice

Bridging the Gap Between Research and Practice

Shay Bilchik, J.D.

Center for Juvenile Justice Reform
Georgetown Public Policy Institute



Gabrielle Lynn Chapman, Ph.D.

Peabody Research Institute
Vanderbilt University

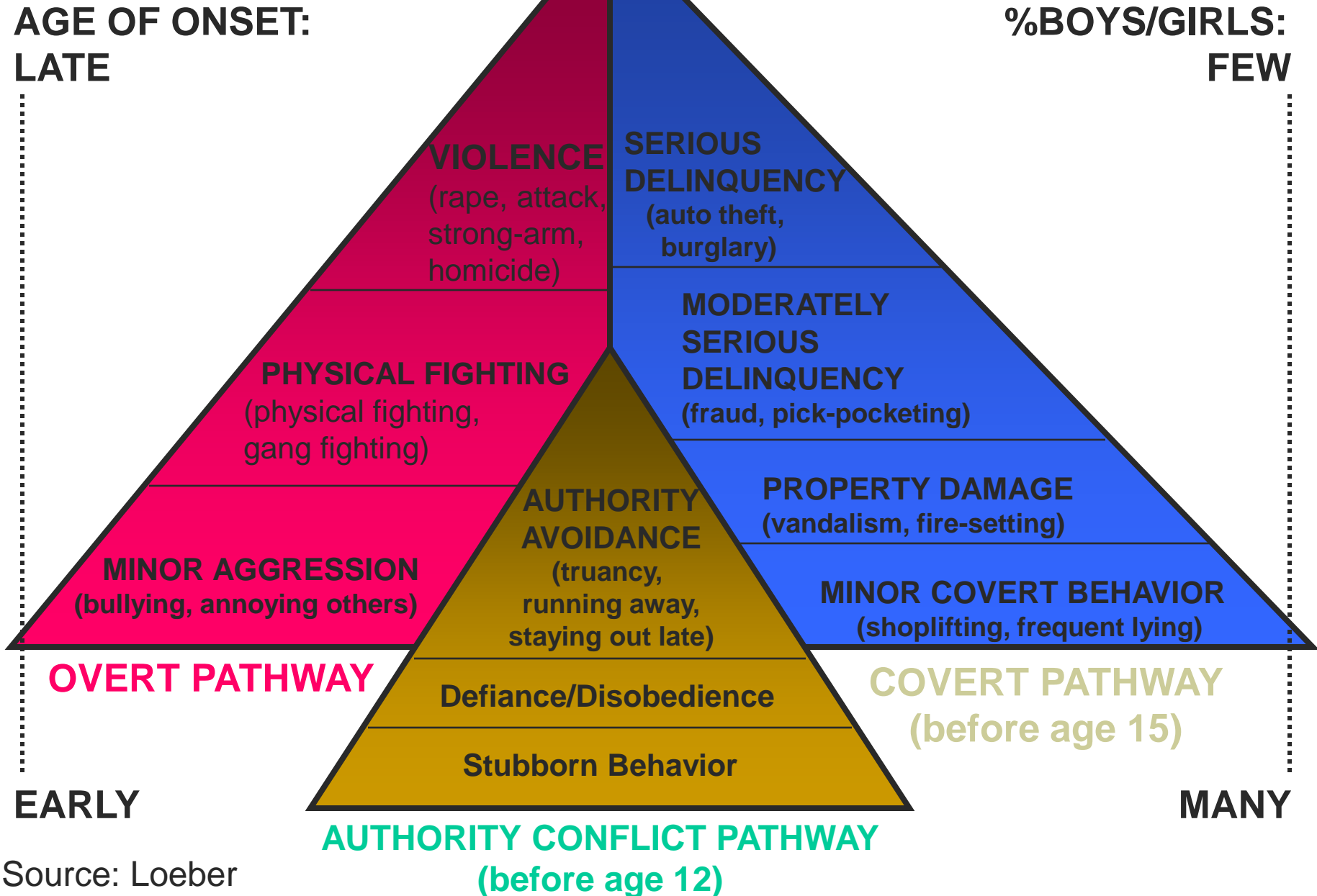


National Juvenile Justice Network, July 28, 2011

Overview

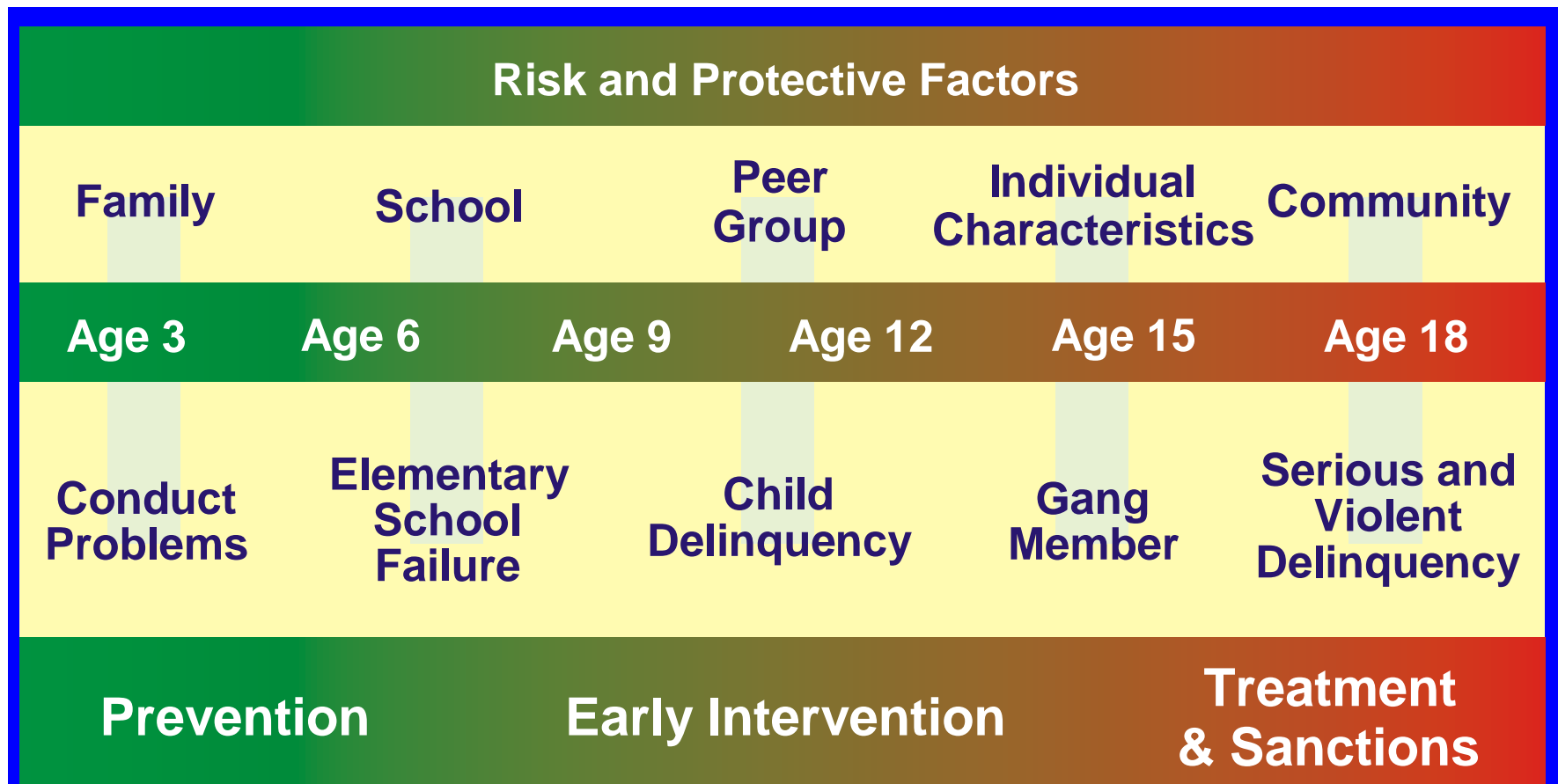
- Comprehensive Strategy framework
- Evidence-based practice
 - What does it mean?
- Knowledge base
 - Meta-analysis
 - Research summary
- Standard Program Evaluation Protocol (SPEP)
 - Operationalization
 - Validation

Developmental pathways to serious and violent behavior



Source: Loeber

Prevention and Intervention Windows of Opportunity



Child delinquents: Onset of delinquency and first felony court contact (Pittsburgh Youth Study)

Minor
Problem
Behavior

Moderately
Serious
Problem
Behavior

Serious
Problem
Behavior



Age: 7.0

9.5

11.9

14.5



First Court
Contact for an
Index Offense

Comprehensive Strategy for Serious, Violent, and Chronic Juvenile Offenders

Problem Behavior > Noncriminal Misbehavior > Delinquency > Serious, Violent, and Chronic Offending

Prevention

Target Population: At-Risk Youth

Programs for
All Youth

>

Programs for Youth at
Greatest Risk

>

Immediate
Intervention

>

Intermediate
Sanctions

>

Community
Confinement

>

Training
Schools

>

Aftercare

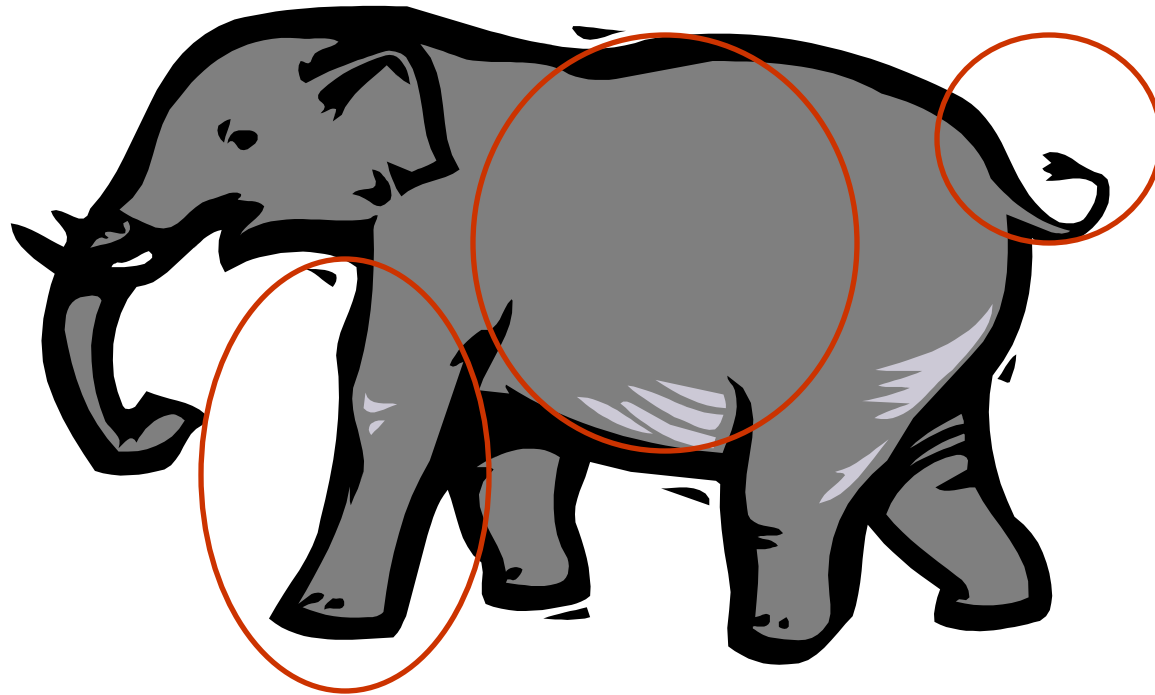
Preventing youth from becoming delinquent by focusing prevention programs on at-risk youth

Intervention & Graduated Sanctions

Target Population: Delinquent Youth

Improving the juvenile justice system response to delinquent offenders within a continuum of treatment options and system of graduated sanctions

[Bridging the Gap]



Few evidence-based programs are actually used in JJ systems

Why?

- There are relatively few programs certified as evidence-based under the prevailing definition
- These programs present organizational challenges:
 - Cost
 - The ability of providers to implement them “by the book”

[The prevailing definition of **EBP**]

The **P** part: A 'brand name' program, e.g.,

- Functional Family Therapy (FFT)
- Multisystemic Therapy (MST)
- Big Brothers/Big Sisters mentoring
- Aggression Replacement Training (ART)

The **EB** part: Credible research supporting that specific program certified by, e.g.,

- Blueprints for Violence Prevention
- OJJDP Model Programs Guide
- National Registry of Evidence-based Programs and Practices (NREPP)

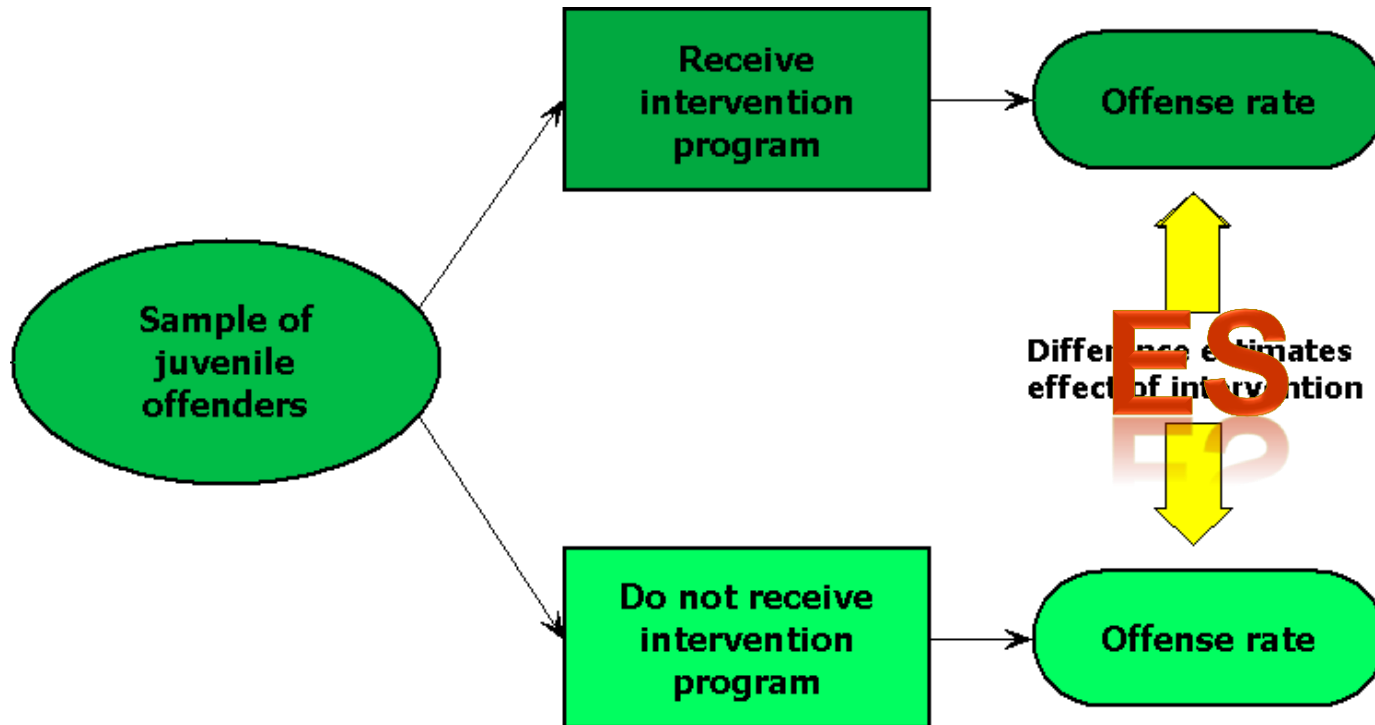
[An alternative perspective on the P in EBP: Generic program “types”]

- Interventions with research on effectiveness can be described by the *types* of programs they represent rather than their brand names, e.g.,
 - family therapy
 - mentoring
 - cognitive behavioral therapy
- These types include the brand name programs, but also many ‘home grown’ programs as well
- Viewed this way, there are many evidence-based programs of types familiar to local practitioners

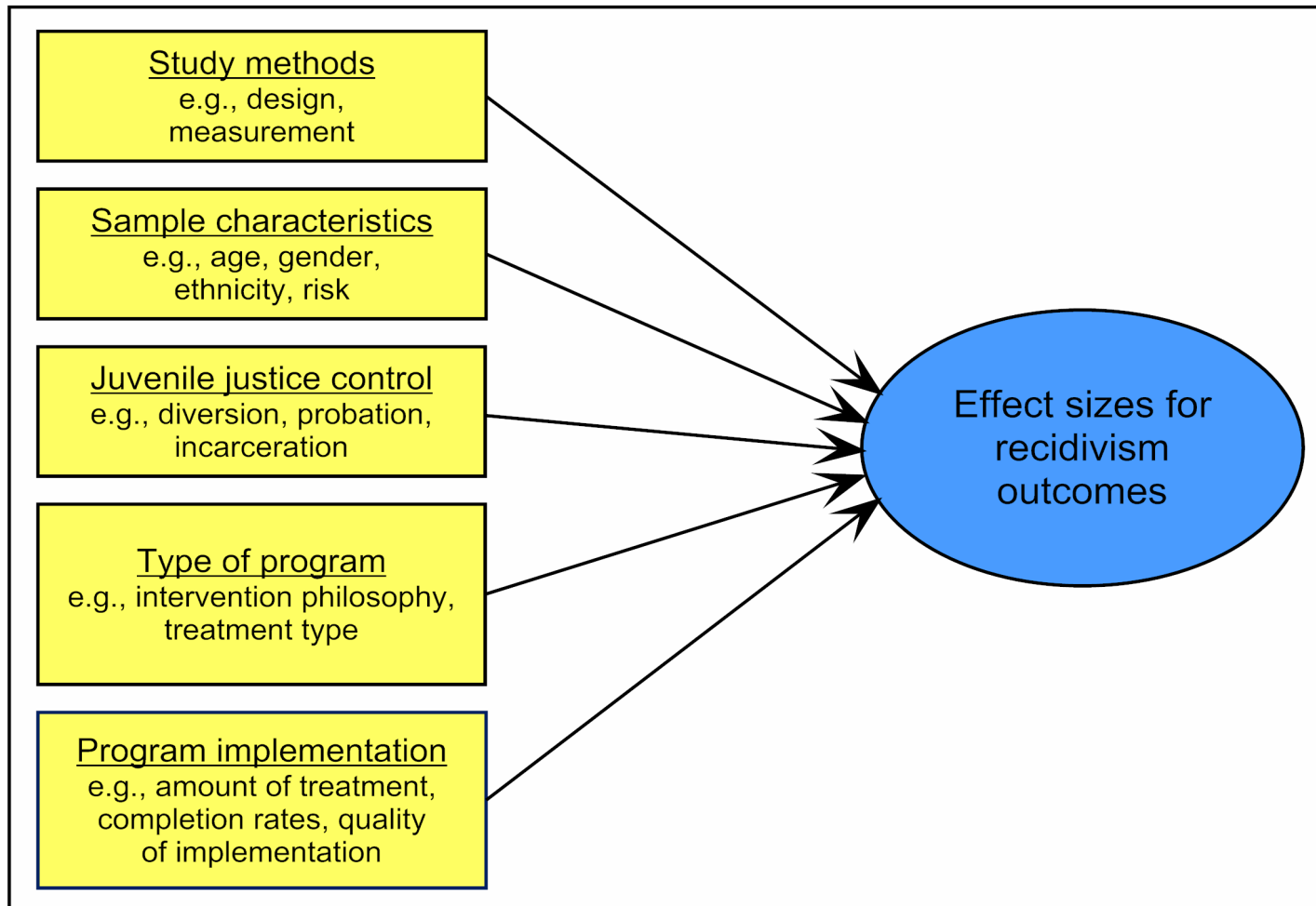
Meta-Analysis of a comprehensive collection of existing studies of interventions for juvenile offenders

- Over 600 experimental and quasi-experimental studies with latest update
- Juveniles aged 12-21 in programs aimed at reducing delinquency
- Focus on the programs' effects on recidivism (reoffending)
- 1950s to 2010

Database of existing studies of interventions for juvenile offenders



Effect sizes assumed to be a function of study and program characteristics



Evidence based practice

Using evidence from existing studies in our meta-analytic database to determine . . .

what generic programs and practices are effective

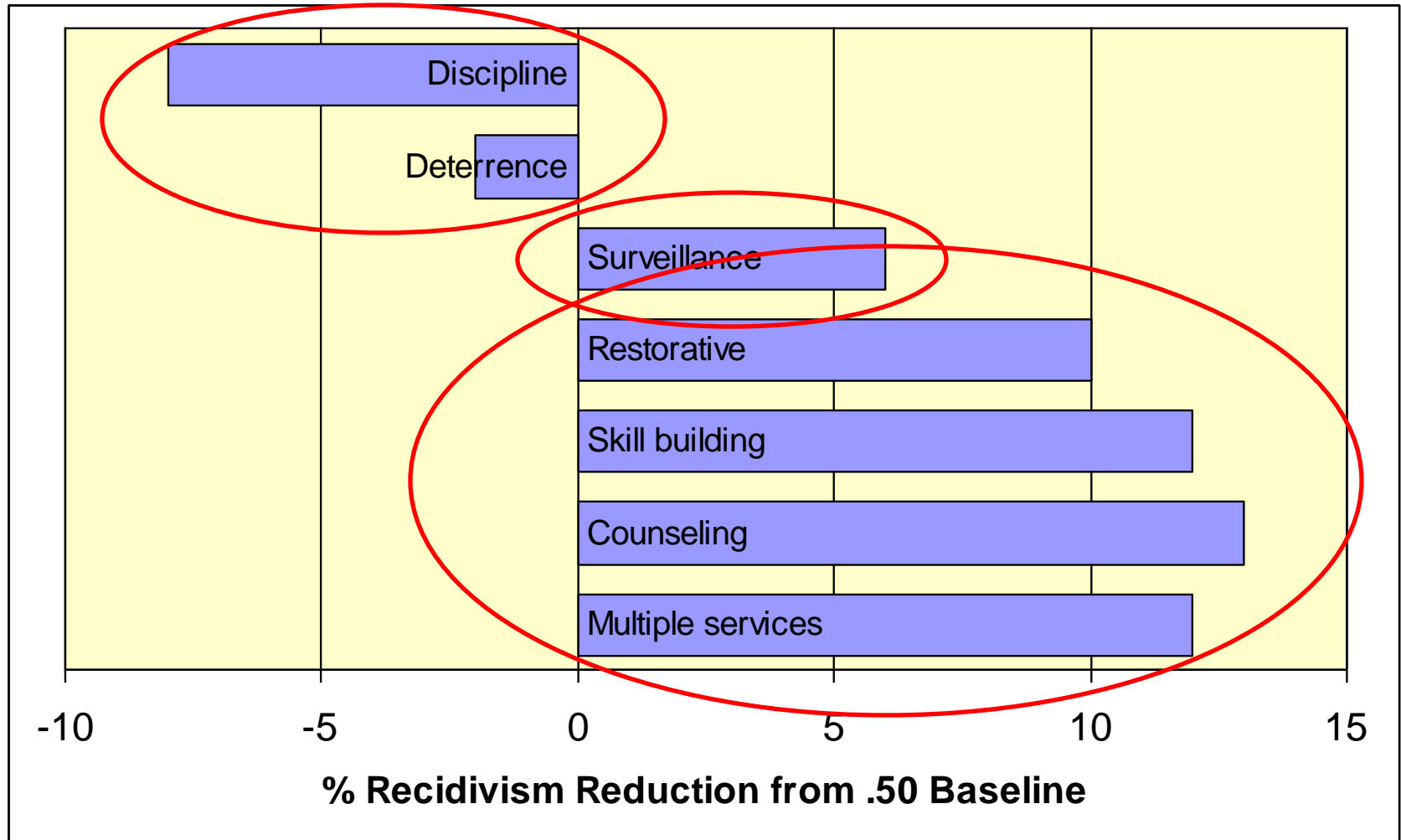
Program “philosophies” (Group 1)

- Discipline: e.g., paramilitary regimens in boot camps
- Deterrence: e.g., prison visitation (Scared Straight)
- Surveillance: e.g., intensive probation or parole.

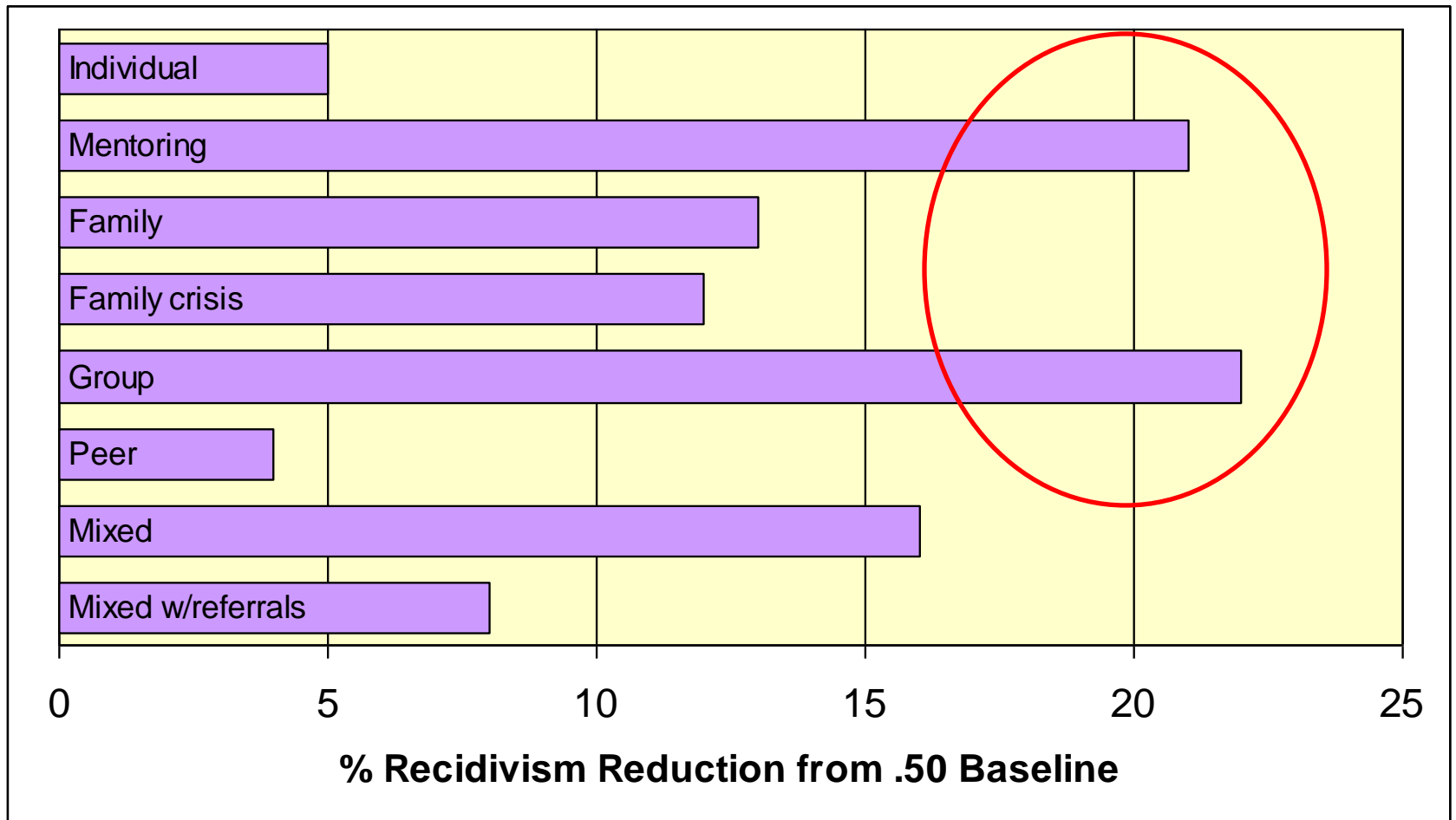
[Program “philosophies” (Group 2)]

- Restorative: e.g., restitution, mediation
- Skill-building: behavioral, CBT, social skills, challenge, academic, & vocational
- Counseling: individual, mentoring, family, family crisis, group, peer, mixed counseling, mixed with supplementary referral
- Multiple coordinated services: case management, service broker, multimodal regimen.

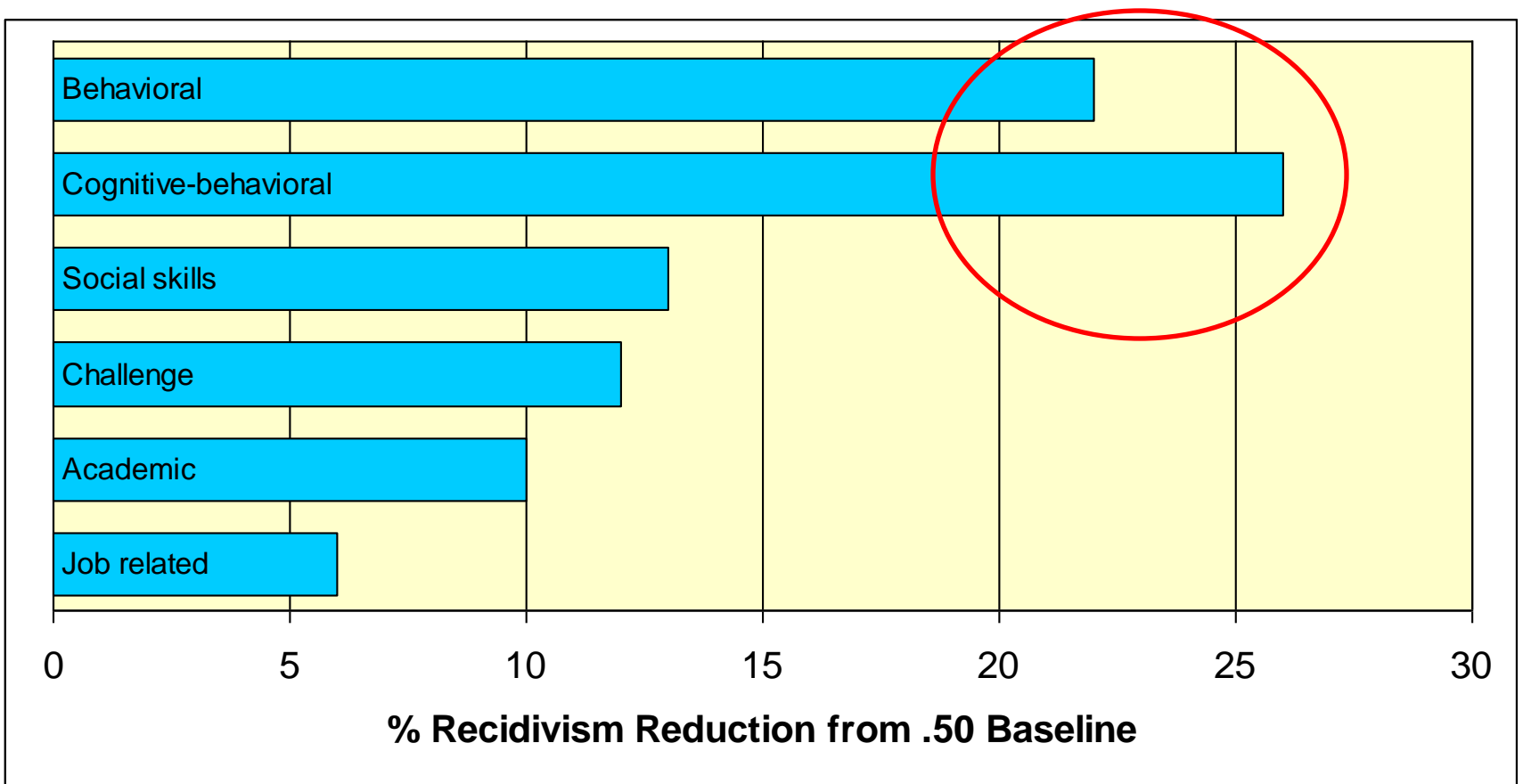
Program types sorted by general approach: Average recidivism effect



Further sorting by intervention type within, e.g., counseling approaches



Further sorting by intervention type within, e.g., skill-building approaches

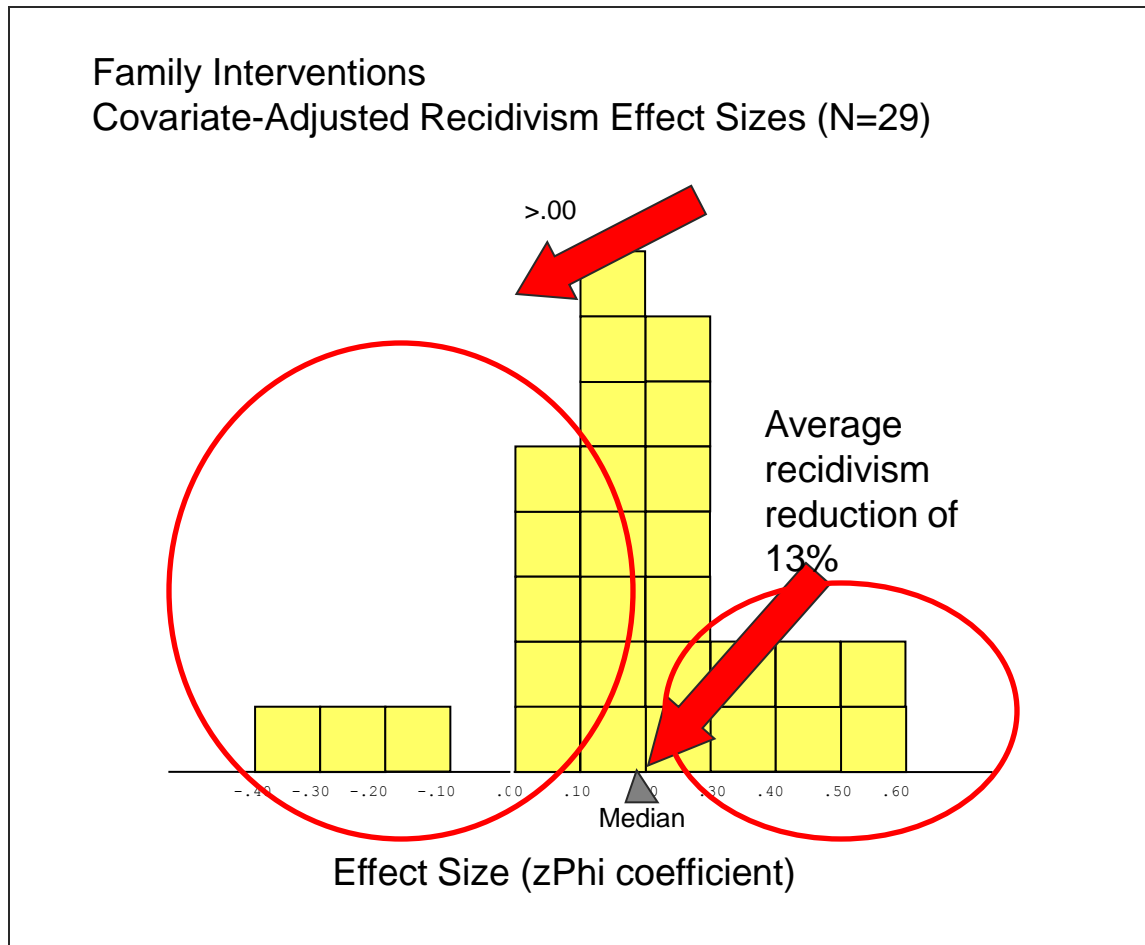


Many *types* of therapeutic interventions thus have evidence of effectiveness ... but there's a catch:

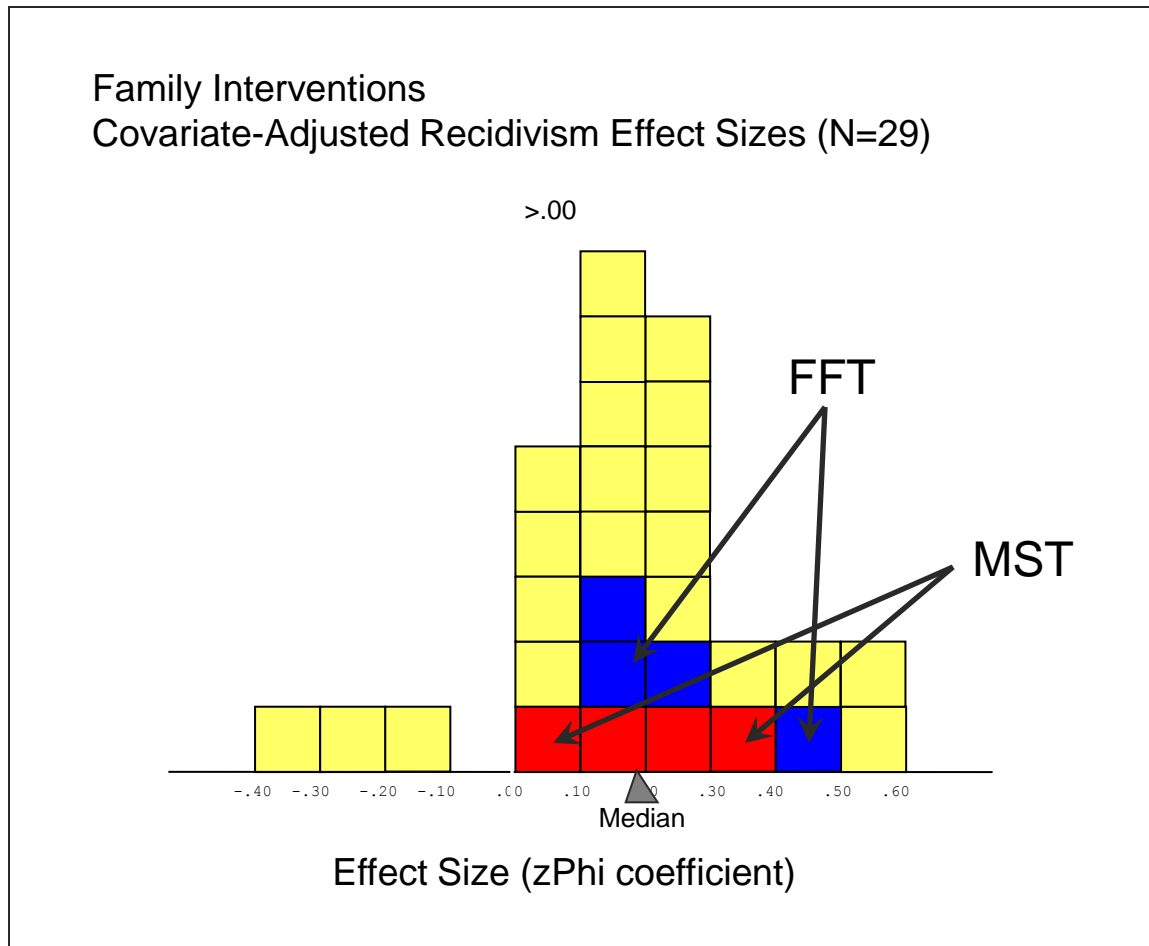
Though their **average** effects on recidivism are positive, larger and smaller effects are distributed around that average.

This means that some variants of the intervention show large positive effects, but others show negligible or even negative effects.

Example: Recidivism effects from 29 studies of family interventions



Where are the brand name model programs in this distribution?



Some characteristics of the juveniles matter

- On average, larger positive effects on recidivism with higher risk juveniles
- Little difference in effects for juveniles of different age, gender, and ethnicity

JJ supervision doesn't matter much

For juveniles with similar risk for recidivism, intervention effects are similar at all levels of juvenile justice supervision:

- No supervision
- Diversion
- Probation/parole
- Incarceration

[Service amount and quality matters]

For each type of intervention ...

- Positive outcomes are associated with the average duration and total hours of service
- Positive outcomes are strongly associated with the quality with which the intervention is implemented

To have good effects, interventions must be implemented to match the 'best practice' found in the research

- Program type: Therapeutic approaches are the more effective intervention types
- Risk: Larger effects with high risk juveniles
- Dose: Amount of service that at least matches the average in the supporting research
- High quality implementation: Treatment protocol and monitoring for adherence

Standardized Program Evaluation Protocol (SPEP)

Apply this knowledge base to assess how well current program practice matches evidence for effectiveness

- A rating scheme for each program type within the therapeutic philosophies
- Applied to individual programs based on data about the services actually provided to participating juveniles
- Validated with juvenile justice programs in Arizona and North Carolina

Standardized Program Evaluation Protocol (SPEP) for Services to Probation Youth

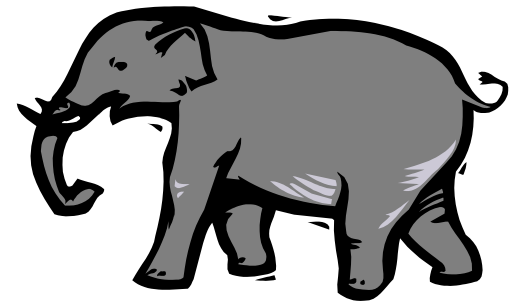
	Possible Points	Received Points
Primary Service:	35	
High average effect service (35 points) Moderate average effect service (25 points) Low average effect service (15 points)		
Supplemental Service:		
Qualifying supplemental service used (5 points)	5	
Treatment Amount:	10	
Duration: % of youth that received target number of weeks of service or more: 0% (0 points) 60% (6 points) 20% (2 points) 80% (8 points) 40% (4 points) 100% (10 points)		
Contact Hours: % of youth that received target hours of service or more: 0% (0 points) 60% (9 points) 20% (3 points) 80% (12 points) 40% (6 points) 100% (15 points)		
Treatment Quality:	15	
Rated quality of services delivered: Low (5 points) Medium (10 points) High (15 points)		
Youth Risk Level:	20	
% of youth with the target risk score or higher: 25% (5 points) 75% (15 points) 50% (10 points) 99% (20 points)		
Provider's Total SPEP Score:	100	[INSERT SCORE]

Points assigned proportionate to the contribution of each factor to recidivism reduction

Target values from the meta-analysis (generic) OR program manual (manualized)

[Evidence based practice]

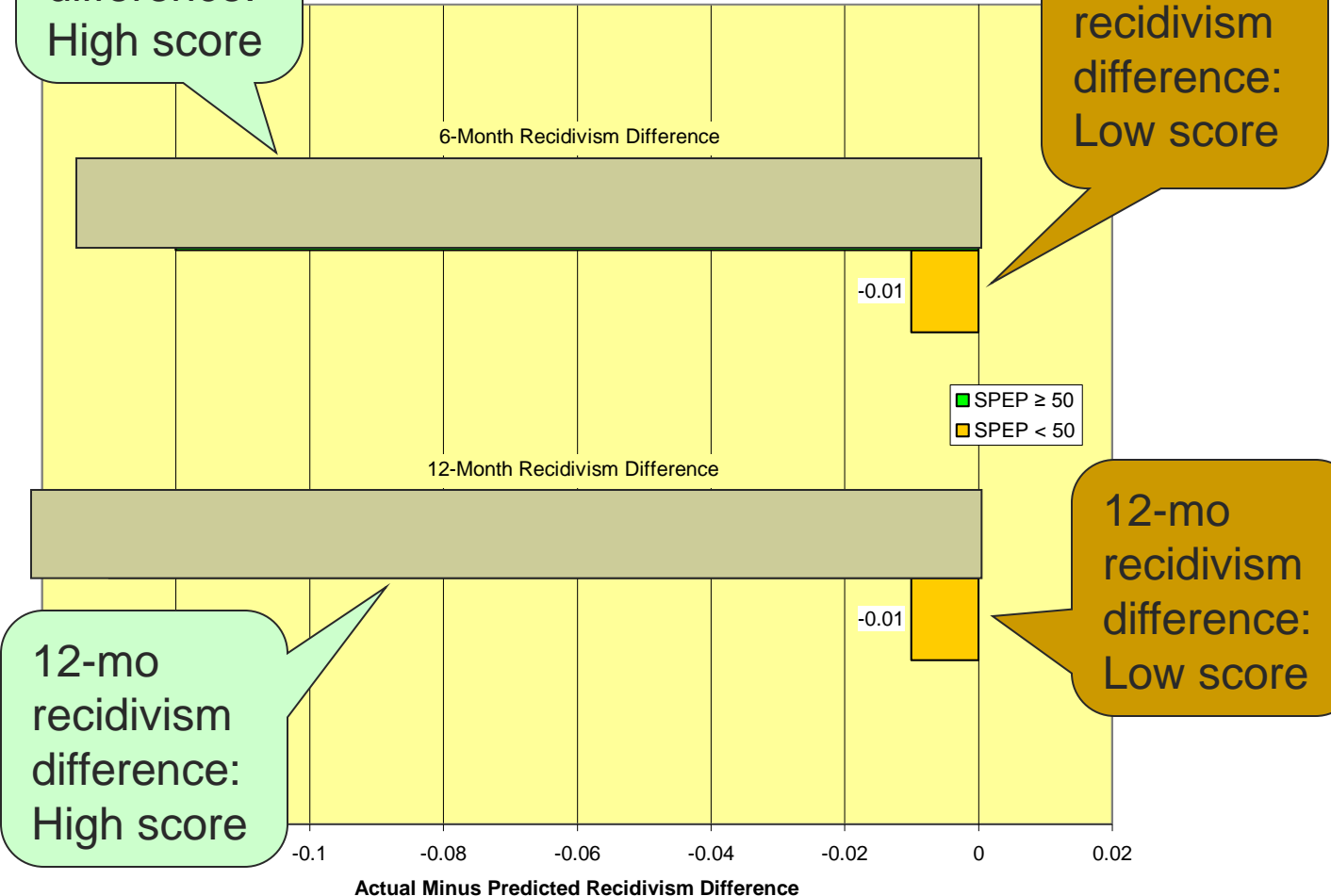
- With adequate specification of the nature of a particular program or service taking place, we can match it with research that provides evidence for the effectiveness of that practice.



Actual vs. predicted recidivism for providers with scores ≥ 50 and < 50

6-mo recidivism difference: High score

6-mo recidivism difference: Low score



12-mo recidivism difference: High score

12-mo recidivism difference: Low score

Actual Minus Predicted Recidivism Difference

[Model Usage]

Statewide reform in:

- North Carolina
- Arizona
- Tennessee

Soon to be operationalized at pilot sites in:

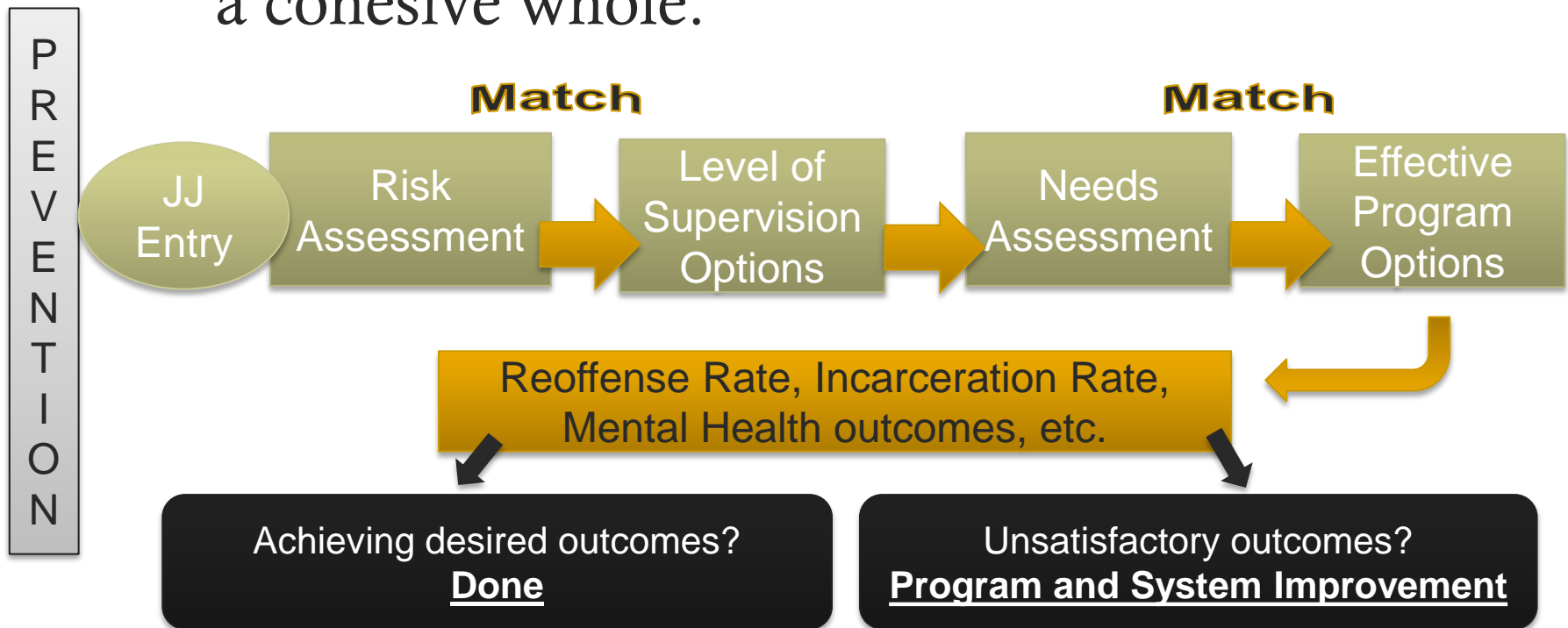
- Florida
- Pennsylvania
- Connecticut

[Summary]

- There is a great deal of evidence on the effectiveness of interventions for juvenile offenders *beyond that for brand name model programs*
- Model programs may be the best choice when a new program is to be implemented
- But evidence-based ‘best practice’ guidance can support the *effectiveness of ‘home grown’ programs already in place* without replacing them with model programs

Creating an Evidence Based Operating Platform

- There is a need for a research based operating platform to ensure that each element of a juvenile justice system is part of a cohesive whole.



[Role of Advocacy]

- Advance the messages that underpin this work, such as:
 - States needlessly spend billions of dollars a year incarcerating nonviolent youth.
 - Imprisoning youth can have severe detrimental effects on youth, their long-term economic productivity and economic health of communities.
 - Community-based programs increase public safety.
 - Community-based programs for youth are more cost-effective than incarceration.

From: Justice Policy Institute (2009). *The Costs of Confinement: Why Good Juvenile Justice Policies Make Good Fiscal Sense*. Washington DC: Justice Policy Institute.

[Role of Advocacy (continued)]

- The role of reinvestment strategies in supporting realignment
 - RECLAIM Ohio

Improving the Operation of Juvenile Justice Systems by Taking a New Approach on Evidence-Based Practice

Bridging the Gap Between Research and Practice

Shay Bilchik, J.D.

Center for Juvenile Justice Reform
Georgetown Public Policy Institute



Gabrielle Lynn Chapman, Ph.D.

Peabody Research Institute
Vanderbilt University



National Juvenile Justice Network, July 28, 2011