



# Juvenile Justice Research: Implications for Intervention and Policy

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# Part 1.

## Effective Use of Research to Meet the Juvenile Justice Challenge



## The juvenile justice challenge

- A high proportion of adult offenders (70-80%) were prior juvenile offenders who appeared in the JJ system
- They were thus on a pathway to continued criminal behavior that effective JJ intervention might have interrupted

### But, at the same time:

- A high proportion of the juveniles who come into the juvenile justice system (70-80%) are not on a path to adult crime; they are just afflicted with adolescence
- Over-involvement with the JJ system can make things worse for those juveniles



# The juvenile justice challenge

So, the JJ system needs to be able to do three things—

- Distinguish youth at high risk for continued criminal behavior from those at low risk
- Administer supervision and treatment programs to the high risk youth that protect public safety and reduce their risk
- Do no harm to the youth at low risk

And do all this in a consistent and sustained manner



# We have research that can help meet this challenge

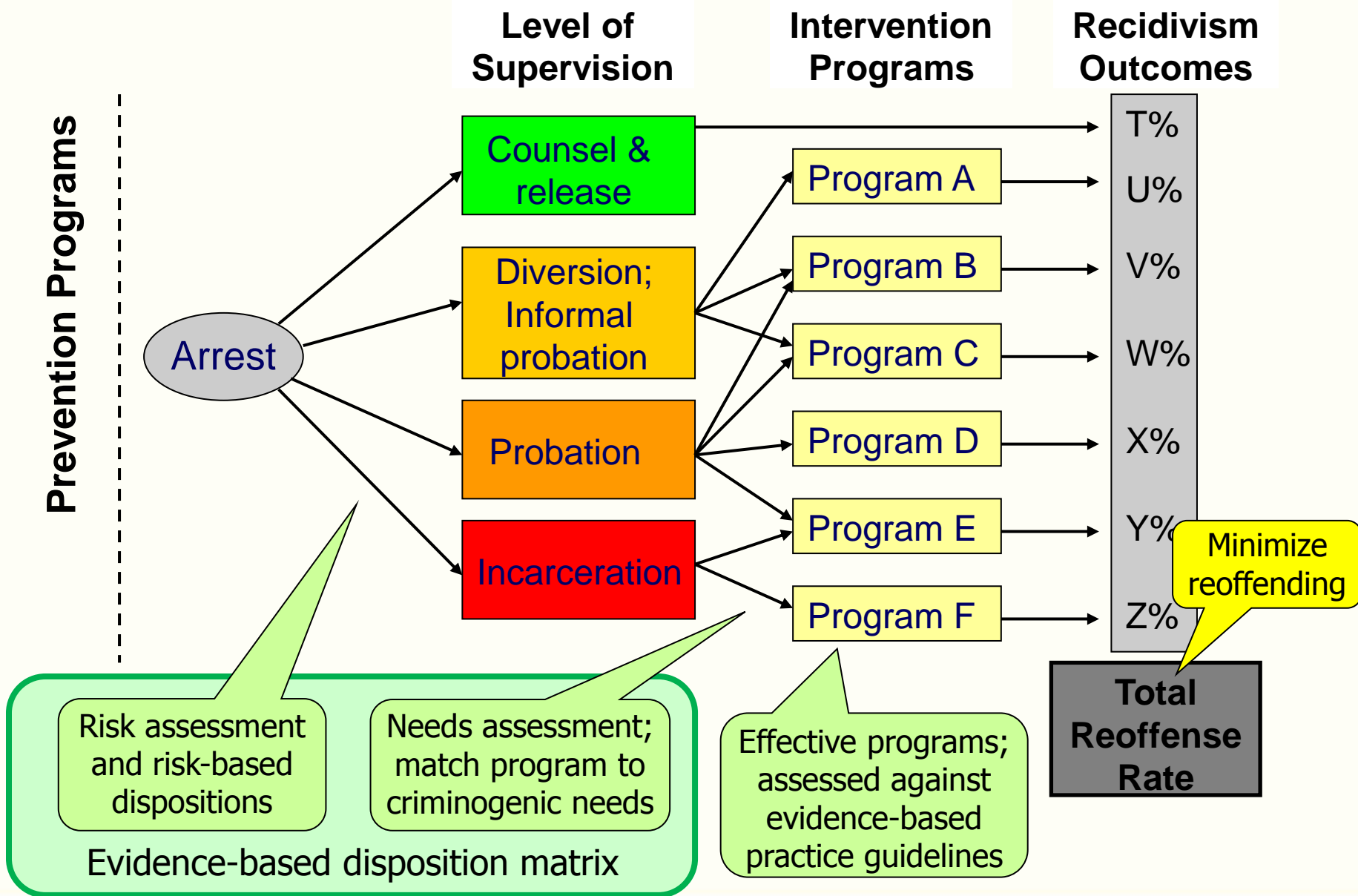
- Longitudinal research on the developmental pathways to criminality
  - Risk factors that predict the probability of criminal behavior
    - Static background factors & prior history
    - Dynamic factors that can be addressed to reduce the probability of criminal behavior (“criminogenic needs”)
- Evaluation research on the effects of intervention programs
  - Therapeutic programs that reduce reoffense rates
  - Programs that do not reduce reoffending and may increase it (punitive, disciplinary, deterrence oriented; transfer to CJ)

# Guiding evidence-based JJ practice with structured decision support tools

- Risk assessment instruments
  - Provides an estimate of the probability of reoffending
- Disposition matrices
  - Guides risk-based level of supervision and treatment
- Needs assessment instruments
  - Supports matching of programs to criminogenic needs
- Program practice guidelines and assessments
  - Evaluates the expected effectiveness of programs for reducing recidivism; e.g., Standardized Program Evaluation Protocol (SPEP)

The essential platform for use of these tools: Well-developed data systems that track juvenile characteristics, service, and outcomes.

# The evidence-based juvenile justice system





# Part 2.

## The Critical Component: Effective Evidence-Based Programs



# The prevailing definition of an evidence-based program: A certified “model” program

The *program* part: A ‘brand name’ program, e.g.,

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

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

- Blueprints for Violence Prevention
- OJJDP Model Programs Guide
- CrimeSolutions.gov
- NREPP (National Registry of EB Programs & Practices)



# A broader perspective on EBPs: Evidence-based 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 program types familiar to practitioners

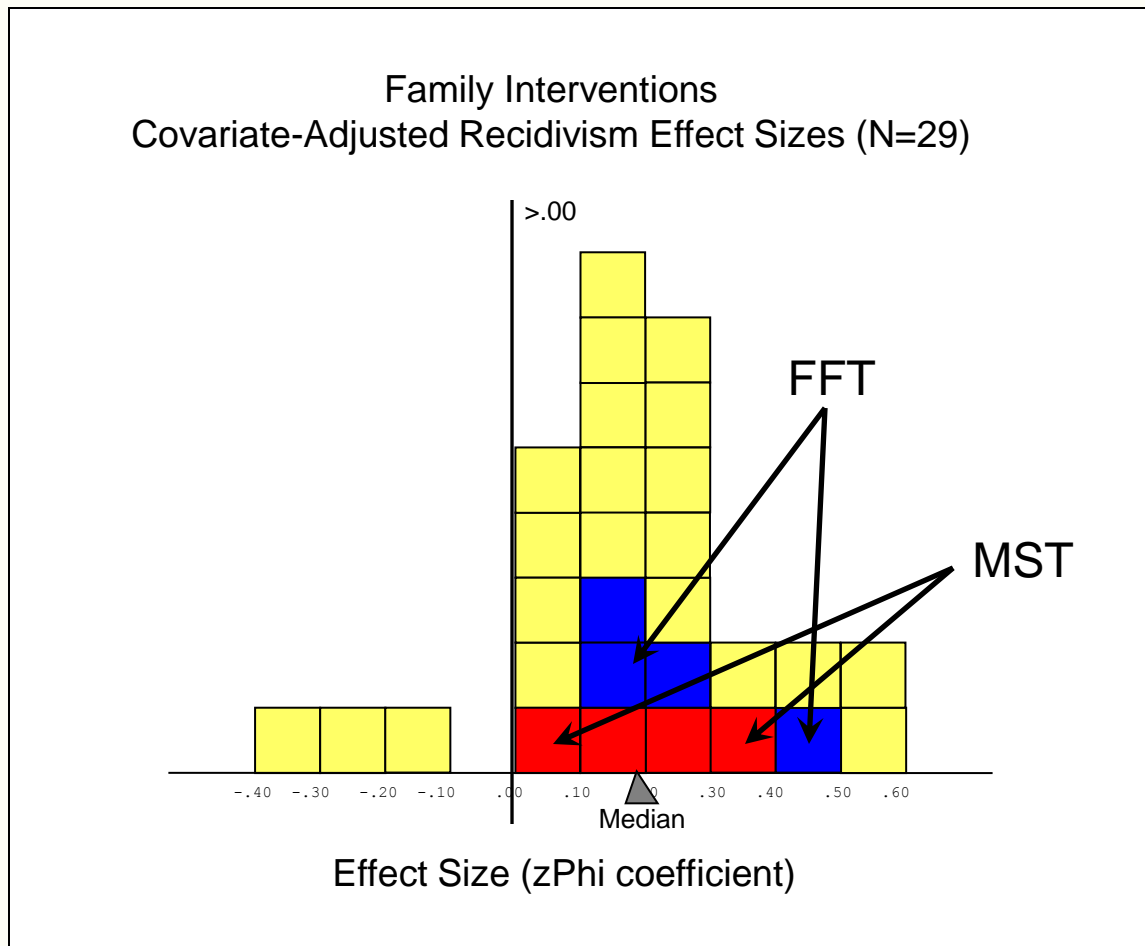


# The evidence base: A comprehensive collection of studies of interventions for juvenile offenders

## Meta-analysis of delinquency intervention research:

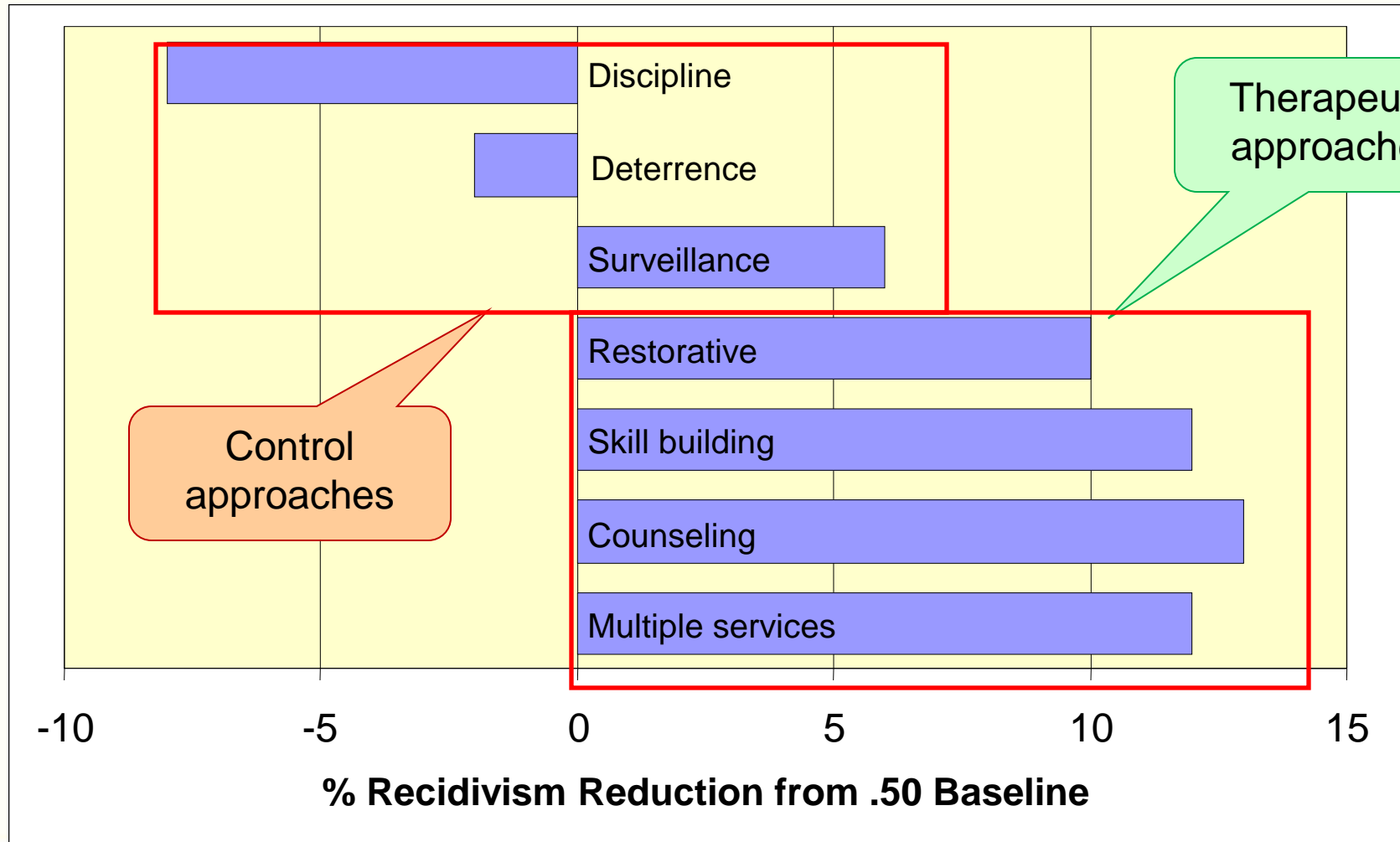
- Studies: 500+ controlled studies of interventions with juvenile offenders
- Outcomes: Focus on the programs' effects on recidivism (reoffending)

# Recidivism effects for generic and brand name family therapy programs





# Program types sorted by general approach: Average recidivism effect





# Generic program types with sufficient research to support practice guidelines

- Cognitive-behavioral therapy
- Behavioral contracting; contingency management
- Social skills training
- Group counseling
- Family counseling; family crisis counseling
- Individual counseling
- Mentoring
- Challenge programs
- Victim-offender mediation
- Restitution; community service
- Remedial academic programs
- Job-related programs (vocational counseling, training, etc.)



# Key characteristics of effective programs

- Use a “therapeutic” approach aimed at internalized behavior change (vs. external control, deterrence)
- Within a therapeutic category, some program types are more effective than others (e.g., CBT, mentoring, family therapy)
- For a given program type, service must be delivered in adequate amounts and quality (dose)
- The more effective programs have an explicit treatment protocol and procedures for monitoring adherence
- Effects are largest with high risk cases



## Guidelines for effective practice based on the findings from this research

The Standardized Program Evaluation Protocol (SPEP): A structured process for assessing programs on these key characteristics

- *Program type*
- *Quality of service delivery*
- *Amount of service (dose) provided*
- *Risk level of juveniles served*



# Pros and cons of the effective practices approach based on meta-analysis

- Applicable to many established programs; doesn't require conversion to a brand name model program
- Provides guidance for incremental program improvement
- Larger evidence base potentially supports broader generalization; allows room for local adaptation

BUT

- Detailed program protocol, training, technical assistance, etc. not generally available for generic program types
- Current evidence base insufficient to provide detailed guidance for effective implementation
- Greater potential variability in effects than may result from following a single well-developed protocol



## Main takeaway points

- Available research provides more useful information for improving the performance of JJ systems than is currently being used
- Structured assessment and decision-making tools are the vehicles for getting research evidence into routine sustained practice
- The critical component for reducing recidivism is evidence-based programs monitored for quality
- The evidence base for programs supports both name-brand model programs and no-name generic types of programs