

A Final Report for:

***ASSESSMENT OF AFTERCARE SERVICES
PROVIDED TO DELINQUENT YOUTH***

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Keystone University Research Corporation

September 30, 1998

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The overarching goal of this study is to contribute to our knowledge about how to improve the aftercare services delivered to delinquent youth in Pennsylvania. We hope that the knowledge gained as a result of this study will take us one step further in that direction.

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EXECUTIVE SUMMARY

STATEMENT OF THE PROBLEM

Juvenile crime in America has soared over the past decade. From 1984 to 1994 the homicide arrest rate for juveniles increased 160 percent. Many believe that juvenile delinquency will continue to increase as the size of our youth population grows. Recently, our news has been filled with reports about youths committing horrendous crimes. The school shootings during the 1997/98 academic year shocked our nation and raised the public cries to *do something* about youth violence.

One area of juvenile corrections that has received an increasing emphasis and attention is the aftercare phase. Community-based aftercare is the parole phase of corrections, it "is the point at which the supposedly beneficial cumulative effects of the institutional 'treatment' experience are transferred to community settings, and are reinforced, monitored, and assessed" (Altschuler & Armstrong, 1994a:1). Intensive community-based aftercare services have evolved over the past decade as a means to improve the likelihood that juveniles released from secure confinement remain crime free rather than return to delinquency. But questions about the efficacy of these programs remain.

Given this epidemic of juvenile delinquency and the new strategies and efforts to address this problem, it is of vital importance to gather information about what works and what doesn't work. To that end, this report represents the effort to collect and analyze evaluative data on the process and outcomes of two intensive aftercare programs for juvenile delinquents that have been implemented in Pennsylvania.

The two of the contracted service providers—Philadelphia Opportunities Industrialization Center, Youth Advocacy Plus Program (OIC-YAPP) and Abraxas Non-Residential Care (Abraxas NRC)—provided *intensive aftercare* services to youth in Philadelphia and Allegheny counties that were released from YDCs and YFCs. These aftercare services have been established for the purpose of easing the transition between a correctional institution and the home/community environment. Specifically, these programs aim to *reduce recidivism* and *increase other prosocial behaviors* among the juveniles receiving the services.

The two evaluation components of this research include:

- ◆ ***Process Evaluation***—to assess the level of service provided to juveniles on aftercare status and to determine if appropriate aftercare services were provided during both the institutional and community phases (the quantity of program activity and the quality of program implementation).
- ◆ ***Impact (Outcome) Evaluation***—to assess the effectiveness of the aftercare services in accomplishing stated goals (i.e., reducing recidivism and increasing prosocial behaviors).

RESEARCH METHODOLOGY

A quasi-experimental design was used in this evaluation of the contracted intensive aftercare programs in Allegheny County (Abraxas NRC) and Philadelphia County (OIC-YAPP). Table 2.1 illustrates the research design employed in this study. In Philadelphia, Group 1 subjects are YDC/YFC releasees who experienced contracted intensive aftercare services through the OIC-YAPP (experimental treatment). Subjects in Group 2 and Group 3 represent control groups in Philadelphia County. Group 2 subjects are YDC/YFC releasees who received aftercare services of varying *intensity* (usually little more than traditional probation) directly through the Philadelphia County probation department. Group 3 subjects also received aftercare directly through probation but were initially released from a variety of privately run placement programs (e.g., George Jr. Republic, Glen Mills School, VisionQuest, etc.).

The pattern of one experimental group and two control groups found in Philadelphia County is repeated in Allegheny County. Group 4 and Group 5 subjects are YDC/YFC releasees. Group 4 subjects were released to the Allegheny Abraxas NRC program (contracted intensive aftercare), while Group 5 subjects received aftercare directly through the Allegheny County probation department. Group 6 subjects were released from private placement facilities to probation-based aftercare.

Group 7 is actually composed of five groups, one each from the counties of Berks, Bucks, Dauphin, Lancaster, and Lehigh. Subjects in these groups were released from YDCs/YFCs to direct aftercare through their respective county probation departments. These control groups provide additional baseline data for comparison with the experimental and control groups in Allegheny and Philadelphia counties.

Subjects were selected from a population of juveniles who had at least one previous stay in a secure residential placement facility (YDC, YFC, or private facility). To obtain a cohort of subjects with similar release dates and a similar follow-up period, the population was defined as juveniles arriving at a residential placement during 1995.

Sampling frames for groups 1 through 7 were constructed from lists of juvenile offenders provided by the Department of Public Welfare (DPW), the Center for Juvenile Justice Training and Research (CJJT&R) at Shippensburg University, and the two contracted aftercare agencies. The final sample sizes for each group (for which data were gathered) were as follows: Group 1 = 89; Group 2 = 85; Group 3 = 88; Group 4 = 72; Group 5 = 58; Group 6 = 85; Group 7, Bucks = 40, Berks = 55, Dauphin = 26, Lancaster = 35, and Lehigh = 31 (see Table 2.1).

There were multiple methods of data collection incorporated into this research design: juvenile data from case files in the family court as well as the intensive aftercare agencies; aftercare agency data gathered during site visits where we interviewed staff and reviewed agency records; and adult arrest data for all study subjects that turned 18 during the study period was gathered from the centralized records system of the Pennsylvania State Police.

Table 2.1: Sampling Groups
COUNTY

PLACEMENT	AFTERCARE	COUNTY		
		Philadelphia	Allegheny	Control Counties *
Public	Contracted	1 (N = 89)	4 (N = 72)	
Public	Direct	2 (N = 85)	5 (N = 58)	7 (N = 187)
Private	Direct	3 (N = 88)	6 (N = 85)	

* Berks, Bucks, Dauphin, Lancaster, Lehigh.

Four instruments described below were used to gather data relevant to all aspects of the process and outcome evaluation, including the demographic characteristics, and the social and criminal history of juveniles in each group in the study. Copies of these instruments are located in Appendix A of this report.

The *Social and Criminal History* instrument detailed subject information maintained in the family court for the following factors: socio-demographic background; juvenile and adult arrests, convictions and incarcerations; adjustment while in the sample placement; probation type and frequency of contacts following release from the sample placement; prior problems in the areas of family life, school problems and substance abuse.

The *Youth in Aftercare* instrument included the following data about a juvenile's experience in one of the contracted intensive aftercare programs: pre-release case manager contact with youth and contacts with family; post-release contacts with youth; aftercare discharge status and recidivism; home setting and family situation; drug and alcohol treatment; education; employment; other community involvement. The instrument also captured information about prosocial goals set by the case manager and juvenile and assessed them for completion.

A *Program Information Survey* instrument was sent to Abraxas NRC and OIC-YAPP for completion. This instrument included information on the following: all current and recent employees (job title and responsibilities, experience and qualifications, period of employment, and specific responsibilities related to the intensive aftercare program); staff turnover rates; and case manager caseloads. The instrument also inquired about routine inservice staff training programs and additional training opportunities that staff may have pursued on their own. Finally, the instrument asked the aftercare agency to list and evaluate all other community-based services (educational, health, D&A, recreational, etc.) that the aftercare agency used to provide additional services to its clients.

The *Site Visit Interview* schedule was used to collect information from staff members at Abraxas NRC and OIC-YAPP during the site visit. This instrument, which was completed during a personal interview with the staff member, asked the respondent to describe the following: their role in the aftercare program; their beliefs and attitudes towards juvenile delinquents, the juvenile justice system, and

attempts to deal with the delinquency problem; the congruency of such beliefs among aftercare staff; the effectiveness of the aftercare program in accomplishing individual and system-level objectives (competency development, community protection, etc.); adequacy of resources; quality of staff communication; and factors promoting or inhibiting service delivery. Special questions targeted to case managers asked them to describe the following: the client intake process; the mechanisms they use to ensure compliance and for handling noncompliance; their relationship with the courts and with juvenile probation officers; the adequacy of other community-based service providers.

FINDINGS

PROCESS EVALUATION

The findings from our *process evaluation* are presented first. Initially we describe the two aftercare service programs—the size and composition of the aftercare staff; staff qualifications and prior experience; size of case load; and staff turnover. Next, the *quantity of program activity* in terms of timing and number of contacts is examined and how it differs from the aftercare services of the county probation departments. Next, we characterize the juveniles who participated in the two aftercare programs with regard to these risk factors: home environment, drug and alcohol abuse, schooling and education; employability; and negative peer group relationships and activity. How these risk assessments matched service delivery is also assessed. The extent to which the aftercare service programs brokered other services from the community to serve their clients and how well these brokered services worked is another important aspect of our process evaluation that is discussed. Finally, we comment on the overall *quality of program implementation*, based on a series of research questions that served to focus our discussion.

Description of Aftercare Service Programs

- ◆ ***The size and composition of aftercare staff.*** At both contracted service providers the size and composition of aftercare staff was adequate to handle the volume of juvenile clients normally served by these two programs. There was an adequate mix of supervisory, case management, and support staff at each program. However, both contracted service providers experienced shortages of specialized staff (e.g., counselors), as reflected in the multiple job assignments of those with training in family therapy.
- ◆ ***Staff qualifications and prior experience of aftercare staff.*** At OIC-YAPP staff qualifications and prior experience of aftercare staff appear adequate, based on what was reported on paper. The education and training for case manager staff was appropriate with a BA in criminal justice or related field typical of the staff. Additional training for case manager staff was also provided by each of the aftercare agencies. At Abraxas NRC there was a mixture of staff qualifications,

with some staff coming to the program without formal training, but who had experience with the program—although this was not the norm.

- ◆ **Case loads of case managers.** Both aftercare programs were actually at or below the ideal of 10-12 cases per case manager (OIC-YAPP averaged 10.3 community cases/case manager; Abraxas NRC averaged 3.8 cases/case manager).
- ◆ **Turnover.** The number of aftercare staff in the two aftercare programs did not fluctuate greatly over the period from 1995 to late 1997, although staffing dropped off significantly (from about 9 to 2 staff members) in the Abraxas NRC program in October 1997, following a program audit and restructuring. Furthermore, recruitment apparently compensated for the 10-30 percent annual turnover rate in case managers for each program. Regardless, staff turnover was a significant concern of managerial staff at both programs. Managers experienced challenges in finding and retaining qualified, experienced staff, and cited the nature of the work and compensation issues as contributing to staff turnover and , burnout.,,

Quantity of Program Activity

- ◆ **Timing and number of contacts.** Taking all the indicators of service delivery related to the timing and number of contacts, we see a pattern emerging for these contracted aftercare service providers—their *quantity of program activity* did not match operational guidelines (as stated in their annual reports and in Exhibit 1 on page 9 of this report). Referrals to the aftercare programs were not made in a timely manner, leaving the agencies with less time to make contact with the juvenile, his/her family, and to establish an aftercare plan. Each program had approximately two months between the first institutional contact and the juvenile's release from placement (ideally, they should have several months). The number of institutional contacts was also fewer than expected—case files rarely provided evidence of more than one pre-release contact with the juveniles and hardly ever any documented contacts with families, regardless of the amount of time between referral and release. Once released from institutional placement, approximately 50 percent of the juveniles were *not* contacted within the first 24 hours. Finally, although not consistent between Philadelphia OIC-YAPP and Abraxas NRC, the number of contacts per month throughout the aftercare period was less than expected given the ideal of 3-4 contacts per week at the beginning and tapering off as the juvenile transitions into the community.
- ◆ **Contact by county probation officers.** The comparisons for Philadelphia County reveal a greater frequency of contact by probation officers (2-4 per month for the control group) than for the intensive aftercare case managers (less than one per month). Allegheny County comparisons reveal an opposite pattern (i.e., 4-10 per month for the experimental group versus less than one per month for the control group)—although there are more reasons to question the reliability and validity of the Allegheny data for both Abraxas NRC as well as the PO contact data, making our inferences about the differences in the level of service

less confident. These data for Philadelphia and Allegheny counties, hence, do not provide consistent findings regarding the comparative level of aftercare service (number of contacts) delivered to juveniles released from YDCs/YFCs. In both counties there are wide gaps between the aftercare case manager contacts vs. those contacts of the POs, although the patterns are opposite one another.

Risk Factors and Associated Service Delivery

- ◆ **Home environment.** Both contracted aftercare service providers tended to record incomplete information from home visits, and in some cases no such was available at all. In most cases only a juvenile's living arrangement was noted. Fewer than one-quarter of juveniles in either of the contracted aftercare service programs resided in a household containing both natural parents. However, information on the number of people in a household, home suitability, parental involvement with aftercare, and the employment and public assistance status of parents/guardians was only available for a limited number of cases.

Examination of case files and other records from both contracted aftercare service providers revealed very little specific information about family-related services that may have been provided internally or through referral to other programs and agencies. Except for referrals to prenatal services (usually for female clients and girlfriends of male clients) there is little evidence that the two contracted service providers routinely referred clients to other community-based service providers for family services.

- ◆ **Drug and alcohol abuse.** Information gathered from court records show substance abuse to be a common problem; over 40 percent of juveniles in both programs had a history of major drug use problems, and more than one-quarter had major alcohol use problems. Substantial percentages (i.e., 20 percent or more) of juveniles in both groups also showed evidence of drug and/or alcohol use at school, involvement in drug sales, and participation in D&A treatment.

Although both agencies have some indication that juveniles with D&A problems were given access to treatment, there is very little documentation regarding the type of treatment, frequency of sessions, and regularity of attendance. Results of drug urinalysis (generally performed by the probation department) were either not regularly reported to the aftercare agencies or the information was not routinely recorded by case managers in a juvenile's case file.

- ◆ **Schooling and education.** A majority of juveniles in both groups had educational histories that included one or more of the following: major truancy or dropping out, out-of-school suspension or expulsion, an achievement level two or more years behind their grade level, and failing one or more grades. Nearly half of OIC-YAPP clients and over half of Abraxas NRC clients had previous experience with alternative or special education.

It is clear that, at least in the case of OIC-YAPP, a serious effort was made by aftercare staff to enroll juveniles in an educational program. In the case of

Abraxas NRC, there were 17 of 24 clients (for whom case files were available) enrolled in an educational program. Therefore, it appears that Abraxas NRC also made serious efforts in this area. A final question relevant to an evaluation of post-release educational services at both programs is whether aftercare staff were monitoring their clients' school attendance and academic performance. Neither contracted service provider appears to have routinely recorded information about academic performance or about steps taken to address problems in the areas of attendance and academic performance.

- ◆ ***Employability.*** Information obtained from the contracted service providers about job-related services and employment rates of clients suggest that both agencies made serious efforts to prepare their clients for work, and were reasonably successful in placing clients with employers. To combat employers' negative perceptions of delinquent youth, OIC implemented several measures intended to restore the community's faith in their clients. Abraxas NRC also had several programs to help clients prepare for and find employment. However, very few case files at both aftercare agencies contained information about any job-related services received as part of aftercare treatment. Furthermore, case file information suggests that work attendance and performance of their clients in the workplace was not monitored consistently or at least was not routinely recorded.
- ◆ ***Peer group relationships and activity.*** Information on association with delinquent peers is only available for a small percentage of cases for each of the aftercare programs. Re-association with delinquent peers appears to be a more serious problem for the juveniles at OIC-YAPP (10 out of 13 cases where information was reported) than for Abraxas NRC (7 out of 14 cases where information was reported). Similarly, little information was available on the participation in non-school sponsored recreational activity.

However, contracted service providers (especially OIC-YAPP) did provide their clients with a large variety of topical and engaging group sessions, guest speakers, and sponsored off-site educational, cultural and recreational activities. While attendance figures from OIC suggest that participation rates for voluntary events could be improved, and Abraxas NRC apparently failed to record participation rates, this is one of the more innovative features of the aftercare programs offered by the two contracted service providers.

- ◆ ***Service brokerage:*** The Program Information Surveys from both contracted service providers shows that they referred clients to a number of valuable community resources. Abraxas NRC appears to have had a particularly dense and varied network of positive relationships with community organizations (17 organizations spanning six distinct service areas). While OIC-YAPP's network of connections with community organizations (eight organizations covering six distinct service areas) appears to have been less dense, and their evaluation of these services was less positive, OIC appears to have been equipped to provide its clients with more in-house services (e.g., employment prep) than Abraxas NRC.

Quality of Program Implementation

In the evaluative assessment of the *quality of program implementation* we drew upon two primary sources of documentation. First, data already presented to describe the level of program activity at the two contracted aftercare service providers gave us evidence regarding the extent to which the programs implemented their intensive aftercare services according to the ideal model presented in the report. Second, the input from staff at these agencies who were interviewed offered *insider* perspectives on program implementation, strengths and weaknesses of program operation, assessment of linkages with outside agencies, and recommendations for improvement. Together, these sources of evidence provided both *objective* as well as *subjective* data on the quality of program implementation.

We have already noted the extent to which these programs were lacking in the delivery of services at the level in which their program models dictated. This, as well, reflects on the overall *quality of their implementation*. Undoubtedly, there were some highly qualified and motivated staff (both at the case manager and administrative level) at both of these aftercare sites. For those who worked hard and were committed to their work, there were others who did not seem to care and the resulting organizational climate at both OIC-YAPP and Abraxas NRC was poor. Interview data reveal complaints of internal politics, low morale, poor wages and benefits, and too much bureaucratic red tape.

In addition the overall *quality of implementation* is reflected in the inconsistent and missing documentation that existed for the juveniles who were served by both programs. Without documentation, we had no choice but to assume that an activity (e.g., contact with juvenile or family) did not actually occur if it was not noted in a case file. As a result, this may have resulted in *underestimating* the level of activity; but we have no way of knowing how much.

External factors also affected the *quality of implementation* to some degree at both aftercare agencies. In some instances, there were difficulties in dealing with the referring institutions and delays in the referrals; schools were not always cooperative in placing juveniles released mid-year; employers were hard to come by; and in Allegheny County, particularly, the vast array of service agencies dealing with a juvenile resulted in *turf* battles and uncoordinated service delivery.

OUTCOME EVALUATION

Before turning to the outcome data, it is important to examine information on the backgrounds of the juveniles included in our samples. Since background characteristics and/or risk factors can play a key role in explaining outcomes, we need to know the extent to which these factors varied across the groups we are comparing.

Juvenile Background Characteristics

The factors analyzed relate to the following:

- ◆ A juvenile's: demographic background (i.e., sex and race).
- ◆ Delinquent history (i.e., age at first arrest, prior arrests, prior convictions, prior placement, and age at first placement).
- ◆ Social problems (i.e., family, school, and drug and alcohol problems).
- ◆ Sample placement variables (i.e., sample placement is first placement, age at sample placement, length of sample placement, age at release from sample placement, and institutional problems).

Within Philadelphia County and Allegheny County, two types of comparisons are of interest.

- ◆ Comparisons between juveniles with the *same type of placement* (i.e., the public YDCs/YFCs), but who received *different types of aftercare* (i.e., either intensive aftercare from one of the contracted service providers versus direct aftercare through probation departments). This represents a comparison of Group 1 and Group 2 in Philadelphia and Group 4 and Group 5 in Allegheny.
- ◆ Comparisons between juveniles with *different types of placement* (i.e., YDCs/YFCs versus private institutions), but who received the *same type of aftercare* (i.e., direct aftercare through probation departments). This means a comparison of Group 2 and Group 3 in Philadelphia and Group 5 and Group 6 in Allegheny.

Summing up the results of this comparative analysis for the sample groups in Philadelphia and Allegheny counties, we observe strikingly similar patterns of statistically significant differences. In considering the ***criminal history*** variables, we see that for the experimental group and the first control group (Group 1 versus Group 2 in Philadelphia, and Group 4 versus Group 5 in Allegheny), ***the age at first arrest and age at first placement are significantly lower for the experimental group than for the first control group.*** We also see that in both counties, experimental group juveniles have the same or slightly more prior arrests, convictions and placements than juveniles in the first control group, but these differences are not statistically significant. Looking at these same criminal history variables for the pair of control groups in each county (all of whom received public aftercare), we also see that juveniles who were committed to public placement had significantly more prior arrests, convictions, and placements than juveniles who were committed to private placement facilities. In both counties, juveniles committed to public placement also tended to have a slightly earlier age at first arrest and first placement, but the differences were not significant.

Turning to the ***social history*** variables, we see that there were few significant differences among the juvenile groups in either county. ***In Philadelphia County***, experimental group juveniles tended to score higher on all three problem indexes, but ***the only significant difference was in the area of family life.*** In Allegheny County, there were no significant differences between the experimental group and

the first control group for any of these indexes. Comparing the pair of control groups, in each county the juveniles committed to public placement scored significantly higher on the drug and alcohol problem index.

Finally, looking at the variables related to the *sample placement* for Philadelphia County and Allegheny County, we see that *juveniles committed to private placement were about twice as likely as other juveniles to have had no placement prior to the sample placement*. We also see that in both counties, *juveniles in the experimental group were significantly older than juveniles in the first control group upon arrival at the sample placement, and that control group juveniles committed to public placement were also significantly older than control group juveniles committed to private placement*. No significant differences were found between the groups in terms of adjustment in the sample placement.

Summing up the results reported for the seven control counties, we are not surprised to find that there are differences across the seven counties for almost every variable in the analysis. More interestingly, we observe that some of the juvenile samples consistently exhibit either a relatively high or low recidivism risk. In particular, the *Bucks County juveniles tend to have the fewest prior arrests, convictions, and placements*. They are also the oldest at first placement and score lowest on the family and school problem indexes. More than 85 percent of Bucks County juveniles had no placement prior to the sample placement, and they had the least problems adjusting while in the sample placement. Taken together, all these factors point toward a relatively low recidivism risk for juveniles in the Bucks County sample.

At the other end of the spectrum, we see that the *Dauphin County sample had the highest number of previous placements, and were the youngest group at age of first arrest and first placement*. The Dauphin County sample also scored highest on the drug and alcohol problem index, and shared high score with Berks County and Lehigh County on the school problem index. Nearly two-thirds of Dauphin County juveniles had at least one placement prior to the sample placement and they tended to have the most difficult adjustment in the sample placement. The Berks County sample also scored highest among the seven counties on multiple variables, including prior arrests, convictions and placements, and the school problem index. *All these considerations point to a relatively high recidivism risk for juveniles in the Dauphin County and Berks County samples*.

Recidivism Outcomes

There were a number of measures of recidivism used to capture different aspects of the concept and to compensate for the shortcomings inherent in any single measure of recidivism. The measures used consisted of rearrest (yes or no) over entire observation period; rearrest within first six months; number of rearrests over entire observation period; number of rearrests over 12 months of *street time*, and reincarceration over the first 12 months after release.

Except for one measure of recidivism, there were no significant differences in the recidivism for juveniles in the intensive aftercare services versus those who received public aftercare through the probation departments. In the one instance of a significant difference, for reincarceration within the first 12 months after release, the intensive aftercare juveniles were about twice as likely to be reincarcerated. Over 20 percent of the juveniles in intensive aftercare in both Philadelphia County as well as Allegheny County were reincarcerated within the first twelve months. On the other hand, in Philadelphia only 10.7 percent and in Allegheny only 13.8 percent of the juveniles in direct aftercare were reincarcerated.

The direction of the differences for each of these recidivism variables is also of interest, even though most were not statistically significant. All of the measures of recidivism revealed a slightly greater propensity for the juveniles in the intensive (contracted) aftercare to recidivate compared to their counterparts in public aftercare.

When some of the background differences between the experimental and control groups were controlled to *separate out* any of the influence that these differences may have had on recidivism, we did not find any appreciable difference in the outcome. Thus, even though risk factors were slightly worse for the experimental groups and their recidivism rates were slightly higher, the differences in recidivism for experimental and control groups were not statistically significant.

Similar analysis was performed to compare the various measures of recidivism across the seven control counties in addition to the Group 2 and Group 5 control counties within Philadelphia County and Allegheny County (public placements/public aftercare juvenile groups). This analysis revealed a number of statistical differences across these groups, but there were also some very significant risk factor differences. This analysis is presented in detail in the full text of this report. It is also of interest to note that the experimental groups in both counties, for most measures, still had slightly higher recidivism rates when compared to all of these control groups.

Prosocial Outcomes

In the last major section we look at prosocial outcomes for juveniles in Philadelphia Group 1 and Allegheny Group 4—the two experimental groups that received contracted aftercare services upon discharge from the YDCs/YFCs. This discussion specifically examines the following as indicators of the achievement of prosocial outcomes: arrests in aftercare, reduction in substance abuse, completion of education, finding employment, other community involvement, goal attainment while in aftercare, and discharge status.

The data analyzed in this section come from the case file records of the two contracted aftercare service providers. Unfortunately, limited data availability proved to be a problem with both contracted service providers. The problem was particularly acute at Abraxas NRC, where case files could be located for only 24 of

71 clients. Moreover, the information contained in these files was often scanty or posed challenges to interpretation. The situation with Philadelphia OIC was considerably better, but was also far from ideal. OIC staff were able to provide us with case file data for 72 of 89 clients. Again, however, a variable amount of useful information was available for each client, and it was rare to find complete information for a case. In the discussion below, we attempted to make the most of the limited information we were able to collect. ***However, the limitations of the data should be borne in mind as one reads through the discussion.***

Arrests in Aftercare. At OIC-YAPP, with a 31 percent rearrest rate within the first four months, the implication is that a substantial minority of OIC-YAPP clients failed to make significant gains in prosocial behavior. For Abraxas NRC, 24 percent of the clients were rearrested within four months also indicating that a substantial minority of juveniles in the Abraxas NRC program did not experience significant behavioral improvements.

Reduction of Substance Abuse. Information from OIC-YAPP case files indicates that 17 clients received counseling and/or treatment for substance abuse problems (whereas court data indicated 69 juveniles with a substance abuse problem. Furthermore, of those who did receive treatment (17 juveniles), no more than half of OIC-YAPP of them showed behavioral improvements in the form of reduced involvement with drugs and alcohol. ***Given the number of missing case files for Abraxas NRC (47 out of 71), there is insufficient evidence from which to generalize about possible behavioral improvements in Abraxas NRC clients in the area of substance abuse.***

Completion of Education. Court data from Philadelphia County indicate extensive histories of school problems among the juveniles sent to OIC-YAPP. Given the severity of school problems among the juveniles sent to OIC-YAPP, even modest improvements in this area would be significant. Most clients were enrolled in an education program, and most of these appear to have had no more than minor attendance problems. Few appear to have experienced any type of school disciplinary action. Overall, the available evidence suggests at least minor improvement for a majority of OIC-YAPP clients in the area of education.

Just as in Philadelphia County, the Allegheny County juveniles sent to Abraxas NRC had extensive school-related problems. While data were only available for about 17 Abraxas NRC cases, these data suggest a high rate of educational enrollment. Furthermore, attendance and discipline problems appear to have fallen substantially for this group while they were in aftercare. The evidence suggests at least minor but real improvements among Abraxas NRC clients in the area of education.

Finding Employment. No information is available on the prior employment histories of juveniles who went to the two contracted aftercare programs. In any case, given the long and varied record of delinquency typical of the experimental group subjects in this study, it is doubtful that more than a few of them had significant prior work experience. Given the many challenges delinquent youth face when seeking to enter the world of work (e.g., low skill levels and stigmatization by

employers), it is perhaps no small accomplishment that 22 OIC-YAPP clients were able to find jobs. *Unfortunately, little additional information about the work experience of these 22 juveniles could be gleaned from their case files. However, there is evidence of positive social adjustment on the part of some OIC-YAPP clients in the area of employment.*

The limited evidence available on the employment experience of Abraxas NRC clients is neither particularly encouraging nor discouraging. There simply is not enough information to permit generalization regarding prosocial adjustment of Abraxas NRC clients in the area of employment.

Other Community Involvement. Another way of assessing the prosocial adjustment of juveniles in the two contracted aftercare programs is to look for evidence of other types of positive involvement in the community. *There is insufficient evidence regarding other community involvement to generalize about the progress of OIC-YAPP clients in this area. Similarly, there is not enough evidence to permit generalizations about the prosocial adjustment of Abraxas NRC clients in this area.*

Goal Attainment. Case file documentation for clients who attended the two contracted aftercare programs contains valuable information on the various prosocial goals each juvenile set for himself or herself in consultation with his or her aftercare case manager.

The average number of set goals per OIC-YAPP client was 3.7, or 1.7 if mandatory goals, such as meeting with regularly with one's case manager and attending group sessions, are excluded. For the entire group of subjects in the OIC-YAPP, 31 percent of goals were either partially or fully completed (103 out of 332 set goals). If we limit the analysis to goals with a *known* success/failure outcome, the success rate was 62 percent (103 out of 167 set goals). Many OIC-YAPP clients did complete at least some of their aftercare goals, and this suggests some progress towards prosocial norms among these clients.

The average number of goals per Abraxas NRC client was 6.5, or 5.5 not counting the one mandatory goal. If we take the 181 set goals for 24 clients, there was a 30 percent success rate in goal completion (54 out of the 181 goals were either fully or partially completed). The overall success rate for goals with a *known* outcome was 61 percent (54 out of 88). At most, it can be said that the 20 clients made limited progress towards prosocial goals while in aftercare.

Discharge Status. A typical practice of the case managers of both contracted service providers was to record information regarding the status of clients at the point of discharge from the aftercare program. Discharge information bearing on the question of prosocial behavioral adjustment by aftercare clients is analyzed in this section. This information includes early program discharge, employment status, school status, and cooperativeness (as assessed by the case manager) while in the program.

While it is normal for the length of aftercare service to vary somewhat, the *standard* service period is about six months. At OIC-YAPP, 29 of 59 clients (49 percent) were discharged with less than five complete months of program involvement.

While the evidence regarding early discharges from the OIC-YAPP program is not encouraging, discharge information for clients who stayed in the program appears more promising. The data suggests a scenario in which a large proportion of aftercare clients experienced poor adjustment and thus received early discharges, while a degree of genuine progress was not uncommon for those who remained in the program.

Discharge data were available for only 15 cases at Abraxas NRC. Eight (8) of the 15 Abraxas NRC clients (53 percent) were discharged with less than five complete months of program involvement. While little can be reliably concluded from this small number of cases, the available evidence on early discharges does not bode well regarding the development of prosocial norms among Abraxas NRC clients.

CONCLUSIONS AND POLICY IMPLICATIONS

What can we conclude as a result of this research and what are the implications for public policy? Our introduction to this research stated that it is of vital importance to gather information about what works and what doesn't work, particularly in this era of scarce resources and demands for greater accountability.

Given this goal, our discussion of policy implications focuses on the following:

- ◆ ***Continuation of Intensive Aftercare Programs.*** At one level this issue will be addressed with regard to the two programs evaluated; and at another level we will consider the issue of the overall efficacy of intensive aftercare programs, *in general*.
- ◆ ***Improvement in Intensive Aftercare Programming.*** Discussion of this issue will be based on the assumption that the two programs evaluated, herein will be continued; therefore, these recommendations offer suggestions for improving the delivery of services and the overall *quality of implementation*.

Continuation of Intensive Aftercare Programs. Assuming that decisions about continuation of any program are based on *what works*, ***we have little evidence***

*that would support the success of the two intensive aftercare programs evaluated in this study. Their measurable outcomes were not better than the outcomes produced by direct aftercare through the county probation offices. In fact, recidivism (regardless of how it is measured) is slightly higher for the intensive aftercare juveniles than it is for the others. The prosocial outcomes are also not very positive, although minor improvements were found in some of the areas, e.g., the educational and employment areas.*¹

*On the other hand, we can say that approximately one-third of the juveniles were considered successes at the conclusion of their intensive aftercare experience, using the simplest measure of recidivism (i.e., whether the juvenile was rearrested over the entire observation period). Some might claim that helping one person is better than helping no one.. If we look at other types of intervention programs for individuals with serious chronic social problems, their success rates generally fare about the same, although success rates of 50 percent or higher are often reported.*²

Rehabilitation is more difficult to achieve than one might assume, particularly when the efforts are too little, too late. Those juveniles who have been released from public correctional facilities are the most serious juvenile offenders. They have multiple risk factors and generally come from environments that perpetuate their delinquency. Even the success rates independently reported by the two agencies was not very high. It was comparable to the rates we found when we analyzed the recidivism data.

Then who can be rehabilitated? Staff at the two aftercare agencies indicated that the juvenile best served by these programs are those that are motivated to change. But the motivated youth would probably change and follow a different path without this intervention. And for the youth that are not motivated, regardless of how exceptional the intervention, the impact will be minimal. There may be a small percentage of marginal youth that, for one reason or another, become motivated to change as a result of the intervention. However, policy makers need to make a decision as to whether intensive aftercare programs are worth the cost to implement them, particularly if they produce no better results than the aftercare services offered through the county probation departments.

Turning to the other component of this research, the process evaluation, we note that the unfavorable outcomes are coupled with an inadequate *quantity of program activity* as well as *quality of program implementation*. ***Given the evidence that the level of program activity did not match operational guidelines and there were other problems with implementation, the poor outcome results are not unexpected.*** Therefore, when you have inadequate program implementation in

¹ However, as previously indicated, there are limitations in our evaluation of the prosocial outcomes because of the nature of the data and our limited ability to compare before/after measures or experimental/control group measures.

² As an example, in the evaluation of the Philadelphia Intensive Aftercare Probation Project the final report indicated a success rate of approximately 50 percent (Sontheimer, Goodstein, and Kovacevic, 1990).

addition to working with a population of juveniles that is very difficult to rehabilitate, poor outcomes can be anticipated. Given all of this, the findings of this research and the evaluation of both process and outcomes are congruent with one another.

If we take these results to another level, this particular research is equivocal with regard to the overall efficacy of intensive aftercare programs. It was not a good test of the model and its effectiveness. For a good test, the program implementation has to match the theoretical and operational model. When that happens, you can have a legitimate assessment of the extent to which intensive aftercare programs produce better results than do other options available to juveniles who are released from correctional institutions.

Even if this research was not a good test of the model, it is interesting to note that some of our findings have been echoed in other research. For example, there are still persistent questions about whether decreased caseload size and more frequent contact between the client and supervising agent will result in more favorable outcomes. As Armstrong (1991:21) noted, "to the extent this question has been addressed, the anticipated reduction in criminal behavior has not materialized." Further, he indicates that there are still questions about "whether the reductions in caseload size have actually resulted in a greater intensification of contact, suggesting that this whole issue perhaps needs to be explored again in a more rigorous fashion" (Armstrong, 1991:21).

Our finding that both aftercare agencies had relatively small caseloads, yet did not deliver the intensity of services provides additional evidence that the intensification of service does not automatically follow from reduced caseload size. This further calls into question some of the basic assumptions of the theoretically based model of intensive aftercare.

Improvement in Intensive Aftercare Programming. Although the preceding discussion has a degree of pessimism, ***it should be mentioned that there were some positive aspects to the programs evaluated. Both programs exhibited a cooperative attitude toward our research and were frank in their discussions about the strengths and weaknesses of their programs.*** To their credit, both OIC-YAPP and Abraxas NRC were in the process of making improvements to their record keeping (one of their major problem areas) and each agency had some dedicated and enthusiastic staff members. Furthermore, when the internal and managerial problems were recognized at Abraxas NRC, the headquarters engaged in a reasonable process to uncover the difficulties and take corrective action. An organizational structure is never perfect. What is important is that it engages in a continual process to examine itself and improve.

To that end, the recommendations that follow are our suggestions concerning ways in which these programs can improve their operations.

- ◆ ***Increase program activity so that it matches operational guidelines.*** Assuming that program activity really was at the level we found it (and the low level was not merely an artifact of the poor record keeping), then both programs

need to increase the intensity of their interaction and service delivery to the juveniles referred to them. The level of contact with the juveniles and their families was not as expected; the follow-up on school performance, drug and alcohol treatment, employment performance, etc. was also absent for the majority of juveniles (or not noted anywhere). This is the *sine qua non* of an intensive aftercare program. If the contact with and the referral of juveniles to outside support services are no different than for juveniles in aftercare provided by the county probation departments, then why have contracted intensive aftercare?

- ◆ ***Improve program oversight to guarantee compliance with operational guidelines.*** Diligence in program oversight is essential. Given our findings with regard to the level of service and the extent to which it did not match operational guidelines, we can assume that compliance issues were not routinely scrutinized. Some of this can be attributed to organizational *mini crises* that always loomed on the horizon (e.g., cash flow problems, interpersonal conflicts, staff turnover and replacement problems). In organizations where this exists, supervisory and management staff often have their energies redirected, thereby preventing them from performing their other job functions. However, because of the importance of program oversight responsibilities, it is also important that management and supervisory personnel not have dual responsibilities within a program (e.g., in the case of OI-YAPP, the project director also served as the family therapy specialist).
- ◆ ***Implement improved methods of documentation.*** This is an area where a balance must be reached between being accountable and yet not becoming too bureaucratic with the development of numerous and burdensome record keeping procedures. However, with today's PC data base software, it has become relatively easy for smaller organizations and programs to develop data base management systems that are user-friendly. They can also help eliminate the maintenance of duplicate information in hard-copy files as clients interface with different aspects of a social service program. Furthermore, they make it easier to produce client-based reports on service delivery and outcomes. They also provide a structure to the data elements that need to be maintained for accountability. In order to develop a system that is easy to use and not too burdensome, it is essential that all staff be part of the development process and fully understand the operational procedures regarding responsibilities for data input.

As already noted in our discussion of findings, both aftercare programs lacked some very basic information about their clients and the quality of information about a client varied considerably, much of its quality dependent on the practice of an individual case manager. Even where there were standard forms (e.g., the discharge summary in OIC-YAPP), there were basic pieces of information that were not recorded or asked in such a way that they would be noted for each case (e.g., whether a client was enrolled in school or not, employed or not, a success or a failure). Of course, in the case of Abraxas NRC, the situation with missing files (approximately two-thirds of our sample) is a serious noncompliance issue.

- ◆ ***Provide ongoing staff training to guarantee proper record keeping.*** As already indicated, not only is it necessary for staff to be included in development of any record keeping system, but it is also essential that they be properly trained in maintaining this information. This seems obvious and one would assume that this is automatic—even for *paper* record keeping procedures. However, given the gaps we found in the existing records, this apparently was not occurring.
- ◆ ***Provide adequate clerical support for staff.*** To assist case managers in their record keeping responsibilities, it is essential that the programs have sufficient clerical staff. Neither of the programs evaluated had sufficient assistance in this area. Although with today's computerized data base systems, much of the data entry can be done during point-of-contact, there are other types of clerical duties that should not be the responsibility of case managers and supervisory staff (e.g., producing data base reports when needed or for documenting attendance at group activities, etc.).

A final comment is with regard to research process. Given the conditions that existed at Abraxas NRC when we entered on the scene (i.e., they had just undergone an internal audit and complete restructuring), hindsight tells us it was unwise to conduct an outcome evaluation of this program. If an evaluability assessment had been performed, we would have recommended that the research not go forward or that only a process evaluation take place. Recognizing that this evaluation was conducted because of federal requirements, we know that this might not have been an option. However, since so much of their data was missing and the contents of their existing files was skimpy, we have little confidence in the data reported for their number of contacts and services delivered. This being the case, our conclusions are filled with caution and caveats when we report on the case file data from Abraxas NRC. On the other hand, documenting this from an outside source (i.e., independent researchers) does assist policy makers in making their decisions about future programming.

In conclusion, these data have provided some solid evidence as to the operation and effectiveness of the two contracted intensive aftercare service providers in Pennsylvania. Although the overall picture is not very positive, we have highlighted both strengths and weaknesses and made specific recommendations for improvement. There are no easy answers to the problems faced by juvenile delinquents, but the importance of forming policy based on empirical data and implementing programs based on an understanding of *what works* cannot be denied.

1.0 STATEMENT OF THE PROBLEM

1.1 JUVENILE CRIME IN AMERICA

Juvenile crime in America has soared over the past decade. From 1984 to 1994 the homicide arrest rate for juveniles increased 160 percent. The 1.5 million delinquency cases handled by juvenile courts in 1993 represented a 23 percent increase from 1989, while the number of juveniles placed on probation increased 21 percent (U.S. Department of Justice, 1996). Juveniles now account for almost one quarter of all weapons-crime arrests, although they make up only a small fraction of the population. Most of these cases involved youth adjudicated for property offenses; 21 percent involved person offenses; 18 percent involved public order offenses; and 7 percent involved drug law violations (Bilchik, 1996).

Many believe that juvenile delinquency will continue to increase as the size of our youth population grows. Recently, our news has been filled with reports about youths committing horrendous crimes. The school shootings during the 1997/98 academic year shocked our nation and raised the public cries to *do something* about youth violence.

Dealing with juveniles separate from adult offenders is almost a century old. The first juvenile justice courts were established in Illinois in 1899; the Illinois system featured informal hearings and noncriminal proceedings. Rehabilitation was the primary goal of the system, not public safety. By 1920 almost every state in the nation had adopted a juvenile justice system comparable to the one in Illinois. However, by the 1960s when juvenile crime was on the rise, these systems soon became overwhelmed. And now that states are facing an epidemic of violent juvenile crime, reforms of the system have been implemented. The previous system of punishments for youthful offenders (e.g., warnings, lectures, and possibly a few months in a detention hall) have not been effective in deterring juvenile crime.³ Some states have opted to automatically transfer juveniles 14 or older to adult court when they are charged with a felony or to send non-violent offenders to military-style boot camp.

One area of juvenile corrections that has received an increasing emphasis and attention is the aftercare phase. Community-based aftercare is the parole phase of corrections, it "is the point at which the supposedly beneficial cumulative effects of the institutional 'treatment' experience are transferred to community settings, and are reinforced, monitored, and assessed" (Altschuler & Armstrong, 1994a:1). Intensive community-based aftercare services have evolved over the past decade as a means to improve the likelihood that juveniles released from secure confinement remain crime free rather than return to delinquency. But questions about the efficacy of these programs remain.

Given this epidemic of juvenile delinquency and the new strategies and efforts to address this problem, it is of vital importance to gather information about what works and what doesn't work. The need to have accurate information on what works is essential in an era of scarce resources. Federal, state, and private agencies or institutions have recognized this need. To that end, this report represents the effort to collect and analyze evaluative data on the process and outcomes of two intensive aftercare programs for juvenile delinquents that have been implemented in Pennsylvania.

1.2 AFTERCARE SERVICES FOR DELINQUENT YOUTH—HISTORY AND CURRENT PRACTICES

The interest in intensive juvenile aftercare can be traced to earlier efforts with intensive supervision of adult offenders. This movement to implement intensive supervision programs for adults was a pragmatic approach to the

³ Comprehensive evaluation designs have been implemented to identify effective juvenile prevention and treatment strategies (Nelson, 1997). Federal agencies that serve as clearinghouses for these evaluation studies and other research related to juvenile delinquency are the *National Council of Juvenile and Family Court Judges*; the *National Center for Juvenile Justice Research*; the *NFC Juvenile Crime Research Page* [online], just to name a few.

escalating problems of managing felony offenders (Armstrong, 1991). The earliest efforts in the 1960s focused on probationers rather than parolees—i.e., *front-end* interventions. At that time, the search was for the optimal number of clients amenable to supervision on individual caseloads (Carter & Wilkins, 1984; Latessa, 1987). The widely held assumption was that "once the caseload size was reduced, the supervising officer would be freed to conduct case management activities and to provide the required services in a more intensive, responsive and traditional manner" (Armstrong, 1991: 3). The effects of reduced caseloads were disappointing—it may have increased the number of contacts and services, but a reduction in criminal behavior did not materialize (Latessa, 1987). More recent programs in adult intensive probation supervision have relied on greater surveillance and social control, in congruence with the current emphasis on punishment and deterrence that dominates the philosophical underpinnings of the adult justice system.

In the 1980s, similar experiments with community-based interventions were beginning to appear in the juvenile justice system (Armstrong, 1988; Krisberg et al., 1989; Steenson, 1986). Furthermore, the development of the juvenile intensive probation supervision movement (JIPS) had important implications for the operation of juvenile intensive *aftercare* programs (IAP), which evolved several years after the initial JIPS programs. Initially, as with the adult programs, goals of enhanced surveillance and heightened social control prevailed in the JIPS programs. However, research has revealed that programs focusing almost entirely on social control have not been effective (Altschuler & Armstrong, 1994b).

Hence, more recent developments in intensive supervision for juveniles have directed equal attention to close monitoring/surveillance in addition to providing specialized supportive services. The intensive supervision programs for juveniles, while driven by some of the same concerns facing the adult correctional system, do have some fundamental differences in their philosophical orientations. The adult model is still very much based on a social control and punitive system of community-based supervision. As such, elements of the intensive supervision models for adults consist of "stringent curfew hours, house arrest, electronic monitoring, team supervision, drug and/or alcohol testing and monitoring and the assignment of restitution and community service orders" (Armstrong, 1991:4).

On the other hand, the intensive supervision models for juveniles maintain an adherence to treatment/rehabilitation. The rehabilitative ideal holds its own within the juvenile justice system; notwithstanding the significant inroads that have been made by the *get-tough* philosophy that prevails in the adult justice system. This characteristic of juvenile intensive supervision has been labeled as an *intermediate intervention* as opposed to an *intermediate punishment* approach (McCarthy, 1987).

Although intensive supervision was initially conceptualized as an alternative to imprisonment, during this past decade, an increasing interest in its application to the *aftercare* phase of the juvenile correctional process has evolved. For the most part, aftercare services for juveniles released from secure confinement have been neglected given the limited resources available for the overall correctional process. The concern for public safety and calls for harsher sanctions and punishment led the juvenile justice system to focus much of its attention on the development of institutional programs to reduce serious juvenile criminality. "The overall result in many states has been to lock up more and more juveniles for longer periods" (Altschuler & Armstrong, 1994a:1).

But the reality is that these juveniles are eventually released to the community and an already overburdened juvenile aftercare system. During 1993, 53,273 juveniles were admitted to state custody in the U.S., and the number of releases was 49,431. Fifty-six percent of admissions were new commitments, and 13 percent were parole violators. Most of the releases (almost 57 percent) were to parole or aftercare (Bilchik, 1996). In response to the changing volume and nature of juvenile parolees, the programs designed to deal with them also have changed.

Recognizing the impact of the social and environmental context on delinquent behavior, juvenile justice practitioners and researchers have turned their focus to this post-release phase of the correctional process and its influence on recidivism. "The growing interest in juvenile aftercare programs throughout the nation is linked to an awareness by juvenile correctional administrators that standard parole practices have been largely unsuccessful in normalizing the behavior of high-risk juvenile parolees in the community over the long term" (Altschuler & Armstrong, 1994b:3). Given the goal of reducing juvenile criminal activity, juvenile justice researchers have identified a host of factors that impact this behavior during the post-release phase. "Whether or not a juvenile releasee is enrolled in school, has a job, is relating well to family, is involved with illicit

substances—these factors may be the most critical in determining whether that individual will be motivated to reengage in criminal activity" (Sontheimer & Goodstein, 1993:198).

These concerns precipitated the creation of new aftercare programs and, following the lead of earlier intensive supervision programs, the new aftercare programs have sought a balance between punishment and treatment, a balance between the needs of society and those of the juvenile offender. This *balanced approach* recommends applying a set of principles—community protection, accountability, competency development, and/or treatment—along with individualized assessment in dealing with juvenile offenders (Maloney, Romig, and Armstrong, 1988). "Accordingly, the proposed IAP model assumes that any attempt to lower rates of recidivism with high-risk juvenile offenders on parole must include a substantial intensification of intervention strategies providing social control and service provision" (Altschuler & Armstrong, 1994b:3).

Responding to these concerns about juvenile aftercare, the Office of Juvenile Justice and Delinquency Prevention (OJJDP) spearheaded efforts to design and implement model aftercare programs. In 1980 the Violent Juvenile Offender Research and Development Program of OJJDP was initiated. This project focused on aftercare efforts for the chronically violent adolescent. The model of intervention "simultaneously emphasized community protection, accountability and rehabilitation, and represented the integration of control, strain, and social learning theories" (Armstrong, 1991:10). Furthermore, in 1987, OJJDP funded a research and development initiative that "focused on assessing, developing, testing, and disseminating information on intensive community-based aftercare prototypes or models for the release of chronic serious juvenile offenders from secure confinement" (Altschuler & Armstrong, 1994a:1).

Although the specific features of intensive aftercare programs vary, a common attribute is a reduced caseload—generally ranging from 12-25 juveniles per officer, which allows for more intensive supervision. Furthermore, these programs involve a prerelease planning phase, involvement with the offender's family and significant others, and frequent contacts with the offender (Sontheimer & Goodstein, 1993).

Based on the various efforts to design, implement, and evaluate these intensive aftercare programs for juveniles, a number of critical issues surrounding these initiatives have been identified. These issues focus on questions related to the philosophy and goals of the programs; the caseload size and frequency of contact; the classification procedures and client targeting; and the evaluation of the programs (Armstrong, 1991).

Philosophy and Goals. The intensive supervision/aftercare programs for juveniles have an imposing set of purported goals (e.g., reduced prison crowding, increased public protection, rehabilitation of offenders, proof of value of community-based supervision, and cost savings). There is skepticism about the ability of programs to deliver on all these promises (Clear and Hardyman, 1990; Byrne, 1990; Armstrong, 1991). Furthermore, the philosophical principles that underlie these programs can produce vastly different programs with different effects, depending on the emphasis of a particular program (i.e., social control vs. rehabilitation).

Of particular concern in the design of IAPs is the extent to which balanced incentives are employed in a program—i.e., positive reinforcements and rewards for success vs. sanctions for violations. An IAP "must carefully and creatively address sanctions on the one hand and reinforce successes on the other; otherwise, it may exacerbate the problem it is intended to solve" (Altschuler & Armstrong, 1994c).

Caseload Size and Frequency of Contact. The assumption is that if caseload size is decreased, the frequency and intensity of contact will increase thereby improving performance levels of the offender. Whether this happens in the intensive aftercare programs is at issue and evidence is mixed regarding the increase in contact and its impact on improved performance (i.e., reduced recidivism and increase in prosocial behavior). In summing up the findings from research, Armstrong (1991:21) states:

A major question is whether decreased caseload size and more frequent contact between the client and supervising agent will result in more favorable outcomes. To the extent this question has been addressed, the anticipated reduction in criminal behavior has not materialized. Further, some question persists about the extent to which reductions in caseload size have actually resulted in a greater intensification of contact, suggesting that this whole issue perhaps needs to be explored again in a more rigorous fashion.

A secondary problem also surfaces related to this discussion of frequency of contact. If IAPs are designed to increase the contact with a juvenile and his/her family, peers, and co-workers, then there is a greater potential for more infractions and technical violations to surface. If graduated sanctions are not used, the result may be reincarceration for technical violations or minor offenses—inadvertently contributing to institutional overcrowding. Therefore, determining the level of surveillance and control that is appropriate in juvenile aftercare programs is of particular concern, along with incorporating graduated sanctions (Altschuler & Armstrong, 1994c).

Classification Procedures and Client Targeting. The importance of selecting cases appropriate for higher levels of supervision is critical—some offenders "appear to experience greater difficulty in making a successful community adjustment if placed under conditions of intensive supervision" (Armstrong, 1991:19). Clear and Hardyman (1990) have referred to this as the *interaction effect*, where the intensification of control with low-risk offenders will only exacerbate the potential for recidivism. Given this, it is essential for programs to utilize risk-assessment instruments to properly identify those juveniles most at risk of becoming a repeat offender.

Furthermore, it is critical for IAP programming to address need-related risk factors (e.g., those related to home and family, school, peer influences, work, substance abuse, etc.). This raises another set of questions related to what services are needed and who will provide them; how will case management be implemented; who will provide funding and for what services; and how will service provision be monitored and evaluated (Altschuler & Armstrong, 1994c).

Evaluation of the Programs. The effectiveness of these programs still has not been clearly demonstrated and reviews of the various studies can be found in Catalano et al. (1988); Fagan, Forst and Vivona (1988); Greenwood et al. (1989); and Altschuler & Armstrong (1994a). For the most part, research in this area has not used rigorous methodology (e.g., experimental or quasi-experimental designs) and, with missing information, conclusions about program efficacy and practical recommendations have been difficult (Altschuler & Armstrong, 1994a).

Questions have also been raised in the research literature related to the use and measurement of recidivism as an indicator of program effectiveness. Reducing program effectiveness to a single event—an all-or-nothing matter—fails to capture the complexity of why or how an offender has resumed a negative pattern of behavior. This concern is especially relevant when considering high-risk/repeat offenders, where some backsliding is to be expected. Without an understanding of social conduct as a process within both a psychological and social environmental context, the development of effective programs will not materialize. This reinforces the importance of including psychological, as well as behavioral, indicators of change (Armstrong, 1991).

As a result of the investigation into these critical issues, the OJJDP developed and disseminated a model for intensive aftercare programs (Altschuler & Armstrong, 1994c). The model emanating from the OJJDP effort is theory driven (an integration of social control, strain, and social learning theories) and incorporates risk assessment (identification of youth at highest risk for becoming repeat offenders) as a key feature. It specifies a set of principles that offer a *blueprint* from which a program can be designed; these principles also provide direction and a set of goals for the development of an IAP. These principles are (Altschuler & Armstrong, 1994c:4):

- ◆ To prepare youth for progressively increased responsibility and freedom in the community.
- ◆ To facilitate youth-community interaction and involvement.
- ◆ To work with both the offender and targeted community support system (e.g., families, peers, schools, and employers) to establish constructive interaction and to help youth adjust successfully to the community.
- ◆ To develop new resources and supports where needed.
- ◆ To monitor and test the youth and the community on their ability to deal with each other productively.

Based on these principles, the key program elements of the OJJDP model include (Altschuler & Armstrong, 1994c:5-27):

- ◆ ORGANIZATIONAL AND STRUCTURAL CHARACTERISTICS.
- ◆ CASE MANAGEMENT.
 - ☑ Assessment and classification.
 - ☑ Individualized case planning.
 - ☑ Combination of surveillance techniques and service provision.
 - ☑ Balanced incentives and graduated consequences.
 - ☑ Service brokerage with community resources.
- ◆ MANAGEMENT INFORMATION AND PROGRAM EVALUATION.

Furthermore, this model identifies the various service areas that individual IAPs may offer as part of their programming, depending on need:

- ◆ Special needs and special populations.
- ◆ Education and school.
- ◆ Vocational training, job readiness, and placement.
- ◆ Living arrangements.
- ◆ Social skills.
- ◆ Leisure and recreation.
- ◆ Client-centered counseling (individual and group).
- ◆ Family and work intervention.
- ◆ Health.
- ◆ Special technology.

This model provides an ideal set of theoretically based program features and underlying principles from which practicing IAPs can be assessed. As such, the model provides a useful tool in research that is designed to evaluate the implementation and effectiveness of existing intensive aftercare programs for delinquent youth.

In sum, the level of interest in these intensive aftercare programs for juvenile offenders has been growing, with their development evolving from the initial efforts with adult intensive supervision. Although there is still some question about operational goals and philosophy, program elements, appropriate target populations, as well as the overall effectiveness of these programs, this has not hindered their popularity.

1.3 PENNSYLVANIA'S AFTERCARE SERVICES

1.3.1 Background on Aftercare Services

Pennsylvania juvenile courts committed over 4,000 delinquent youth to residential placements in 1995. Some of these placements were to Youth Development Centers (YDCs) and Youth Forestry Camps (YFCs) operated by the Department of Public Welfare. Other placements were to privately run institutions or wilderness programs, comparable to the YDCs and YFCs. Philadelphia and Allegheny counties accounted for about two thirds of the institutional placements. As these youth prepared for release from their institutional placement, they were provided aftercare services to aid in their transition. Both county juvenile probation departments and contracted private sector organizations provided aftercare services to juveniles released from residential placements. Two of the contracted service providers—Philadelphia Opportunities Industrialization Center, Youth Advocacy Plus Program (OIC-YAPP) and Abraxas Non-Residential Care (Abraxas NRC)—provided *intensive aftercare* services to youth in Philadelphia and Allegheny counties that were released from YDCs and YFCs. It is these service providers of *intensive aftercare* that are the focus of this research.

The model for these intensive aftercare services in Pennsylvania corresponds to those promulgated through research and development efforts of the OJJDP. In addition, because of the importance of aftercare services, the Pennsylvania Juvenile Court Judges' Commission (JCJC) developed voluntary standards to govern aftercare services provided by county juvenile probation officers (LB&FC, 1996). These standards are shown in Exhibit 1.

Upon release from residential placement, juveniles are continued on probation for a period of time to ease the transition between the institution and the home/community environment. This also enables the court to maintain jurisdiction over juveniles who often still owe restitution, court costs, and/or community service. Ideally, this aftercare process begins prior to release from the residential placement. These aftercare services consist of a combination of monitoring/surveillance activities as well as other rehabilitative services. The first phase of these aftercare services begins prior to release—it is labeled the **institutional phase**. Following release, the aftercare services enter the **community phase**. There are a number of services provided to the delinquent youth during each of these phases, as identified below.

The service activities of the **institutional phase** include:

- ◆ Risk assessment and classification.
- ◆ Monthly contact with youth.
- ◆ Contact with youth's family.
- ◆ Development of a service plan.

The service activities of the **community phase** include:

- ◆ Developing incentives for compliance.
- ◆ Implementing graduated consequences for noncompliance.
- ◆ Brokering support services.

Not only do the types of services vary in each phase, but also the level of service for the juvenile offender may vary in terms of:

- ◆ The number and frequency of contacts between the juveniles and his/her aftercare worker and/or probation officer.
- ◆ The number and frequency of curfew checks.
- ◆ The number of contacts between the aftercare worker and/or probation officer and the juvenile's family, the juvenile's employer/teachers, and other significant individuals.

These aftercare services have been established for the purpose of **easing the transition between a correctional institution and the home/community environment**. Specifically, these programs aim to **reduce recidivism** and **increase prosocial behavior** among the juveniles receiving the services. Indicators of these program outcomes include at a minimum:

- ◆ **Recidivism:** rearrest for delinquent/criminal offenses and violation of juvenile probation.

Exhibit 1

Standards Governing Aftercare Services*

1. The recommended caseload size for the aftercare officer is 18 youth. The caseload size of the aftercare officer shall not exceed 25 youth.
2. Aftercare begins when the placement decision is made. Aftercare services should be provided while the youth is in placement and for a six-month period following his/her release unless the youth is discharged sooner or the court extends supervision.
3. Within 30 days after the placement decision is made, the aftercare officer will develop and complete a written treatment plan for the youth based on information gathered from the parents(s)/guardian(s) and placement facility.
4. The aftercare officer should attend the initial treatment staffing and release staffing conducted by the placement facility regarding the youth in placement.
5. The aftercare officer shall visit the placement site once every month to visit with the youth and appropriate program staff (i.e., supervisor, houseparent or counselor) to monitor the youth's progress and the service delivery system, to initiate and implement aftercare planning and to build a working relationship with the youth.
6. The court shall require that the placement facility provide a written treatment plan within 30 days after the youth enters placement; written monthly progress reports or, where appropriate, written quarterly progress reports; and written release summaries which include a post-release plan.
7. The aftercare officer shall maintain monthly contact with the parent(s)/guardian(s) while the youth is in placement to communicate progress and to initiate and implement aftercare planning.
8. The aftercare officer shall complete a written post-release plan prior to the youth's release from placement outlining post-release goals for the youth and how they may be attained.
9. During the six (6) month period following release, the aftercare officer shall contact the youth and significant others (i.e., school, parent(s)/guardian(s), employer, other agencies providing services) at least once a week until the youth is stabilized in the community. These contacts should increase or decrease depending upon the youth's adjustment.
10. Aftercare cases shall be reviewed on a monthly basis by the aftercare officer and the chief juvenile probation officer or his/her designee.

** Developed by LBE&FC staff from information provided by JCJC.*

- ◆ **Prosocial behavior:** involvement in education and/or work during aftercare period; abstaining from alcohol or drug use; stability of the juvenile's living situation; and positive relationship with family members.

1.3.2 Evaluation of Aftercare Services in Pennsylvania

In response to federal requirements, the Pennsylvania Commission on Crime and Delinquency sought an evaluation of the intensive aftercare services provided to the delinquent youth released from YDCs and YFCs in Pennsylvania. This report represents the results of the evaluation effort. The goals of this research include:

- ◆ Documenting the level of services provided.
- ◆ Determining the effectiveness of the services and if there is a relationship between program outcomes and level of service.
- ◆ Determining if there are significant differences in the focus, quality, and/or effectiveness of the services provided by the juvenile probation departments vs. private organizations under contract.

The evaluation design includes both a process and outcome component. As detailed herein, these two evaluation components include:

- ◆ **Process Evaluation**—to assess the level of service provided to juveniles on aftercare status and to determine if appropriate aftercare services were provided during both the institutional and community phases (the quantity and quality of program services).
- ◆ **Impact (Outcome) Evaluation**—to assess the effectiveness of the aftercare services in accomplishing stated goals (i.e., reducing recidivism and increasing prosocial behavior).

2.0 RESEARCH METHODOLOGY

A quasi-experimental design was used in this evaluation of the contracted intensive aftercare programs in Allegheny County (Abraxas NRC) and Philadelphia County (OIC-YAPP). In this section the research questions, design, and measurements employed in this study are detailed.

2.1 RESEARCH QUESTIONS

The research addressed questions relevant to a *process* and *outcome* evaluation of intensive aftercare services. The *process evaluation* was concerned with both descriptive information about the programs and their *quantity of program activity* as well as evaluative assessments of the *quality of program implementation*. Although the focus of this research is on the contracted (private) aftercare service providers, comparisons to the public aftercare service providers (county probation departments) are made where data were available.

The descriptive information about an aftercare service provider's organization and its quantity of program activity included the following:

Organizational Characteristics

- ◆ Size/location and type (public vs. private) of aftercare service provider.
- ◆ Staffing patterns—e.g., amount, type, experience, educational background, and turnover.

Program Activities

- ◆ A description of the aftercare services and the level at which they were delivered to participants—i.e., contacts made both during the *institutional phase* and the *community phase* to facilitate treatment planning and delivery. Additionally, any significant difference in the level of service of the contracted/private vs. public aftercare service providers is described.
- ◆ A description of participant risk factors and the services delivered to alleviate any problems—i.e., characteristics of the home environment, patterns of substance abuse, school/educational problems, employability, and negative peer associations/activity.
- ◆ A description of other agencies linked with the aftercare service provider—i.e., type of service provider and level of service provided.

The questions that focused on the *quality of program implementation* included the following:

- ◆ What factors facilitated/interfered with the implementation of the aftercare services for delinquent offenders?
- ◆ Were the budgets, number and qualifications of staff, and the amount of time required for implementation adequate?
- ◆ Did the aftercare services meet the needs of the delinquent offenders?
- ◆ Were the operating environments, as well as the network of supporting/referring services within the communities favorable for implementation?
- ◆ Were there problems with planning and implementing the aftercare services?
- ◆ Were the standard operating rules and routines that regulated the flow of work and linked various work roles congruent or in conflict with the program of aftercare services?
- ◆ Were the communication flows between the project staff and participants adequate?

Although these factors primarily address process and implementation concerns, such factors ultimately bear on program outcomes. Furthermore, when we compare the different types of service providers (i.e., public vs.

private), the information on quality of program implementation should prove useful in the interpretation of the results.

The *outcome evaluation* focused on this major research question: do the intensive aftercare services provided to juvenile offenders released from residential placements result in reduced recidivism and improvement in prosocial behavior? Specifically, the evaluation research addressed the following questions about outcomes.

- ◆ Are there significant differences in recidivism outcomes for juvenile offenders:
 - ✓ who received intensive (private and contracted) versus direct (public) aftercare services?
 - ✓ who received direct (public) aftercare services but were released from public residential facilities versus those released from private residential facilities?
 - ✓ who received direct (public) aftercare services but were from the different counties?
- ◆ Are there significant changes in prosocial behavior for juvenile offenders who received intensive (private and contracted) aftercare services?
- ◆ Are there significant differences in outcomes (both recidivism and prosocial behavioral outcomes) for juvenile offenders who receive different levels of aftercare services?

As specified above, this study documented the *level* of service provided by the contracted service providers, Abraxas NRC and OIC-YAPP, as well as the level of service provided by probation departments. If juveniles who received intensive aftercare services experienced fewer arrests, adjudications, and placements than other high-risk habitual offenders who received services administered directly through probation departments, then it is important to see if this corresponds with different levels of service. This same question applies to a juvenile's success in achieving various prosocial objectives (e.g., completing education, obtaining steady employment). Although in this research we will only examine the behavioral adjustment of the intensive aftercare juveniles, as indicated by a comparison of prosocial behavior before placement and while in aftercare. It is hypothesized that there is a positive relationship between the quality and quantity of aftercare services and the likelihood of successful social reintegration, thereby decreasing the likelihood of future criminality. It is assumed that the intensive aftercare services provided by the two contracted aftercare agencies (coupled with traditional probation services) represents a significantly higher level of service than is *typically* provided to juveniles whose aftercare consists solely of the services provided directly through probation departments. Hence, this study will determine:

- ◆ If the *experimental treatment* of the contracted intensive aftercare service providers (i.e., increased monitoring, greater number of contacts between the juveniles and their intensive aftercare case managers, and access to a broader array of community-based services) was delivered.
- ◆ If the *experimental treatment* improved post-release adjustment, increased the accomplishment of prosocial objectives, and lowered the incidence of recidivism.

2.2 *SAMPLING DESIGN*

In the logic of experimental research, subjects are randomly assigned to experimental and control groups. Baseline conditions are measured for both groups at the beginning. Next, the experimental group is exposed to the treatment, while the control group remains untreated. Follow-up measurements are then taken of both groups to determine the effects of the treatment on subjects in the experimental group.

A quasi-experimental research design employs the same basic logic as classic experimental research, except that the subjects in the study are selected into experimental and control groups based upon *prior* exposure to the treatment. Since random assignment is no longer possible, statistical techniques are used to determine any aggregate level differences in nontreatment factors that are also known to influence the outcome variables. These other factors are then *statistically* controlled so as to render the experimental and control groups comparable, and to allow for meaningful comparison of outcomes.

Table 2.1 below illustrates the research design employed in this study. In Philadelphia, Group 1 subjects are YDC/YFC releasees who experienced contracted intensive aftercare services through the OIC-YAPP (experimental treatment). Subjects in Group 2 and Group 3 represent control groups in Philadelphia County. Group 2 subjects are YDC/YFC releasees who received aftercare services of varying *intensity* (usually little more than traditional probation) directly through the Philadelphia probation department. Group 3 subjects also received aftercare directly through probation but were initially released from a variety of privately run placement programs (e.g., George Jr. Republic, Glen Mills School, VisionQuest, etc.). As we will see in later sections, these groups differ somewhat in terms of socio-demographic characteristics (age, race, etc.), social history (problems related to family, school and substance use), and criminal history (prior arrests, etc.). These differences have been quantified for statistical control so we can determine the *independent* effects of the contracted intensive aftercare intervention on prosocial behavior and recidivism.

The pattern of one experimental group and two control groups found in Philadelphia is repeated in Allegheny County. Group 4 and Group 5 subjects are YDC/YFC releasees. Group 4 subjects were released to the Allegheny Abraxas NRC program (contracted intensive aftercare), while Group 5 subjects received aftercare directly through the Allegheny probation department. Group 6 subjects were released from private placement facilities to probation-based aftercare.

Group 7 is actually composed of five groups, one each from the counties of Berks, Bucks, Dauphin, Lancaster, and Lehigh. Subjects in these groups were released from YDCs/YFCs to direct aftercare through their respective county probation departments. These control groups provide additional baseline data for comparison with the experimental and control groups in Allegheny and Philadelphia counties.

Table 2.1: Sampling Groups

PLACEMENT	AFTERCARE	COUNTY		
		Philadelphia	Allegheny	Control Counties *
Public	Contracted	1	4	
Public	Direct	2	5	7
Private	Direct	3	6	

* Berks, Bucks, Dauphin, Lancaster, Lehigh.

Criteria for Selecting Subjects. Subjects were selected from a population of juveniles who had at least one previous stay in a secure residential placement facility (YDC, YFC, or private facility). To obtain a cohort of subjects with similar release dates and a similar follow-up period, the population was defined as juveniles arriving at a residential placement during 1995. Henceforth we refer to this as the *sample placement*. When a subject had multiple placements during 1995, the earliest 1995 placement that was immediately followed by a release to the community was the sample placement. For subjects in the two experimental groups (1 and 4) the placement immediately preceding release to the contracted intensive aftercare program was the sample placement.

Sampling frames for Groups 1 through 7 were constructed from lists of juvenile offenders provided by the Department of Public Welfare (DPW), the Center for Juvenile Justice Training and Research (CJJT&R) at Shippensburg University, and the two contracted aftercare agencies. In many cases the sampling frame contained fewer than 100 subjects, in which case all subjects were included in the final sample. This happened with Group 4 (N = 77) and Group 5 (N = 72) in Allegheny County and with all five control counties included in Group 7 (Berks N = 49; Bucks N = 64; Dauphin N = 33; Lancaster N = 56; and Lehigh N = 86). No

replacement cases were available for subjects who had to be dropped from these groups. Sampling frames for Groups 1 (N = 253), 2 (N = 556) and 3 (N = 787) in Philadelphia and Group 6 (N = 232) in Allegheny were large enough to allow random sampling with replacements. Our target was to complete data collection for a sample size of 100 in each of these groups.

However, there were instances where cases had to be dropped from the study. Whenever possible, randomly selected replacement cases were substituted for dropped cases. The grounds for dropping a case were:

- ◆ If the juvenile had no placement event *starting* in 1995.
- ◆ If the juvenile did not have a *clean* release to ensure a reasonable follow-up period in the community. For example, if the juvenile was transferred immediately from the sample placement to a subsequent placement without any significant time in the community between placements.⁴
- ◆ If the juvenile was removed from the juvenile court jurisdiction immediately upon release from the sample placement (i.e., a *closed* case). Parolees who moved out of state immediately upon release from the sample placement, or who reached age 18 while in the sample placement, constituted most of these *closed* cases.
- ◆ If the juvenile's court data could not be located or the juvenile was still in the 1995 placement at the end of 1996.

In the end, the final sample sizes for each group (for which data were gathered) were as follows: Group 1 = 89; Group 2 = 85; Group 3 = 88; Group 4 = 72; Group 5 = 58; Group 6 = 85; Group 7, Bucks = 40, Berks = 55, Dauphin = 26, Lancaster = 35, and Lehigh = 31.

2.3 DATA COLLECTION STRATEGIES

In the collection of data for this research the project's Advisory Group⁵ was instrumental in establishing access to the family court, juvenile judges, juvenile probation officers, and contracted aftercare service site staff. Establishing such liaisons and gaining this access to court records was essential for the successful completion of our data collection.

Once access was gained, the following tasks for sampling and data collection were completed. Many of these tasks were carried out concurrently and did not necessarily follow one from the other in a linear fashion.

- ◆ **Construct the sampling frames for all seven counties.** Through data provided by the Department of Public Welfare, the CJJT&R, and the contracted aftercare service sites, lists of juveniles who went

⁴ Such immediate recommitments usually occurred because the youth had committed new offenses while in the sample placement or because he/she had otherwise failed to adjust in the sample placement. The exclusion of these cases may introduce systematic bias into the samples because youth who reoffend or fail to adjust while in placement may be especially high-risk. However, many of the juveniles included in the study have lengthy placement histories that include failure to adjust in one or more of these previous placements.

⁵ The members of the Advisory Group included representatives from the Pennsylvania Commission on Crime and Delinquency (PCCD), the Department of Public Welfare (DPW's Office of Children, Youth, and Families), and the Juvenile Court Judge's Commission (JCJC).

into a residential placement sometime in 1995 were created for each of the counties included in this study. Final sample lists were then created as specified in Section 2.2.

- ◆ **Secure cooperation of the juvenile court judges.** The Executive Director of the Juvenile Court Judges Commission (JCJC) sent letters to the juvenile judges in all seven counties to inform them of our research and to secure their cooperation in the data collection process. Where necessary, any of the concerns raised by the judges were addressed and all judges facilitated our access to court records.
- ◆ **Conduct briefing meetings at the courts and aftercare sites.** To establish working relationships and to make a preliminary assessment of data availability, we made initial visits to the family courts and aftercare sites in Allegheny and Philadelphia counties. At this point, we also requested copies of annual and quarterly reports from both aftercare agencies.
- ◆ **Design data collection instruments.** During the visits to the juvenile courts we made a preliminary assessment of the contents of sample juvenile case files in light of the social history and criminal history variables of interest. Based on this information and on feedback from the PCCD Project Officer, the data collection instruments were finalized (see Section 2.4 for description of the content of these instruments).
- ◆ **Identify and train fieldworkers.** During the visits to the juvenile courts we requested a list of juvenile probation staff who could be trained as fieldworkers to collect social and criminal history information from juvenile case files. Staff from the other county probation offices were solicited via phone contacts. Once identified, KURC research staff along with court administrators conducted on-site training in the completion of the data collection instruments. Members of KURC's staff were also on hand to supervise the initial fieldwork, and thereafter were available via telephone to handle any subsequent questions or problems. The data collection process began in January 1998 and was completed in May 1998. Fieldworkers were of a high caliber, consisting mostly of court staff, probation supervisors and experienced line probation officers. The quality of the work performed by fieldworkers was generally quite high.
- ◆ **Conduct visits at the contracted aftercare sites.** Visits were made to the sites to conduct interviews with staff members who were employed during the target period. In March 1998 we conducted interviews with six staff members of OIC-YAPP, including two program directors, three case managers, and an office administrator. Interviewing at Abraxas NRC in Allegheny County was made more difficult by the fact that the organization had undergone extensive staff turnover. (More details on the staffing at Abraxas NRC can be found in Section 3.1.4)
- ◆ **Collect data on juvenile experiences in intensive aftercare.** Data from contracted aftercare site records were used to record a juvenile's experience with the aftercare program (see description of Youth in Aftercare instrument in Section 2.4). For OIC-YAPP copies of these records were sent to KURC's office for transcribing, while data were extracted from records on-site at Abraxas NRC.
- ◆ **Collect adult arrest data.** For all study subjects that turned 18 during the study period, the centralized records system of the Pennsylvania State Police provided information about any arrests that occurred during the follow-up period.

2.4 *DATA COLLECTION INSTRUMENTS*

Four instruments described below were used to gather data relevant to all aspects of the process and outcome evaluation, including the demographic characteristics, and the social and criminal history of juveniles in each group in the study. Copies of these instruments can be found in Appendix A.

The *Social and Criminal History* instrument collected detailed subject information maintained in the family court for the following factors: socio-demographic background; juvenile and adult arrests, convictions and incarcerations; adjustment while in the sample placement; probation type and frequency of contacts following

release from the sample placement; prior problems in the areas of family life, school problems and substance abuse.

The *Youth in Aftercare* instrument included the following data about a juvenile's experience in one of the contracted intensive aftercare programs: pre-release case manager contact with youth and contacts with family; post-release contacts with youth; aftercare discharge status and recidivism; home setting and family situation; drug and alcohol treatment; education; employment; other community involvement. The instrument also captured information about prosocial goals set by the case manager and juvenile and assessed them for completion.

A *Program Information Survey* instrument was sent to Abraxas NRC and OIC-YAPP for completion. This instrument included information on the following: all current and recent employees (job title and responsibilities, experience and qualifications, period of employment, and specific responsibilities related to the intensive aftercare program); staff turnover rates; and case manager caseloads. The instrument also inquired about routine inservice staff training programs and additional training opportunities that staff may have pursued on their own. Finally, the instrument asked the aftercare agency to list and evaluate all other community-based services (educational, health, D&A, recreational, etc.) that the aftercare agency used to provide additional services to its clients.

The *Site Visit Interview* schedule was used to collect information from staff members at Abraxas NRC and OIC-YAPP during the site visit. This instrument, which was completed during a personal interview with the staff member, asked the respondent to describe the following: their role in the aftercare program; their beliefs and attitudes towards juvenile delinquents, the juvenile justice system, and attempts to deal with the delinquency problem; the congruency of such beliefs among aftercare staff; the effectiveness of the aftercare program in accomplishing individual and system-level objectives (competency development, community protection, etc.); adequacy of resources; quality of staff communication; and factors promoting or inhibiting service delivery. Special questions targeted to case managers asked them to describe the following: the client intake process; the mechanisms they use to ensure compliance and for handling noncompliance; their relationship with the courts and with juvenile probation officers; and the adequacy of other community-based service providers.

3.0 FINDINGS

The findings reported in this section first examine the research questions raised in our process evaluation—including a description of the contracted aftercare service programs, their quantity of program activity as well as the quality of program implementation. Second we address the issue of program outcomes. These findings are presented comparatively for the two contracted intensive aftercare service providers and, when available, data for the control counties is presented.⁶

3.1 PROCESS EVALUATION

3.1.1 Description of Aftercare Service Programs

Size, Location, and Type of Aftercare Service Providers. As already presented in Section 2.2, two private aftercare service agencies were contracted to deliver intensive aftercare services to juveniles released from state YDCs/YFCs. These two agencies—Philadelphia OIC-YAPP and Allegheny Abraxas NRC—are the focus of this evaluation. In comparison, the aftercare services provided by county probation offices in Philadelphia and Allegheny counties serve as a comparison, delivering services to juveniles released from the YDCs/YFCs as well as some private residential institutions. Furthermore, juveniles released from public institutions into public aftercare in a set of 5 other control counties throughout Pennsylvania (Berks, Bucks, Dauphin, Lancaster, and Lehigh) compose another comparison group.

The number of juveniles released into aftercare in any one year in these counties varies. Our sampling frames were created by identifying juveniles who entered a residential institution during the 1995 calendar year. If we examine the size of these sampling frames for each county (Table 3.1), we have an indicator of the volume of high-risk juveniles that a county must deal with in a year. By and large, the volume of incarcerated youth in Philadelphia is overwhelming, even compared to Allegheny County; Philadelphia has four times the number of juveniles in residential placement compared to Allegheny County. The other counties have less than 5 percent of Philadelphia's volume. Furthermore, in Philadelphia 15.8 percent of the juveniles in residential institutions were released to private, contracted intensive aftercare, whereas in Allegheny County the number was 20.2 percent.

⁶ Throughout this section it is important to remember that the analysis is based on data gathered from the family court records (for both the , experimental,, as well as the , control,, juveniles included in our sample) in addition to the data on the juveniles receiving service from the two contracted aftercare providers. There was limited prosocial data available in the court records, therefore the , control,, juveniles are not meaningfully compared to the , experimental,, juveniles for these variables. In addition, there was some limited availability of juvenile data from the client files of the two contracted aftercare service providers—particularly data detailing contacts and service provided. Since an instance of missing data may represent activity that simply was not documented, the results reported herein may underestimate actual program activity (e.g., contacts between case manager and juvenile). In the absence of information to the contrary, however, we have no choice but to treat missing data as no activity. Furthermore, only one-third of the case files (24 out of 77) for our original sample of Abraxas NRC juveniles could be located by the agency. This represents a considerable volume of , missing data,, and hampers our comparability of Abraxas NRC case file data with that from OIC-YAPP. This incomplete information from contracted service providers is an indicator of quality of program implementation and is discussed in Section 3.1.3.

Table 3.1: Size of Sampling Frames

PLACEMENT	AFTERCARE	COUNTY		
		Philadelphia	Allegheny	Control Counties *
Public	Contracted	253	77	
Public	Direct	556	72	288
Private	Direct	787	232	

* Berks = 49, Bucks = 64, Dauphin = 33, Lancaster = 56, Lehigh = 86.

Staffing Patterns and Staff Qualifications. Fundamental to the achievement of effective and consistent aftercare service delivery is the maintenance of a reliable corps of qualified and experienced aftercare personnel. The hands-on, one-to-one nature of intensive aftercare services makes it all the more important that staff who work directly with the juvenile clients have relevant qualifications, extensive experience, and up-to-date training. The information on staffing patterns and qualifications reported in this section comes from the annual reports of the two contracted service providers and from the Program Information Survey completed by both agencies.

According to the Program Information Survey, between 1995 and early 1998, OIC-YAPP had an average annual staff contingent of 10.7 persons. This included the program manager, two senior case manager/supervisors, and one secretary. The number of staff appears to have risen from 9 to 13 over the period. During this same period, OIC's intensive aftercare program (OIC-YAPP) was servicing about 110 clients in the community at any given time (plus a smaller number of institutional cases). Based on these figures, the average case load for each OIC-YAPP staff member whose job duties included case management (i.e., program manager, supervisors, and case managers), was about 10.3 community cases. The data also suggest an adequate mix of supervisory, specialist, case management, and support staff, although the combined program manager/supervisor/family therapist position suggests a shortage of specialized personnel.⁷

Annual reports of OIC-YAPP also state that case managers had at least a BA in criminal justice or a related field, and experience working with high-risk youth. The annual reports describe a comprehensive training program for all staff. This training was divided into *basic training* and *enrichment training*. The two-week basic training consisted of program orientation and *job shadowing* (observation of senior case managers). Enrichment training was conducted on an as-needed basis according to the results of staff performance evaluations and employee development plans. Enrichment training usually focused on specialized topics, such as dealing

⁷ During the period covered by the study (1995-1998) a single senior staff person handled the roles of program manager and family therapist.

with juvenile sex offenders, understanding youth gangs, or introduction to family therapy. In addition, some OIC-YAPP staff individually sought out training opportunities in the areas of *outcome-based case management* as well as unspecified training opportunities at the Center for Juvenile Justice Training and Research.

The Program Information Survey asked for a list of all former and current personnel involved in the intensive aftercare program since 1995. Of the 19 persons cited, 11 were listed as current employees. The list of current employees included one program manager/supervisor/family therapist; two senior case managers; seven case managers; and one secretary. With the exception of the secretary, all current employees worked full time in the intensive aftercare program (YAPP). The program manager had over 10 years of experience on the job at OIC. The length of employment for one senior case manager was four years (unknown for the other). The average length of employment with OIC-YAPP for all 15 current and former case managers was about 1.8 years, with a maximum of 5.5 years and a minimum of one month. All former and current staff members at or above the level of case manager had at least a four-year degree in criminal justice or a related field. The average length of experience in juvenile aftercare for the 15 current and former case managers was about 3.4 years, with the maximum being 15 years and the minimum being one year. Staff turnover at OIC-YAPP was low between 1995 and 1996. There was no staff turnover in 1995, and two case managers left the program in 1996 (15 percent staff turnover). Turnover rose to 33 percent in 1997, when the program lost 5 out of 11 case managers.

Annual reports from Abraxas NRC do not explicitly state the *typical* complement of supervisory staff, case managers and secretarial personnel for the NRC program. Due to program restructuring, which commenced in early 1997, the size of the NRC program's staff was difficult to assess. Prior to that time, the program is known to have had at least one program director, one family therapist/supervisor, one secretary, and an indeterminate number of case managers. Two case managers were present during an initial site visit in October 1997. One of these case managers was subsequently moved to another Abraxas program. On the last site visit in May 1998, we observed one case manager and two case manager trainees. The Program Information Survey indicates that at least one secretarial employee was on staff part time between February 1994 and October 1997. No secretarial staff were observed during any of the site visits.

Data from the Program Information Survey shows that Abraxas NRC had an average annual staff contingent of 9 persons. This included the program director, a family therapist/supervisor, a secretary (1995-96 only), and a variable number of case managers. The number of staff appears to have been quite steady over the period from 1995 through 1997, with 9.5 staff (one secretary was part-time) in 1995 and 1996, and 8 full-time staff until October 1997. During this period the NRC program served about 30 community cases at any given time. Based on these figures, the average case load for each Abraxas NRC staff member whose job duties included case management (i.e., program manager, supervisors, and case managers), was about 3.8 community cases (plus institutional cases). The data also suggest an adequate mix of supervisory, specialist, case management, and support staff,

although the combined family therapist/supervisor position suggests a shortage of specialized personnel.

Annual reports state that at minimum a BA was preferred, but that prior experience with high-risk juveniles was most important in selecting new employees. While the annual reports state that supervision and training was required for all new staff, the training/orientation regimen was not detailed. Periodic enrichment training was conducted by internal staff and outside consultants. The annual report for FY 1995-96 lists 17 training topics, including understanding gang activities and gang prevention, working with minority families, STDs, treatment of the juvenile sex offender, and stress management. All Abraxas NRC staff also attended a conference on youth gangs.

The Program Information Survey returned by Abraxas NRC lists 11 staff members since 1995, of which two are listed as current employees. Both are case managers. These case managers had worked in the NRC program since 1990 and 1991, respectively. Including both current and former employees, the average length of employment with the NRC program for six case managers was about 4.8 years, with a maximum of 7.3 years and a minimum of 1.4 years.

The majority of current and former staff members working directly with aftercare clients had at least a four-year degree in criminal justice or a related field. There were two without any formal degree. The average length of experience in juvenile delinquency and aftercare for the six former and current case managers was about 8.8 years, with the maximum being 17 years and the minimum being two years. Between 1995 and 1996, the Abraxas NRC program experienced low staff turnover (10-20 percent). Massive staff turnover occurred in 1997, when the program manager, family therapist, the last remaining secretary, and three of the five case managers were let go or left the program.

No current program manager is listed on the Program Information Survey. The previous program manager left in early 1997, following a program audit and restructuring. Since the program manager's departure, program oversight was being handled part-time by a senior Abraxas official working out of offices in Pittsburgh and Washington D.C. Program activity and staffing appear to have fallen dramatically since the program audit and restructuring were completed in late 1997. Minimal program activity was observed during several site visits conducted between October 1997 and May 1998. Staff informed us that most program activity had been moved to sites located in the central region of the state.

In summary, the size and composition of aftercare staff at both contracted service providers appears to have been adequate to handle the volume of juvenile clients normally served by these two programs. The number of aftercare staff in the two aftercare programs did fluctuate over the period from 1995 to late 1997, with turnover ranging between 10-30 percent. Moreover, staffing dropped off significantly in the Abraxas NRC program in October 1997, following a program audit and restructuring. Recruitment apparently compensated for the 10-30 percent annual attrition rate in case managers.

The OIC-YAPP appears to have given adequate attention to training of new aftercare staff and enrichment training for established staff. Little is known about the training regimen for new aftercare staff at Abraxas NRC, although enrichment training appears to have been adequate for established staff. The average term of employment for OIC-YAPP case managers (1.8 years) was such that at any given time there were at least a few relatively new and inexperienced case managers on the job. The average term of employment for Abraxas NRC case managers (4.8 years) suggests that the program had a relatively solid core of seasoned case managers on staff at any given time, up to the fall of 1997.

Staff qualifications and prior experience of aftercare staff at both programs also appear to have been adequate, although the utilization of staff without formal qualifications was an issue for Abraxas NRC (the efficacy of such a practice is also debated nationally). Further, both contracted service providers experienced shortages of specialized staff, as reflected in the multiple job assignments of those with training in family therapy. Caseloads of case managers at both aftercare programs were actually at or below the ideal of 10-12 cases per case manager.

3.1.2 Quantity of Program Activity

The description of *quantity of program activity* includes a number of areas of service delivery. First, we examine important events during the institutional phase: the referral-to-release time period and the number of institutional contacts. Second, during the community phase of aftercare, we determine the timing of the first contact after release and also assess the frequency and type of contact, particularly in comparison to that experienced by the juveniles in direct aftercare with the county probation department. Third, we present data on the risk assessments completed by the aftercare agencies and the extent to which these assessments resulted in services delivered. The areas of risk examined are: home environment, substance abuse, schooling and education, employability, and negative peer group relationships and activity. Finally, we describe the other services that are brokered to assist in the treatment process.

Institutional Phase Events. The chief objectives of an intensive aftercare case manager during the *institutional phase* are to become familiar with the client's case, to prepare an individualized aftercare plan, and to establish a positive working relationship with the client that can be carried over into the community phase. Given this, the events during the *institutional phase* that are especially relevant to the *community phase* are:

- ◆ Referral of the juvenile to the contracted service provider by the placement institution.
- ◆ First (and any subsequent) contact(s) between the aftercare case manager and the referred juvenile.
- ◆ Release of the juvenile from placement institution.

Referral-to-Release Time Period. Ideally, the referral of a potential client to aftercare should occur several months prior to the anticipated release date. Follow-up by an aftercare case manager should then occur in a timely manner and (time permitting), several face-to-face contacts between the incarcerated youth and case manager should be completed. Table 3.2 compares OIC-YAPP with Abraxas NRC on the timing of the initial referral and first contacts.

Table 3.2
Timing of Aftercare-Related Events During the Institutional Phase
Philadelphia OIC-YAPP and Allegheny Abraxas NRC

		OIC-YAPP	Abraxas NRC
Days from aftercare referral to institutional release	<i>Mean</i>	113	75
	<i>Median</i>	96	48
	<i>Minimum</i>	0	0
	<i>Maximum</i>	621	261
	<i>(N)</i>	(75)	(18)
Days from aftercare referral to first institutional contact	<i>Mean</i>	43	17
	<i>Median</i>	25	13
	<i>Minimum</i>	0	3
	<i>Maximum</i>	150	60
	<i>(N)</i>	(31)	(12)
Days from first institutional contact to institutional release	<i>Mean</i>	63	69
	<i>Median</i>	66	55
	<i>Minimum</i>	0	1
	<i>Maximum</i>	140	179
	<i>(N)</i>	(30)	(13)

The OIC-YAPP case managers typically received client referrals in a more timely fashion than did Abraxas NRC. OIC-YAPP received referrals with approximately one month more lead time than did Abraxas NRC (comparing both mean and median number of days from aftercare referral to institutional release). Furthermore, seven clients (39 percent) were referred to Abraxas NRC *less than a month* before release, while only 9 percent of OIC-YAPP referrals came so close to institutional release.⁸

⁸ Even though OIC-YAPP shows a better track record with regard to these data, their 1995-96 annual report identified problems with the referral process at the beginning of the contract year, noting that it ,lacked clear structure and a large amount of youth were referred but were not appropriate candidates for aftercare treatment.,, They cite as examples of inappropriate referrals juveniles who were over 18 years of age or who had histories of repeated extreme violence. This problem was corrected through collaboration with the Office

The first contact between the incarcerated youth and the case manager occurred with less time delay at Abraxas NRC than at OIC-YAPP, which may have been a result of the shorter referral-to-release time span that existed for Abraxas NRC. The case managers at Abraxas NRC typically made first contact about two weeks after referral, while at OIC-YAPP the contact occurred after one month. However, just under half (42 percent) of the incarcerated youth referred to OIC-YAPP were seen within three weeks of referral.

Even with the differences in timing for initial referral and first contact, the amount of time for pre-release planning did not substantially vary between OIC-YAPP and Abraxas NRC. Both contracted aftercare service providers had approximately two months to prepare a juvenile's aftercare plan. Given the ideal of having *several months* lead time to do pre-release planning, both OIC-YAPP and Abraxas NRC fell just short of having several months, but not to the point where they had no time at all to do the planning required.

Institutional Contacts. The next important consideration in the institutional phase is the number of pre-release contacts between the case manager and the client, and between the case manager and the client's family. Since the average referral-to-release time was between two and one-half to three and one-half months for both contracted service providers, it is expected that case managers would typically have at least 2-3 pre-release contacts with clients and their families. The annual reports from both contracted service providers state a goal of at least one face-to-face contact per month between case managers and juvenile clients in institutional placement. Table 3.3 reports case manager pre-release contacts with juveniles who went into intensive aftercare with the two contracted service providers. As the table shows, the data from agency case files rarely provides evidence of more than one pre-release contact, regardless of the amount of time between referral and release. Of 32 OIC-YAPP clients who had at least one documented contact, only two had a second documented contact and none had more than two. In the case of Abraxas NRC, only 14 clients had a documented contact, only one of whom had two documented contacts.

Evidence of family contacts in the pre-release phase was also lacking. OIC-YAPP case managers had only one contact documented with 13 of 32 families, making for an average of less than one contact per family. If we were to include the 40 cases for which there was no contact data at all, these figures would be even lower. From Abraxas NRC records we could document a single pre-release contact with only one family.

of Children Youth and Families (OCYF), and it is no longer mentioned in the 1996-1997 annual report.

**Table 3.3 Total Case Manager-Client and
Case Manager-Family Contacts During Institutional Phase
Philadelphia OIC-YAPP and Allegheny Abraxas NRC**

		OIC-YAPP	Abraxas NRC
Client contacts	<i>Mean</i>	1.1	1.1
	<i>Median</i>	1	1
	<i>(N)</i>	(32)	(14)
Family contacts	<i>Mean</i>	0.4	0.0*
	<i>Median</i>	0	0
	<i>(N)</i>	(32)	(14)

* Only one family contact could be documented for a single Abraxas NRC client.

These data indicate one of two things. Either proper documentation of pre-release contacts was a problem area for both contracted service providers, or neither contracted service provider delivered the *quantity of program service* as expected during the *institutional phase* of an intensive aftercare program.

Community Contacts. One of the most important elements of an intensive aftercare program is frequent face-to-face contact between the juvenile parolee and the aftercare case manager. Under the reduced caseloads associated with intensive aftercare, more frequent face-to-face contact between case managers and their clients is expected. Regular contact is particularly critical in the first few weeks following release from placement, when the juvenile's living situation and daily routine are not yet firmly established, and when the likelihood of recidivism is relatively high.

Table 3.4 presents descriptive statistics about the length of time between discharge of the juvenile from placement and first contact between juvenile and aftercare case manager. Ideally, all juvenile clients should have contact with their case manager within 24 hours of release from institutional placement. As the table shows, both OIC-YAPP and Abraxas NRC made contact with approximately half of their clients within 24 hours of the release from their institutional placement. (OIC-YAPP case managers made contact with 36 of 65, or 55.4 percent; Abraxas NRC met with 9 of 19, or 47.4 percent).⁹ Therefore, approximately half of the juveniles released to OIC-YAPP and Abraxas NRC *were not contacted* within the first 24 hours.

⁹ It should be stressed that these are all documented first contacts, and it is possible that some juveniles had undocumented first contacts within 24 hours of placement discharge.

Table 3.4 Days Between Institutional Discharge and First Community Contact Between Case Manager and Juvenile Client Philadelphia OIC-YAPP and Allegheny Abraxas NRC

		OIC-YAPP	Abraxas NRC
Days from placement discharge to first aftercare contact	<i>Minimum</i>	0 (N=36)	0 (N=9)
	<i>Maximum</i>	104	13

	<i>Mean</i>	8.4	2.4
	<i>Median</i>	0	1
	<i>Mode</i>	0	0
	<i>(N)</i>	(65)	(19)

JCJC guidelines for intensive aftercare call for at least three face-to-face contacts per week between probation officer and juvenile parolee during the first weeks of aftercare. Aftercare guidelines also typically recommend that some portion of these contacts take place during non-traditional hours (evenings and weekends). Both the OIC-YAPP and the Abraxas NRC 1995-96 annual reports state that more frequent face-to-face client contacts occurred during the first weeks of aftercare. For OIC-YAPP, the report states that contacts occurred at a minimum three times per week for at least the first four weeks of the program. The 1995-96 annual report from Abraxas NRC cites a minimum of four face-to-face contacts per week during the first eight weeks of aftercare, presumably dropping off gradually in subsequent weeks. Neither contracted service provider's records on client contacts makes a clear or consistent distinction between contacts that occurred during regular business hours and those that occurred during non-traditional hours. Since it was not possible to determine which contacts occurred during non-traditional hours, no such distinction has been made herein. Annual reports from both aftercare agencies indicate that coverage of non-traditional hours was incorporated into staffing schedules. Case managers at both agencies used pagers to maintain accessibility during non-traditional hours.

Tables 3.5 and 3.6 show the average number of contacts per month between case manager and client, and between case manager and other relevant community members.¹⁰ Information for Table 3.5 is derived from case manager weekly activity

¹⁰ The data in these tables are derived from an analysis of contact documentation provided by Philadelphia OIC and Abraxas NRC. Completed and attempted (unsuccessful) contacts are reported separately. Juvenile contacts are subdivided into face-to-face and telephone contacts. The category of attempted juvenile contacts covers all types of attempted contacts (i.e., in-person and phone). The category of other contacts encompasses all types of contacts with family members, teachers, employers, probation officers, and other relevant community members. The next-to-last row of the tables report the proportion of completed contacts that were with the juvenile (face-to-face and telephone) versus all types of completed contacts with other community members. The bottom row of the tables report the number of cases for which contact data was available from month to month.

logs supplied by OIC-YAPP. The table indicates an average of less than one face-to-face or telephone contact per month between case manager and juvenile in the OIC-YAPP program. There is little variation in the juvenile contact figures from month to month. This is well below the stated OIC-YAPP standard of at least three in-person contacts per week. Case manager contacts with other relevant community members account for approximately one more contact per month per client. After the first two months, contacts between case managers and juveniles account for less than half of all contact activity. Later in this section we look at contacts between probation officers and all juveniles in the study. Adding probation officer contacts into Table 3.4 would improve the picture. At this point, however, the focus is on services delivered by the contracted service providers.

**Table 3.5 Mean Case Manager Contacts Per Client Per Month
Months 1-6
Philadelphia OIC-YAPP**

		Month					
		1	2	3	4	5	6
Juvenile	Face-to-face (completed)	0.6	0.7	0.6	0.4	0.4	0.7
	Phone (completed)	0.3	0.6	0.5	0.2	0.4	0.5
Juvenile	Attempted (all)	0.2	0.5	0.7	0.4	1.0	1.0
Other	Completed	0.9	1.1	1.2	0.7	1.6	2.3
	Attempted	0	0	0	0	0	0
Juv/Total	Completed	50.7%	53.5%	47.6%	43.6%	32.3%	34.1%
	Cases (N)	42	42	39	32	28	24

Information for Table 3.6 was gathered from weekly logs contained in Abraxas NRC case files. During the first month Abraxas NRC case managers and their juvenile clients met face-to-face an average of 10.8 times, or approximately 2-3 times per week. In addition, during this period there were an average of 9.7 phone contacts, or 2.3 contacts per week. This is close to the stated Abraxas NRC standard of four in-person contacts per week during the first month.¹¹ In-person and phone contacts

¹¹ While the contact information reported for Abraxas NRC appears encouraging, there are two reasons for interpreting the data in Table 3.6 cautiously. First, the small number of cases contributing data to the table reduces confidence in the reliability of the information. Second, it is unclear whether the contact information reported in the Abraxas NRC case files

taper off in subsequent weeks. By the third month both types of contacts drop to about half the level seen in the first month, and this level of contact remains stable through the remainder of the six-month period. Case manager contacts with parents, teachers, employers and other relevant community members are relatively high and stable, averaging between 9.7 and 6.3 per month over the entire six month period. Juvenile contacts represent about two-thirds of all contact activity in the first two months and remain above 50 percent during months 3 and 4. After the fourth month there are not enough observations to allow calculation of this ratio.

**Table 3.6 Mean Case Manager Contacts Per Client Per Month
Months 1-6
Allegheny Abraxas NRC**

		Month					
		1	2	3	4	5	6
Juvenile	Face-to-face (completed)	10.8	8.3	5.8	5.4	4.1	4.3
	Phone (completed)	9.7	7.5	4.2	6.5	4.3	4.7
Juvenile	Attempted (all)	0.8	0.4	0.7	2.8	4.3	12.7
Other	Completed	9.1	7.9	7.9	9.4	6.3	9.7
	Attempted	0	0.1	0.1	.02	0.1	0
Juv/Total	Completed	69.2%	66.7%	55.8%	56.0%	--	--
Cases (N)		20	19	14	11	7	3

Taking all these indicators of service delivery related to the timing and number of contacts, we see a pattern emerging for these contracted aftercare service providers: their *quantity of program activity* did not match stated operational guidelines.

However, it is important to compare these data with contact data from the county probation departments and to determine if the level of service is different. In Tables 3.7 through 3.10, we can see the frequency of contact that county probation officers had with juveniles in contracted intensive aftercare, as well as with those juveniles released from public placement into the direct aftercare of the county probation

is for *completed* contacts or *prospective* (planned) contacts, thus leaving doubt as to how many of the reported contacts actually took place.

department. (For the probation officer contact data for the other control groups 3, 6, and 7, see Appendix B.)¹²

The comparisons for Philadelphia (Tables 3.5, 3.7, and 3.8) reveal a greater frequency of contact by probation officers than for the intensive aftercare case managers. Furthermore, a higher percentage of the probation officer contacts were with the juvenile directly—comprising approximately two-thirds of the completed contacts over the six-month period. Whereas, with the OIC-YAPP case managers, only one-third to one-half of the completed contacts were with the juvenile directly. Comparing PO contacts with the non-OIC juveniles who are the most comparable (Group 2), we see that for every month, the mean number of contacts for these juveniles is higher than for the OIC-YAPP group. On the surface, this pattern seems logical, since POs might assume that the OIC-YAPP juveniles are receiving more intensive aftercare services from OIC.

Allegheny County comparisons (see Tables 3.6, 3.9, and 3.10) reveal an opposite pattern—although there are more reasons to question the reliability and validity of these data for both Abraxas NRC as well the PO contact data, making our inferences about the differences in the level of service less confident. The data, as presented, shows a higher frequency of contact by the Abraxas NRC case managers compared to the frequency of contact by the county probation officers. But again, it is difficult to draw any overall conclusions with these data since the Ns are small and the data sources are more suspect.

These data for Philadelphia and Allegheny counties, hence, do not provide consistent findings regarding the comparative level of aftercare service (number of contacts) delivered to juveniles released from YDCs/YFCs. Although in both counties there are wide gaps between the aftercare case manager contacts vs. those contacts of the POs, the pattern is in the opposite direction.

¹² The contact data for the county probation departments came from different sources in the various counties. For Philadelphia and all the control counties (Berks, Bucks, Dauphin, Lancaster, and Lehigh), these data were extracted from the probation officer narrative that was included in the "J" files (juvenile case files) in the family courts. However, in Allegheny County, initiation of this data collection process came after the fieldworkers had gone through the juvenile files for the social and criminal history data. Therefore, we used the "Direct Contact Sheets" filled in by POs at the family court as a record of contacts with the juveniles in our sample. There were some limitations to this source. First the contact sheets were only available for the period from January 1997 to early 1998. Therefore, for any juvenile whose aftercare began prior to January 1997, there is only partial data; and for those juveniles whose aftercare ended before 1997, there is no data. Second, we could not always find entries in the contact sheets even for juveniles whose aftercare period fell within the time frame (January 1997-early 1998). Given these limitations, these PO contact data probably *underestimate* the quantity of PO contacts in Allegheny County.

**Table 3.7 Mean Probation Officer Contacts Per Client Per Month
Months 1-6**
Experimental Group 1, Philadelphia OIC-YAPP

		Month					
		1	2	3	4	5	6
Juvenile	Face-to-face (completed)	3.4	2.7	2.1	2.5	2.0	1.9
	Phone (completed)	1.2	1.0	0.7	1.1	0.9	0.5
Juvenile	Attempted (all)	1.2	1.4	1.3	1.3	1.1	0.7
Other	Completed	2.7	2.0	1.8	2.4	2.1	1.7
	Attempted	0.2	0.2	0.2	0.3	0.1	0.2
Juv/Total	Completed	62.9%	65.4%	61.1%	60.1%	58.5%	58.8%
	Cases (N)	86	81	71	58	54	45

**Table 3.8 Mean Probation Officer Contacts Per Client Per Month
Months 1-6**
Control Group 2, Philadelphia County

		Month					
		1	2	3	4	5	6
Juvenile	Face-to-face (completed)	4.4	4.0	2.8	3.2	2.5	2.7
	Phone (completed)	0.6	0.5	0.6	0.6	0.4	0.3
Juvenile	Attempted (all)	1.6	1.8	1.1	1.2	1.3	1.1
Other	Completed	2.5	2.3	1.3	1.5	1.4	0.9
	Attempted	0.5	0.4	0.2	0.4	0.3	0.4
Juv/Total	Completed	67.0%	66.4%	72.3%	71.1%	67.0%	76.1%
	Cases (N)	80	77	73	54	43	34

**Table 3.9 Mean Probation Officer Contacts Per Client Per Month
Months 1-6**
Experimental Group 4, Abraxas NRC

		Month					
		1	2	3	4	5	6
Juvenile	Face-to-face (completed)	0.4	1.6	1.7	1.2	1.1	0.8
	Phone (completed)	0.2	0.1	0	0	0	0

Juvenile	Attempted (all)	0	0	0	0	0	0
Other	Completed	0.5	0.7	0.5	0.8	0.5	0.5
	Attempted	0.1	0.3	0.6	0.4	0.3	0.3
Juv/Total	Completed	55.6%	71.8%	77.1%	60.0%	68.4%	60.0%
Cases (N)		16	16	16	13	12	12

**Table 3.10 Mean Probation Officer Contacts Per Client Per Month
Months 1-6**
Control Group 5, Allegheny County

		Month					
		1	2	3	4	5	6
Juvenile	Face-to-face (completed)	0.5	0.5	0.4	0.4	0.6	0.4
	Phone (completed)	0	0	0	0	0	0

	Attempted (all)	0	0	0	0	0.2	0
Other	Completed	0.5	0.2	0.2	0.4	0	0.2
	Attempted	0.2	0	0	0	0.2	0.2
Juv/Total	Completed	--	--	--	--	--	--
Cases (N)		6	6	5	5	5	5

Home Environment. A variety of information was gathered from the case files of the contracted service providers concerning the home setting and family situation of juveniles in contracted aftercare. Information about home setting and family situation was derived from evaluations of home environments conducted by the contracted aftercare service providers either in the pre-release phase or shortly after the juvenile was released to the community.

A juvenile's living arrangements while on aftercare and the willingness of his or her family to participate in the aftercare plan can have a significant impact on his or her performance in aftercare. It is also important to see if aftercare agency staff are conducting home visits as necessary, identifying problematic aspects of the juvenile's family situation, and taking appropriate measures to address these problems.¹³

Table 3.11 summarizes the living arrangements for the juvenile parolees in the OIC-YAPP program and the Abraxas NRC program. The most common living arrangement was for juveniles to reside in a household headed by the mother (father absent). Fewer than one-quarter of juveniles in either of the contracted aftercare programs resided in a household containing both natural parents. A further 10-20 percent of juveniles in both programs resided in the home of another relative (e.g., grandparent). Very few juveniles lived independently while on aftercare (two in OIC-YAPP, none in Abraxas NRC). Four juveniles in the OIC-YAPP program and one in the Abraxas NRC program experienced a change in living arrangements while in aftercare, which may have been disruptive to their aftercare. However, the data show that most of the juveniles in the contracted aftercare programs experienced relatively stable living conditions under the supervision of an adult family member.

The number of people in the household can also affect the quality of the home environment, which in turn can have an impact on performance in aftercare. For example, a juvenile parolee dwelling in a single-parent household with many siblings may be exposed to more economic and interpersonal stresses that are likely to weaken his/her performance in aftercare.

Table 3.12 indicates the total number of people residing in the households of 26 juveniles in the OIC-YAPP program and 20 juveniles in the Abraxas NRC program. For juveniles in both programs there is a roughly even split between households containing three or fewer members and those containing 4 or more persons. Very few lived in a household containing six or more persons. These data indicate that a

¹³ Annual reports from Philadelphia OIC cite several internal initiatives geared toward the provision of family-related services. These included parent-child family communications workshops/seminars and family counseling/therapy. The families of 169 of 239 clients (70.7 percent) served during FY 1995-96 were identified as having participated regularly in the program. The FY 1996-97 report cites a family participation rate of 30 percent. Annual reports from the Abraxas NRC program also cite internal initiatives to serve clients and their families. These included the establishment of a Family Advisory Board charged with planning group educational and recreational events and outings designed to include clients and their families, as well as the provision of traditional family counseling services through the resident family therapist/coordinator. In FY 1996-97 the NRC program served 49 clients, during which time the annual report cites 72 family contacts during the pre-release phase (1.5 per family) and 316 during the post-release phase (6.5 per family).

substantial portion of juveniles in contracted aftercare lived in households that may have been overcrowded or overly stressful.

Table 3.11 Living Arrangements of Aftercare Clients
Philadelphia OIC-YAPP and Allegheny Abraxas NRC

	OIC-YAPP (N=86)	Abraxas NRC (N=22)
Both natural parents	9 10.5%	5 22.7%
Mother only	35 40.7%	11 50.0%
Father only	1 1.2%	0 0.0
Natural parent and step parent	3 3.5%	1 4.5%
Unspecified family members	15 17.4%	0 0.0
Other relative	16 18.6%	3 13.6%
Other	7 8.3%	2 9.1%

Table 3.12 Number of People Residing in Household
Philadelphia OIC-YAPP and Allegheny Abraxas NRC

	OIC-YAPP (N=26)	Abraxas NRC (N=20)
2-3	14 53.8%	8 40.0%
4-5	11 42.3%	9 45.0%
6+	1 3.8%	3 15.0%

Table 3.13 further examines the suitability of the home environment. In the case of 26 juveniles in the OIC-YAPP program, more than half (53.8 percent) faced a home environment deemed by aftercare staff to be either marginal or unsuitable. The situation was better for 22 juveniles in the Abraxas NRC program, where only 13.6 percent faced a difficult home environment. Case managers in both programs indicated that they try to find alternative living arrangements (e.g., living with a member of the extended family) for juveniles confronting difficult home environments. Aftercare staff also noted the persistent shortage of affordable housing for those (often older) clients preferring to live independently.

Table 3.13 Home Suitability and Parental Involvement in Aftercare (%)
Philadelphia OIC-YAPP and Allegheny Abraxas NRC

	OIC-YAPP	Abraxas NRC
Home Suitability (N)	(26)	(22)
Excellent	3.8 %	9.1 %
Good	42.3	77.3
Marginal	50.0	13.6
Unsuitable	3.8	0.0
Parental Involvement (N)	(30)	(22)
Very Supportive	26.7 %	13.6 %
Supportive	36.7	54.5
Marginal	33.3	27.3
Not Supportive	3.3	4.5

Table 3.14 reports on the employment and public assistance status of clients' parents. All things being equal, the presence of an employed parent in the household tends to stabilize the home environment (although in single parent households this might have the reverse effect, as adult supervision decreases). Data from a limited number of cases for the two contracted aftercare programs indicate that most households had income from at least one working parent or guardian and that few households received any form of public assistance. Five of 22 juveniles in the OIC-YAPP program and 4 of 12 juveniles in the Abraxas NRC program resided in households headed by a single working parent (usually the mother). Thus, evidence regarding the impact of the employment and public assistance status of households on the stability of the home environment is equivocal.

Table 3.14 Employment and Public Assistance Status of Parents/Guardians

Philadelphia OIC-YAPP and Allegheny Abraxas NRC

	OIC-YAPP	Abraxas NRC
At least one parent/ guardian employed	16 72.7% (N=22)	9 75.0% (N=12)
Family receiving public assistance	5 27.8% (N=18)	2 28.6% (N=7)

Both contracted aftercare service providers appear to have been inconsistent about gathering information about the home environment of juveniles in their respective programs. In most cases a juvenile's living arrangement was noted. However, information on the number of people in a household, home suitability, parental involvement with aftercare, and the employment and public assistance status of parents/guardians was only available for a limited number of cases.

Another issue to consider is how the information gathered from home assessments was used, if at all. Interviews and informal conversations with case managers at both aftercare agencies indicated that family issues were discussed in meetings between case managers and juveniles. However, examination of case files and other records from both contracted aftercare service providers revealed very little specific information about family-related services that may have been provided internally or through referral to other programs and agencies. Information from 24 Abraxas NRC case files show that 15 juveniles received family-related services (mostly individual or group counseling) and that the parents of 10 juveniles participated in planned family meetings. Information from OIC-YAPP case files contains no details about family-related services that may have been provided either to juveniles or their parents. Except for referrals to prenatal services (usually for female clients and girlfriends of male clients) there is little evidence that the two contracted service providers routinely referred clients to other community-based family services. Both contracted service providers had a staff member with training in family therapy. This staff member often participated in institutional visits and home assessments. However, staff shortages in both agencies forced this staff person to divide their time between family therapy work and supervision of case managers.

Substance Abuse. Substance abuse problems are quite common among serious high-risk juvenile offenders, and overcoming these problems is an important prosocial achievement. In this section we look at evidence from the contracted service providers of their efforts to monitor juvenile clients' substance use and to deal effectively with drug and alcohol violations.

Annual reports from OIC-YAPP indicate that two outside agencies (Nexus and Gaudenzia, Inc.) were utilized for random urinalysis, drug treatment and referral services. OIC also conducted workshops and sponsored guest speakers to address drug and alcohol issues at weekly group sessions. Case managers were responsible for monitoring clients' participation in drug and alcohol counseling and rehabilitation programs.¹⁴

Annual reports from Abraxas NRC state that random drug testing was done, as often as needed on a client-by-client basis. Weekly group sessions also addressed issues of substance abuse and health. Outside resources utilized by the NRC program included seminars run by staff from St. Francis Hospital through the Juvenile Court Drug and Alcohol program and speakers from Alcohol and Narcotics Anonymous.¹⁵

Evidence gathered from court records about drug and alcohol use among juveniles served by the two contracted aftercare programs is presented in Table 3.15. As the table shows, substance abuse was quite common in both groups of juveniles. Over 40 percent of juveniles in both programs had a history of major drug use problems, and more than one quarter had major alcohol use problems. Substantial percentages of juveniles in both groups also showed evidence of drug and/or alcohol use at school, involvement in drug sales, and participation in D&A treatment.

Examination of OIC records reveals that 17 of 74 juveniles (23.0 percent) were given access to treatment for substance abuse. The type of treatment, frequency of sessions and regularity of attendance could not be determined from OIC documentation, but at least one juvenile is known to have had major attendance problems. Urinalysis results for 15 of 76 juveniles indicate that 7 passed and 8 failed (most commonly for marijuana). Discussions with OIC case managers indicate that probation personnel performed most drug testing, so testing was probably much more common than OIC documentation might suggest. However, the results of these tests either were not regularly reported to OIC case managers or the information was not routinely recorded by case managers in a juvenile's case file.

¹⁴ In OIC-YAPP's annual report for FY 1995-96, 78 of 239 clients (32.6 percent) were referred to D&A treatment programs. Twenty-two (22) of these 78 clients remained drug free, 44 were detected to have used drugs at least once, and 17 were incarcerated due to drug and alcohol related offenses. During FY 1996-97, 25 of 219 (11.4 percent) clients tested positive for drug or alcohol use.

¹⁵ Annual reports from Abraxas NRC make no mention of rates of positive drug test results, referral to treatment, or incarceration due to D&A violations.

Table 3.15 Prior Substance Abuse Among Aftercare Clients (%)
Philadelphia OIC-YAPP and Allegheny Abraxas NRC

	OIC-YAPP	Abraxas NRC
Alcohol use problem (N)	(89)	(72)
No	48.3 %	41.7 %
Yes, minor	23.6	30.6
Yes, major	28.1	27.8
Drug use problem (N)	(89)	(71)
No	27.0 %	31.0 %
Yes, minor	32.6	23.9
Yes, major	40.4	45.1
Drug/alcohol use at school (N)	(77)	(71)
No	57.1 %	80.3 %
Yes	42.9	19.7
Prior involvement in drug sales (N)	(89)	(72)
No	43.8 %	63.9 %
Yes, minor	23.6	12.5
Yes, major	32.6	23.6
Prior D&A treatment (N)	(89)	(71)
No	68.5 %	71.8 %
Outpatient or type unknown	15.7	15.5
Inpatient	15.7	12.7

Very little documentation exists in Abraxas NRC case files regarding D&A monitoring and treatment. In interviews NRC case managers did mention that the Nexus agency was used for drug testing and treatment. Only three case files contained any drug test results (2 pass; 1 failure for marijuana). The results of any drug tests performed by probation personnel were either not regularly reported to NRC case managers or case managers did not routinely record the information.

Sufficient information is available from OIC-YAPP to permit a tentative assessment of the match between client needs and service provision in the area of substance abuse. Table 3.16 shows the likelihood that juveniles with drug and/or alcohol problems will receive treatment. Although the amount of data is quite limited (16 cases), it does suggest a positive relationship between a history of substance use problems and the likelihood of receiving D&A treatment services while in aftercare. Moreover, the likelihood of receiving such services appears related to the *severity* of a juvenile's substance abuse history.

Table 3.16 Drug and/or Alcohol Problem by D&A Treatment
Philadelphia OIC-YAPP (N=16)

D&A Problem	D&A Treatment in Aftercare	
	No	Yes
No	3	0
Yes, minor	3	2
Yes, major	2	6

Schooling and Education. Educational problems are virtually universal among serious high-risk juvenile offenders. Hence, completion of schooling through remedial education, GED classes, and re-enrollment in public school must be a central treatment goal of any aftercare program.

Table 3.17 summarizes the history of school problems for juvenile parolees in the OIC-YAPP and Abraxas NRC intensive aftercare programs. A majority of juveniles in both groups had educational histories that included one or more of the following: major truancy or dropping out, out-of-school suspension or expulsion, an achievement level two or more years behind their grade level, and failing one or more grades. Nearly half of OIC-YAPP clients and over half of Abraxas NRC clients had previous experience with alternative or special education. All problem rates were higher for the juveniles entering the OIC-YAPP program.

Annual reports from OIC-YAPP cite a number of in-house educational resources and programs centered around the Education Lab, a semi-private room featuring a computer, over 400 books and periodicals, and other learning aids. This room was used for computer-aided instruction, individual tutoring, and completion of homework assignments. Assistance was given to juveniles wishing to re-enroll in public school. Clients and family members interested in pursuing GED instruction were referred to an internal GED program or to external agencies such as the Mayor's Commission on Literacy. Counseling and referrals were also available for clients interested in entering college.¹⁶

¹⁶ The OIC-YAPP FY 1995-96 report states that 77 of 239 clients (32.2 percent) completed the school year, 12 earned their GED, four enrolled in vocational school, and one enrolled in an adult basic education (ABE) program. The FY 1996-97 report states that 118 of 219 clients (53.9 percent) were given assistance in completing educational goals: 91 were re-enrolled in high school, 14 earned their GED diploma, 10 were enrolled in GED classes, two enrolled in vocational training, and one enrolled in ABE classes. Forty-one (41) juveniles received assistance through the Education Lab, of which 24 were given tutoring assistance, 11 participated in driver education tutoring, and 6 were tutored in GED prep.

Table 3.17 Prior School Problems of Aftercare Clients (%)
Philadelphia OIC-YAPP and Allegheny Abraxas NRC

	OIC-YAPP	Abraxas NRC
School attendance (N)	(88)	(71)
No major problems or minor truancy	18.2 %	29.6 %
Major truancy or dropped out	81.8	70.4
Most serious disciplinary action (N)	(77)	(71)
None	27.3 %	18.3 %
In-school suspension	6.5	21.1
Out-of-school suspension or expulsion	66.2	60.6
Achievement level 2 or more years behind grade level (N)	(78)	(69)
No	38.5 %	44.9 %
Yes	61.5	55.1
Failed a grade (N)	(77)	(72)
No	27.3 %	38.9 %
Yes	72.7	61.1
Participated in alternative or special education program (N)	(85)	(71)
No	51.8 %	42.3 %
Yes	48.2	57.7

Annual reports from Abraxas NRC indicate that the agency utilized a number external educational agencies and programs, including the Allegheny Intermediate Unit (remedial education), the Pittsburgh Literacy Council (GED prep), the Connelly Trade Center (VoTech), and Americorp (tutorial). Abraxas NRC staff also arranged for clients to tour local colleges and universities.¹⁷

Table 3.18 reports educational enrollments for juvenile parolees in OIC-YAPP and Abraxas NRC as determined through examination of case files and related records. Educational planning for the post-release phase was an important part of case planning for both contracted aftercare service providers. As the table shows, almost all juvenile parolees participated in an education program while in aftercare.

¹⁷ During FY 1995-96, 33 of 67 Abraxas NRC clients (49.3 percent) enrolled in high school, vocational training, or GED classes. Two clients also enrolled in college. The annual report for FY 1996-97 reports educational enrollments on a monthly basis. The maximum number of clients in educational programs during FY 1996-97 was 22 of 49 (44.9 percent). Most of these clients were re-enrolled in public school, while most others entered vocational training or GED classes. Eighteen (18) clients completed their GEDs during FY 1996-97.

At least partial data were available for 56 of 89 OIC-YAPP clients. Of the 33 cases for which no post-release educational data were available, as many as seven may have completed their GED while in their institutional placement (3=Yes, 4=Unknown) and another four were working (3=Full-time, 1=Part-time) while in aftercare. The remaining 22 juveniles (who apparently were not enrolled in an educational program) neither completed their GED in placement nor acquired employment while in aftercare.

Case files were available for only 24 of 72 Abraxas NRC clients, of which post-release educational data were available for 17. Other educational information for clients of the two contracted service providers appears later within the outcome evaluation section.

Table 3.18 Educational Enrollments of Aftercare Clients (%)
Philadelphia OIC-YAPP and Allegheny Abraxas NRC

	OIC-YAPP	Abraxas NRC
Educational enrollment (N)	(56)	(17)
High school or middle school	78.6 %	23.5 %
Vocational school	8.9	5.9
GED/ABE classes	10.7	41.1
Remedial education	0.0	23.6
College	1.8	5.9

It is clear from the table that, at least in the case of OIC-YAPP, a serious effort was made by aftercare staff to enroll juveniles in an educational program. In the case of Abraxas NRC, where 17 of 24 clients were enrolled in an educational program, it also appears that serious efforts were made in this area. Unfortunately, we have no post-release educational information about the remaining 48 clients whose case files could not be located.

A final question relevant to an evaluation of post-release educational services is whether aftercare staff were monitoring their clients' school attendance and academic performance. Thirty-two of 89 OIC-YAPP case files contained reports on school attendance, while the figure was 15 of 24 files for Abraxas NRC. Neither contracted service provider appears to have routinely recorded information about academic performance or about steps taken to address problems in the areas of attendance and academic performance.

Employability. Acquiring employment is an important and highly desirable post-release goal for many juvenile parolees, especially those who have already attained their high school diploma or GED certificate. Aftercare staff are expected to provide their clients with assistance in preparing for and finding jobs. It is also important that case managers remain apprised of a client's progress at work through regular contact with the client and his or her employer so that any problems with work attendance or employer-employee relations can be promptly addressed.

Annual reports from OIC-YAPP discuss a set of internal programs—the Job Center—geared toward job readiness training and the job search. The 3-week Jobs Informational System Training (JIST) program, enables each client to either obtain and maintain employment or utilize the skills obtained from the job training to continue the search. Another employment service program, Jump Start Plus Internship Activity (JSPIA), consists of eight weeks of preparatory classes followed by an 8-week job internship. To combat employers’ negative perceptions of delinquent youth, OIC implemented several measures intended to restore the community’s faith in our clients. These measures included hosting an open house reception and implementing a mentoring program with several local companies and one major university.¹⁸

Annual reports from Abraxas NRC indicate that the staff made use of several programs to help clients prepare for and find employment. These included the Abraxas Workbridge program, the Vocational Rehabilitation Center and Youth Build-Employment, Job Corp, and Youth Works. Under these and other programs NRC clients received training and/or employment in a variety of occupations and fields (industrial, office, retail, beauty, etc).¹⁹

Information relating to employment was found in the case files of 68 of 89 OIC-YAPP clients. This information showed that 23 clients (25.8 percent) found jobs while in aftercare (9 full-time, 14 part-time). Only six case files contained information about any job-related services received as part of aftercare treatment. All six made use of OIC’s job listings, five of these same clients also received instruction to improve their job search skills and had access to the job skills library. Most OIC-YAPP clients who were *not* employed were full-time students (29 of 39, or 74.4 percent). Thirteen (13) full-time students had part-time jobs, and 3 had full-time jobs while in aftercare.

Abraxas NRC case files for 21 of 72 juveniles contained information regarding employment. Nine of these 21 clients (42.9 percent) obtained employment while in aftercare (4 full-time, 5 part-time). Information on job-related services received as part of aftercare treatment was available for four cases. Two juveniles received instruction in job search skills, and two attended the Vocational Rehabilitation Center. Two of these same clients also received assistance in résumé preparation and instruction in interviewing skills. One of these same clients also attended job readiness classes. From the limited set of Abraxas NRC case files available, it

¹⁸ According to the Philadelphia OIC-YAPP annual report for FY 1995-96, 75 of 239 clients (31.4 percent) participated in Job Center and 55 of them found employment (21 full-time, 34 part-time). According to the annual report for FY 1996-97, 65 of 219 clients (29.7 percent) were serviced through Job Center, and 46 of these clients secured full-time (13) or part-time (33) employment. In addition, 12 juveniles were enrolled in the JSPIA program. One successfully completed the program and went on to regular employment.

¹⁹ According to the Abraxas NRC annual report for FY 1995-96, 19 of 67 clients (28.4 percent) acquired full-time or part-time work. The FY 1996-97 annual report lists the numbers of clients employed on a monthly basis. The maximum number of clients employed in any month of FY 1996-97 was 9 of 49 clients (18.4 percent).

appears that most NRC clients who were *not* employed were full-time students (7 of 11, or 63.6 percent). Three full-time students also worked part-time, and one worked full-time while in aftercare.

Case file information suggests that monitoring of work attendance and performance by both contracted service providers was inadequate. Only four OIC-YAPP case files contained information on a client's work attendance or on the employer-employee relationship. Although no major work attendance problems were noted for any of these four clients, three had major or frequent relationship problems leading to dismissal. Eight case files from Abraxas NRC contained information about a client's job performance. Six had no major attendance problems, and two exhibited absenteeism leading to dismissal. Information on the employer-employee relationship was available for six of these same clients. Three clients had a good relationship with their employer, one had minor or infrequent problems not leading to dismissal, and two had major or frequent problems leading to dismissal. No information was available for the case files of either contracted service provider regarding steps taken by case managers to deal with clients' problematic workplace performance.

Employment information obtained from the contracted service providers suggests that both agencies made serious efforts to prepare their clients for work, and were reasonably successful in placing clients with employers. However, both aftercare agencies either failed to adequately monitor the performance of their clients in the workplace or at least neglected to routinely record this information.

Peer Group Relationships and Activity. Intensive aftercare is intended to provide an intermediate step between the highly structured and regulated institutional environment and the community; i.e., aftercare service case managers are to assist, guide and monitor clients in all aspects of reintegration with the community. Often, however, elements of life in the communities to which juvenile parolees return continue to encourage and reinforce delinquent behavior. Therefore, it is important for aftercare workers to monitor all aspects of their clients' re-involvement with the community. In particular, how clients spend their spare time can seriously affect their prospects for reoffending. Aftercare staff need to provide clients with plenty of positive group activities. They also need to be aware of how clients are spending recreational time when not on agency premises, and they need to be on the lookout for signs of re-association with delinquent peers.

Annual reports from OIC-YAPP list many community resources that were utilized for group sessions and off-site educational, cultural and recreational activities. Guest speakers from the community addressed group sessions on topics relating to substance abuse, violence, crime and justice, health and sexuality, values and self esteem, employment opportunities, the sciences, religion, and local politics. Group cultural and recreational activities included visits to museums, theater performances, recreation parks, professional sporting events, and a research center. Juveniles and their families were also invited to attend several picnics and holiday

events sponsored by OIC during the year. Attendance at group sessions was compulsory for most clients.²⁰

Annual reports from Abraxas NRC list many community resources that were utilized for group sessions and off-site educational, cultural and recreational activities. A summer camp was provided for clients who were not employed. Topics covered in group sessions included health and sexuality, gangs and violence, and independent living skills. Clients also participated in sporting activities and were involved in community service projects. Field trips included visits to area parks, college campuses, college sporting events, theater, and art galleries and museums.²¹

Some data collected from the case files of the contracted service providers sheds light on aspects of clients' other community involvement. Information on association with delinquent peers is available for only 13 of 89 OIC-YAPP clients. Of these 13 clients, three showed no signs of re-association with delinquent peers, eight showed signs of occasional re-association, and two showed signs of regular re-association. Information on non-school sponsored recreational involvement was available for only 10 clients, eight of whom were known to have participated in aftercare-sponsored activities, and two of whom were known to have hobbies.

Abraxas NRC case files for 14 clients reported that half (7) were not re-associating with delinquent peers, while half (7) were occasionally re-associating with delinquent peers. Seven case files contained information on non-school sponsored recreational participation. Six clients participated in aftercare-sponsored activities, and one client was involved in non-school athletics.

Both contracted service providers (especially OIC-YAPP) provided their clients with a large variety of topical and engaging group sessions, guest speakers, and sponsored off-site educational, cultural and recreational activities. This is perhaps one of the most impressive aspects of the aftercare programs offered by the two contracted service providers. However, attendance figures from OIC suggest that participation rates for voluntary events could be improved. Abraxas NRC apparently failed to record participation rates. Both aftercare agencies also needed to do a better job of monitoring their clients' re-association with delinquent peers, as well as their non-school sponsored recreational activity.

Service Brokerage by Aftercare Service Agencies. No aftercare agency can directly provide all the resources and services required to meet the diverse needs of their juvenile clients. Hence, service brokerage and referral are essential tasks for aftercare agencies. By referring clients to other organizations and resources in the community, aftercare agencies effectively enlarge the array of services that they can offer to their clients, and thereby substantially enrich the aftercare experience. Because service brokerage is such an important part of aftercare service delivery, the number and quality an aftercare agency's linkages with other organizations

²⁰ Annual reports for Philadelphia OIC FY 1995-96 and FY 1996-97 cite an average of 15 clients involved in each of the group cultural and recreational activities sponsored by OIC. It is not clear how many family members participated in any of these events.

²¹ Annual reports for Abraxas NRC contain no attendance figures for clients and their families at these sponsored activities.

needs to be considered as part of any evaluation of the quantity and quality of service delivery.

Most information on organizations and services utilized by the two contracted service providers and on the quality of linkages comes from a Program Information Survey completed by both contracted service providers for this study and from interviews conducted with their respective staffs. Additional information is contained in annual reports from both agencies.

In the Program Information Survey OIC-YAPP listed eight organizations with which they have had working arrangements since 1995. These include the local school district, the county welfare department, Nexus (D&A treatment), United Way's First Call For Help (a referral service), Boyz in the Good (intervention program), and several cultural organizations (guest speakers). OIC-YAPP rated the quality of services provided to their clients by five of these organizations as *excellent* or *good*. The quality of services received from the local school district, the welfare department, and one guest speaker organization was rated as *fair*.

In the Program Information Survey completed by Abraxas NRC, 17 organizations were identified. These included two health information agencies, three organizations providing assistance to new parents, five organizations offering job training, two providing volunteer work opportunities, five local colleges and universities offering college preparation courses, and two wrap around services. Abraxas NRC rated all community organizations as either *excellent* or *good*. Additional organizations not listed in the Program Information Survey are cited in Abraxas NRC annual reports. These included several mental health service providers, health and prenatal clinics, juvenile counseling services, the Urban League and several churches.

The Program Information Surveys from both contracted service providers shows that they referred clients to a number of valuable community resources. Abraxas NRC appears to have had a particularly dense and varied network of positive relationships with community organizations. While OIC-YAPP's network of connections with community organizations appears to have been less dense, and their evaluation of these services was less positive, OIC appears to have been equipped to provide its clients with more in-house services (e.g., employment prep) than Abraxas NRC.

3.1.3 Quality of Program Activity

In the following evaluative assessment of the *quality of program implementation* we will draw on two primary sources of documentation. First, data already presented to describe the level of program activity at the two contracted aftercare service providers gives us evidence regarding the extent to which the programs implemented their intensive aftercare services according to the ideal model presented in Section 1.2 (as well as their own program models described in their own annual reports). Second, the input from staff at these agencies who were interviewed offers *insider* perspectives on program implementation, strengths and weaknesses of program operation, assessment of linkages with outside agencies, and recommendations for improvement. Together, these sources of evidence provide both *objective* as well as *subjective* data on the quality of program implementation.

◆ **What factors facilitated/interfered with the implementation of the aftercare services for delinquent offenders?**

Clearly there are a number of factors that facilitated the implementation of the intensive aftercare services at OIC-YAPP and Abraxas NRC. The extent to which there is a theoretically based model that details important programmatic features and service delivery components is an important facilitating factor. The work at the national level by OJJDP provides a solid basis upon which individual programs can design their own aftercare program. Furthermore, the set of standards developed by JCJC within Pennsylvania establishes performance guidelines for the programs.

Another set of facilitating factors, which were internal to the programs themselves, consists of the following. First, the size of the case load for the aftercare staff was moderately low, which should have facilitated the delivery of more *intensive* service (to a smaller number of juveniles). The mix of staff and their educational backgrounds was also appropriate for this type of employment and there were a number of opportunities for the staff to participate in enrichment training. The mix of community services and the level of satisfaction with most of them also provided adequate opportunities for service brokerage by the two aftercare service providers. The two aftercare agencies appeared to offer, or insure through service brokerage, a mixture of program activities to support their clients' transition into the community—e.g., educational enrollment, employment counseling and job search; D&A treatment, and family counseling. Furthermore, both of these programs have a long history of working with this type of clientele, although perhaps in other program areas. As *experienced* agencies they would have required less time for start-up and implementation than *inexperienced* agencies.

In addition to the facilitating factors identified above, there are a number of items specifically mentioned by the staff at these two agencies—factors that they perceived to facilitate the delivery of their programs:

◆ OIC-YAPP staff mentioned:

- ✓ Staffing qualities, e.g., the level of staff commitment to the program and *the kids*; the staff's involvement in the development of the program; and the case managers' ability to deal with *the kids*—there's a balance between professionalism and having fun with them (mutual respect); the case managers' visits to the institutions ahead of time to establish rapport with the clients.
- ✓ OIC organizational support, e.g., the availability of back-up funding at OIC to support the program when contracts were delayed from DPW; the support from OIC management to staff and program goals.
- ✓ The monitoring and assistance of the DPW Project Officer's help in coordination and project operations.

◆ Abraxas NRC staff mentioned:

- ✓ Staffing qualities, e.g., the staff worked well together when all were on *P's and Q's*; case managers were familiar with clients other than their own—this facilitated their assisting one another and covering for one another when necessary.
- ✓ Abraxas operational procedures, e.g., there were good working relations with POs, some external providers, and institutional staff; and NRC did at least have good working procedures *on paper*.

Regarding factors that interfered with the performance and implementation of services, there are factors both external and internal to the aftercare service providers. Externally, the referrals to the aftercare programs did not occur in a timely manner and rarely were made several months prior to the juveniles' release from institutional placement. This reduced the amount of time available for the aftercare case manager to contact the juvenile, his/her family, and do aftercare planning. However, this was not an extremely serious problem, since there was generally around 2 months for this pre-release contact and planning.

Internally, the performance of a number of the staff at Abraxas NRC apparently became a serious problem, as evidenced by their internal audit and complete restructuring in the fall of 1997. Since our ability to interview staff at Abraxas was severely hampered as a result of this restructuring, we have little independent evidence as to the interpersonal problems that existed, leading up to this internal audit and restructuring. What evidence we do have relates to the completeness of case file data and proper documentation, along with the input from the few staff that were interviewed.

Based on the staff interviews, these are specific items that became apparent as factors that interfered with the implementation of the programs:

◆ OIC-YAPP:

- ✓ There were difficulties in working with some of the institutions—perhaps due to personality conflicts the case managers had difficulty in working with the institutions and gaining early access to the juveniles referred to OIC, as well as having access to the institutional files.
- ✓ There was a level of dissatisfaction and low morale among staff members at OIC; for example some staff commented on the lack of effort and follow through on the part of other staff, there were complaints that the organizational climate at OIC had changed for the worse as a result of high turnover, difficulties in finding staff, delayed funding, reduced funding from some sources, bureaucratic rules and red tape, low salaries and benefits, too much internal and external politics, lack of creativity on part of staff, and too much emphasis on a *corporate image*.
- ✓ There were some difficulties in working with the external service organizations—specifically the schools, which made it difficult to enroll students when they were released from their institution mid-year. There was also a long delay in getting paperwork between counties when a juvenile was transferred from one jurisdiction to another.

◆ Abraxas NRC:

- ✓ There were *turf* battles in Allegheny County with juveniles who were tied to other programs simultaneously with Abraxas NRC; this led to problems and difficulties in coordinating services and sometimes resulted in clients playing one agency against the other.
- ✓ There were serious staffing problems as indicated with comments concerning inadequate education/training/experience among some case managers and the project director; poor staff morale; inadequate compensation and no established career paths; and internal politics.
- ✓ There were problems in implementing elements of the intensive aftercare model, i.e., establishing and enforcing sanctions for client accountability; establishing more than minimal expectations for clients; and lack of connection and follow-up with clients and families during institutional phase.

◆ **Were the budgets, number and qualifications of staff, and the amount of time required for implementation adequate?**

The budgets of both programs appeared to be adequate for implementing the services in the aftercare programs. However, some staff and management within both programs complained of low wages, poor benefits, and difficulty in accessing funding. On the other hand, some staff within these programs indicated that there were funds available when they planned special activities for the juveniles. If we use case loads as an indicator of adequate funding, the case loads were low, indicating adequate staffing for the size of the program.

For the most part, as in most social service agencies, salaries are not high and there is a constant turnover of staff, which can be disruptive. And, although the turnover at these agencies was not outside what is typical for most comparable organizations, that does not lessen its disruptive impact.

As already discussed the number of staff was adequate in both agencies. Only the overlapping job responsibilities of the family therapist staff member at both agencies created some problems. Furthermore, Abraxas NRC was understaffed in the area of clerical help, as indicated by case manager comments.

As for the qualifications of staff (in terms of educational backgrounds and experience), it was better in OIC-YAPP than in Abraxas NRC, where formal degrees were not required for case managers. The extreme difficulty Abraxas had as a result of their previous project director is also an indicator of the staff qualification problems.

Finally, the amount of time to implement the program was not at issue for either of these programs, since they both had been in operation for a number of years. However, some staff expressed difficulty in accomplishing goals with their clients within the 6-month timeframe allotted for the aftercare services. Furthermore, there were difficulties at OIC in *round-the-clock* staffing and meeting emergencies since flextime and/or staggered work hours were *not part of policy at OIC*.

◆ Did the aftercare services meet the needs of the delinquent offenders?

There is a mixture of evidence that can be utilized to address this question. Clearly, there were some services delivered to the juveniles to overcome or moderate the risk factors that characterized these juveniles. Family counseling, school enrollment, job readiness classes and job hunting, drug and alcohol treatment, and social and recreational activities were services described by the aftercare agencies. There was also contact with the juveniles and their families.

What was not clear was the level and intensity of these services. The number of contacts over the aftercare period was less than expected and for many of the services noted above, there was inconsistent documentation (much of it missing) that any of these services were part of the aftercare plan for particular cases. These key data areas were not consistently documented in the records in either of the aftercare service providers:

- ✓ Case manager-client contacts
- ✓ Dates of first pre- and post-release contacts
- ✓ Dates of referral to aftercare (institutional phase), aftercare admission and discharge (community phase)
- ✓ Details of pre-release contacts with youth
- ✓ Extent of pre-release planning completed before release
- ✓ Information about a client's home setting and family situation
- ✓ Drug and alcohol monitoring/violations/treatment
- ✓ Clients' prosocial goals and their success in achieving these goals

Annual reports from OIC-YAPP state that client case files, included, but [were] not limited to, counseling notes, treatment plans, referral forms, monthly summaries, discharge summaries, school information, and home visit reports., In fact, it was rare to find a file with all of these documents. Particularly uncommon were counseling notes, monthly summaries, and school information. For Abraxas NRC, approximately two-thirds of the case files could not even be located, which greatly reduced our ability to draw any valid conclusions about the delivery of service to the sample of juveniles included in this research.

Given this documentation problem, our assessment as to whether or not the aftercare services were meeting the needs of their clients is equivocal. If the services were being delivered according to the needs of the juveniles, there is not evidence that this occurred, either because the services were not actually delivered or because their delivery was not documented. Either way, this represents a problem for the aftercare agencies.

◆ **Were the operating environments, as well as the network of supporting/referring services within the communities favorable for implementation?**

Obviously, there were problems in the internal operating environment at Abraxas NRC, but it was a problem that the organization recognized and took steps to correct through their internal audit and restructuring. Interpersonal problems among staff and staff performance were issues leading to the action by the Abraxas headquarters. No obvious and as severe internal problems existed at OIC-YAPP.

The network of supporting services was mostly favorable for both agencies. And staff interviews revealed relative satisfaction with the network of services, with only a few exceptions. For OIC-YAPP there were some problems in getting juveniles enrolled in school, particularly if they were released from placement in the middle of a school term. In other cases, working with particular institutions was difficult. Also, finding employers and/or employment agencies willing to work with these juveniles was difficult, according to some staff at both aftercare agencies.

◆ **Were there problems with planning and implementing the aftercare services?**

As already discussed above, the major problem for both of these agencies was related to the actual delivery of services and/or proper documentation that the services were delivered. Program models were appropriate and annual reports seemed to indicate compliance with requirements; however, the actual documentation was lacking.

In addition to this, case managers were asked about the referrals they get and if they consider any to be inappropriate. For OIC-YAPP, the sex offender was one type of juvenile that they could not handle. For Abraxas NRC it was the 18-19 year old and clients with mental health problems who were not served well. There seemed to be a consensus within both aftercare agencies that the motivated client was best served and they could have the greatest impact when the motivational level was high. So, to the extent that each of these programs had inappropriate referrals and/or unmotivated clients, they had difficulties in being effective in the delivery of the aftercare services.

◆ **Were the standard operating rules and routines that regulated the flow of work and linked various work roles congruent or in conflict with the program of aftercare services?**

Operating rules should have specific guidelines for case file documentation and include routines for spot checking their completeness. Since both aftercare programs had problems in this area, this indicates a lack of standard operating rules and routines to regulate the work of aftercare case managers and/or lack of monitoring of this requirement.

Evidence of other operational procedures that were in conflict with the program of aftercare services is detailed in the internal audit of Abraxas NRC. Problems with the project director's supervisory ability and the internal conflicts it caused led to extreme measures on the part of Abraxas headquarters. This internal audit and subsequent corrective action is to the agency's credit. Unfortunately it was too late for the group of juveniles who were included in our sample.

◆ **Were the communication flows between the project staff and participants adequate?**

The evidence for this is based primarily on the input from project staff, since we were unable to interview any of the juveniles from our targeted sample of youths incarcerated during 1995.

Staff generally reported a good rapport with the juveniles, but a few mentioned some problems with *difficult clients*.

3.2 *OUTCOMES EVALUATION*

In this section the impact of different placement and aftercare experiences on the post-release adjustment of the juvenile groups in the study is addressed. As previously discussed, the outcomes of chief concern are:

- ◆ ***Reduced recidivism:*** i.e., a reduced propensity to become reinvolved with the juvenile justice or criminal justice system.
- ◆ ***Prosocial behavioral changes:*** e.g., avoiding delinquent peers, completing school, finding work, refraining from drug and alcohol use.

Results of the outcome measurements for all the juvenile samples are presented, along with a comparative analysis for groups by type of institutional placement (public versus private), type of aftercare received (public versus private), and county. However, before turning to the outcome data, it is important to examine information on the backgrounds of the juveniles included in our samples. Since background characteristics and/or risk factors can play a key role in explaining outcomes, we need to know the extent to which these factors varied across the groups we are comparing.

The factors discussed below cover aspects of a juvenile's:

- ◆ ***Demographic background:*** sex and race.
- ◆ ***Delinquent history:*** age at first arrest, prior arrests, prior convictions, prior placements and age at first placement.
- ◆ ***Social problems:*** family, school, and D&A problems.
- ◆ ***Sample placement variables:*** sample placement is first placement, age at sample placement, length of sample placement, age at release from sample placement, and institutional problems.

If, on the one hand, it is found that our groups are essentially comparable in terms of these factors, then one can be reasonably confident in attributing any differences in outcomes to the effects of placement and aftercare. If, on the other hand, significant group differences are found for any of these factors then these differences will have to be taken into account when comparing outcomes for the different

juvenile groups. Statistical techniques will allow us to control for the effects of these factors when assessing the impact of placement and aftercare on outcomes.

3.2.1 Demographic Characteristics and Risk Factor Comparisons: Philadelphia and Allegheny County

The demographic characteristics and risk factor data for our three samples in Philadelphia County are described in Table 3.19, while the same information is found in Table 3.20 for Allegheny County and in Table 3.21 for the other seven control counties. All data presented in these tables were derived from family court juvenile files.

In addition to the race and sex of the juveniles, these data consist of the juveniles' criminal history and social history. The *criminal history* includes a number of measures that refer to a juvenile's prior contact with the juvenile justice system. Greater risk of recidivism is associated with early age of first arrest and placement and a higher number of prior arrests, convictions and placements. The *social history* includes three indexes: problems with family life, schooling, and substance abuse. For each index, scores at the low end of the range indicate few and/or minor problems in a particular area, while scores at the high end of the range indicate multiple and/or serious problems. The family problem index has a range from 8 to 24, the school problem index ranges from 6 to 12, and the drug and alcohol problem index ranges from 3 to 9. (See Appendix C for the items composing each of these indexes.) Finally, we examine a set of variables that characterize the sample placement: age upon entering the sample placement, length of incarceration, and adjustment while in the sample placement.

Within Philadelphia and Allegheny, two types of comparisons are of interest.

- ◆ Comparisons between juveniles with the *same type of placement* (i.e., the public YDCs/YFCs), but who received *different types of aftercare* (i.e., either intensive aftercare from one of the contracted service providers versus direct aftercare through probation departments). This represents a comparison of Group 1 and Group 2 in Philadelphia and Group 4 and Group 5 in Allegheny.
- ◆ Comparisons between juveniles with *different types of placement* (i.e., YDCs/YFCs versus private institutions), but who received the *same type of aftercare* (i.e., direct aftercare through probation departments). This means a comparison of Group 2 and Group 3 in Philadelphia and Group 5 and Group 6 in Allegheny.

Same placement/different aftercare comparisons. Only a few significant differences were found between groups of juveniles who were coming from the same type of placement (public) and who received different types of aftercare (Groups 1 and 2 in Philadelphia, and Groups 4 and 5 in Allegheny). Therefore, the primary *experimental group* and *control group* in both Philadelphia and Allegheny counties are fairly similar. These differences (for age at first arrest, age at first placement,

and in Philadelphia, the family problem index) and the significance of them are described below.²²

Different placement/same aftercare comparisons. On the other hand, there were greater differences between juvenile groups who came from different types of placements (public vs. private) and received the same type of aftercare (public). This represents a comparison between Groups 2 and 3 in Philadelphia, and Groups 5 and 6 in Allegheny. Overall, it appears that the juveniles coming out of private placements are not as entrenched in the juvenile justice system (they have fewer prior arrests, prior convictions, and prior placements) and this sample placement (in a private institution) is their first placement. Their drug and alcohol problems are not as severe; however, they are also, on the average, a full year younger than the juveniles coming out of public placements.

More specifically, the following describes the comparative analysis of these demographic, criminal history, social history, and sample placement variables for the *experimental* and two *control* groups within both Philadelphia and Allegheny County.

- ◆ ***Race/Ethnicity.*** In both Philadelphia and Allegheny, the majority of the juveniles are black. Furthermore, Latinos represent the second largest racial group in Philadelphia, while in Allegheny the second largest group consists of whites. However, in Allegheny there were fewer whites in the *experimental group* (19.4 percent) than in either of the *control groups* (Group 5 = 32.8 percent and Group 6 = 39.3 percent).
- ◆ ***Sex.*** By far, males represent the largest percentage of youth committed to institutional placement and released to aftercare in both Philadelphia and Allegheny counties. However, the Allegheny *experimental group* does have approximately 10 percent fewer males (83.3 percent) than does either *control group* (Group 5 = 94.8 percent and Group 6 = 92.9 percent).
- ◆ ***Age at First Arrest.*** In both Philadelphia and Allegheny there is a statistically significant difference in the age at first arrest; the *experimental groups* in both counties are on the average younger when

²² It is worth noting that even in a classical experimental design where researchers are able to randomly pre-assign subjects to groups before administering the treatment, at least a few differences are likely to remain between the groups. Obviously, juveniles in the present study could not be randomly pre-assigned to groups, so the researchers had no way of controlling for group differences. Thus, we should not be surprised to find at least some differences between the juvenile groups. The present research randomly sampled from populations of juveniles already assigned to a particular type of placement and aftercare. These differences are important not only because they help to account for differences in recidivism outcomes but also because they may point to certain (perhaps unintended) biases in how the juvenile justice system in Pennsylvania sorts juvenile offenders into different placement and aftercare pathways.

first arrested than are the *control groups*. This is indicative of *experimental groups* that are more at risk. Furthermore, in comparing the Philadelphia samples with those of Allegheny, we see that the Allegheny juveniles are being arrested for the first time at a younger age (Allegheny = 12.9 years compared to Philadelphia = 13.4 years for the *experimental groups*; Allegheny = 13.7 and 13.3 years compared to Philadelphia = 14 and 14.3 years for the *control groups*)

- ◆ **Prior Arrests.** There are no significant differences in the number of prior arrests when we compare the *experimental group* with the first *control group* either within Philadelphia or Allegheny county. However, comparisons between the two control groups do reveal significant differences. The private placement juveniles in both counties have fewer prior arrests than do the public placement juveniles. (In Philadelphia Group 2 = 4.2 compared to Group 3 = 2.8; in Allegheny Group 5 = 5.3 compared to Group 6 = 3.9.) Furthermore, the number of prior arrests for the three groups in Allegheny is, on the average, greater than the number of prior arrests for their comparative groups in Philadelphia. The Philadelphia groups had approximately one less prior arrest than their comparable groups in Allegheny.

- ◆ **Prior Convictions.** The number of prior convictions was not significantly different when we compare the *experimental groups* with the first of the two *control groups* within the two counties. But similar to the pattern for prior arrests, when we compare the two *control groups*, we see that the private placement juveniles have significantly fewer prior convictions than the public placement juveniles do. (In Philadelphia Group 2 = 3.0 compared to Group 3 = 2.4; in Allegheny Group 5 = 4.0 compared to Group 6 = 3.3.) Furthermore, we see that within Allegheny County the juveniles in the three groups have 1+ prior convictions over and above their comparable group in Philadelphia.

Table 3.19 Profile of the Three Philadelphia Samples

	Group 1 (experimental)	Group 2 (control)	Group 3 (control)
Placement	Public	Public	Private
Aftercare	Private	Public	Public
N	89	85	88
Demographic Variables			
Race/Ethnicity (%)			
White	6.7	5.9	6.9
Black	78.7	77.6	81.6
Latino	13.5	15.3	10.3
Other	1.1	1.2	1.2

Sex (% male)	96.6	97.6	96.6
Criminal History Variables (mean)			
Age at First Arrest ¹	13.4	14.0	14.3
Prior Arrests ²	4.3	4.2	2.8
Prior Convictions ³	3.0	3.0	2.4
Prior Placements ⁴	1.0	0.8	0.2
Age at First Placement ⁵	14.9	15.5	15.3
Social History Variables (mean score)			
Family Problem Index ⁶ (index range: 8-24)	13.9	11.8	11.4
School Problem Index (index range: 6-12)	10.0	10.0	9.8
D&A Problem Index ⁷ (index range: 3-9)	5.6	5.2	4.1

¹ Group 1 versus Group 2: $t = -2.33, p < .05$

² Group 2 versus Group 3: $t = 5.03, p < .001$

³ Group 2 versus Group 3: $t = 2.59, p < .05$

⁴ Group 2 versus Group 3: $t = 5.42, p < .001$

⁵ Group 1 versus Group 2: $t = -2.71, p < .01$

⁶ Group 1 versus Group 2: $t = 3.92, p < .001$

⁷ Group 2 versus Group 3: $t = 3.91, p < .001$

Table 3.19 (Continued)

	Group 1 (experimental)	Group 2 (control)	Group 3 (control)
Placement Aftercare	Public Private	Public Public	Private Public
Sample Placement Related Variables (mean)			
Sample Placement is First Placement (% Yes) ⁸	40.4%	45.2%	81.8%
Age at Sample Placement ⁹	16.0	16.5	15.6
Length of Sample Placement (months) ¹⁰	9.5	8.4	12.0

Age at Release from Sample Placement	16.8	17.2	16.6
Institutional Problem Index (index range: 3-9)	4.6	4.3	4.4

⁸ Group 2 versus Group 3: $\chi^2 = 24.9, p < .001$

⁹ Group 1 versus Group 2: $t = 2.60, p < .05$ Group 2 versus Group 3: $t = 4.61, p < .01$

¹⁰ Group 2 versus Group 3: $t = -5.78, p < .001$

- ◆ **Prior Placements.** There are no significant differences in the number of prior placements either within Philadelphia or Allegheny counties when we compare the *experimental groups* with the first of the two *control groups*. However, when we compare the two *control groups*, we see that the private placement juveniles have significantly fewer prior placements than their comparable public placement juveniles do. (In Philadelphia Group 2 = 0.8 compared to Group 3 = 0.2; in Allegheny Group 5 = 1.5 compared to Group 6 = 0.5.) Allegheny County has juveniles who average more prior placements (1.5) than do the juveniles from Philadelphia, who average less than one.
- ◆ **Age at First Placement.** There was a statistically significant difference for the age at first placement. Both in Philadelphia and Allegheny counties, the *experimental groups* were younger than the two *control groups*. Furthermore, the Allegheny County juveniles in all three groups were, on the average, younger than the comparable Philadelphia group when they entered their first placement.
- ◆ **Family Problems.** Only in Philadelphia County did we see that the *experimental group* experienced significantly more family problems than did the *control group* (Group 1 = 13.9 vs. Group 2 = 11.8). There was no significant difference found in Allegheny County (Group 4 = 13.7 vs. Group 5 = 14.3). However, we also see an opposite pattern in Philadelphia compared to Allegheny. In Allegheny, the *experimental group* experienced fewer family problems when compared to the *control group* (although the difference is not statistically significant). In Philadelphia, it was the *experimental group* who experienced more family problems. This is the first time the Allegheny *experimental group* appeared to be at less risk than their *control group*.
- ◆ **School Problems.** There were no significant differences in the experience of school problems, either within the two counties or when we compare the two counties. For all sample groups, the school problem index average score was around 10 (on a scale 6-12).
- ◆ **D&A Problems.** There were no significant differences in the level of drug and alcohol problems when we compare the *experimental groups* with the first of two *control groups* in both counties. On the other hand, the private placement juveniles experienced fewer D&A problems than their counterparts who were committed to public placements (In Philadelphia Group 2 = 5.2 compared to Group 3 = 4.1; in Allegheny Group 5 = 6.1 compared to Group 6 = 4.9.)

Furthermore, as with the family problem index this is another instance where the Allegheny *experimental group* appeared to be at less risk than their comparable *control group*. The Allegheny *experimental group* (D&A index = 5.6) experienced fewer D&A problems when compared to the *control group* (D&A index = 6.1).

- ◆ **Sample Placement is First Placement.** The private placement juveniles (Group 3 and Group 6) are far more likely to have this sample placement as their first placement. In Philadelphia, 81.8 percent of the private placement juveniles compared to around 40+ percent for the public placement juveniles indicate this sample placement is their first; in Allegheny, the comparison is 64.3 percent vs. approximately 30 percent.
- ◆ **Age at Sample Placement.** Consistent with above, the private placement juveniles are younger than their comparable public placement groups, as indicated by their age at sample placement (just over 15 years for private placement juveniles compared to 16+ for public placement juveniles).
- ◆ **Length of Sample Placement.** The length of the sample placement varied significantly across the three groups within Philadelphia County (Group 1 = 9.5 months; Group 2 = 8.4 months; Group 3 = 12 months). In Allegheny County the length of sample placement was quite similar across the three groups—9+ months.
- ◆ **Age at Release from Sample Placement.** Consistent with the age at sample placement and length of sample placement, the average age at release varies across the three groups within each county (but the differences are not statistically significant). However, we also see that, on the average, the *experimental groups* in both Philadelphia and Allegheny are approximately a half-year younger than their counterparts in public placement/public aftercare.

Table 3.20 Profile of the Three Allegheny Samples

	Group 4 (experimental)	Group 5 (control)	Group 6 (control)
Placement	Public	Public	Private
Aftercare	Private	Public	Public
N	72	58	84
Demographic Variables			
Race/Ethnicity (%)			
White	19.4	32.8	39.3
Black	75.0	63.8	60.7
Latino	1.4	3.4	0.0
Other	4.2	0.0	0.0

Sex (% male)	83.3	94.8	92.9
Criminal History Variables (mean)			
Age at First Arrest ¹	12.9	13.7	13.3
Prior Arrests ²	5.8	5.3	3.9
Prior Convictions ³	4.5	4.0	3.3
Prior Placements ⁴	1.5	1.5	0.5
Age at First Placement ⁵	14.5	15.2	14.7
Social History Variables (mean score)			
Family Problem Index (index range: 8-24)	13.7	14.3	13.5
School Problem Index (index range: 6-12)	9.9	9.6	9.3
D&A Problem Index ⁶ (index range: 3-9)	5.6	6.1	4.9

¹ Group 4 versus Group 5: $t = -2.58, p < .05$

² Group 5 versus Group 6: $t = 3.28, p < .01$

³ Group 5 versus Group 6: $t = 2.20, p < .05$

⁴ Group 5 versus Group 6: $t = 4.67, p < .001$

⁵ Group 4 versus Group 5: $t = -2.39, p < .05$

⁶ Group 5 versus Group 6: $t = 3.09, p < .01$

Table 3.20 (Continued)

	Group 4 (experimental)	Group 5 (control)	Group 6 (control)
Placement Aftercare	Public Private	Public Public	Private Public
Sample Placement Related Variables (mean)			
Sample Placement is First Placement (% Yes) ⁷	31.9%	31.0%	64.3%
Age at Sample Placement ⁸	16.0	16.5	15.2
Length of Sample Placement (months)	9.0	9.0	9.9
Age at Release from Sample Placement	16.8	17.3	16.0
Institutional Problem Index (index range: 3-9)	4.2	4.0	4.3

⁷ Group 5 versus Group 6: $\chi^2 = 15.2, p < .001$

⁸ Group 4 versus Group 5: $t = -2.75, p < .01$ Group 5 versus Group 6: $t = 5.86, p < .001$

◆ ***Institutional Problems.*** The number of institutional problems did not vary significantly across the three groups within both Philadelphia and Allegheny counties.

Summing up the results reported in Tables 3.19 and 3.20, we observe strikingly similar patterns of statistically significant differences in both Philadelphia and Allegheny counties. In considering the criminal history variables, we see that for the experimental group and the first control group (Group 1 versus Group 2 in Philadelphia, and Group 4 versus Group 5 in Allegheny), the age at first arrest and age at first placement are significantly lower for the experimental group than for the first control group. We also see that in both counties, experimental group juveniles have the same or slightly more prior arrests, convictions and placements than juveniles in the first control group, but these differences are not statistically significant. Looking at these same criminal history variables for the pairs of control groups in both counties (all of whom received public aftercare), we also see that juveniles who were committed to public placement had significantly more prior arrests, convictions, and placements than juveniles who were committed to private placement facilities. In both counties, juveniles committed to public placement also tended to have a slightly earlier age at first arrest and first placement, but the differences were not significant.

Turning to the social history variables, we see that there were few significant differences among the juvenile groups in either county. In Philadelphia, experimental group juveniles tended to score higher on all three problem indexes, but the only significant difference was in the area of family life. In Allegheny, there were no significant differences between the experimental group and the first control group for any of these indexes. Comparing the pairs of control groups, in both counties the juveniles committed to public placement scored significantly higher on the drug and alcohol problem index.

Finally, looking at the variables related to the sample placement for Philadelphia and Allegheny, we see that juveniles committed to private placement were about twice as likely as other juveniles to have had no placement prior to the sample placement. We also see that in both counties, juveniles in the experimental group were significantly older than juveniles in the first control group upon arrival at the sample placement, and that control group juveniles committed to public placement were also significantly older than control group juveniles committed to private placement. No significant differences were found between the groups in terms of adjustment in the sample placement.

3.2.2 Demographic Characteristics and Risk Factor Comparisons: The Seven Counties

In addition to comparing the demographic and risk factors characteristics of our juvenile groups from Philadelphia and Allegheny counties, we also make similar comparisons among our juvenile samples from the seven control counties (Berks, Buck, Dauphin, Lancaster and Lehigh counties).²³ In this case, all of the sample groups in the seven counties came from the same type of placement (public) and were released to the same type of aftercare (public). In that respect, these seven groups are most similar with Philadelphia Group 2 and Allegheny Group 5. Table 3.21 reports demographic and risk factor characteristics for the seven juvenile groups.

- ◆ ***Race/Ethnicity.*** There is considerable variation in the mix of racial/ethnic groups across the seven counties. However, one of the most striking differences between the two large counties (Philadelphia and Allegheny) and the five smaller counties is in the proportion of Black juveniles. In both of the large counties blacks comprise a majority, while in all but one control county (Dauphin), they do

²³ Analysis of variance shows statistically significant variation across the seven juvenile groups for all five criminal history variables. A companion table located in the Appendix D of this report lists the F or chi-square values for these and other variables in Table 3.21. Another companion table in the appendix also reports all statistically significant county-by-county comparisons for each variable.

Table 3.21
Profile of the Seven Samples of Juveniles Released from Public Placement to Public Aftercare
All Counties

	Philadelphia (Group 2)	Allegheny (Group 5)	Berks (all)	Bucks (all)	Dauphin (all)	Lancaster (all)	Lehigh (all)
N	85	58	40	55	26	35	31
Demographic Variables							
Race/Ethnicity (%)							
White	5.9	32.8	25.0	60.0	19.2	31.4	16.1
Black	77.6	63.8	17.5	29.1	80.8	20.0	25.8
Latino	15.3	3.4	52.5	3.6	0.0	48.6	58.1
Other	1.2	0.0	5.0	7.3	0.0	0.0	0.0
Sex (% male)	97.6	94.8	95.0	96.4	100.0	94.3	90.3
Criminal History Variables (mean)							
Age at First Arrest *	14.0	13.7	14.3	14.2	12.5	13.6	13.9
Prior Arrests *	4.2	5.3	5.7	3.2	4.5	5.2	4.9
Prior Convictions *	3.0	4.0	4.8	2.5	4.1	3.8	3.8
Prior Placements *	0.8	1.5	1.4	0.3	1.4	0.9	1.0
Age at First Placement *	15.5	15.2	15.5	15.8	13.8	14.6	15.5

* Analysis of variance for this variable shows significant differences among the counties. See appendix for details.

Table 3.21 (Continued)

	Philadelphia (Group 2)	Allegheny (Group 5)	Berks (all)	Bucks (all)	Dauphin (all)	Lancaster (all)	Lehigh (all)
Social History Variables (mean score)							
Family Problem Index * (index range: 8-24)	11.8	14.3	12.5	11.4	13.9	14.0	14.7
School Problem Index * (index range: 6-12)	10.0	9.6	10.2	8.8	10.2	9.9	10.2
D&A Problem Index (index range: 3-9)	5.2	6.1	6.1	5.7	6.5	6.1	6.0
Sample Placement Related Variables (mean)							
Sample Placement is First Placement (% Yes) **	45.2%	31.0%	40.0%	85.5%	34.6%	46.7%	60.0%
Age at Sample Placement *	16.5	16.5	16.5	16.2	15.4	15.5	16.0
Length of Sample Placement (months) *	8.4	9.0	5.3	3.3	9.1	7.5	5.1
Age at Release from Sample Placement*	17.2	17.3	16.9	16.5	16.1	16.1	16.4
Institutional Problem * Index (index range: 3-9)	4.6	4.0	4.5	3.7	5.0	4.2	3.6

* Analysis of variance for this variable shows significant differences among the counties. See appendix for details.

**Chi-square analysis for this variable shows significant differences among the counties. See appendix for details

not. White juveniles make up the bulk of sample subjects in Bucks County. In Berks, Lancaster, and Lehigh, the majority is Latino.

- ◆ **Sex.** There is little variation among the seven groups in terms of sex composition, which exceeds 90 percent male in all cases.
- ◆ **Age at First Arrest.** The mean age at first arrest ranges from 12.5 years in Dauphin to 14.3 years in Berks. The low age at first arrest in Dauphin differentiates this county from the others, where the mean age at first arrest is generally above 13.5 years; this may indicate a higher risk of recidivism for the Dauphin sample.²⁴ According to this factor, the lowest risk of recidivism was for Berks juveniles. The Dauphin figure is statistically significant (i.e., lower) compared with Philadelphia, Berks, and Bucks
- ◆ **Prior Arrests.** The mean number of prior arrests ranges from 3.2 in Bucks to 5.7 in Berks. According to the number of prior arrests, juveniles in the Bucks sample have the lowest risk of recidivism while Berks juveniles have the highest risk. The figure for prior arrests in the Bucks sample is statistically significant (i.e., lower) compared with the samples from Allegheny, Berks, Lancaster, and Lehigh.
- ◆ **Prior Convictions.** The mean number of prior convictions ranges from 2.5 in Bucks to 4.8 in Berks. These data suggest a relatively low risk of recidivism for the Bucks sample and a relatively high risk for the Berks sample. The mean number of prior convictions in the Bucks sample is statistically significant (i.e., lower) compared with all other counties except Philadelphia.
- ◆ **Prior Placements.** The mean number of institutional placements prior to the sample placement ranges from 0.3 in Bucks to 1.5 in Allegheny. The variable indicates a relatively low risk of recidivism for the Bucks sample, while it indicates the highest risk for the Allegheny sample. The mean number of prior placements in the Bucks sample is statistically significant (i.e., lower) compared with Philadelphia, Allegheny, Berks, and Dauphin.
- ◆ **Age at First Placement.** The mean age at first institutional placement ranges from 13.8 years in Dauphin to 15.8 in Bucks. The Dauphin age figure is substantially lower than for the other counties. In most other counties the age at first placement is above 15 years. According to this variable, the Bucks sample has the lowest risk of recidivism, while the Dauphin sample has the highest risk. The mean age at first arrest for the Bucks sample is statistically significant (i.e., lower) compared with all other counties except Lancaster.
- ◆ **Family Problems.** This index has a possible range of 8 to 24. The mean score on the family problem index ranges from 11.4 in Bucks to 14.7 in Lehigh. According to this index, the Bucks sample again has the lowest recidivism risk, while the

²⁴ However, it is important to remember that no single risk factor can reliably predict recidivism.

Lehigh sample has the highest risk. The mean score of the Bucks sample on the family problem index is statistically significant (i.e., lower) compared with Allegheny, Dauphin, Lancaster, and Lehigh. The Philadelphia sample also has a low mean score on the family problem index (11.8). They differ significantly from Allegheny, Lancaster, and Lehigh.

- ◆ ***School Problems.*** This index has a possible range of 6-12. The mean score on the school problem index ranges from 8.8 in Bucks to 10.2 in Berks, Dauphin, and Lehigh. According to this index, the Bucks sample had the lowest recidivism risk, while the Berks, Dauphin and Lehigh samples have the highest risk. The mean score of the Bucks sample on the school problem index is statistically significant (i.e., lower) compared with Philadelphia, Berks, Dauphin, and Lehigh.
- ◆ ***D&A Problems.*** This index has a possible range of 3-9. This index ranges from 5.2 in Philadelphia to 6.5 in Dauphin. According to this index, the Philadelphia sample had the lowest recidivism risk, while the Dauphin sample had the highest risk. The drug and alcohol problem index is the only variable in Table 3.22 for which there were no statistically significant differences among the seven counties.
- ◆ ***Sample Placement is First Placement.*** The proportion of juveniles in each sample for whom the sample placement was also the first placement varied greatly across the seven counties. The variable ranges from 31.0 percent in Allegheny to 85.5 percent in Bucks. More than half of the juveniles from Philadelphia, Allegheny, Berks, Dauphin and Lancaster had at least one prior placement, indicating groups of juveniles that are more entrenched in the juvenile justice system. Most of the sample juveniles from Bucks and Lehigh had no prior placement, suggesting groups of juveniles less entrenched.
- ◆ ***Age at Sample Placement.*** The mean age upon entering the sample placement ranges from 15.4 years in Dauphin to 16.5 years in Philadelphia, Allegheny and Berks. The two samples with the lowest mean age at sample placement (Dauphin and Lancaster) differ significantly compared with the samples from Philadelphia, Allegheny and Berks. Furthermore, in both Dauphin and Lancaster the percentage of juveniles for whom this is their first placement is not that high (34.6 percent and 46.7 percent, respectively), which is further indication that these juveniles have a more severe criminal history.
- ◆ ***Length of Sample Placement.*** The mean length of time spent in the sample placement ranges from 3.3 months in Bucks²⁵ to 9.1 months in Dauphin. There was considerable variation in the length of sample placement across the seven counties. The mean length of sample placement for the Bucks sample is statistically significant (i.e., shorter) compared with Philadelphia, Allegheny, Dauphin, and Lancaster. In addition, the mean length of sample placement is significantly shorter for the Berks and Lehigh samples compared with Philadelphia, Allegheny, and Lancaster.

²⁵ Most Bucks sample subjects were committed to short-term placement at Youth Forestry Camp #3.

- ◆ ***Age at Release from Sample Placement.*** Corresponding with the data on age at sample placement and length of sample placement, the age at release ranges from 16.1 years in Dauphin to 17.3 years in Allegheny. What has occurred, however, is that some of the juveniles who entered the sample placement at a younger age (e.g., juveniles in Dauphin), are actually being released from this placement at an age comparable to juveniles in other counties (e.g., Bucks) because of the different length of time in the sample placement.
- ◆ ***Institutional Problems.*** This index measures a juvenile's adjustment in the sample placement. It has a possible range from 3 to 9. The lowest mean scores were 3.6 in Lehigh and 3.7 in Bucks. The highest was 5.0 in Dauphin. According to this index, the Lehigh sample had the lowest risk of recidivism, while the Dauphin sample had the highest risk. The mean score on the institutional problem index is significantly lower for the Lehigh sample compared with Philadelphia, Berks and Dauphin. The mean score on this variable is also significantly higher for the Dauphin sample compared with the Allegheny and Bucks samples. The low scores on the institutional problems for Lehigh and Bucks can be accounted for in part by the relatively brief placement periods for juveniles in these samples.

Summing up the results reported in Table 3.21, we are not surprised to find that there are differences across the seven counties for almost every variable in the table. More interestingly, we observe that some of the juvenile samples from some counties consistently exhibit either a relatively high or low recidivism risk. In particular, the Bucks juveniles tend to have the fewest prior arrests, convictions, and placements. They are also the oldest at first placement and score lowest on the family and school problem indexes. More than 85 percent of Bucks juveniles had no placement prior to the sample placement, and they had the least problems adjusting while in the sample placement. Taken together, all these factors point toward a relatively low recidivism risk for juveniles in the Bucks sample.

At the other end of the spectrum, we see that the Dauphin sample had the highest number of previous placements, and were the youngest group at age of first arrest and first placement. The Dauphin sample also scored highest on the drug and alcohol problem index, and shared high score with Berks and Lehigh on the school problem index. Nearly two-thirds of Dauphin juveniles had at least one placement prior to the sample placement and they tended to have the most difficult adjustment in the sample placement. The Berks sample also scored highest among the seven counties on multiple variables, including prior arrests, convictions and placements, and the school problem index. All these considerations point to a relatively high recidivism risk for juveniles in the Dauphin and Berks samples.

3.2.5 Recidivism : The Impact of Different Types of Aftercare Service

The primary goal of intensive aftercare probation is to reduce the likelihood that parolees will resume their previous delinquent behavior. Information on recidivism is presented in different ways so as to capture different aspects of the concept and to compensate for the shortcomings inherent in any single measure of recidivism. The analysis includes rearrests and reincarcerations from both the juvenile and adult systems.

In this section we compare recidivism outcomes for groups of juveniles in Philadelphia and Allegheny who were committed to public placement facilities (Youth Development Centers and Youth Forestry Camps) for the sample placement, but who differed in the type of aftercare service they received. In Philadelphia, juveniles who received contracted aftercare services from OIC following release from the YDCs/YFCs are designated as Group 1. Their public placement counterparts who received aftercare services directly through probation belong to Group 2. In Allegheny, juveniles who received contracted aftercare services from Abraxas NRC upon release from the YDCs/YFCs fall into Group 4. Their direct aftercare counterparts are in Group 5.

Since the main focus of the evaluation is the contracted aftercare service providers in Philadelphia and Allegheny, the greater part of the analysis that follows is devoted to comparing recidivism outcomes for Group 1 and Group 2 juveniles in Philadelphia and Group 4 and Group 5 juveniles in Allegheny.

Proportion of Subjects Rearrested. Table 3.22 shows the percentage of juveniles who were rearrested at least once during the entire observation period (typically about 18 months). The table presents separate results for Philadelphia and Allegheny, and the comparisons within counties are between public placement releasees who received contracted aftercare services and those who did not. The follow-up period is longer for subjects with earlier sample placement release dates. However, mean follow-up time does not vary significantly across the groups.²⁶ Failure rates are about equal for both groups in Philadelphia. In Allegheny, however, the failure rate for Group 4 juveniles (contracted aftercare) is about 16 percent higher than for juveniles who received direct aftercare services.

²⁴ Philadelphia: Group 1 mean = 18.1 months, Group 2 mean = 19.0 months, $t = -1.20$, ns. Allegheny: Group 4 mean = 17.9 months, Group 5 mean = 17.4 months, $t = 0.36$, ns.

Table 3.22
Proportion of Juvenile Subjects With at Least One Rearrest
Over Entire Observation Period
Contracted Versus Direct Aftercare Services, Public Placement Groups Only

	Philadelphia (N=173)		Allegheny (N=130)	
	Group 1 (Contracted AC)	Group 2 (Direct AC)	Group 4 (Contracted AC)	Group 5 (Direct AC)
Successes (no rearrests)	29 32.6%	29 34.1%	24 33.3%	29 50.0%
Failures (1+ rearrests)	60 68.4%	56 66.9%	48 66.7%	29 50.0%
Total	89	84	72	58

Philadelphia: $\chi^2 = 0.05$, df = 1, ns.

Allegheny: $\chi^2 = 3.70$, df = 1, $p < .10$

Table 3.23 examines a shorter follow-up period (six months) in order to assess recidivism rates while most subjects are still active in some type of aftercare treatment. Six months into the post-release period, most subjects have remained arrest-free. However, in Philadelphia, failure rates are about 9 percent higher for the subjects in contracted aftercare, which suggests that the recidivism rate for these juveniles is actually higher while in aftercare. In Allegheny, failure rates are about 5 percent higher for the juveniles in contracted aftercare, which suggests a stronger tendency to reoffend while in aftercare.

Table 3.23
Proportion of Juvenile Subjects With at Least One Rearrest
Within First Six Months of Release From Sample Placement
Contracted Versus Direct Aftercare Services, Public Placement Groups Only

	Philadelphia (N=174)		Allegheny (N=124)	
	Group 1 (Contracted AC)	Group 2 (Direct AC)	Group 4 (Contracted AC)	Group 5 (Direct AC)
Successes (no rearrests)	55 61.8%	60 70.6%	47 65.3%	39 75.0%
Failures (1+ rearrests)	34 38.2%	25 29.4%	25 34.7%	13 25.0%
Total	89	85	72	52

Philadelphia: $\chi^2 = 1.50$, df = 1, ns.

Allegheny: $\chi^2 = 1.34$, df = 1, ns.

Number of Rearrests. Table 3.24 shows the mean number of rearrests for Philadelphia and Allegheny juveniles in the experimental and control groups for the entire observation period. The table shows that in both counties, the average number of rearrests was slightly higher for juveniles who received contracted aftercare services.

Table 3.24
Mean Number of Rearrests Per Subject Over Entire Observation Period
Contracted Versus Direct Aftercare Services, Public Placement Groups Only

Philadelphia		Allegheny	
<i>Group 1</i> <i>(Contracted AC)</i>	Group 2 (Direct AC)	Group 4 (Contracted AC)	Group 5 (Direct AC)
1.69 (N=89)	1.34 (N=85)	1.64 (N=72)	1.24 (N=58)
t = 1.40, df = 172, ns.		t = 0.99, df = 128, ns.	

A more precise way of counting rearrests is to take into account only time during which a juvenile is in the community and therefore able to reoffend. This *street time* excludes any time a juvenile may have spent in placement during the follow-up period. Table 3.25 compares experimental and control groups in Philadelphia and Allegheny on the mean number of rearrests during the first 12 months of *street time*. As the table shows, even when time in the community is held constant, the rearrest rate is still slightly higher for subjects in the experimental groups.

Table 3.25
Mean Number of Rearrests Per Subject Over 12 Months of "Street Time"
Contracted Versus Direct Aftercare Services, Public Placement Groups Only

Philadelphia		Allegheny	
<i>Group 1</i> <i>(Contracted AC)</i>	Group 2 (Direct AC)	Group 4 (Contracted AC)	Group 5 (Direct AC)
0.91 (N=77)	0.69 (N=75)	0.75 (N=56)	0.61 (N=49)
t = 1.26, df = 150, ns.		t = 0.70, df = 103, ns.	

Seriousness of New Offenses. Another way to look at recidivism is to consider the nature and seriousness of offenses for the subset of subjects within each group who reoffended. The most serious alleged offense following release from public placement is shown in Figure 3.1 and Figure 3.2. For each recidivist, the most serious alleged offense across all his or her rearrests is recorded. Both figures show that, within a

Figure 3.1
Most Serious Offense for Which Recidivists Were Rearrested
Philadelphia Juveniles in Public Placement
Group 1 (Contracted Aftercare) vs. Group 2 (Direct Aftercare)

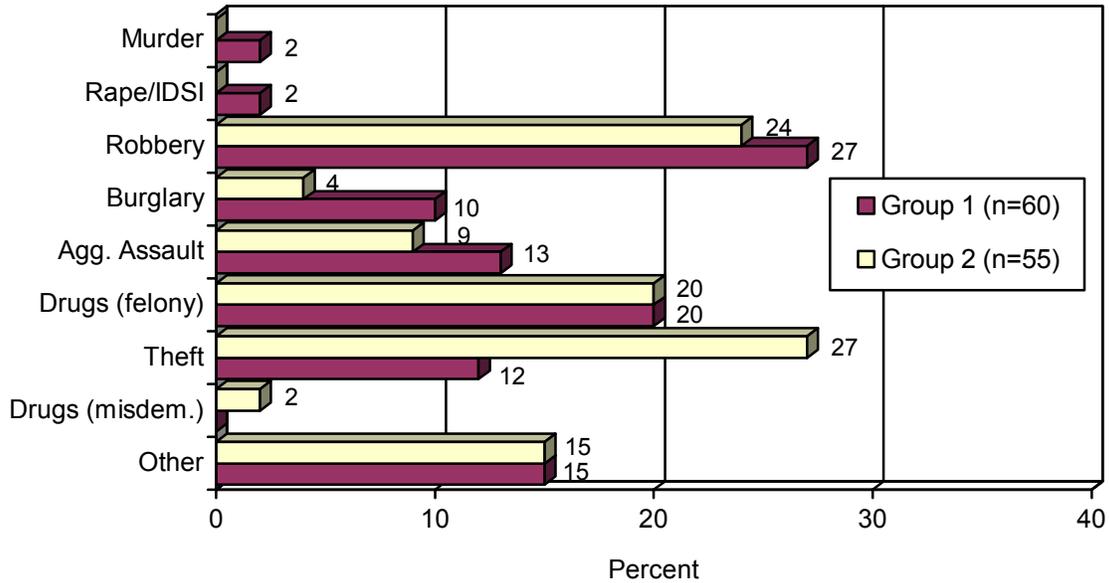
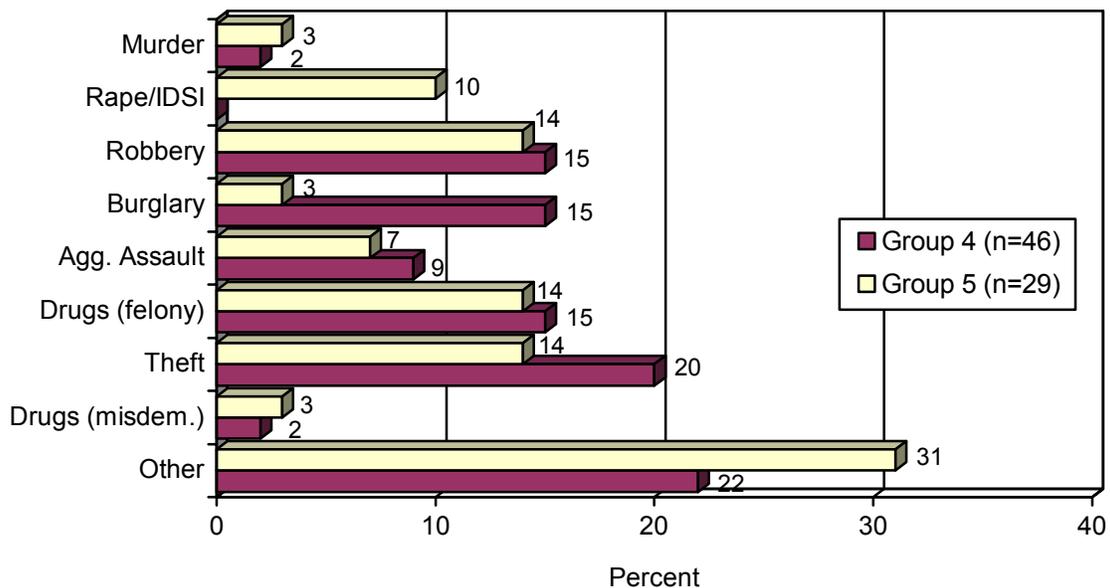


Figure 3.2
Most Serious Offense for Which Recidivists Were Rearrested
Allegheny Juveniles in Public Placement
Group 4 (Contracted Aftercare) vs. Group 5 (Direct Aftercare)



county, recidivists in the experimental group and control group tended to be arrested for similar crimes. However, there were some differences. In Philadelphia, Group 1 recidivists were about half as likely as Group 2 juveniles to be arrested for theft, and were slightly more likely to be arrested for burglary. Burglary is generally considered to be a more serious offense than theft. Figure 3.2 displays information for the experimental group and control group in Allegheny. As in Philadelphia, the subjects in the experimental group (Group 4) were more likely to be arrested for burglary.

Given that the juveniles in these samples are all high-risk offenders, it may be beneficial to restrict the notion of recidivism to new *felony* offenses. This is accomplished by dropping the last two offense categories (misdemeanor drug and *other*) from Figures 3.1 and 3.2. This produces the following recidivism rates.

- ✓ Philadelphia Group 1 = 57.3 percent
- ✓ Philadelphia Group 2 = 54.1 percent
- ✓ Allegheny Group 4 = 48.6 percent
- ✓ Allegheny Group 5 = 32.8 percent

In Philadelphia, felony recidivism rates are only slightly higher for the contracted aftercare group. In Allegheny, however, felony recidivism rates are nearly 16 percent higher for the contracted aftercare group, a significant difference ($\chi^2 = 4.16$, $df = 1$, $p < .05$).

Reincarceration. Another way to analyze distinct components of the concept of recidivism is to examine rates at which juveniles were reincarcerated. This measure raises the recidivism threshold substantially, since it requires that a subject be arrested, found guilty, and committed to juvenile or adult confinement.²⁷ Since the subjects in this study are all high-risk offenders, it is appropriate to consider this more restrictive recidivism standard. One disadvantage of using incarceration as a measure of recidivism is that court processing decisions (e.g., plea bargains) introduce factors that are not necessarily related to actual culpability. One advantage of this measure is that it is less sensitive to the system response effect than arrests. The system response effect refers to the fact that the higher level of surveillance typically associated with intensive aftercare leads to more frequent detection of offenses.²⁸ Thus, all things being equal, arrests will occur more frequently (and sooner) for the subjects in the experimental groups. Another advantage of looking at incarceration, then, is that the chain of court decisions required to incarcerate an offender probably tends to reduce the influence of the system response effect.

²⁷ As in the analysis of rearrests, both juvenile and adult incarcerations are included.

²⁸ In light of the data presented earlier in this chapter on contacts between intensive aftercare case managers and their juvenile clients, it is not clear how important the system response effect is in accounting for higher recidivism rates among juveniles sent to contracted aftercare.

Table 3.26 reports rates of reincarceration 12 months after release from the sample placement for Philadelphia and Allegheny juveniles committed to YDCs/YFCs. In Philadelphia, the incarceration rate for juveniles who received contracted aftercare services was 21 percent, about twice as high as for juveniles who received aftercare directly through probation. In Allegheny, nearly 23 percent of juveniles who received contracted aftercare services were reincarcerated within one year of release. This rate is nearly twice as high as for juveniles whose aftercare was handled directly through probation.

Table 3.26
Proportion of Juvenile Subjects Reincarcerated
Within First Twelve Months of Release From Sample Placement
Contracted Versus Direct Aftercare Services, Public Placement Groups Only

	Philadelphia (N=171)		Allegheny (N=129)	
	Group 1 (Contracted AC)	Group 2 (Direct AC)	Group 4 (Contracted AC)	Group 5 (Direct AC)
Successes (not reincarcerated)	69 79.3%	75 89.3%	55 77.5%	50 86.2%
Failures (reincarcerated)	18 20.7%	9 10.7%	16 22.5%	8 13.8%
Total	87	84	71	58

Philadelphia $\chi^2 = 3.20$, $df = 1$, $p < .10$ Allegheny $\chi^2 = 1.61$, $df = 1$, ns.

Survival Analysis. The last measure of recidivism to be considered is the *time to first rearrest*. A subject is considered to *survive* as long as he or she remains arrest-free. This measure of recidivism seeks to detect the effects of intensive aftercare by taking into account the *timing* of arrests. The follow-up period for this analysis is 12 months from the sample placement release date. About 45 percent of subjects in Philadelphia and Allegheny County remained arrest-free for one year, so the follow-up period ends at the point where about half of subjects reoffended. A longer follow-up period could be employed, but then subjects who were released from placement later than 1996 would not have a full 12 months of follow-up time and would have to be excluded from the analysis. The time frame used allows for retention of about 90 percent of Philadelphia and Allegheny subjects in the analysis (i.e., those released from the sample placement prior to 1997). Subjects survive to the end of the observation period if their first arrest occurred after the twelfth month *or* if they had no new arrests whatsoever (*censored* cases). Survival experience for experimental and control group subjects are graphed in Figure 3.3 (Philadelphia) and Figure 3.4 (Allegheny).

Figure 3.3
Survival Experience (Time to First Arrest)
During the First Twelve Months After Release
Philadelphia Juveniles Released From Public Placement
Experimental Group (1) Versus Control Group (2)

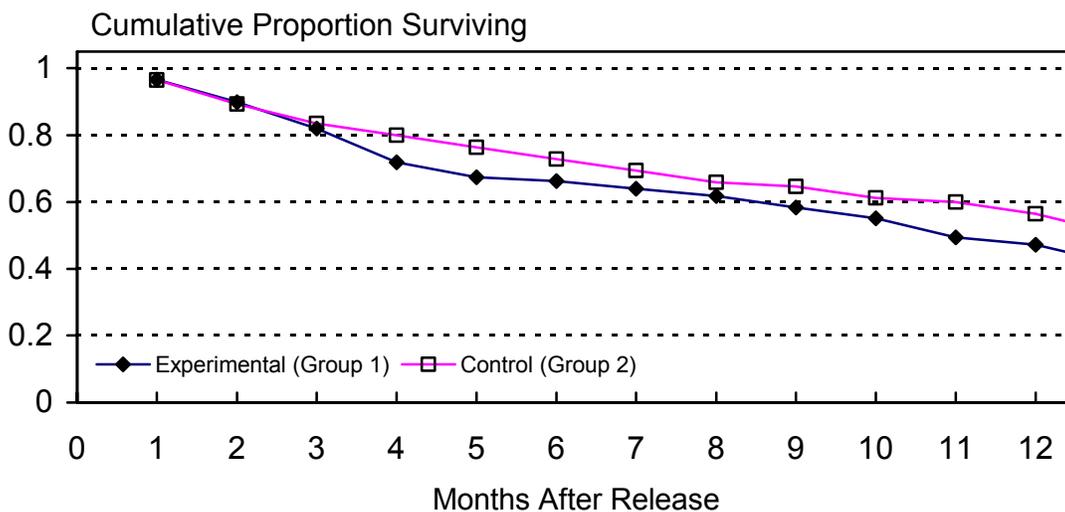
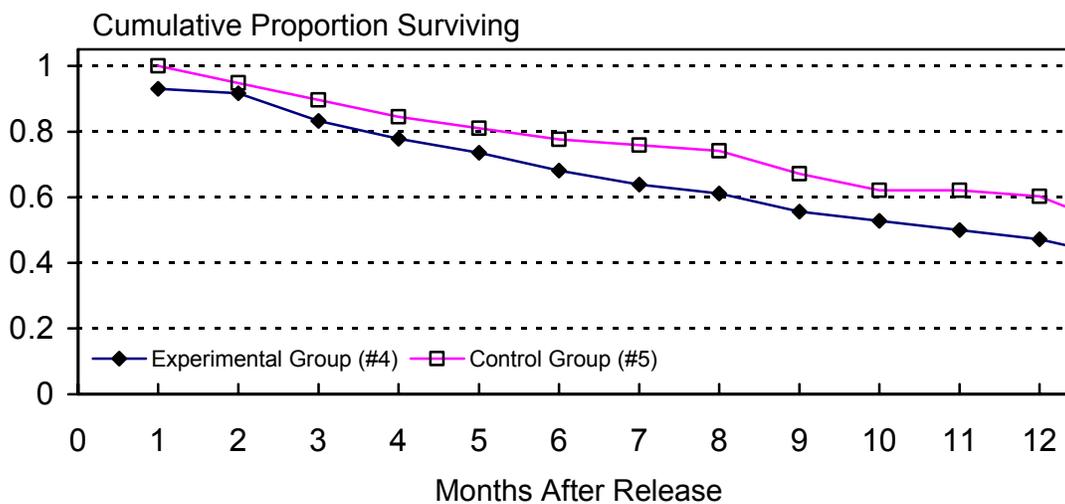


Figure 3.4
Survival Experience (Time to First Arrest)
During the First Twelve Months After Release
Allegheny Juveniles Released From Public Placement
Experimental Group (4) Versus Control Group (5)



As Figure 3.3 shows, the proportion of subjects in the experimental and control groups surviving falls over time. During the first three months, the survival experience for Group 1 (experimental) and Group 2 (control) is nearly identical. After the third month, however, Group 2 begins to outperform Group 1, and this pattern holds fairly steady through the remainder of the observation period. A comparison of the survival curves shows no significant difference in survival experience (Log Rank = 1.30, df = 1, ns.). Figure 3.4 plots the survival curves for Group 4 (experimental) and Group 5 (control) in Allegheny. Again, a similar pattern appears, although Group 5 begins to outperform Group 4 almost from the outset and the distance separating the two curves appears to be greater than was seen in Philadelphia. Also, the control group curve appears to level off at around the tenth month, while the curve for the experimental group continues to fall. Despite these differences, a comparison of the curves does not reveal a statistically significant difference (Log Rank = 1.98, df = 1, ns.).

Correlation Analysis. Up to this point we have compared recidivism outcomes (as measured in various ways) for groups of juveniles according to whether or not they received the contracted aftercare services. Earlier it was noted that these groups also differ significantly on several of the social and criminal risk factors. In the case of Philadelphia juveniles released from public placement, those who received contracted aftercare services were significantly younger at age of first arrest and age of first placement. They also scored higher on the family problem index. In Allegheny, significant differences were found in the age of first placement and age of first arrest. Since these risk factors are also known to correlate with delinquency, it is possible that they are interfering with the analysis of the relationship between aftercare and recidivism. In this section we employ correlation techniques to isolate the relationship between aftercare and recidivism by controlling for the affects of these risk factors. Two of the recidivism measures are examined: time to first rearrest and number of rearrests during the first 12 months of *street time*.

Table 3.27 presents the zero order correlation coefficients for Philadelphia juveniles released from public placement facilities (Group 1 and Group 2). Included in the matrix are a dummy variable to represent type of aftercare (1=contracted, 0=direct), the recidivism variable (months to rearrest), age at first arrest, age at first placement, and family problem index. The analysis is restricted to cases with at least one new arrest.

The only risk factor that correlates significantly with aftercare type is the family problem index, indicating that family problems were more serious for the juveniles who received contracted aftercare services (Group 1). The only other correlation of note is between age at first placement and family problems. This result indicates that juveniles who are older at the time of their first placement tend to have less serious family problems. The correlation between aftercare type and months to rearrest is weak and not significant ($r = -.07$, $p = .45$). The sign of the coefficient indicates that time to rearrest tends to be shorter for juveniles in contracted aftercare. This is in accordance with the results from the survival analysis. However, the relationship is not significant. When the risk factors (items 3-5 in the table) are controlled, the correlation between aftercare type and months to rearrest

does not change appreciably ($r = -.05$, $p = .61$). When the variables in Table 3.27 are analyzed through linear regression, the explained variation in recidivism (measured as months to arrest), is quite small ($R^2 = .01$, ns) and none of the independent variables have significant explanatory power (i.e., the beta coefficients are weak and not significant) vis-à-vis the dependent variable (months to rearrest).²⁹

Table 3.27
Zero Order Correlation Coefficients
Aftercare Type and Months to Rearrest
 Philadelphia Group 1 and Group 2

	[1]	[2]	[3]	[4]	[5]
[1] Aftercare Type	1.00
[2] Months to Rearrest (DV)	-.07	1.00	.	.	.
[3] Age at First Arrest	-.12	.01	1.00	.	.
[4] Age at First Placement	-.15	.08	.70****	1.00	.
[5] Family Problem Index	.35****	.08	-.26***	-.34****	1.00

*** $p < .01$ (two-tailed test)

**** $p < .001$ (two-tailed test)

This analysis can also be performed on the public placement groups from Allegheny County. Here, however, we drop the family problem index because it was not found to differ significantly for the contracted aftercare and direct aftercare groups (Groups 4 and 5, respectively). The zero order correlation coefficients appear in Table 3.28.

All variables have a slight negative correlation with aftercare type, indicating that the juveniles in contracted aftercare are rearrested slightly earlier, and are slightly younger at age of first arrest and placement. None of the independent variables correlates significantly with months to rearrest. As in the previous table, there is a strong and anticipated positive correlation between age at first arrest and age at first placement. When these two risk factors are controlled, the partial correlation between aftercare type and months to rearrest does not change appreciably ($r = -.04$, $p = .71$). When the variables in Table 3.28 are inserted into a regression equation, the explained variation is similar to the results detailed above for Philadelphia ($R^2 = .04$, ns) and no significant beta coefficients. This set of variables does not account for any of the variation in the recidivism measure.

The last recidivism measure we examine is the number of rearrests for 12 months of *street time*. Again, we start with the public placement groups in Philadelphia. The zero order correlation coefficients are presented in Table 3.29.

²⁹ Collinearity diagnostics did not reveal multicollinearity problems for this or any other regression equations discussed in this section.

Table 3.28
Zero Order Correlation Coefficients
Aftercare Type and Months to Rearrest
 Allegheny Group 4 and Group 5

	[1]	[2]	[3]	[4]
[1] Aftercare Type	1.00	.	.	.
[2] Months to Rearrest (DV)	-.06	1.00	.	.
[3] Age at First Arrest	-.07	.10	1.00	.
[4] Age at First Placement	-.07	.20*	.56****	1.00

* $p < .10$ (two-tailed test)

**** $p < .001$ (two-tailed test)

Table 3.29
Zero Order Correlation Coefficients
Aftercare Type and Number of Rearrests for 12 Months of “Street Time”
 Philadelphia Group 1 and Group 2

	[1]	[2]	[3]	[4]	[5]
[1] Aftercare Type	1.00
[2] Rearrests (DV)	.11	1.00	.	.	.
[3] Age at First Arrest	-.09	-.03	1.00	.	.
[4] Age at First Placement	-.13	-.03	.62****	1.00	.
[5] Family Problem Index	.27****	.07	-.18**	-.17**	1.00

** $p < .05$ (two-tailed test)

**** $p < .001$ (two-tailed test)

As with results presented earlier in this section, column one of the table shows that Philadelphia juveniles in contracted aftercare have significantly more serious family problems, and are slightly younger at first arrest and first placement. Neither the type of aftercare received nor the risk factors correlates significantly with the recidivism measure. Rearrests are slightly higher for juveniles who received contracted aftercare services ($r = .11$, $p = .18$). Column 3 of the matrix shows that the two age variables are highly correlated, and that juveniles who get arrested early and reach placement at a relatively early age also tend to have more serious family problems. When we control for the risk factors (items 3-5), the partial correlation between type of aftercare and rearrests does not look much different ($r = .09$, $p = .26$). The regression analysis produces an R^2 of .01 (ns.) and no significant beta coefficients.

Table 3.30 shows zero order correlation coefficients for public placement juveniles in Allegheny. Juveniles in contracted aftercare were slightly younger at age of first arrest and placement. Also, subjects arrested and confined at earlier ages tended to reoffend more frequently during the first 12 months back in the community. Age of first arrest and age of first placement were highly correlated. While it is small and not significant, the positive coefficient for aftercare type and rearrests indicates slightly more rearrests for the juveniles sent to contracted aftercare services. When

the influence of the other two variables is neutralized, the partial correlation between aftercare type and rearrests remains essentially unchanged ($r = .04$, $p = .67$). Inserting the variables into a regression equation produces an R^2 of .04 (ns.). All beta coefficients are weak and not significant.

Table 3.30
Zero Order Correlation Coefficients
Aftercare Type and Number of Rearrests for 12 Months of “Street Time”
Allegheny Group 4 and Group 5

	[1]	[2]	[3]	[4]
[1] Aftercare Type	1.00	.	.	.
[2] Rearrests (DV)	.08	1.00	.	.
[3] Age at First Arrest	-.17*	-.17*	1.00	.
[4] Age at First Placement	-.07	-.17*	.65****	1.00

* $p < .10$ (two-tailed test)

*** $p < .001$ (two-tailed test)

3.2.4 Recidivism: The Impact of Public versus Private Placement

In this section we investigate recidivism outcomes for Philadelphia and Allegheny juveniles who received aftercare services directly through probation. The comparison groups are distinguished by the type of sample placement. In Philadelphia, we compare Group 2 (public placement) with Group 3 (private placement). In Allegheny, the comparison is between Group 5 (public placement) with Group 6 (private placement).

Proportion of Subjects Rearrested. Table 3.31 compares results for groups of juveniles in Philadelphia and Allegheny who received aftercare services directly through probation, but who experienced different types of institutional placement. In Philadelphia, failure rates are about nine percent higher for juveniles committed to public placement. In Allegheny, failure rates are virtually the same for both groups (about 50 percent).

Table 3.32 below examines a shorter follow-up period (six months) in order to view recidivism rates while most subjects are still active in direct aftercare. Six months into the post-release period, most subjects remained arrest-free. In Philadelphia, failure rates are nearly equal, suggesting that recidivism tended to rise over time for public placement releasees. In Allegheny, failure rates are about 9 percent lower for the public placement releasees, again suggesting that recidivism tended to increase over time for the group of public placement releasees.

Table 3.31
Proportion of Juvenile Subjects With at Least One Rearrest
Over Entire Observation Period
Public Versus Private Placement (Control Groups)

	Philadelphia (N=169)		Allegheny (N=142)	
	Group 2 (Public Plcmt.)	Group 3 (Private Plcmt.)	Group 5 (Public Plcmt.)	Group 6 (Private Plcmt.)
Successes (no rearrests)	29 34.1%	38 43.2%	29 50.0%	43 51.2%
Failures (1+ rearrests)	56 66.9%	46 57.8%	29 50.0%	41 49.8%
Total	85	84	58	84

Philadelphia: $\chi^2 = 2.18$, df = 1, ns.

Allegheny: $\chi^2 = 0.00$, df = 1, ns.

Table 3.32
Proportion of Juvenile Subjects With at Least One Rearrest
Within First Six Months of Release From Sample Placement
Public Versus Private Placement (Control Groups)

	Philadelphia (N=173)		Allegheny (N=135)	
	Group 2 (Public Plcmt.)	Group 3 (Private Plcmt.)	Group 5 (Public Plcmt.)	Group 6 (Private Plcmt.)
Successes (no rearrests)	60 70.6%	62 70.5%	39 75.0%	55 66.3%
Failures (1+ rearrests)	25 29.4%	26 29.5%	13 25.0%	28 33.7%
Total	85	88	52	83

Philadelphia $\chi^2 = 0.00$, df = 1, ns.

Allegheny $\chi^2 = 1.15$, df = 1, ns.

Number of Rearrests. Table 3.33 compares the mean number of rearrests over the entire observation period within Philadelphia and Allegheny counties for juveniles committed to public versus private placement. In both counties, juveniles committed to private placement had slightly fewer arrests on average than those committed to YDCs/YFCs. The analysis of risk factors presented earlier in this chapter showed the public placement releasees to be a higher risk group. This may help to account for the higher number of rearrests for Group 2 and Group 5 subjects.

Table 3.33
Mean Number of Rearrests Per Subject Over Entire Observation Period
Public Versus Private Placement (Control Groups)

Philadelphia		Allegheny		
<i>Group</i> <i>(Public Plcmt.)</i>	2	Group 3 (Private Plcmt.)	Group 5 (Public Plcmt.)	Group 6 (Private Plcmt.)
1.36 (N=85)	1.03 (N=88)	1.24 (N=58)	0.90 (N=84)	
t = 1.49, df = 171, ns.		t = 1.28, df = 140, ns.		

Seriousness of New Offenses. The most serious alleged offense following release from public placement is shown in Figures 3.5 and 3.6. For each recidivist, the most serious alleged offense across all his or her rearrests is recorded. Figure 3.5 compares juvenile groups in Philadelphia who received the same type of aftercare (direct) but who differ in the type of sample placement (public versus private). Offense patterns for both Philadelphia groups are similar. However, robbery and theft were more common among Group 2 juveniles, while felony drug offenses were higher for Group 3. In Allegheny (Figure 3.6), felony drug offenses were more common for Group 5, while robbery and aggravated assault were more common for Group 6. There is also a significant difference *between* the counties, as felony drug arrests accounted for a larger proportion of offenses in Philadelphia.

If the scope of the analysis is confined to felony offenses, we get the following recidivism rates for juveniles who received direct aftercare.

- ✓ Philadelphia Group 2 = 54.1 percent
- ✓ Philadelphia Group 3 = 42.0 percent
- ✓ Allegheny Group 5 = 32.8 percent
- ✓ Allegheny Group 6 = 31.0 percent

Felony recidivism rates were generally higher in Philadelphia, where Group 2 had a recidivism rate 12.1% above that of Group 3 ($\chi^2 = 2.51$, $df = 1$, ns.). In Allegheny, felony recidivism rates were about the same for both groups ($\chi^2 = 0.05$, $df = 1$, ns.).

Figure 3.5
Most Serious Offense for Which Recidivists Were Rearrested Philadelphia Juveniles in Direct Aftercare Group 2 (Public Placement) vs. Group 3 (Private Placement)

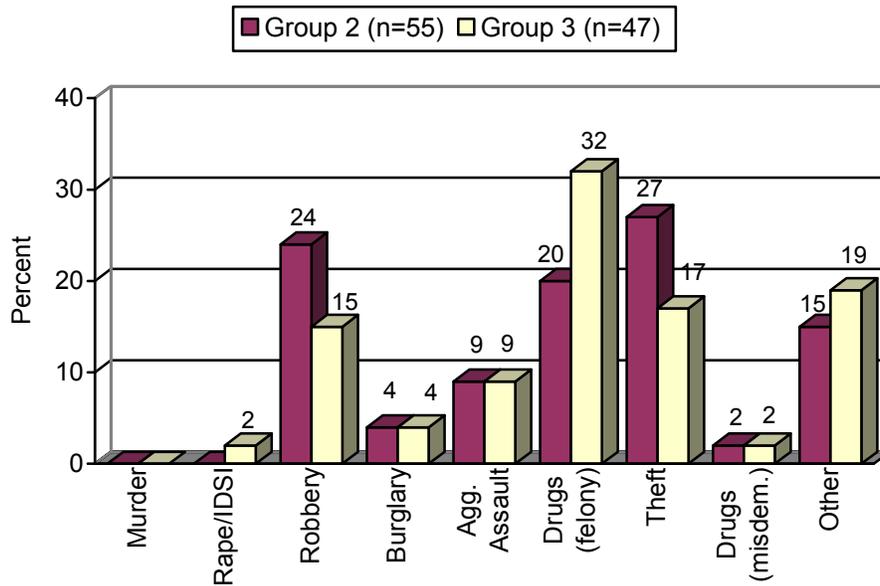
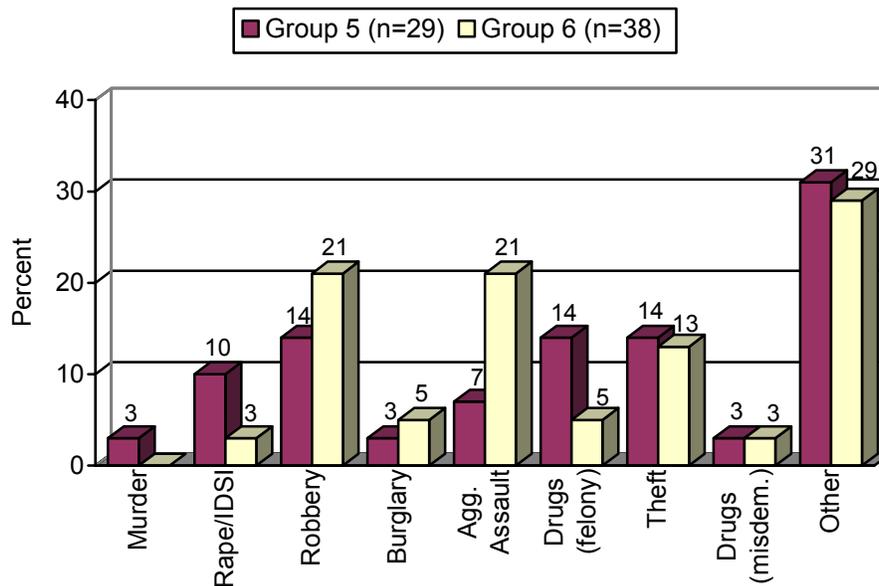


Figure 3.6
Most Serious Offense for Which Recidivists Were Rearrested Allegheny Juveniles in Direct Aftercare Group 5 (Public Placement) vs. Group 6 (Private Placement)



Reincarceration. The more stringent recidivism criterion of reincarceration is considered here. Table 3.34 examines reincarceration rates for juveniles in Philadelphia and Allegheny who received aftercare services directly through probation (12-month follow-up period). In Philadelphia, the rate of incarceration for juveniles released from the YDCs/YFCs was nearly 7 percent lower than for juveniles released from private placement. In Allegheny, the situation was much the same. Fourteen (14) percent of juveniles released from public placement were reincarcerated within a year, compared to 19 percent of juveniles released from private placement. None of these differences is statistically significant. Even though rates of reincarceration are higher for juveniles released from private placement facilities in both counties, their rates are still lower than those for experimental group juveniles (i.e., those released from public placement to contracted aftercare).

Table 3.34
Proportion of Juvenile Subjects Reincarcerated
Within First Twelve Months of Release From Sample Placement
Public Versus Private Placement (Control Groups)

	Philadelphia (N=159)		Allegheny (N=133)	
	Group 2 (Public Plcmt.)	Group 3 (Private Plcmt.)	Group 5 (Public Plcmt.)	Group 6 (Private Plcmt.)
Successes (not reincarcerated)	75 89.3%	62 82.7%	50 86.2%	61 81.3%
Failures (reincarcerated)	9 10.7%	13 17.3%	8 13.8%	14 18.7%
Total	84	75	58	75

Philadelphia $\chi^2 = 1.46$, $df = 1$, ns.

Allegheny $\chi^2 = 0.56$, $df = 1$, ns.

Survival Analysis. The time to first rearrest is examined here to see what proportion of subjects in each group *survive* (i.e., remain arrest-free) from month to month. Survival experiences for juveniles released from public and private placement facilities are graphed in Figure 3.7 (Philadelphia) and Figure 3.8 (Allegheny).

Figure 3.7 shows that the proportion of surviving subjects in Group 2 and Group 3 falls steadily over time, but tends to level off toward the end of the 12 month observation period. Most notable is the fact that after the third month the two curves are in near perfect convergence. A statistical comparison of the two curves shows that they do not differ significantly (Log Rank = 0.22, $df = 1$, ns.). Figure 3.8 graphs the survival curves for Group 5 and Group 6 in Allegheny. Again, the two curves diverge little (Log Rank = 0.01, $df = 1$, ns.). However, the curve for the private placement releasees (Group 6) is more flat than the curve for Group 5. Consequently, Group 6 slightly outperforms Group 5 after the eighth month.

Figure 3.7
Survival Experience (Time to First Arrest)
During the First Twelve Months After Release
Philadelphia Control Groups
Released From Public Placement (#2) Versus Private Placement (#3)

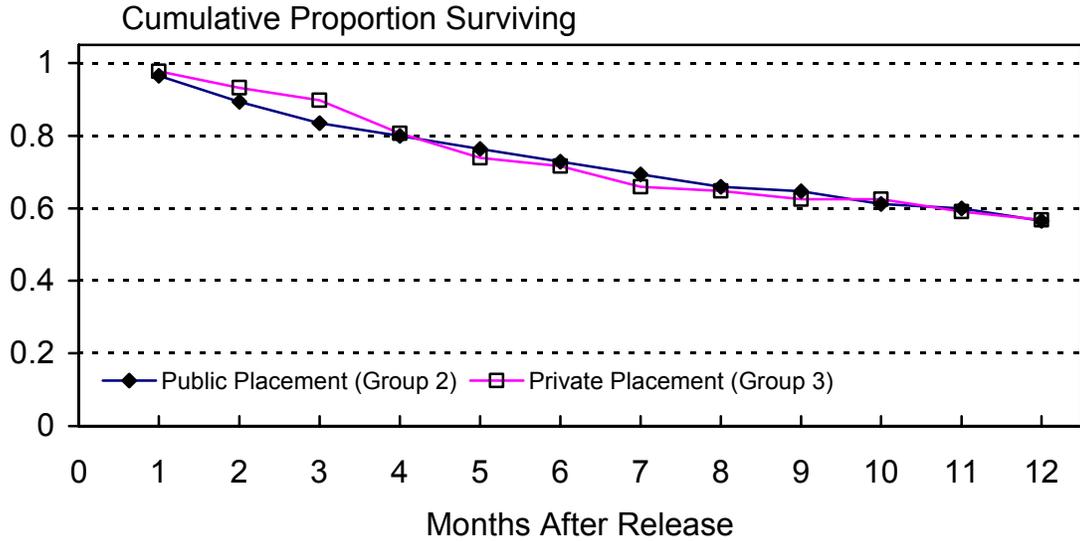
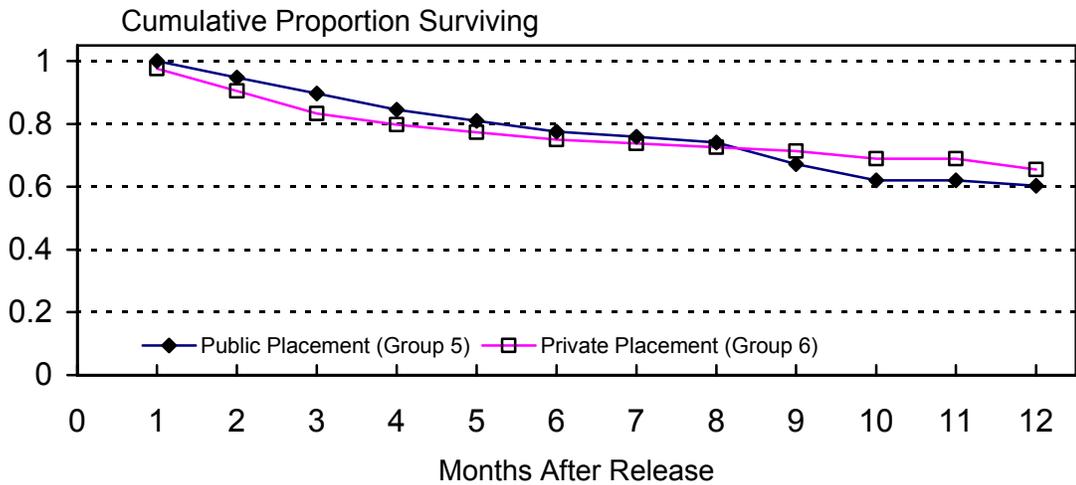


Figure 3.8
Survival Experience (Time to First Arrest)
During the First Twelve Months After Release
Allegheny Control Groups
Released From Public Placement (#5) Versus Private Placement (#6)



3.2.3 Recidivism: Differences Among the Seven Counties

In this section, we examine patterns of recidivism on a county-by-county basis. All juveniles included in the analysis were committed to public placement facilities for the sample placement and subsequently experienced direct aftercare (probation). The analysis compares recidivism outcomes for subjects from Philadelphia Group 2, Allegheny Group 5, Berks, Bucks, Dauphin, Lancaster, and Lehigh.

Proportion of Subjects Rearrested. Table 3.35 below reports the percentage of juveniles in each county who were rearrested at least once during the entire observation period following release from the sample placement. Since the table is limited to juveniles with the same type of sample placement (public) and aftercare service (direct), only Groups 2 and 5 are included from Philadelphia and Allegheny, respectively. The chi-square statistic indicates that the failure rates among the seven counties differ significantly ($p < .05$). The lowest failure rate was in Berks, where less than 40 percent of subjects were eventually rearrested. Other counties with relatively low rearrest rates include Bucks and Allegheny. The highest failure rate was in Lancaster, where more than three-quarters of subjects were eventually rearrested. Other counties with relatively high rearrest rates include Philadelphia (Group 2) and Dauphin. The Lehigh rearrest rate ranks these subjects in the middle.

Table 3.36 examines a shorter follow-up period (six months). At this point in time, most subjects would still have been in direct aftercare (probation). The differences in recidivism rates across the seven counties are not large enough to be statistically significant. Rearrest rates in all but two counties (Philadelphia and Lehigh) ranged between 25 and 35 percent. The three counties with relatively low rearrest rates over the entire observation period (Allegheny, Berks and Bucks) also had the lowest rearrest rates over the short term. In most counties, relapse into delinquency (as measured by rearrest) did not happen within the first six months. That is, less than half of the rearrests observed over the long term had taken place within the first six months. This was true in Philadelphia (Group 2), Allegheny (Group 5), Bucks, and Lancaster. Only in Berks, Dauphin and Lehigh did the majority of rearrests occur within the first six months. Neither group of subjects from the two large counties (Philadelphia and Allegheny) stands out from the groups from the smaller counties with regard to this measure of recidivism.

Number of Rearrests. Table 3.37 below shows the mean number of rearrests for juveniles in all seven counties who were committed to public placement facilities and who received direct aftercare services. The entire follow-up period is used in tallying the number of arrests accumulated by a subject. The lowest number of rearrests was in Berks. Other groups with relatively low rearrests were Bucks and Lehigh. The highest number of rearrests occurred in Lancaster. Philadelphia (Group 2) and Dauphin also exhibited relatively numerous arrests. Allegheny (Group 5) ranks in the middle on number of rearrests. The high number of rearrests for the Lancaster subjects seems anomalous, given the other evidence presented (e.g., this group did not receive particularly high risk factor scores), and may partly reflect differences in apprehension of offenders in this county.

Table 3.35
Proportion of Juvenile Subjects With at Least One Rearrest
Over Entire Observation Period
Public Placement and Direct Aftercare, All Seven Counties

	Philadelphia (Group 2)	Allegheny (Group 5)	Berks	Bucks	Dauphin	Lancaster	Lehigh
Successes (no rearrests)	29 34.1%	29 50.0%	24 60.0%	30 54.5%	9 34.6%	7 22.6%	16 45.7%
Failures (1+ rearrests)	56 66.9%	29 50.0%	16 40.0%	25 45.5%	17 65.4%	24 77.4%	19 54.3%
Total	84	58	40	55	26	31	35

$\chi^2 = 15.45, df = 6, p < .05$

98

Table 3.36
Proportion of Juvenile Subjects With at Least One Rearrest
Within First Six Months of Release From Sample Placement
Public Placement and Direct Aftercare, All Seven Counties

	Philadelphia (Group 2)	Allegheny (Group 5)	Berks	Bucks	Dauphin	Lancaster	Lehigh
Successes (no rearrests)	60 70.6%	39 75.0%	30 75.0%	47 85.5%	17 65.4%	20 64.5%	22 62.9%
Failures (1+ rearrests)	25 29.4%	13 25.0%	10 25.0%	8 14.5%	9 34.6%	11 35.5%	13 37.1%
Total	85	52	40	55	26	31	35

$\chi^2 = 8.42, df = 6, ns.$

Table 3.37
Mean Number of Rearrests Per Subject Over Entire Observation Period
All Seven Counties, Public Placement Releasees Sent to Direct Aftercare

Philadelphia (Group 2)	Allegheny (Group 5)	Berks	Bucks	Dauphin	Lancaster	Lehigh
1.34 (N=85)	1.24 (N=58)	0.83 (N=40)	0.85 (N=55)	1.31 (N=26)	2.31 (N=29)	1.06 (N=35)

F = 3.73, df = 6, $p < .001$

Reincarceration. Reincarceration rates represent another means of examining recidivism across the seven counties in the study. As was noted earlier, while the reincarceration rate partly reflects court-processing decisions, it is a particularly appropriate recidivism measure for high-risk offenders.

Table 3.38 reports rates of reincarceration within 12 months of release from the sample placement for juveniles committed to YDCs/YFCs and subsequently sent to direct aftercare in the seven counties. The lowest rates of failure occurred in Dauphin and Lancaster, where less than 10 percent of releasees were reincarcerated within one year. The failure rate was also relatively low for Philadelphia (Group 2). The highest failure rate was in Lehigh, where more than one-third of releasees were returned to confinement within one year. Relatively high failure rates are also found in Berks and Bucks. Allegheny (Group 5) ranked in the middle for this recidivism measure. The reincarceration rate for the Lehigh sample stands out from the rest, and is 14 percent higher than the next highest reincarceration rate. Given that Lehigh also ranks highest in short-term rearrest rates (see Table 3.36 above), it is logical to assume that reincarceration rates would also be high. Just as differences in apprehension rates may partly explain higher rates of rearrest, it is also possible that high reincarceration rates derive in part from differences in the way county juvenile courts handle cases. A somewhat anomalous situation also arises in Dauphin and Lancaster, where the (short-term) rearrest rates are among the highest, yet the reincarceration rates are relatively lowest. Again, the apparent disparities may be a reflection of differences in how county juvenile (and adult) courts handle cases.

Table 3.38
Proportion of Juvenile Subjects Reincarcerated
Within First Twelve Months of Release From Sample Placement
Public Placement and Direct Aftercare, All Seven Counties

	Philadelphia (Group 2)	Allegheny (Group 5)	Berks	Bucks	Dauphin	Lancaster	Lehigh
Successes (not reincarcerated)	75 89.3%	50 86.2%	31 77.5%	43 82.7%	22 91.7%	28 90.3%	21 63.6%
Failures (reincarcerated)	9 10.7%	8 13.8%	9 22.5%	9 17.3%	2 8.3%	3 9.7%	12 36.4%
Total	84	58	40	52	24	31	33

$\chi^2 = 15.31, df = 6, p < .05$

3.2.6 Prosocial Outcomes: The Experimental Groups in Philadelphia and Allegheny

In this last major section we look at prosocial outcomes for juveniles in Philadelphia Group 1 and Allegheny Group 4—the two experimental group that received contracted aftercare services upon discharge from the YDCs/YFCs.

The focus of the discussion is on various behavioral dimensions that are related to the probability that a juveniles will become reinvolved with the criminal justice system upon release from a correctional institution. Here, we look at the ability of juveniles in the two contracted aftercare programs to make progress to becoming productive members of society. This includes such things as completing education, obtaining and holding paid employment, and abstaining from drug and alcohol use. This discussion specifically examines the following as indicators of the achievement of prosocial outcomes: arrests in aftercare, reduction in substance abuse, completion of education, finding employment, other community involvement, goal attainment while in aftercare, and discharge status.

The data analyzed in this section come from the case file records of the two contracted aftercare service providers. Unfortunately, limited data availability proved to be a problem with both contracted service providers. The problem was particularly acute at Abraxas NRC, where case files could be located for only 24 of 71 clients. Moreover, the information contained in these files was often scanty or posed challenges of interpretation. The situation with Philadelphia OIC was considerably better, but was also far from ideal. OIC staff were able to provide us with case file data for 72 of 89 clients. Again, however, a variable amount of useful information was available for each client, and it was rare to find complete information for a case. In the discussion below, we attempted to make the most of the limited information we were able to collect. However, the limitations of the data should be borne in mind as one reads through the discussion.

Arrests in Aftercare. Information on new arrests and other forms of recidivism was presented in detail earlier in this chapter. Here, we briefly consider this issue again only as it bears on the issue of prosocial behavioral outcomes for juveniles sent to contracted aftercare. Other relevant information, such as curfew violations and technical violations of probation, would also be useful to consider in this context. In most cases, however, these data items were available too infrequently to permit their inclusion in the analysis.

According to Philadelphia court information, 28 of 89 juveniles in Group 1 (31 percent) were rearrested within four months of release from the sample placement. At this point, almost all of these juveniles would have still been active cases in the OIC-YAPP program. If we assume that new arrests are an eventual consequence of renewed delinquent activity, and that not all those who have resumed delinquent activity have been rearrested within four months, then the 31 percent rearrest rate observed for OIC-YAPP clients hints at a more widespread resumption of delinquent activity amongst these clients. The implication is that a substantial minority (at least) of OIC-YAPP clients failed to make significant gains in prosocial behavior.

Twenty-four percent of Abraxas NRC clients were rearrested within four months of release from the sample placement. Information on curfew violations was also available for 14 clients of the Abraxas NRC program. The data show that two juveniles experienced no curfew violations, seven had 11 or fewer violations, and the remaining five had numerous violations (25+). Data on curfew violations and rearrests suggest that, much as with the OIC-YAPP clients, a substantial minority (at least) of juveniles in the Abraxas NRC program did not experience significant behavioral improvements.

Reduction of Substance Abuse. In this section we look at the ability of participants in the contracted aftercare programs to avoid involvement with alcohol and illicit drugs.

Court data from Philadelphia indicate that many of the juveniles sent to OIC-YAPP had histories of serious drug and/or alcohol abuse. Only 20 of 89 juveniles (22 percent) in this group had no documented evidence of problems with drugs or alcohol. Thirty-nine (39) youths, or 44 percent, had a major problem with drugs and/or alcohol. The remaining 30 (34 percent) had minor substance abuse problems.

Information from OIC case files indicates that 17 clients received counseling and/or treatment for substance abuse problems. Information on treatment attendance was available for only one client, and it showed that he had major attendance problems. Drug testing information was available from a single urinalysis conducted on each of 15 clients at some point while they were attending the aftercare program. Eight (8) of these tests showed evidence of continued drug use (usually marijuana).

It is difficult to generalize from this limited evidence, but it would appear that no more than half of OIC-YAPP clients showed behavioral improvements in the form of reduced involvement with drugs and alcohol.

Court data from Allegheny indicate that 21 of 71 juveniles (31 percent) sent to the Abraxas NRC program had no documented evidence of drug or alcohol problems. Thirty-three (33) youths, or 46 percent, had a major drug and/or alcohol abuse problem. The remaining 17 (24 percent) had minor substance abuse problems. Virtually all Abraxas NRC clients for which aftercare information was available (20 clients) received counseling and/or treatment for substance abuse problems. Information on treatment attendance was not available for any of these 20 client. Drug testing information was available from a single urinalysis conducted on each of 3 clients at some point while they were attending the aftercare program. One of these tests showed evidence of continued drug use (marijuana).

There is insufficient evidence from which to generalize about possible behavioral improvements in Abraxas NRC clients in the area of substance abuse.

Completion of Education. This section assesses educational participation and attainments of clients in the contracted aftercare programs.

Court data from Philadelphia indicate extensive histories of school problems among the juveniles sent to OIC-YAPP. Only 4 of 89 youths (5 percent) had no documented evidence of school attendance problems. Sixty-one (61) clients, or 69 percent, had a major truancy problem, and seven (8 percent) had dropped out of school. The remaining 16 (18 percent) had minor truancy problems or their school attendance was unknown. Most OIC-YAPP clients had also experienced some form of disciplinary action while in school. Five clients, or 6 percent, had received an in-school suspension, 45 (50 percent) had been given out-of-school suspensions, and 6 (7 percent) had been expelled from school. Twenty-one (21) clients, or 24 percent, had no documented disciplinary action. Evidence on school disciplinary action was unavailable for 12 clients (13 percent). Fifty-six (56) clients, or 62 percent, had failed a grade at least once. The median grade level attained by juveniles upon entering OIC-YAPP was 10, indicating that most clients still needed at least one more year to complete their high school education. Only three (3) clients had reached or completed the 12th grade upon entering the intensive aftercare program.

Information from OIC case files indicates that at least 54 of 89 clients (61 percent) were enrolled in an education program while in aftercare. Forty-three (43), or 80 percent, were re-enrolled in public school, 6 attended GED classes, 4 participated in vocational training, and one was enrolled in college. Three of the clients in public school graduated while in aftercare, as did one GED student and one vocational student. No evidence was collected regarding completion of education by clients subsequent to their departure from the aftercare program. Evidence on school attendance while in aftercare is available for 32 OIC-YAPP clients. Twelve (12) youths showed no major attendance problems, 7 experienced minor truancy, 9 exhibited major truancy, and 4 dropped out of their educational program. Evidence regarding school disciplinary action experienced while in aftercare was available for only 7 OIC-YAPP clients. Five of these juveniles experienced no disciplinary action, and two received an in-school suspension. One client is known to have participated in school-sponsored athletics, and another client participated in the school music program.

Given the severity of school problems among the juveniles sent to the OIC aftercare program, even modest improvements in this area would be significant. Most clients were enrolled in an education program, and most of these appear to have had no more than minor attendance problems. Few appear to have experienced any type of school disciplinary action. Overall, the evidence suggests at least minor improvement for a majority of OIC-YAPP clients in the area of education.

Just as in Philadelphia, the Allegheny juveniles sent to Abraxas NRC had extensive school-related problems. Only 9 of 71 youths (13 percent) had no documented evidence of school attendance problems. Thirty-three (33) clients, or 46 percent, had a major truancy problem, and 12 (17 percent) had dropped out of school. The remaining 17 (24 percent) had minor truancy problems or their school attendance was unknown. Disciplinary action was also common among Abraxas NRC clients. Fifteen (15) clients, or 21 percent, had experienced in-school suspension, 40 (56 percent) had been suspended out-of-school, and 3 (4 percent) had been expelled from school. Thirteen (13) clients, or 18 percent, had no documented disciplinary action. Forty-four (44) clients, or 62 percent, had failed a grade at least once. The median

grade level attained by juveniles at the point of entry to Abraxas NRC was 9, indicating that most clients still needed at least two more years to complete their high school education. Only two clients had reached or completed the 12th grade upon entering the intensive aftercare program.

Information from 24 Abraxas NRC case files indicates that 17 of them were enrolled in an education program while in aftercare. Four were re-enrolled in public school, 6 attended GED classes, one was enrolled in college, and the remaining 6 enrolled in some form of remedial or vocational education. None of these clients are known to have completed their education while in aftercare, but it is likely that some eventually did so. Evidence on school attendance shows that seven students had no major attendance problems, two experienced major truancy, and five dropped out of their education program. Three students had minor truancy or their school attendance was unknown. Evidence regarding school disciplinary action experienced while in aftercare was available for only eight Abraxas NRC clients. One experienced out-of-school suspension and the other seven experienced no disciplinary action. One client is known to have been active in a school-sponsored club, and another participated in the school music program.

While data were only available for about 17 Abraxas NRC cases, these data suggest a high rate of educational enrollment. Furthermore, attendance and discipline problems appear to have fallen substantially for this group while they were in aftercare. The evidence suggests at least minor but real improvements among Abraxas NRC clients in the area of education.

Finding Employment. No information is available on the prior employment histories of juveniles who went to the two contracted aftercare programs. In any case, it is doubtful that more than a few of them had significant prior work experience. In addition, as would be expected, the major initial focus of aftercare treatment for clients in the two contracted aftercare programs was on completing educational goals and job readiness training. However, a minority of clients in both programs either entered aftercare with no further educational goals or they completed these goals while still in aftercare. For these clients, the major focus of aftercare was usually on assistance with finding and keeping a job. This section assesses the ability of these juveniles to secure and maintain paid employment.

Information from Philadelphia OIC case files indicates that 22 of 89 clients found work while in the aftercare program. Eight clients found full-time jobs, and the remaining 14 found part-time jobs. Three of those with full-time jobs were also full-time students at some point while in aftercare, and all but one of the clients with part-time jobs was also a full-time student. More detailed information on the employment experience of OIC-YAPP clients is scanty. Information on work attendance and workplace adjustment was available for only 4 clients. All four had no major attendance problems, but only one had a good relationship with his employer. The other three experienced major and/or frequent relationship problems with the employer leading to dismissal.

Given the many challenges delinquent youth face when seeking to enter the world of work (e.g., low skill levels and stigmatization by employers), it is perhaps no small accomplishment that 22 OIC-YAPP clients were able to find jobs. Unfortunately, little additional information about the work experience of these 22 juveniles could be gleaned from their case files. However, there is some evidence of positive social adjustment by OIC-YAPP clients in the area of employment.

Information from 24 Abraxas NRC case files indicates that 9 clients found work while in the aftercare program. Two clients found full-time jobs, and 5 found part-time jobs. One of the clients with full-time work and three of those with part-time work were also full-time students at some point while in aftercare. Work attendance was not a major problem area for six of these clients, but for two clients it was a serious problem leading to dismissal. Information on the worker-employer relationship was available for six clients. Three had a good relationship with their employer, one had minor and/or infrequent problems with the employer, and two had major and/or frequent problems leading to dismissal.

The limited evidence available on the employment experience of Abraxas NRC clients is neither particularly encouraging nor discouraging. There simply is not enough information to permit generalization regarding prosocial adjustment of Abraxas NRC clients in the area of employment.

Other Community Involvement. Another way of assessing the prosocial adjustment of juveniles in the two contracted aftercare programs is to look for evidence of other types of positive involvement in the community. This section considers two aspects of community involvement by juveniles while in aftercare: refraining from associating with delinquent peers, and participation in positive recreational activities not sponsored by school.

Very little information was available from OIC case files regarding other community involvement. Information on association with delinquent peers while in aftercare was available for only 13 cases. Three clients showed no evidence of delinquent association, 8 had occasional delinquent association, and two regularly associated with delinquent peers. Information on client participation in non-school sponsored recreational activities was available for only 10 clients. Eight regularly participated in recreational activities sponsored by OIC, and two engaged in hobbies. There is insufficient evidence regarding other community involvement to generalize about the progress of OIC-YAPP clients in this area.

Information on association with delinquent peers was available from 14 Abraxas NRC case files. Seven showed no evidence of delinquent association, while the other seven had occasional association with delinquent peers. Information on involvement with non-school sponsored recreational activities was available for seven cases. Six clients participated regularly in recreational activities sponsored by aftercare, and one participated on non-school athletics. There is not enough evidence to permit generalizations about the prosocial adjustment of Abraxas NRC clients in this area.

Goal Attainment. Case file documentation for clients who attended the two contracted aftercare programs contains valuable information on the various prosocial goals each juvenile set for himself or herself in consultation with his or her aftercare case manager. In this section we present information about the prosocial goals of clients and their success in achieving these goals as documented in aftercare agency case files.

Table 3.60 below presents in aggregate form the goals of OIC-YAPP clients. The first column of the table lists a variety of client goals. The numbers listed in the , Total, column indicates the number of clients known to have had that particular goal. Three other columns indicate how many clients completed the goal, attained partial success in completing the goal (when appropriate), or failed to achieve the goal. The column immediately to the right of these three columns shows the number of clients for whom success or failure in completing the goal was not known. All 89 OIC-YAPP cases were included under goals considered mandatory for all clients (as indicated by an asterisk), so those with unknown performance vis-à-vis these goals are included in the calculation of the , Unknown, category. For any other goal, a client was only included if the goal in question was explicitly documented in the client's case file. It is possible that the number of goals that OIC-YAPP juveniles had (completed or otherwise) is higher than suggested by Table 3.20, which is limited to documented goals.³⁰

The average number of goals per OIC-YAPP client was 3.7, or 1.7 if mandatory goals are excluded. The most common non-mandatory goals included avoiding substance use, enrolling in school or some other education program, maintaining good school attendance, and obtaining employment. If we take all the goals (332), there was a 31 percent success rate in goal completion (103 out of the 332 goals were either fully or partially completed). The overall success rate for goals with a *known* outcome was 62 percent (103 out of 167). This is also the typical success rate for most individual items.

The information in Table 3.39 is rather mixed. The proportion of failed goals is large, and the proportion of goals with unknown outcomes is even larger. Still, a high failure rate should not be surprising from a group of high-risk juveniles. Many OIC-YAPP clients did complete at least some of their aftercare goals, and this suggests some progress towards prosocial norms among these clients.

Table 3.40 below presents the goals of Abraxas NRC clients. All 71 OIC-YAPP cases were included under the single mandatory goal of meeting regularly with one's aftercare case manager. For any other goal, a client was only included if the goal in question was explicitly documented in the client's case file.

³⁰ One drawback of assessing goal attainment in numerical terms is the implicit treatment of all goals as ,of equal value., While in theory it would be possible to assign weights to different types of goals based on a set of substantive criteria, in practice this would be a difficult and ultimately subjective exercise. We contend that the method of presentation used has intrinsic merit and utility despite any inherent limitations.

Table 3.39
Goal Attainment, Philadelphia OIC-YAPP Clients
 N = 72 of 89

Description of Aftercare Goal	Goal Attainment				<i>Total</i>
	Completed	Partially Completed	Failed	Unknown	
Meet regularly with aftercare case manager*	5	5	9	70	89
Attend aftercare group sessions*	10	19	15	45	89
Attend aftercare-sponsored activities	3	2	2	2	9
Avoid substance use	6	1	5	3	15
Attend drug treatment	0	0	1	2	3
Enroll in school/GED/votech	7	·	3	4	14
Enroll in college	1	1	1	0	3
Maintain good attendance	10	12	12	12	46
Complete current school year	1	·	0	1	2
Improve grades	1	0	1	0	2
Participate in school-sponsored extra-curricular activities	0	2	0	0	2
Obtain diploma or certificate	3	·	1	4	8
Obtain employment	7	·	9	14	30
Maintain good work attendance	2	2	1	4	9
Other	3	0	4	4	11
<i>Total</i>	<i>59</i>	<i>44</i>	<i>64</i>	<i>165</i>	<i>332</i>
<i>Percent</i>	<i>17.8</i>	<i>13.3</i>	<i>19.3</i>	<i>49.6</i>	<i>100</i>
<i>Completed vs. Failed (Percent)</i>	<i>61.6</i>	<i>·</i>	<i>38.4</i>	<i>·</i>	<i>100</i>
<i>Known vs. Unknown (N)</i>	<i>167</i>			<i>165</i>	<i>100</i>
<i>Known vs. Unknown (Percent)</i>	<i>50.3</i>			<i>49.7</i>	<i>100</i>

* This goal was mandatory for all OIC-YAPP clients.

The average number of goals per Abraxas NRC client was 6.5, or 5.5 not counting the one mandatory goal. The most common non-mandatory goals included abiding by curfew, avoiding substance use, enrolling in school, maintaining good school attendance, and obtaining employment. If we take all the goals (181), there was a 30 percent success rate in goal completion (54 out of the 181 goals were either fully or

partially completed.) The overall success rate for goals with a *known* outcome was 61 percent (54 out of 88).

Table 3.40 shows high proportions of failed goals and goals with unknown outcomes. However, the average number of goals per client is fairly high, so a completion rate of 52 percent could be interpreted as indicating that most clients succeeded in accomplishing at least two goals. However, it is misleading to extrapolate success rates (especially for individual goal items) for the entire sample of Group 4 juveniles from data for only 20 cases.³¹ At most, it can be said that the 20 clients represented in Table 3.61 made limited progress towards prosocial goals while in aftercare.

Table 3.40
Goal Attainment, Abraxas NRC Clients
N = 20 of 71

Description of Aftercare Goal	Goal Attainment				<i>Total</i>
	Completed	Partially Completed	Failed	Unknown	
Meet regularly with aftercare case manager*	1	0	1	69	71
Attend aftercare group sessions	1	1	1	1	4
Abide by curfew	1	6	3	2	12
Avoid substance use	6	1	1	4	12
Attend drug treatment	0	1	1	1	3
Enroll in school/GED/votech	9	·	4	1	14
Enroll in college	0	·	1	3	4
Maintain good attendance	1	3	1	0	5
Improve grades	1	·	0	0	1
Obtain diploma or certificate	0	·	2	2	4
Obtain employment	4	1	8	0	13
Maintain good work attendance	4	0	5	0	9
Maintain good family relations	2	1	2	1	6
Avoid negative peers	1	2	2	4	9
Other	6	1	2	5	14
<i>Total</i>	<i>37</i>	<i>17</i>	<i>34</i>	<i>93</i>	<i>181</i>
<i>Percent</i>	<i>20.4</i>	<i>9.4</i>	<i>18.8</i>	<i>51.4</i>	<i>100</i>
<i>Completed vs. Failed (Percent)</i>	<i>61.4</i>	<i>·</i>	<i>38.6</i>	<i>·</i>	<i>100</i>
<i>Known vs. Unknown (N)</i>	<i>88</i>			<i>93</i>	<i>100</i>
<i>Known vs. Unknown (Percent)</i>	<i>48.6</i>			<i>51.4</i>	<i>100</i>

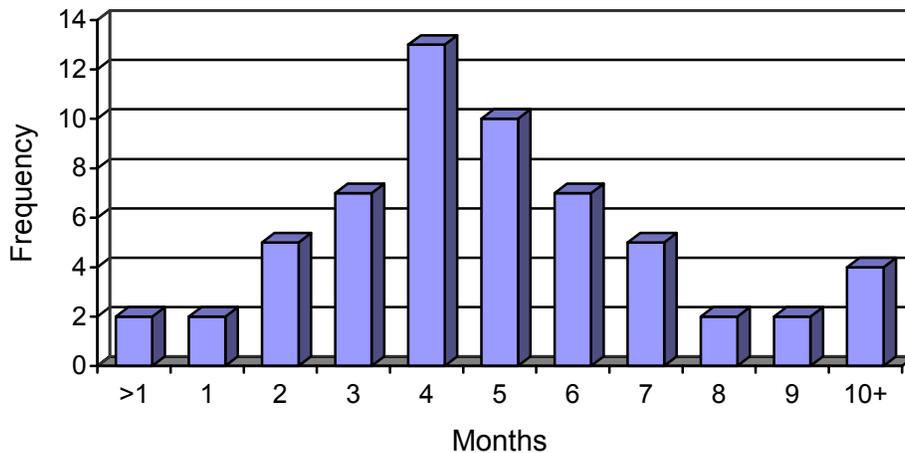
* This goal was mandatory for all Abraxas NRC clients.

³¹ As an example, the completion rate for the goal of meeting regularly with one case manager is 50 percent, but this is based on data from only two cases (one success, one failure).

Discharge Status. A typical practice of the case managers of both contracted service providers was to record information regarding the status of clients at the point of discharge from the aftercare program. Discharge information bearing on the question of prosocial behavioral adjustment by aftercare clients is analyzed in this section. This information includes early program discharge, employment status, school status, and cooperativeness (as assessed by the case manager) while in the program.

While it is normal for the length of aftercare service to vary somewhat, the *standard* service period is about six months. Figure 3.9 shows the number of complete months of aftercare service for OIC-YAPP clients. As the figure shows, 29 of 59 OIC-YAPP clients (49 percent) were discharged with less than five complete months of program involvement. Assuming that most of these early discharges indicate poor program performance (including rearrest and/or reincarceration), these data hint at a failure by perhaps as many as half of OIC-YAPP clients to develop prosocial patterns of behavior while in aftercare.

Figure 3.9
Complete Months in Aftercare
Philadelphia OIC-YAPP (N=59)

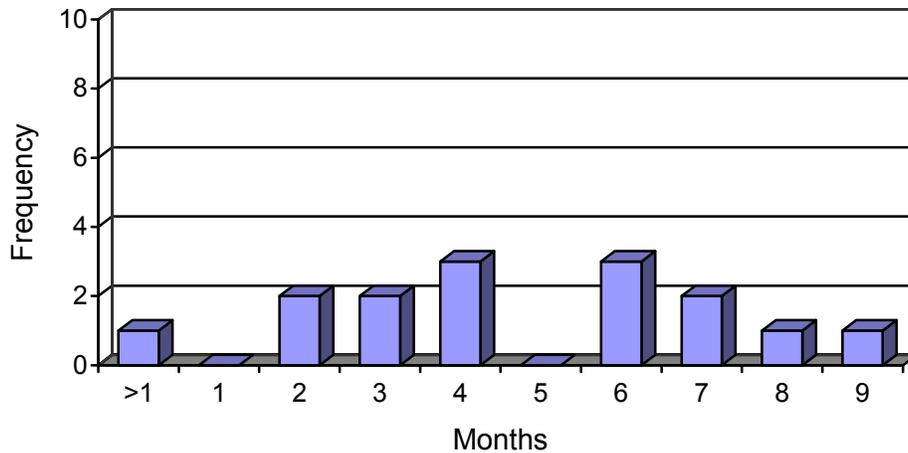


Evidence on the employment status of 43 OIC-YAPP clients at the point of discharge indicates that 14 were employed and 29 were not. Twenty-three (23) clients were also attending school at the time of program discharge, and another four had received their high school diploma or GED certificate. Information on cooperativeness was available for 31 clients, of whom 19 were deemed as cooperative and 12 as uncooperative. Also, ten clients were identified as having been in the Excellence Club.

While the evidence regarding early discharges from the OIC-YAPP program is not encouraging, other discharge information appears more promising. One possible scenario suggested by the data is that a large proportion of aftercare clients experience poor adjustment and thus receive early discharges, while many of those who remained in the program experience a degree of real progress.

Figure 3.10 shows the number of complete months of aftercare service for Abraxas NRC clients. Data were available for only 15 cases. As the figure shows, 8 of the 15 Abraxas NRC clients (53 percent) were discharged with less than five complete months of program involvement. While little can be reliably concluded from this small number of cases, the available evidence on early discharges does not bode well regarding the development of prosocial norms among Abraxas NRC clients.

Figure 3.10
Complete Months in Aftercare
Abraxas NRC (N=15)



Evidence on the employment status of eight Abraxas NRC clients at the point of discharge indicates that four were employed and four were not. Three clients were also attending school at the time of program discharge. None had received their high school diploma or GED certificate. Information on cooperativeness of clients was not available. Five clients were discharged under the status, „failure to maintain contact.,,

It is very difficult to draw meaningful conclusions from the quantity of discharge status information available from Abraxas NRC case files. What little evidence exists is not particularly encouraging.

4.0 CONCLUSIONS AND POLICY IMPLICATIONS

Now that the volumes of data have been analyzed and findings reported, the most important question needs to be asked and addressed. What can we conclude as a result of this research and what are the implications for public policy? Our introduction to this research stated that it is of vital importance to gather information about what works and what doesn't work, particularly in this era of scarce resources and demands for greater accountability.

Given this goal, our discussion of policy implications focuses on the following:

- ◆ ***Continuation of Intensive Aftercare Programs.*** At one level this will be addressed with regard to the two programs evaluated; in addition, the overall efficacy of intensive aftercare programs, in general, will be discussed.
- ◆ ***Improvement in Intensive Aftercare Programming.*** Discussion of this will be based on the assumption that the two programs evaluated, herein, will be continued; therefore, these recommendations offer suggestions for improving the delivery of services and the overall *quality of implementation*.

Continuation of Intensive Aftercare Programs. Assuming that decisions about continuation of any program are based on *what works*, we have little evidence that would support the success of the two intensive aftercare programs evaluated in this study. Their measurable outcomes were not better than the outcomes produced by direct aftercare through the county probation offices. In fact, recidivism (regardless of how it is measured) is higher for the intensive aftercare juveniles than it is for the others. The prosocial outcomes are also not very positive, although some minor improvements were found in the educational area for the OIC-YAPP juveniles.³²

On the other hand, we can say that approximately one-third of the juveniles were considered *successes* at the conclusion of their intensive aftercare experience, using the simplest measure of recidivism (i.e., whether the juvenile was rearrested over the entire observation period). Some might claim that *saving one life* is better than *saving none*. If we look at other types of intervention programs for individuals with serious chronic social problems, their success rates generally fare about the same, although success rates of 50 percent or higher are often reported.³³

Rehabilitation is more difficult to achieve than one might assume, particularly when the efforts are *too little, too late*. These juveniles who have been released from public correctional facilities are the most serious juvenile offenders. They have multiple

³² However, as previously indicated, there are limitations in our evaluation of the prosocial outcomes because of the nature of the data and our limited ability to compare before/after measures or experimental/control group measures.

³³ As an example, in the evaluation of the Philadelphia Intensive Aftercare Probation Project the final report indicated a success rate of approximately 50 percent (Sontheimer, Goodstein, and Kovacevic, 1990).

risk factors and generally come from environments that perpetuate their delinquency. Even the success rates independently reported by the two agencies was not very high: it was comparable to the rates we found when we analyzed the recidivism data.

Then who can be rehabilitated? Staff at the two aftercare agencies indicated that the juvenile best served by these programs are those that are motivated to change. But the motivated youth would probably change and follow a different path without this intervention. And for the youth that are not motivated, regardless of how exceptional the intervention, the impact will be minimal. There may be a small percentage of marginal youth that, for one reason or another, become motivated to change as a result of the intervention. However, policy makers need to make a decision as to whether intensive aftercare programs are worth the cost to implement them, particularly if they produce no better results than the aftercare services offered through the county probation departments.

Turning to the other component of this research, the process evaluation, we note that the unfavorable outcomes are coupled with an inadequate *quantity of program activity* as well as *quality of program implementation*. Given the evidence that the level of program activity did not match operational guidelines and there were other problems with implementation, the poor outcome results are not unexpected. Therefore, when you have inadequate program implementation in addition to working with a population of juveniles that is very difficult to rehabilitate, poor outcomes can be anticipated. Given all of this, the findings of this research and the evaluation of both process and outcomes are congruent.

If we take these results to another level, this particular research is equivocal with regard to the overall efficacy of intensive aftercare programs. It was not a good test of the model and its effectiveness. To do that, the program implementation has to match the theoretical and operational model. When that happens you can have a legitimate assessment of the extent to which intensive aftercare programs produce better results than do other options available to juveniles who are released from correctional institutions.

Even if this research was not a good test of the model, it is interesting to note that some of our findings have been echoed in other research. For example, there are still persistent questions about whether decreased caseload size and more frequent contact between the client and supervising agent will result in more favorable outcomes. As Armstrong (1991:21) noted, "to the extent this question has been addressed, the anticipated reduction in criminal behavior has not materialized." Further, he indicates that there are still questions about "whether the reductions in caseload size have actually resulted in a greater intensification of contact, suggesting that this whole issue perhaps needs to be explored again in a more rigorous fashion" (Armstrong, 1991:21).

Our finding that both aftercare agencies had relatively small caseloads, yet did not deliver the intensity of services provides additional evidence that this intensification of service does not automatically follow from reduced caseload size. This further calls

into question some of the basic assumptions of the theoretically based model of intensive aftercare.

Improvement in Intensive Aftercare Programming. Although the preceding discussion has a degree of pessimism, it should be mentioned that there were some positive aspects to the programs evaluated. Both programs exhibited a cooperative attitude toward our research and were frank in their discussions about the strengths and weaknesses of their programs. To their credit, both OIC-YAPP and Abraxas NRC were in the process of making improvements to their record keeping (one of their major problem areas) and each agency had some dedicated and enthusiastic staff members. Furthermore, when the internal and managerial problems were recognized at Abraxas NRC, the headquarters engaged in a reasonable process to uncover the difficulties and take corrective action. An organizational structure is never perfect, what is important is that it engages in a continual process to examine itself and improve.

To that end, the recommendations that follow are our suggestions concerning ways in which these programs can improve their operations.

- ◆ ***Increase program activity so that it matches operational guidelines.*** Assuming that program activity really was at the level we found it (and the low level was not merely an artifact of the poor record keeping), then both programs need to increase the intensity of their interaction and service delivery to the juveniles referred to them. The level of contact with the juveniles and their families was not as expected; the follow-up on school performance, drug and alcohol treatment, employment performance, etc. was also absent for the majority of juveniles (or not noted anywhere). This is the *sine qua non* of an intensive aftercare program. If the contact with and the referral of juveniles to outside support services are no different than for juveniles in aftercare provided by the county probation departments, then why have contracted intensive aftercare?
- ◆ ***Improve program oversight to guarantee compliance with operational guidelines.*** Diligence in program oversight is essential. Given our findings with regard to the level of service and the extent to which it did not match operational guidelines, we can assume that compliance issues were not routinely scrutinized. Some of this can be attributed to organizational *mini crises* that always loomed on the horizon (e.g., cash flow problems, interpersonal conflicts, staff turnover and replacement problems). In organizations where this exists, supervisory and management staff often have their energies redirected, thereby preventing them from performing their other job functions. However, because of the importance of program oversight responsibilities, it is also important that management and supervisory personnel not have dual responsibilities within a program (e.g., in the case of OI-YAPP, the project director also served as the family therapy specialist).
- ◆ ***Implement improved methods of documentation.*** This is an area where a balance must be reached between being accountable and yet avoid becoming

too bureaucratic with the development of numerous and burdensome record keeping procedures. However, with today's PC data base software, it has become relatively easy for smaller organizations and programs to develop data base management systems that are user-friendly; they can also help eliminate the maintenance of duplicate information in hard-copy files as clients interface with different aspects of a social service program. Furthermore, they make it easier to produce client-based reports on service delivery and outcomes. They also provide a structure to the data elements that need to be maintained for accountability. In order to develop a system that is easy to use and not too burdensome, it is essential that all staff be part of the development process and fully understand the operational procedures regarding responsibilities for data input.

As already noted in our discussion of findings, both aftercare programs lacked some very basic information about their clients and the quality of information about a client varied considerably, much of its quality dependent on the practice of an individual case manager. Even where there were standard forms (e.g., the discharge summary in OIC-YAPP), there were basic pieces of information that were not recorded or asked in such a way that they would be noted for each case (e.g., whether a client was enrolled in school or not, employed or not, a success or a failure). Of course, in the case of Abraxas NRC, the situation with missing files (approximately two-thirds of our sample) is a serious noncompliance issue.

- ◆ ***Provide ongoing staff training to guarantee proper record keeping.*** As already indicated, not only is it necessary for staff to be included in development of any record keeping system, but it is also essential that they be properly trained in maintaining this information. This seems obvious and one would assume that this is automatic— even for *paper* record keeping procedures. However, given the gaps we found in the existing records, this apparently was not occurring.

- ◆ ***Provide adequate clerical support for staff.*** To assist case managers in their record keeping responsibilities, it is essential that the programs have sufficient clerical staff. Neither of the programs evaluated had sufficient assistance in this area. Although with today's computerized data base systems, much of the data entry can be done during point-of-contact, there are other types of clerical duties that should not be the responsibility of case managers and supervisory staff (e.g., producing data base reports when needed or for documenting attendance at group activities, etc.).

A final comment is with regard to research process. Given the conditions that existed at Abraxas NRC when we entered on the scene (i.e., they had just undergone an internal audit and complete restructuring), hindsight tells us it was unwise to conduct an outcome evaluation of this program. If an evaluability assessment had been performed, we would have recommended that the research not go forward or that only a process evaluation take place. Recognizing that this evaluation was conducted because of federal requirements, we know that this might not have been an option. However, since so much of their data was missing and the contents of their existing files was skimpy, we have little confidence in the data reported for

their number of contacts and services delivered. This being the case, our conclusions are filled with caution and caveats when we report on the case file data from Abraxas NRC. On the other hand, documenting this from an outside source (i.e., independent researchers) does assist policy makers in making their decisions about future programming.

In conclusion, these data have provided some solid evidence as to the operation and effectiveness of the two contracted intensive aftercare service providers in Pennsylvania. Although the overall picture is not very positive, we have highlighted both strengths and weaknesses and made specific recommendations for improvement. There are no easy answers to the problems faced by juvenile delinquents, but the importance of forming policy based on empirical data and implementing programs based on an understanding of *what works* cannot be denied.

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