

Recidivism in WA Within 3 years of release from Washington's Juvenile Rehabilitation Administration, 68-78% of youth were convicted of new felonies or misdemeanors Felonies were >50% of total Violent Felonies account for about 20% of total (Washington State Institute for Public Policy, 2006)

Transition service planning for juvenile offenders Integrated transition services, including mental health and substance abuse treatment, financial assistance, and school placement, are rare Transition planning, post-release mental health services, receipt of financial assistance are associated with lower rate of re-offending at 6 month follow-up (Trupin, Turner, Stewart, & Wood, 2004)

Beginnings of FIT: A recognized need for transition services 2000: Washington State Legislature initiated pilot rehabilitation program for youth with co-occurring disorders who are transitioning back to the community from JRA Directed that independent evaluation be carried out by Washington State Institute for Public Policy (WSIPP)

Senate Bill 6853 Juvenile offenders receive treatment that is: Research-based Integrated Individualized mental health and chemical abuse treatment Family-centered Community involved Low caseloads Home or residence-based services Time-determinate to the extent possible Focus on peer and social structures Decreases factors associated with reoffending Increases factors associated with prosocial contacts and behaviors Presented in Tampa, March 2007

Family Integrated Transitions (FIT) A family- and community-based treatment for youth with: Co-occurring mental health and substance abuse diagnoses Being released from secure institutions in Washington State's Juvenile Rehabilitation Administration

20th Annual RTC Conference Presented in Tampa, March 2007

Targeted Impacts

- Lower risk of re-offending
- Connect youth with appropriate community services
- Achieve youth abstinence from drugs/alcohol
- Improve mental health status and stability
- Increase prosocial behavior
- Improve youth's educational level and vocational opportunities
- Strengthen family's ability to support youth

20th Annual RTC Conference Presented in Tampa, March 2007

FIT is predicated upon the notion that treatment is most effective if all of the factors that sustain a problem behavior are addressed in an *integrated* manner



Presented in Tampa, March 200

FIT Integrated Treatment Model

- Multisystemic Treatment (MST) is the foundation
- Incorporates and builds on JRA Integrated Treatment Model, especially:
 - Dialectical Behavior Therapy (DBT)
 - Anger Replacement Training (ART)

20th Annual RTC Conference Presented in Tampa, March 2007

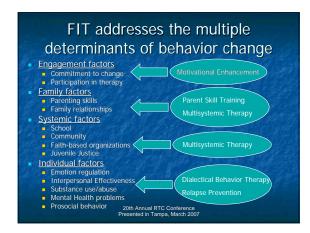
FIT builds on skills developed while incarcerated, focuses on generalization

- JRA Integrated Treatment Model: framework for treatment planning
 - Use of evidence based approaches to treatment
 - Cognitive-behavioral basis
 - Coping Skill development: DBT
 - Functional analysis of behavior
 - Building commitment to change through motivational enhancement
 20th Annual RTC Conference Presented in Tampa, March 2007

Elements of FIT

- Focus on engagement of multiple systems involved in supporting youth's successful transition
- Youth and family are assessed to determine unique needs; services are individualized
- Treatment focuses on family strengths, and on goals set by the family
- Attention to generalization

20th Annual RTC Conference Presented in Tampa, March 2007



FIT: Target Population Inclusion Criteria Ages 11 to 17 at intake Substance abuse or dependence disorder AND Axis I Disorder OR currently prescribed psychotropic medication OR demonstrated suicidal behavior in past 6 months At least 2 months left on sentence

FIT Teams 3-4 therapists per team 3-5 families per therapist at any given time Frequent contact with the family, especially early on, to establish engagement and structure 1 supervisor per team (0.5 FTE)

FIT Oversight Weekly group supervision with supervisor Individual supervision as indicated Weekly telephone consultation with FIT consultants Weekly telephone across the supervision with FIT consultants

FIT: Treatment Begins 2 months before release to allow time to prepare family and systems to support successful transition Therapist meets with family at least once per week Therapist on call 24/7 Treatment takes place in the community where the youth lives

The FIT Manual Chapter 1: Overview of FIT, goals of program Chapter 2: Description of theory and practice of key therapeutic approaches Chapter 3: Therapist's Toolbox Chapter 4: Referral and Engagement Chapter 5: Pre-Release Multisystemic Interventions Chapter 6: Parent Behavioral Skills Training Chapter 7: Pre-Release Sessions Chapter 8: Homecoming Chapter 9: Maintenance Chapter 10: DBT skills Chapter 11: Barriers and Solutions

Therapist's Toolbox

- Contains information on a variety of techniques from different intervention approaches that are to be employed throughout the intervention
 - Fit circles
 - Behavior Chain Analysis
 - Readiness rulers
 - Pros and Cons
 - Goal setting
 - Interaction techniques
 - Commitment strategies
 - Mindfulness exercises
 - Diary card
 - Educational handouts at RTC Conference Presented in Tampa, March 2007

FIT Evaluation Outcomes Recidivism (UW DPBHJP & WSIPP) Cost-benefit (WSIPP) 20th Annual RTC Conference Presented in Tampa, March 2007

Washington State Institute for Public Policy (WSIPP)

- Established in 1983
- The Institute's mission is to carry out practical, non-partisan research—at legislative direction—on issues of importance to Washington State
- The Institute conducts research using its own policy analysts and economists, specialists from universities, and consultants
- Institute staff work closely with legislators, legislative and state agency staff, and experts in the field to ensure that studies answer relevant policy questions_{20th Annual RTC} Conference Presented in Tampa, March 2007

In 1990's, at the behest of the Washington State Legislature, WSIPP started to:

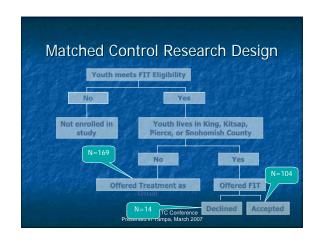
- Evaluate programs to decrease crime and the cost of crime to taxpayers and crime victims
- Develop models to estimate the cost of crime to taxpayers and crime victims
- Do not consider other program effects such as substance use, educational outcomes, or scores on assessment tools

20th Annual RTC Conference Presented in Tampa, March 2007

FIT Eligibility Criteria

- Under 17 ½ years oldIn JRA institution
- Scheduled to be released to four or more months of parole supervision
- Substance abuse or dependence
- One or more of the following:
 - Any Axis 1 disorder (excluding youth with only diagnoses of Conduct Disorder, Oppositional Defiant Disorder, Paraphilia and/or Pedophilia); or
 - Currently prescribed psychotropic medication; or
 - Demonstrated suicidal behavior within the past 3

20th Annual RTC Conference Presented in Tampa, March 2007



FIT Program Evaluation Design and Methods

To account for non-random assignment and differences between groups, data analytic strategies included:

- 25% reduction in the estimated effect of the FIT program on recidivism while calculating cost-benefit
- Stratified the survival analysis to account for proportionally more African American youth in the FIT sample compared with the Control group

20th Annual RTC Conference Presented in Tampa, March 2007

Selection Biases between treatment groups?

- There is a possibility of differences between FIT participants and comparison
 - 88% of eligible youth received FIT (non-participating youth might be different)
 - Families in different geographical areas might face different circumstances (i.e., counties eligible for FIT were more metropolitan - containing Seattle and Tacoma)

20th Annual RTC Conference Presented in Tampa, March 2007

Differences between FIT group and Comparison group

- FIT participants more likely than comparison youth to
 - Identify as African American
 - Have a prior property offense
 - Have higher Initial Security Classification Assessment (ISCA) scores (JRA tool for measuring risk for re-offense)
- FIT participants less likely than comparison youth to identify as Latino
- No significant differences in age at release, age at first conviction, gender, prior drug convictions, criminal history, prior violent convictions, or Native American
- Arguably, FIT group more prone to re-offend

Outcome variable: Recidivism

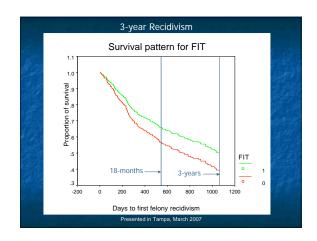
- Obtained through statewide database
- Conviction rates for juvenile or adult offenses
- Follow-up period of 36 months postrelease
- Conviction classifications
 - Total recidivism: misdemeanor + felony
 - Felony recidivism
 - Violent felony recidivism

20th Annual RTC Conference Presented in Tampa, March 2007

Effects of Participation in FIT on 36-month Recidivism

- Utilized stratified Cox regression to adjust for unequal distribution of African American youth in the FIT sample
- Percent that did NOT have a felony conviction 36 months post-release:

 - Comparison: 37.4%
 Youth in FIT 30% less likely than youth not in FIT to have felony recidivism
- Total recidivism (p=0.506) and violent felony recidivism (p=0.521) did not yield statistically significant differences between groups





FIT Benefit-Cost Analysis

- Total cost of FIT per participant: \$9,665
- Benefits to taxpayers in criminal justice savings per participant: \$19,502
- Benefits to non-participants from avoided criminal victimizations per participant: \$30,708
- Total savings per participant =\$50,210
- Net gain per participant=\$40,545

20th Annual RTC Conference Presented in Tampa, March 2007

FIT Benefit-Cost Analysis Benefit-to-Cost Ratio: (Total Benefit/Total Cost) = (\$40,545/\$9,665) = \$4.20 20th Annual RTC Conference Presented in Tampa, March 2007

Next Steps

- Randomized controlled trial of FIT
 - Reduce/eliminate potential geographic and socio-demographic confounds present in current study
- Reaffirm findings as they relate to cultural minorities
- Examination of psycho-social impacts of FIT intervention (move beyond recidivism)

20th Annual RTC Conference Presented in Tampa, March 2007

WSIPP Citations FIT Outcome Evaluation S. Aos, M. Miller, and E. Drake (2006). Evidence-Based Public Policy Options to Reduce Future Prison Construction, Criminal Justice Costs, and Crime Rates. Olympia: Washington State Institute for Public Policy. http://www.wsipp.wa.gov/rptfiles/06-10-1201.pdf WSIPP Models for the Cost of Crime S. Aos, R. Lieb, J. Mayfield, M. Miller, & A. Pennucci (2004). Benefits and costs of prevention and early intervention for youth, Technical Appendix. Olympia: Washington State Institute for Public Policy. http://www.wsipp.wa.gov/rptfiles/04-07-3901a.pdf

OJJDP Model Programs Rating: Effective Can be found on-line at: http://www.dsgonline.com/mpg2.5/TitleV_MPG_Table_Ind_Rec.asp?id=71 0

Contact Information

- Eric Trupin: (206) 685-2085 trupin@u.washington.edu
- Terry Lee: (206) 685-2085 drterry@u.washington.edu
- Suzanne Kerns: (206) 685-2766 sekerns@u.washington.edu

20th Annual RTC Conference Presented in Tampa, March 2007