Adult Services Plan: *Serving 18-25 year-olds*

Best Practices

Chief Probation Officers
of California

Table of Contents

Preface 2

Introduction 3

Definitions: *Providing Clarity* 5

Adolescent Brain Development: *The Basics* 8

Evidence-Based Practices: *What We Know* 10

Template: *A Plan for California Probation* 21

Conclusion 26

Bibliography 27

Appendix A: *Evidence-Based Practice Models* 30

Appendix B: *Evidence-Based Practice Research References* 39

Appendix C: *Logic Model* 48

Preface

This document represents the work of the Chief Probation Officers of California, Adult Services Committee and is part of an extensive action plan developed by the Committee. While there has been a great deal of focus on juvenile offenders in recent years that has resulted in expanded service delivery and improved outcomes with youth on probation across the state, more attention is warranted to address the very real needs of 18-25 year old offenders who lack the maturity and life experience of other, older probationers. Additionally, young adult offenders face many of the same barriers as their juvenile counterparts and yet often do not have the same level of support in their efforts to complete their grant of probation successfully. This briefing paper offers a strategic approach based on evidence-based practices.

The Chief Probation Officers of California would like to acknowledge The California Endowment for sponsoring the Probation Policy Project of which this paper is a part.

Introduction

California varies widely from county to county in size, geography, urbanicity and demographics. Because of this diversity probation departments are responsive to their communities, developing programs and services specific to the unique needs of their jurisdiction. Unfortunately funding for probation has not kept pace with California's rapid growth.

In California approximately 30% of the existing 300,000 probationers are age 18-25.[1] This reflects the demographic boom, often referred to as Tidal Wave II that swept through juvenile justice and is now impacting adult services. While the percentage of probationers in this age group may not be much greater than in the past, the numbers certainly are.

This document is meant to be used by probation departments in their efforts to implement evidence-based practices in screening/assessment, supervision, case management and treatment/treatment referral. The goal is to provide a tool for departments to use regardless of their existing knowledge, available resources or current practice. It is focused on providing services and supervision to 18-25 year olds, although many of the strategies found here may be applied to older probationers as well. Within this document "evidence-based practice" will be used to describe those methods or strategies that have been proven by scientific research to be effective in achieving a specific outcome such as reduced recidivism.

Significant work in gathering information about evidence-based practices (EBP) community corrections was previously completed by a CPOC workgroup.[2] The workgroup compiled a matrix of EBP models that provides a succinct look at what works at reducing recidivism among adult offenders (see Appendix A) and provides research references (Appendix B.) Based on a review of the literature and input from probation statewide, this document continues that effort and provides a planning tool for counties to use to enhance their current practice.

The need for evidence-based practices is especially great for 18-25 year old offenders. The barriers facing these young adults in the criminal justice system are exacerbated by the limited availability or lack of developmentally appropriate services in many areas. While there are several examples of effective practice throughout the state, there are also many challenges to implementing and providing the type of evidence-based services necessary to supervise these offenders. For example, in some cases screening or risk and needs assessment is imperfect or the services provided to these young adults are not evidence-based and therefore fail to meet their needs. In other cases there are little or no

[1] Estimate based on informal survey of probation departments, 2007.
[2] Hunt, Shirley. Memorandum to Vincent Iaria, Chief Probation Officer, San Diego Probation Department *Status Report: Evidence-based Practices in Adult Probation*. September 16, 2005.

appropriate services available in the community. These young offenders often come from unsafe and unhealthy environments, dysfunctional family situations and multi-generational substance abuse. They need a comprehensive response to their set of needs, including a more complete range of substance abuse and mental health treatment options, a continuum of care and case management, and evidence-based supervision.

In any comprehensive analysis of the target population, it is important not to lose sight of the significant strengths and assets these individuals often possess simply because of their youthfulness. It is upon these strengths and with these assets that specific skill building can occur. Because of their young age these probationers have not had the opportunity to commit crimes for decades or in most cases to establish a lengthy alcohol and drug use history. Although some may have a prior juvenile record, by and large they do not have as extensive a criminal history as their older adult counterparts, simply because they are younger. This may result in an easier transition to pro-social behavior with the appropriate skill building and support since there has been less time for the negative behaviors to become ingrained. Similarly, these individuals often have a shorter drug use history. A greater number of these offenders may be diagnosed with substance abuse as opposed to chemical dependency, and therefore they may be more responsive to (developmentally appropriate) treatment. Additionally, younger adults have had less time to suppress pre-existing trauma, and may be more amenable to counseling to resolve these issues. While this is not to dismiss the very serious criminal and drug histories of many 18-25 year old offenders, they do have time on their side which may provide a greater opportunity for positive outcomes.

Through the implementation of evidence-based practices probation departments can help keep young adult offenders from violating probation and being sent to prison.

Definitions: *Providing Clarity*

There is much misunderstanding or partial understanding of many terms used in the human services field today. These definitions come from a variety of sources, which are all noted. In some cases there are multiple definitions or common uses of one term between disciplines and where that is the case it has been noted.

The National Institute of Corrections addresses the need for clarity when using terms that have multiple definitions. In their publication, "Implementing Evidence-based Practices: The Eight Principles of Effective Intervention"[3] the Institute states:

> The terms **best practices, what works, and evidence-based practice (EBP)** are often used interchangeably. While these *buzz words* refer to similar notions, pointing out the subtle distinctions between them helps to clarify the distinct meaning of *evidence-based practices*.

The following terms are presented and defined as they relate to the discussion of serving 18-25 year olds.

Evidence-Based Practice- In the health care field, evidence-based practice (or practices), also called EBP or EBPs, generally refers to approaches to prevention or treatment that are validated by some form of documented scientific evidence. What counts as "evidence" varies. Evidence often is defined as findings established through scientific research, such as controlled clinical studies, but other methods of establishing evidence are considered valid as well. Evidence-based practice stands in contrast to approaches that are based on tradition, convention, belief, or anecdotal evidence.[4]

Evidence-Based or Model Program- These terms refer to a set or constellation of components that implemented together have been proven to produce desired outcomes. It differs from evidence-based practice in that it is more than one element or activity that is required to achieve the positive outcome.

Promising Program/Practice- Frequently used in the public health field, this phrase refers to a method or model that has an evaluation component or plan in place to move towards demonstration of effectiveness, but does not yet have evaluation data available to demonstrate positive outcomes.[5]

---

[3] National Institute of Corrections, *Implementing Evidence-based Practices: The Eight Principles of Effective Intervention*, 2005

[4] National Registry of Evidence-based Programs and Practices, Substance Abuse and Mental Health Services Administration, http://www.nrepp.samhsa.gov/about-evidence.htm

[5] Association of Maternal, Child Health Programs, *Center for Best Practices*, 2004 http://www.amchp.org/policy/bestpractice-definition.htm

Proxy Tool- An instrument that measures a variable used to infer the value of a variable of interest. For instance "age at first arrest" is used to infer an individual's level of risk of reoffending.

Best Practices- Do not necessarily imply attention to outcomes, evidence, or measurable standards. Best practices are often based on the collective experience and wisdom of the field rather scientifically tested knowledge.[6]

Case Management- A process that focuses on assessing, planning, linking, coordinating, monitoring, and evaluating the support and services required to meet the probationer's needs. It addresses the bio-psycho-social needs of the individual and includes the probationer in the process of developing a set of strategies to improve overall outcomes.

Transitional Youth-A term used to identify young adults in their mid to late teens and early twenties who are moving from adolescence to adulthood.

Recidivism- Some agreed upon measure of reoffending. This may include re-arrest or reconviction.

Screening- The first step in the assessment process; it is a predictive tool that separates individuals into categories such as low, medium and high risk for reoffending. Other categorizations might include substance abuser and chemically dependent.

Assessment-An evaluation of factors that provides information about an individual. Some assessment tools evaluate more than one domain, such as substance abuse, mental health and social functioning. A risk and needs assessment evaluates criminogenic factors and provides information that probation officers can use in case planning.

1st, 2nd, 3rd, 4th Generation- These are terms that indicate the evolution of assessment tools. The first generation describes assessments that were mainly "unstructured professional judgments of the probability of offending behavior".[7] Second-generation tools are empirically based risk instruments that consisted mostly of static items such as gender. Third-generation assessments are also empirically based but also include dynamic risk items, or criminogenic needs. An example of a third-generation assessment would be the Level of Service Inventory–Revised or LSI-R. The fourth generation tools are more comprehensive, integrating service and supervision from intake through case closure.[8]

---

[6] National Institute of Corrections, *Implementing Evidence-based Practices: The Eight Principles of Effective Intervention*, 2005

[7] Andrews, D.A.; Bonta, James; J. Stephen Wormith, *The Recent Past and Near Future of Risk and/or Need Assessment* Crime & Delinquency, Vol. 52 No. 1, January 2006 Sage Publications

[8] Andrews, D.A.; Bonta, James; J. Stephen Wormith, *The Recent Past and Near Future of Risk and/or Need Assessment* Crime & Delinquency, Vol. 52 No. 1, January 2006 Sage Publications

Fidelity-Degree of adherence to a specific model or design. A high degree of fidelity is required to produce the same or similar results as the original model. Even with comprehensive training in a specific model or method, there is a tendency to shift back to the "old way" of doing things. When implementing a specific new practice there must be some quality assurance over time to be certain that the new behaviors and activities are being conducted consistent with the model.

Criminogenic-Factors or characteristics that contribute to or cause crime. Some examples include substance abuse and criminal peers.

Adolescent Brain Development: *The Basics*

> New scientific discoveries have put a much different perspective on the understanding of adolescent behavior. Research now suggests that the human brain is still maturing during the adolescent years, **with changes continuing into the early 20s**. The immature brain of the teenage years may not only explain why adolescents are prone to make poor decisions, but it may also place teenagers at an elevated risk to the harmful effects of drugs. (emphasis added)
>
> Based on the pioneering work of Jay Giedd and colleagues at the National Institute of Mental Health, evidence is accumulating that the brain is not fully formed at puberty as earlier thought, but continues important maturation that is not complete until about age 24.
>
> Adolescent Brain Development and Drug Use
> Winters, 2004

While 18-25 year olds are legally adults they are in many ways still adolescents developmentally. Major changes are occurring in the brain of the young adult, changes that result in increased risk taking and an intensity of emotion. The impact of this is that probation departments must use strategies and practices that are developmentally appropriate and that recognize that a different approach is often necessary.

Treatment services that incorporate practices appropriate for adolescents as well as case management techniques that employ sequential direction are likely to be most effective. Breaking down the court's orders into individual tasks and directing the 18-25 year old probationer to complete one task at a time will be more effective than requiring all to be managed simultaneously. While non-compliance may appear willful in this case, it is possible the offender lacks the ability to fully complete multiple objectives at once.

The Added Effects of Drug Use

Research shows that the earlier the onset of drug use the greater the chance is of chemical dependence developing as youth age.[9] In another article, *Adolescent Brain Development: Implications for Drug Use Prevention,* Dr. Ken Winters who is the director of the Center for Adolescent Substance Abuse Research and an Associate Professor in the Department of Psychiatry at the University of Minnesota and co-author Jessie Breyer provide context for working with adolescents. While this article is directed primarily at parents, there is value in it

[9] Chambers, Andrew, Jane R. Taylor, Marc N. Potenza *Developmental Neurocircuitry of Motivation in Adolescence: A Critical Period of Addiction Vulnerability*, American Journal of Psychiatry, 2003.

for probation officers and those developing policy and practice within probation departments.

> Adolescents should be educated about their developing brain. We believe three themes should be emphasized: (1) how the "judgment" part of the brain (pre-frontal cortex) is slow to mature, (2) drugs can "hijack" the brain to create addiction, and (3) the adolescent brain is particularly vulnerable to the effects of substances. By incorporating neurodevelopmental education into the curriculum, adolescents can improve their understanding of themselves and will hopefully make better decisions regarding the use of alcohol and drugs.[10]

Winters and Breyer present some specific strategies that focus on drug use prevention efforts with adolescents. However with some adaptation these techniques can be incorporated into probation case management.

P = Promote activities that capitalize on the strengths of the developing brain (e.g., sports and music)

A = Assist your child when faced by challenges that require a lot of planning.

R = Reinforce the value in seeking advice and input from you and other adults.

E = Educate your child that risk taking can have negative consequences not foreseen.

N = Never minimize the developing brain's susceptibility to substance abuse.

T = Tolerate the "oops" behaviors that may be the result of an immature brain.[11]

Fig. 1 Principles of Neurodevelopment to Reinforce Prevention Efforts

Supervising 18-25 year olds on probation requires a blending of juvenile and adult focused strategies that take into consideration the brain development that continues to occur. Making certain that treatment and other referral sources are not treating the 18-25 year old as they would older adult probationers but are providing services that are developmentally appropriate is key.

[10] Ken Winters, Jessie Breyer, *Adolescent Brain Development: Implications for Drug Use Prevention,* Mentor Foundation, 2004
[11] Ken Winters, Jessie Breyer, *Adolescent Brain Development: Implications for Drug Use Prevention,* Mentor Foundation, 2004

Evidence-Based Practices: *What We Know*

Overview

The field of community corrections is learning more about what is effective in reducing recidivism and changing offender behavior. As one professional put it "Recidivism can be predicted; Recidivism can be reduced."[12] To do this we must use evidence-based practices and tested models. These models are outlined in Appendix A. We must also use validated risk assessments focused on identifying and ameliorating criminogenic needs and focus on what works.

Latessa identified the who, what and how of "what works" in reducing recidivism in the community corrections population. He outlined four principles: 1. Risk-Identifying high risk offenders to target; 2. Need-identifying criminogenic needs of each offender; 3. Treatment-addressing the offender's risk factors as well as their needs through cognitive behavioral methods; 4. Other factors-which include fidelity to the chosen model, quality assurance and addressing the additional needs of the offender.[13]

In 2005 the National Institute of Corrections published "Implementing Evidence-based Practice in Community Corrections: The Principles of Effective Intervention", which outlined a specific model that has been proven to reduce criminal recidivism.[14] The publication provides a framework for community corrections agencies to implement the following eight specific evidence-based practices.

Eight Evidence-Based Principles for Effective Interventions

1. Assess Actuarial Risk/Needs.
Ongoing assessment is the basis for effective case planning and supervision. As stated in the Effective Intervention publication "Screening and assessment tools that focus on dynamic and static risk factors, profile criminogenic needs, and have been validated on similar populations are preferred. They should also be supported by sufficiently detailed and accurately written procedures." Assessment and reassessment leads to comprehensive case management and is the foundation for sound supervision aimed at reducing recidivism.

---

[12] White, Thomas F. *Re-Engineering Probation Towards Greater Public Safety: A Framework for Recidivism Reduction through Evidence-Based Practices.* State of Connecticut-Judicial Branch, April 2005.
[13] Latessa, Edward J. *From Theory to Practice: What Works in Reducing Recidivism?,* Division of Criminal Justice, University of Cincinnati 2005
[14] National Institute of Corrections, *Implementing Evidence-based Practice in Community Corrections: The Principles of Effective Intervention*, 2005

2. Enhance Intrinsic Motivation.
Probationers often begin complying with their court orders in an effort to avoid further incarceration or because of other external pressure (from family, etc.) Studies show that offenders who develop internal motivation to change their behavior are less likely to reoffend. The goal for probation officers then is to utilize skills such as Motivational Interviewing to move a probationer from the place of external motivation to one of internal motivation.

3. Target Interventions.

a. *Risk Principle*: Prioritize supervision and treatment resources for higher risk offenders.
While common sense might suggest that supervising and providing treatment for low risk offenders would reduce recidivism, in fact the research demonstrates that this has either no effect or the opposite effect. Focusing supervision and treatment efforts on high risk offenders on the other hand, reduces recidivism.

b. *Need Principle*: Target interventions to criminogenic needs.
The efforts of probation and other partners such as treatment providers and other community-based service providers should be focused on those offender characteristics that contribute to criminal activity. It requires an assessment of the offender that identifies criminogenic needs and then the inclusion of the findings in the case plan. Working with the probationer to address his/her substance abuse and to stay away from criminal peers for example, are both ways to reduce recidivism.

c. *Responsivity Principle*: Be responsive to temperament, learning style, motivation, culture, and gender when assigning programs.
Treatment and service matching is critical when referring probationers to community-based providers. Considering and responding to the characteristics of the individual can lead to improved outcomes. Factors such as probationers' gender, age and level of motivation should play a role in determining where to direct them for services. When only one provider agency is available is there a choice between two counselors within the agency, for instance? When possible, selecting the probation officer to supervise an offender should also take these issues into account.

d. *Dosage*: Structure 40-70% of high-risk offenders' time for 3-9 months.
Making sure that offenders have limited idle time is an important factor when developing a case plan. Some probationers have full time employment and have a family to raise in addition to their treatment and probation appointments, and other service requirements. Many offenders though are not employed nor do they have many other obligations and therefore their days consist of hours and hours of

unstructured time and no developed daily routine. To reduce the likelihood of reoffending high risk offenders must have a coordinated, structured schedule for three to nine months.

e. *Treatment*: Integrate treatment into the full sentence/sanction requirements.
Substance abuse and mental health treatment should not be considered a separate plan or entity from the supervision case plan. In the past community corrections has at times left the work of treatment to treatment professionals without incorporating the goals into the probation case plan. Collaboration is crucial to have the greatest impact on high risk offender outcomes.

4. Skill Train with Directed Practice (use Cognitive Behavioral treatment methods).
Some probation departments provide much of their own programming and others refer exclusively to outside agencies. Whatever service is being provided to address substance abuse or criminal thinking for instance it must be an evidence-based model and the provider, whether in-house or in the community must be sufficiently trained in order to reduce recidivism. Additionally, quality assurance should be in place to be certain that the specific practice is being adhered to. Cognitive behavioral models have shown their effectiveness in reducing recidivism and there are some 450 cognitive behavioral treatment models available.

5. Increase Positive Reinforcement.
Probation officers must identify desired behavior in probationers and verbally acknowledge it. In some cases this may be simply identifying the expected actions of the offender when they comply. If the probationer shows up for a scheduled appointment, the PO should mention it, and if the probationer is on time, that should be noted too. Even if the probationer isn't in 100% in compliance, behavior change occurs when approximations are reinforced. Pointing out that the probationer has made five out of the last six appointments, and that they are "on the right track" can serve to reinforce the positive behavior while acknowledging the lack of compliance. Further work may be necessary to identify why a probationer is missing any appointments, but reinforcing the behavior that is in compliance has been demonstrated to reduce recidivism. The research indicates that the ratio of positive to negative reinforcement should be four to one in order to produce long-lasting behavior change.

6. Engage Ongoing Support in Natural Communities.
Utilizing Restorative Justice techniques and other strategies that improve ties to the community and that rely on supportive family members and friends has been linked to reduced recidivism. Offenders will not always have probation and other public case managers to support them. Identifying and helping the offender cultivate these positive relationships can lead to long-term change.

7. Measure Relevant Processes/Practices.
The Evidence-Based Principles for Community Corrections publication specifically notes: "Accurate and detailed documentation of case information, along with a formal and valid mechanism for measuring outcomes, is the foundation of evidence-based practice. Agencies must routinely assess offender change in cognitive and skill development, and evaluate offender recidivism, if services are to remain effective." The document adds that staff performance and fidelity to the evidence-based practice must also be evaluated.

8. Provide Measurement Feedback.
This principle is tied to the last; once evaluation has occurred of both offenders and staff then the results must be used to encourage continued compliance and to make modifications as necessary.

Screening

The risk and needs assessment process begins with screening. The purpose of screening is to separate offenders into risk categories so that high risk offenders can be the focus of further screening and intervention, consistent with the research.[15] There are several evidence-based screening tools available; most consisting of only a few questions. Other types of screening can also occur at the beginning of the case process such as chemical dependency and mental health screening.

Assessment

Assessment takes the next step beyond screening. A comprehensive assessment, often referred to as a biopsychosocial assessment, evaluates several domains such as social functioning, mental health status. There are a multitude of assessment tools available, some for purchase and others available in the public domain. The three most important questions to ask when choosing a particular assessment tool are (1) has the tool been normed and validated? If so, has it been done so cross-culturally?; (2) is it is reliable?; and (3) can the tool directly assist with the case planning of an individual offender?

Training is an important consideration with any screening and assessment tool. Each tool is different and once a screening or assessment is conducted it must also be scored. Whoever administers and scores these instruments must have training and there must be follow-up on the administration techniques to assure accuracy of the results.

[15] National Institute of Corrections, *Implementing Evidence-based Practice in Community Corrections: The Principles of Effective Intervention*, 2005

Cultural Proficiency

"Cultural Competence" tends to refer to an individual's practice, while "Cultural Proficiency" often is used to describe the policies within an agency or system. Scientific research proving the effectiveness of cultural competence is in the early stages of development, and a review of the literature reveals a primary focus on defining the concepts and identifying research questions. There are however some promising studies that support the efficacy of cultural and linguistic competence affecting health and mental health outcomes.[16] Additionally, as noted in Appendix A, there are strategies specifically developed for use with female offenders, for example. Practitioners can increase their level of cultural competency by employing certain strategies. As noted by the National Institute of Corrections, responding to the individual offender's cultural and gender for example when referring to treatment and other services has been shown to reduce recidivism.[17]

Respecting the values and culture of young adults is a key component in making an impact with this age group. As such, probation departments and the community based organizations they work with should provide multicultural materials and services.[18] Identifying and responding to language and cultural differences that may present a barrier to service delivery is crucial. As noted in the Substance Abuse and Mental Health Services Administration's Treatment Improvement Protocol #27, case managers should have the:

- Ability to be self-aware
- Ability to identify differences as an issue
- Ability to accept others
- Ability to see clients as individuals and not just as members of a group
- Willingness to advocate
- Ability to understand culturally specific responses to problems[19]

---

[16] Goode, Tawara D., M. Clare Dunne, Suzanne M. Bronheim *The Evidence Base For Cultural And Linguistic Competency In Health Care*, National Center for Cultural Competence, Center for Child and Human Development, Georgetown University,October 2006

[17] National Institute of Corrections, *Implementing Evidence-based Practice in Community Corrections: The Principles of Effective Intervention*, 2005

[18] Hecht, Michael L; Marsiglia, Flavio F; Kayo, Rebecca; *Cultural Factors in Adolescent Prevention: Multicultural Approach Works Well,* Addiction Professional, May 2004

[19] Rogers, G. *Educating Case Managers for Culturally Competent Practice*. Journal of Case Management 4(2):60-65, 1995.

Strengths-based Approach

The Strengths-based Approach or Strengths Perspective was developed in the field of social work by Dr. Dennis Saleebey, and focuses on identifying clients' potential and including them in the case planning process. It is one of four commonly used case management models.[20] Rather than solely assessing risk, it emphasizes the importance of identifying resiliency factors as well. There is increasing research demonstrating the effectiveness of strengths-based approaches in case management.[21] [22]

Utilizing the Strengths-based Approach, services should focus on the following factors:[23]

- What people have learned about themselves, others, and their world.
- Personal qualities, traits, and virtues that people possess.
- What people know about the world around them.
- The talents and skills that people have.
- Cultural, personal stories, pride and lore.
- The community.

An additional tool that can assist probation officers in developing case plans for 18-25 year old probationers is the Search Institute's "40 Developmental Assets" which outlines internal and external youth characteristics that help to identify both risk and resiliency factors. There are eight types of assets, including support, empowerment, boundaries and expectations, constructive use of time, commitment to learning, positive values, social competencies and positive identity. This educational tool was developed for adolescents age 12-18, but can be considered for this transitional aged population to aid in assessing strengths and deficits.[24] Although not a scientific instrument, this list can provide some guidance in reviewing a youth's background and current situation as probation officers develop case plans to address the needs of 18-25 year old probationers.

Trends of Evidence-based Practices in Probation

As outlined in Appendix A, there are many evidence-based practices that have been identified in the past twenty years. Although none are specifically focused on providing services to 18-25 year olds, there are models that have been

---

[20] Walsh, J. *Clinical Case Management With Persons Having Mental Illness.* Belmont, CA: Brooks/Cole. 2000

[21] Rapp, Richard C.; et al. *Predicting Post-Primary Treatment Services and Drug Use Outcome: A Multivariate Analysis*, American Journal of Drug and Alcohol Abuse, Vol. 24, 1998

[22] Siegal, H., Rapp, C., Li, L., Saha, P., Kirk, K. *The Role of Case Management in Retaining Clients in Substance Abuse Treatment: An Exploratory Analysis.* Journal of Drug Issues (Fall) 1997

[23] Saleebey, Dennis, ed. *The Strengths Perspective in Social Wor*k. Longman: New York, 1997

[24] Search Institute *40 Developmental Assets,* Copyright © 1997, 2007 by Search Institute. All rights reserved. Minneapolis, MN 55413 www.search-institute.org

researched that demonstrate effectiveness in reducing recidivism among populations that include these young adult offenders. The National Institute of Corrections has published and endorsed several models, including the compilation of strategies discussed in "Implementing Evidence-based Practice in Community Corrections: The Principles of Effective Intervention". Over time there has been a movement away from simply identifying those practices thought to be effective to rigorous scientific study of specific practices. One example of this is the finding that lowering caseloads alone is not sufficient to reduce recidivism as noted by Taxman.[25]

Noteworthy among the references found in Appendix B is William Burrell's article titled "Implementing Evidence-based Practices in Community Corrections: Helpful Lessons from Unlikely Places"[26]. He identifies the very real challenge of putting these new strategies into practice. Additional funding is not the only barrier, but changing the way a department does business can also be difficult.

Treatment

It can be expected that a significant percentage of the young adults to be served will require either substance abuse or mental health treatment, or in some cases both. There are specific treatment models that are most appropriate for adolescents and young adults. In some counties treatment placement may be a clinical decision made by another agency, and not part of probation's responsibility. This however is not the case in many counties, and regardless of who makes the ultimate decision it is critical that probation officers understand the basics of substance abuse and mental health treatment.

Dr. Douglas Marlowe at the University of Pennsylvania notes the importance of an integrated approach with respect to drug offenders:

> One approach has shown consistent promise for reducing drug use and criminal recidivism: an integrated public health-public safety strategy that combines community-based drug abuse treatment with ongoing criminal justice supervision.[27]

An outstanding resource detailing important information regarding offenders with co-occurring disorders (chemical dependency and mental illness) is the National GAINS Center. Additionally, there is information and recommendations that can

---

[25] Taxman, Faye *Supervision: Exploring the Dimensions of Effectiveness,* Federal Probation, 2002.
[26] Burrell, William *Implementing Evidence-based Practices in Community Corrections: Lessons from Unlikely Places,* 2005
[27] Marlowe, Douglas B. *Integrating Substance Abuse Treatment and Criminal Justice Supervision,* North Carolina TASC Training Institute http://training.nctasc.net/Marlowe/index.htm

assist probation officers in their work with these individuals who are experiencing both mental illness and substance abuse. Specifically, according to Dr. Roger Peters of the Mental Health Institute at the University of Florida, the following can be expected with these individuals[28]:

- More likely to experience problems when not taking medication or not in treatment
- Use of even small amounts of alcohol or drugs may trigger recurrence of either disorder
- Difficulty comprehending or remembering important information (e.g., verbal memory)
- Not recognize consequences of behavior (e.g. planning abilities)
- Poor judgment
- Disorganization
- Limited attention span
- Not respond well to confrontation

Traditional substance abuse treatment approaches can be less effective with this population because:

- Cognitive impairments make it difficult for individuals to understand and process information
- Confrontational approaches used in substance abuse treatment are not tolerated well
- Frustration and dropout may result from requirements of abstinence and avoidance of drug use

Traditional mental health treatment approaches can be less effective with this population because:

- Persistent unaddressed substance abuse interferes with individuals' ability to follow mental health treatment recommendations
- Active use of substances can interfere with effectiveness of treatment (i.e. medications, etc.)
- Mental health treatment orientation is often insufficient to promote positive change in use of substances and other maladaptive behaviors

Recommendations for this population include:

- At least one year of treatment provided, with the potential for ongoing treatment
- More extensive assessment provided
- Greater emphasis on psychoeducational and supportive approaches

[28] Peters, Roger H. and Fred C. Osher *Co-Occurring Disorders and Specialty Courts*, National GAINS Center, 2004

- Higher staff-to-offender ratio, more mental health staff involved in treatment groups
- More staff monitoring and coordination of treatment activities
- Cross-training of all staff
- Shorter meetings and activities
- Staff guide implementation of activities
- Staff have more responsibility to act as role models and guides
- Information presented gradually, and in small units
- Supportive versus confrontational approach
- Emphasis on instruction, practice, and assistance
- More individual counseling provided
- Task assignments more individualized
- Rewards delivered more frequently

Supervision

While there has been little research done on models specifically aimed at 18-25 year old offenders, there is information available on the unique needs of this group. One study has demonstrated the decreased motivation to change in the 18-25 year old population, specifically finding that compared to their older counterparts, more 18-25 year olds who were on probation and receiving substance abuse treatment were in a "pre-contemplative" stage of change while 26-45 year olds were more frequently in a "contemplative" stage of change. That is, the younger group of probationers did not see a need to change their behavior, while the older probationers were at least considering a behavior change.

Additionally, this study found that only 30% of the younger group was drug free at the time of discharge compared to 70% of the older group.[29] Michael Clark, consultant and member of the Motivational Interviewing Network of Trainers (MINT) emphasizes the importance of meeting the client where they are, noting that an average group of clients beginning substance abuse treatment are typically 40% pre-contemplative stage, 40% contemplative stage, and a mere 20% in the preparation/action stage.[30] This information serves to instruct probation departments in the need to implement Motivational Interviewing, especially with this younger offender group.

While increased supervision can provide the support and opportunity for early intervention that many young offenders need, it may also produce increased violations, technical and otherwise. That is, if probationers are being supervised

[29] Sinha, Rajita; Caroline Easton, Kathleen Kemp, *Substance abuse treatment characteristics of probation-referred young adults in a community-based outpatient program,* American Journal of Drug and Alcohol Abuse, August 2003
[30] Clark, Michael, National Association of Drug Court Professionals 10th Annual Conference, Milwaukee Wisconsin, 2004

more intensively, watched more closely, they will be found to be out of compliance with the terms and conditions more often. This can be disappointing and frustrating as programs attempt to provide more supervision in an effort to assist offenders as well as protect public safety, only to produce statistics that seem to demonstrate less success. In fact, these probationers are not violating more often, but because they are under the microscope as it were, there is the perception that they are less compliant with their probation orders than others who are being supervised less closely. Increased supervision can identify a problem and provide corrective action before the options are foreclosed. If undesired, and often less serious behaviors are caught early there is an opportunity to provide services and support to avoid the behavior escalating to something more serious. A probationer who is found under the influence of alcohol for instance, can be sanctioned, provided treatment and other services before they decide to drink and drive, thereby avoiding a new crime and intervening before the public is put at risk.

Case Management

As noted previously, 18-25 year olds face additional odds. These young offenders need coordinated, comprehensive case management to assist them in negotiating the adult world. Moving from adolescence to adulthood is a difficult process at best, with most young people needing the support of many adults and mentors as they make the transition. In mainstream society these adults and mentors may be parents, teachers, clergy, older siblings, coaches, neighbors, student dorm-managers, co-workers or supervisors. However many of the young adults on probation in California have few if any of these positive role models and likely have unaddressed criminogenic needs as well. There are few if any adults or mentors to help them navigate their passage to adulthood. There also exists a lack of trust in many of these young offenders especially when they have been involved in the juvenile justice system in the past and may not have seen the system as a helpful resource.

A wider array of case management services is required, in that 18 to 25 year old offenders have an increased inability to comply with the terms and conditions of probation due to their immaturity and therefore violate and ultimately get sent to prison. Through years of drug use, offenders lose their ability, or never learn how to organize their time, keep on task, or manage day-to-day roadblocks. Case management provides assistance not only with ancillary needs such as these, but helps to increase retention in treatment with this population as well.[31] Treatment engagement is one of the goals of case management, and it has been demonstrated that standard substance abuse treatment augmented through

[31] Brolin, M., Panas, L., Elliott, E., & Shwartz, M., *The Effect Of Case Management In Substance Abuse Treatment: Analysis Of Special Populations*, National Evaluation Data Services Technical Report, 2002

intensive case management substantially increases treatment engagement.[32] Case management can improve other barriers to success such as health outcomes. For instance, research suggests that drug treatment programs combined with intensive case management programs can reduce HIV risk among homeless women. [33] According to Gary Field, Ph.D. Consensus Panel Chair in the executive summary of Continuity of Offender Treatment for Substance Use Disorders From Institution to Community, TIP 30, "Ideally, a single, full-time case manager works in conjunction with a transition team of involved staff members from both systems."[34] Case management services works to enhance the engagement process, address linkage of clients to treatment and other service providers, and to assist clients in problem solving life-skill issues (including how to take a bus, how to use a calendar, how and why to pick up the phone to ask for help) as well as assisting them with seeking help in addressing underlying issues of abuse.

As noted earlier, recent longitudinal research from the National Institute of Mental Health has demonstrated that brain development, and specifically, that area in the brain that is related to reasoning and problem solving, is the last to mature, into the early 20s.[35] According to the lead author of this study, Dr. Jay Giedd, "the part of the brain that is helping organization, planning and strategizing is not done being built yet."[36] The implications of this are notable. Organization, planning and strategizing are exactly the skills needed to successfully complete probation. Part of this process includes problem solving, being able to develop an alternative, *positive* plan of action when unanticipated events occur. This research supports what much of the state is experiencing, 18-25 year olds are less successful than their older counterparts in complying with their court ordered terms and conditions and therefore require enhanced and motivational case management services to assist them while on probation.

---

[32] Morgenstern, J., Riordan, A., McCrady, B.S., McVeigh, K.H., Blanchard, K.H., Irwin K.T., *Intensive Case Management Improves Welfare Clients' Rates of Entry and Retention in Substance Abuse Treatment,* Mount Sinai School of Medicine, New Jersey Department of Human Services, Rutgers University, January 2001

[33] Kilbourne, A.M., Herndon, B., Andersen, R.M., *Psychiatric Symptoms, Health Services, And HIV Risk Factors Among Homeless Women*, Journal of Health Care for the Poor and Underserved, May, 2002

[34] Center for Substance Abuse Treatment, Substance Abuse and Mental Health Services Administration, *Continuity of Offender Treatment for Substance Use Disorders From Institution to Community,* Treatment Improvement Protocol (TIP) Series 30, 1998

[35] National Institute of Mental Health, Press Release, *Imaging Study Shows Brain Maturing,* May 17, 2004

[36] Geidd, Jay. Interview with PBS Frontline, *Inside the Teen Brain,* online at www.pbs.org/wgbh/pages/frontline/shows/teenbrain/.

Template: *A Plan for California Probation*

Each county in California has unique attributes that require differing approaches to the implementation of evidence-based practices. While the planning questions may be the same, the answers differ due to demographic, geographic, economic and sometimes political realities.

The questions that follow are designed to help a probation department design a plan to provide specific, evidence-based programming to 18-25 year olds. These questions are not exhaustive and may lead to other questions and discussions. This process may include the development of a logic model, an example of which can be found in Appendix B. A logic model can graphically establish a link between who you're planning to serve, what strategies you plan to implement, what impact you expect the strategies to have, and how you will know if you're successful.

<u>Target Population</u>

Q: All 18-25 year-olds or a subset? e.g. gang members, homeless

Q: Why this population or subset? Would you seek to exclude any subset?

Q: What is the rationale and support for population choice? Is there a greater need in this population? Is a greater impact expected?

Q: What local data is available to support this choice? How many 18-25 year olds do you have on probation currently?

Q: What would the caseload size be?

Considerations

While caseload size is one measure of intensity of services, workload must also be considered. In determining how many cases should be assigned to an individual officer there should be some thought given to what the responsibilities would include. Will this officer be writing court reports? Will this officer appear in court regularly on these cases? Will this officer have other unrelated duties that will reduce the amount of time spent with probationers on his/her caseload? Will this officer be conducting field services on these probationers, and if so how large is the geographic area to be covered?

Screening and Assessment

Q: What screening and assessment tools will be used?

Q: Who will administer the screening and the assessment?

Q: What is the cost of the screening tool? The assessment tool? Is it proprietary or in the public domain?

Q: What other, non-monetary costs might be expected, such as staff time to administer or score the screening or assessment tool?

Q: Is training required to administer either the screening tool or the assessment tool?

Q: How will the results of the screening and assessment be used?

Considerations

Departments must begin by identifying what screening and assessment tools are currently being used and determining whether they are evidence based and whether the assessment is 3rd or 4th generation. If not, what will be necessary to implement a different tool(s)? What are the barriers to implementation? By identifying specific needs and barriers a plan can be developed to work toward implementation of tools that are standardized and that are developmentally appropriate.

Objectives

Q: What do you hope to achieve? e.g. increased public safety; reduced recidivism; improved performance on probation.

Q: Are there other stakeholders who may have goals or objectives that you might take into consideration? e.g. does the community have an interest in restoring healthy families and therefore objectives such as employment, safe and stable housing, and appropriate parenting could be included.

Considerations

Objectives must be measurable and time bound. Outcome measures then will be the specific indicators of achievement. When developing objectives it is important to be realistic. As discussed early, "reducing violations" may be a goal, however it is possible that due to the increased supervision there will be increased violations. Also, recognizing that there are many factors influencing a particular outcome, objectives should be tied to the population being served. For

instance, an objective to "reduce crime committed by 18-25 year olds throughout the county" suggests that the strategies implemented will have an impact on all 18-25 year olds in the jurisdiction, when in fact the goal is to impact those on probation or a smaller set of 18-25 year old probationers.

Outcome Measures

Q: How will you know when you're successful? e.g. improved school/work attendance; drug free days; reduction in crime/arrest free days.

Q: Will other indicators be tracked and measured? e.g. diploma or GED achievement, independent living skills.

Q: Who will collect this data? Who will analyze it? How will it be reported out?

Considerations

Outcome measures must be objective and quantifiable. Outcomes such as "improved quality of life" may be valuable, but without a specific measure or measures it can often become a subjective determination. Rather, if "improved quality of life" is the goal, then the next question must be "What indicators will tell us whether someone's quality of life is improved? Some examples might be stable housing, employment, etc. These can be measured—with some specific definitions attached to the terms (for instance, "employed" may seem like a term that is defined the same by everyone, but it must be given a definition for the purposes of the evaluation. Is "volunteer work" considered employment? What about a mother who chooses to stay home with her infant child while her husband works to support the family?) Whatever are decided upon as outcome measures must then have specific data elements identified and that data must be available. The logistical questions must be addressed including who currently captures this data, if anyone? How accessible is it to access? Are there any restrictions on who can have the information? Lastly, involving a professional evaluator or researcher can be extremely helpful in this process.

Strategies

Q: What specific interventions do you plan to implement? Are they evidence based?

Q: What services do these offenders need? Will this require additional funding?

Q: How will this impact the current caseload/workload?

Q: What will this require in terms of other resources, such as additional staff time to implement a strategy like Motivational Interviewing for instance?

Q: What will the collaborative process look like to carry out this plan? Who will you partner with to maximize the success of this effort?

Considerations

Many if not most 18-25 year old probationers will have a substance abuse problem that may or may not have developed into full blown chemical dependency. This will require specific treatment interventions as well as support. While it is difficult for any probationer to admit they are addicted, it is additionally hard for this age group to envision a life without alcohol and/or drugs. Youth in this age group are expected to act like adults, but many lack the lifeskills to manage their finances or maintain employment. Case plans must include increased support and services and often more frequent contact with the probation officer and service providers in the community. The probation department should develop a list of treatment options and community based services that can address the specific needs of these offenders. In addition, the individual probationer should not be overlooked as an asset in this process. He/she can play an important role in identifying his/her needs and helping to develop this list of services.

There are many opportunities to collaborate that will ultimately lead to a more comprehensive and successful program. Some examples include: working with the sheriff's department to begin the screening, assessment and case planning process while the probationer is still in custody; collaborating with county and community-based organizations that provide a wide range of services such as health care, substance abuse and mental health counseling, vocational training and other assistance; and developing partnerships with other programs that serve the same or similar populations.

<u>Activities</u>

Q: What specific tasks will be accomplished to implement this plan? e.g. identification of eligible 18-25 year olds; development of a budget; identification of specific probation officers to be assigned to the new caseload(s); phone call to the Private Industry Council to determine available services.

Q: What training will be necessary for officers and other personnel? e.g. specific case planning strategies for adolescents and young adults; motivational interviewing.

Considerations

Once the strategies are identified an action plan must be developed for implementation purposes. These things are the individual tasks that must be completed for the new services and new approach to begin. It is helpful if this list of activities or action plan has very detailed items (as minute as a phone call) and that each item is assigned to a specific person. There should be a realistic due date attached to each as well. In some cases where additional funding is necessary to fully implement a project or set of strategies, the action plan may be divided up into phases. The first phase would include the steps necessary to access additional funding (grant writing, etc.) as well as a modified plan to begin operation with a limited number of the selected target population, sometimes called a pilot project. The second phase would detail activities needed to implement at full capacity.

Further, adherence to an action plan and fidelity to a particular set of strategies is critical. It is important to utilize a project management model, of which there are many, that will assure that implementation is occurring as planned and that outcomes are being measured. Mid-course correction or adjustment of an action plan may take place when certain strategies or procedures are not as successful as initially anticipated, however this type of redirection should only occur when data has been collected and analyzed.

Conclusion

The 18-25 year old probationer poses some unique supervision challenges. Although legally adults, brain development is still occurring for most of these offenders making them similar in many ways to those in the juvenile system. Employing evidence-based models that address the risk factors and varied needs of young adult offenders, while assuring service delivery is developmentally appropriate requires a comprehensive plan.

The planning process involves an understanding of the specific young adults to be served. The characteristics will differ from county to county, and in order to effectively plan, information about the target population should be gathered and reviewed by probation and other stakeholders. Knowing the education level, parental status, and what percentage is homeless or has a mental health diagnosis will determine the type of service and support needed. Once this is accomplished a set of evidence-based strategies can be identified and implementation preparation can begin.

The goal is to protect public safety while providing young adults on probation the greatest chance to be productive citizens and to stay out of prison. By implementing evidence-based practices this can be achieved.

Bibliography

(For more extensive references see our website: www.cpoc.org/)

SUPERVISION

Aos, Steve, Marna Miller, and Elizabeth Drake. (2006). *Evidence-Based Adult Corrections Programs: What Works and What Does Not.* Olympia: Washington State Institute for Public Policy.

Latessa, Edward J. (2005) *From Theory To Practice: What Works In Reducing Recidivism?*

National Institute of Corrections, *Implementing Evidence-based Practices: The Eight Principles of Effective Intervention*, 2005

Center for Substance Abuse Treatment. *Enhancing Motivation for Change in Substance Abuse Treatment*, Treatment Improvement Protocol (TIP) Series 35, DHHS Publication No. (SMA) 99-3354. Washington, DC: U.S. Government Printing Office, 1999.

Petersilia, Joan (editor), *Community Corrections*: *Probation, Parole, and Intermediate Sanctions*, Oxford University Press, 1998.

Petersilia, Joan, *Reforming Probation and Parole*, American Correctional Association, Lanham, Maryland, 2002.

Backer, T.E., Guerra, N., Hesselbein, F., Lasker, R. & Petersilia, J. *Blueprint for building evidence-based community partnerships in corrections*. Briefing paper prepared for the California Department of Corrections and Rehabilitation, 2005. http://www.humaninteract.org/images/cdcr-blueprint.pdf

Proshaska, James, DiClemente, Carlo, Norcross, John, *Changing for Good,* Avon Books, New York, 1994

TREATMENT

Castonguay, L. G. and L. E. Beutler (2006). Principles of Therapeutic Change That Work. Oxford, Oxford University Press.

Miller, W. R., Ph.D. and K. M. Carroll (2006). Rethinking Substance Abuse. New York, The Guilford Press.

Norcross, J. C., L. E. Beutler, et al. (2006). Evidence-Based Practices in Mental Health. Washington, American Psychological Association.

Center for Substance Abuse Treatment. *Substance Abuse Treatment for Adults in the Criminal Justice System.* Treatment Improvement Protocol (TIP) Series 44. DHHS Publication No. (SMA) 05-4056. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2005.

Center for Substance Abuse Treatment. *Integrating Substance Abuse Treatment and Vocational Services.* Treatment Improvement Protocol (TIP) Series 38. DHHS Publication No. (SMA) 00-3470. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2000.

OFFENDER ASSESSMENT

Bogue, B. (2000). "Implementing An Offender Assessment/Classification System: A Practitioner's Operator Guide."

Del Pra, Z. (2004). "In Search of a Risk Instrument." Topics in Community Corrections: 9-12.

Latessa, E.J. & Lowenkamp, C.T. (2005) "The Role of Offender Risk Assessment Tools and How to Select Them." For the Record, 4th Quarter, 18-20.

WEBSITES

Washington State Institute for Public Policy
http://www.wsipp.wa.gov/

National Council on Crime and Delinquency
http://www.nccd-crc.org/nccd/n_index_main.html

Substance Abuse and Mental Health Services Administration:
National Registry of Evidence-based Programs and Practices
http://www.nrepp.samhsa.gov/

Appendix A: *Evidence-Based Practice Models*

MODEL REFERENCES: EVIDENCED-BASED PRACTICES - ADULT PROBATION MODELS
PRELIMINARY (LAST UPDATE - 9/16/05)

REFERENCE SOURCE	GENERIC/ SPECLZD.	ADULT/ JUV.	ABSTRACT/SUMMARY	IMPLEMENTED IN/ ENDORSED BY_
CPOC (1980) *Probation Standards* • *HISTORICAL DOCUMENT (Document Could Serve As A "Prototype" To Meet CPOC Strategic Planning Objective #1)*	Generic Standards	Adult & Juvenile (All Prob. Operations)	This document was the product of the CPOC "Standards Project." In brief, the purposes of the Standards Project were (1) to influence California legislation, (2) to define the purpose & philosophy of probation in California; (3) To establish uniformity of probation department operations across California; (4) To provide basis for viewing probation as a profession in California; and (5) To provide a defense against external attacks. The 189 page document presents full range of standards across all probation operations. Sections include I. Generic Standards (probation org., citizen involvement, court functions, records), II. Juvenile Court Standards; III. Probation Admin. Standards; IV. Adult Probation Services Standards; V. Juvenile Probation Services Standards; VI. Secure & Non-Secure Juvenile Institutions Standards; VII. Abuse and Neglect Standards.	• California • Supported by: Foundation for Continuing Education in Corrections (Law Enforcement Assistance Administration Grant), OCJP, CA Probation, Parole and Correctional Association *(NOTE: No Research Based Citations)*
National Institute of Corrections and Maryland Department of Public Safety (2004?) *Tools of the Trade: A Guide to Incorporating Science Into Practice* **Maryland Division of Parole and Probation. (2004?)** *"Nuts and Bolts" of PCS - Proactive Community Supervision*	Generic (with section on Specialized	Adult Sup. (applies to juvenile as well)	Comprehensive presentation of the NIC EBP model. Full discussion of the concepts and components of the model. Includes "Worksheets" i.e. with exercises for staff. Condensed summary of the NIC EBP model.	• Maryland is the model implementation site. • NIC/CJI adopted model that is now being implemented elsewhere. • California: Amador County (CPO: Michael Kriletich)
Minnesota Dept. Corrections January 2001 *Research-Based Practices for Field Services: 8 Point Plan*	Benchmarks for eight "best practices" in field services	Applies to Adult and Juv. Sup.	Describes 8 field practices with their respective recommended practices, claim statement and research validation. It also has a list of outcomes ("you know it when you see…") when these practices are properly implemented.	• Minnesota Dep. Of Corrections • • NIC adopted model that is now being implemented elsewhere.
State of Connecticut-Judicial Branch (April 2005) *A Framework for Recidivism Reduction through Evidenced-*	Generic Standards	Applies to Adult and Juv. Sup.	Briefly reviews the new and occasionally conflicting approaches for managing correction agencies and attempts to answer the questions, "How do we translate the models operationally in our agencies?" What do we and our staff need to do with in our special agency roles	• Tom White, Director or Operations--State of Connecticut

This review was completed for CPOC by Drs. Shirley Hunt and Ellen Dellis, Research Division, Orange County Probation Department, and Christina Nyikes, Grants and Planning, San Diego County Probation Department, under the direction of Vincent Iaria, Chief Probation Officer, San Diego County and with support from Colleene Preciado, Chief Probation Officer, Orange County and John Hensley, Deputy Chief Probation Officer, San Diego County.

MODEL REFERENCES: EVIDENCED-BASED PRACTICES - ADULT PROBATION MODELS
PRELIMINARY (LAST UPDATE - 9/16/05)

REFERENCE SOURCE	GENERIC/ SPECLZD.	ADULT/ JUV.	ABSTRACT/SUMMARY	IMPLEMENTED IN/ ENDORSED BY_
based Practice			and responsibilities to implement and sustain these strategies?" Defines six elements in an evidenced-based model for probation services. If theses process are fully operationalized, this model should maximize recidivism reduction, improve public safety, and reduce prison overcrowding.	• NIC adopted model that is now being implemented elsewhere.
Evidenced-based Practice in Probation and Parole: The Implementation Challenge **Connecticut Judicial Branch-court Support Services Division**	Generic	Applies to Adult and Juv. Sup.	Five years since the implementation of Evidenced-based Practice in the Connecticut Adult and Juvenile Probation system, author, Tom White, details the things he would have done differently if he knew at the time what he knows now. They key obstacle in the implementation of evidence-based practice "is not in determining what needs to be done, but rather how to do it.	• Tom White, Director or Operations--State of Connecticut • NIC adopted model that is now being implemented elsewhere.
Implementation of Effective Correctional Management of Community Offenders **(A NIC National Satellite and Internet Broadcast, Feb. 24, 2004)**	Generic	Applies to Adult and Juv. Sup.	Key areas covered in broadcast: 1) Differentiate between controlling offenders for compliance and intervening to reduce recidivism 2) Extent to which correctional practices aligns with research 3) What it takes for systems to change 4) How evidenced-based principles can improve an agency's effectiveness and efficiency during times of limited resources 5) Distinguish between fads and evidence-based practices	• NIC adopted model that is now being implemented elsewhere. • Brad Bogue, Justice System Assessment & Training • The Carey Group (Mark Carey is former Deputy Commissioner of Community and Juv. Services in the Minn. Dept. Corrections • Crime and Justice Institute
Implementing Evidence-Based Practice in Community Corrections: ***The Principles of Effective Intervention*** ***Leading Organization Change***	Generic	Adult Sup. (applies to juvenile as well)	*NIC-CJI Collaboration Project Vision:* To build learning organizations that reduce recidivism through systemic integration of evidence-based principles in collaboration with community and justice partners. Documents (see far left) are in-depth sources on each of the model components. The Integrated Model is based on the premise that the implementation of evidence-based principles in community corrections can only be achieved when integrated with corresponding	• NIC adopted model that is now being implemented elsewhere. • Crime and Justice Institute

This review was completed for CPOC by Drs. Shirley Hunt and Ellen Dellis, Research Division, Orange County Probation Department, and Christina Nyikes, Grants and Planning, San Diego County Probation Department, under the direction of Vincent Iaria, Chief Probation Officer, San Diego County and with support from Colleene Preciado, Chief Probation Officer, Orange County and John Hensley, Deputy Chief Probation Officer, San Diego County.

MODEL REFERENCES: EVIDENCED-BASED PRACTICES - ADULT PROBATION MODELS
PRELIMINARY (LAST UPDATE - 9/16/05)

REFERENCE SOURCE	GENERIC/ SPECLZD.	ADULT/ JUV.	ABSTRACT/SUMMARY	IMPLEMENTED IN/ ENDORSED BY_
and Development *Collaboration for Systemic Change in The Criminal justice System* *Implementing Effective Correctional management OF Offenders in the Community Outcome and Process Measures*			organizational development and collaboration.	
Using an Integrated Model to Implement Evidence-based Practices in Corrections **Lore Joplin, Brad Bogue, Nancy Campbell, Mark Carey, Elyse Clawson, Dot Faust, Kate Florio, Billy Wasson, and William Woodward** **Published in August 2004 Publication of the International Community Corrections Association and American Correctional Association** *Implementing Evidence-based Practices in Corrections* **Elyse Clawson, Brad Bogue, Lore Joplin**	Generic	Adult Sup. (applies to juvenile as well)	The significant reduction of offender recidivism in community corrections by implementing a series of evidence-based practices is explained. This article is comprised of the following sections: overview; an integrated model of implementation; evidence-based practice, eight principles for effective interventions, and related questions to ask; collaboration; and conclusion. Framework of eight evidence-based principles (all highly interdependent) for effective interventions listed in developmental sequence: Principle 1) Assess Actuarial Risk/Needs. Principle 2) Enhance Intrinsic Motivation. Principle 3) Target Interventions. 3a) *Risk Principle*: Prioritize supervision and treatment resources for higher risk offenders. 3b) *Need Principle*: Target interventions to criminogenic needs. 3c) *Responsivity Principle*: Be responsive to temperament, learning style, motivation, culture, and gender when assigning programs. 3d) *Dosage*: Structure 40-70% of high-risk offenders' time for 3-9 months. 3e) *Treatment Principle:* Integrate treatment into the full sentence / sanction requirements.	• Tom White, Director or Operations--State of Connecticut • NIC adopted model that is now being implemented elsewhere.

This review was completed for CPOC by Drs. Shirley Hunt and Ellen Dellis, Research Division, Orange County Probation Department, and Christina Nyikes, Grants and Planning, San Diego County Probation Department, under the direction of Vincent Iaria, Chief Probation Officer, San Diego County and with support from Colleene Preciado, Chief Probation Officer, Orange County and John Hensley, Deputy Chief Probation Officer, San Diego County.

MODEL REFERENCES: EVIDENCED-BASED PRACTICES - ADULT PROBATION MODELS
PRELIMINARY (LAST UPDATE - 9/16/05)

REFERENCE SOURCE	GENERIC/ SPECLZD.	ADULT/ JUV.	ABSTRACT/SUMMARY	IMPLEMENTED IN/ ENDORSED BY
			Principle 4. Skill Train with Directed Practice (use Cognitive Behavioral treatment methods). Principle 5. Increase Positive Reinforcement. Principle 6. Engage Ongoing Support in Natural Communities. Principle 7. Measure Relevant Processes/Practices. Principle 8. Provide Measurement Feedback.	
American Correctional Association Standards and Accreditation	Generic	Applies to Adult and Juv. Sup.	Standards are revised based on changing practices, current case law and agency experiences. Standards reflect the views of correctional practitioners, architects, medical and legal experts.	• Florida State Department of Corrections • National Organization
Minnesota Cognitive Behavioral Network: Sharing, Striving, Promoting **(online program guide)**	Generic	Applies to Adult and Juv. Sup.	Minnesota has attempted for many years to institute evidence-based practices. They are currently working with Integrated Model program name, population served (e.g., Adults – Medium to High-Risk) and program description:	• NIC adopted model that is now being implemented elsewhere. • Minn. Dept. Corrections
What Work in Probation and Youth Justice **. Edited by Ross Burnett (Center for Criminal Research and Probation Studies Unit, University of Oxford do not have pub.**	Generic	Applies to Adult and Juv. Sup.	Describes the development of evidence-based practices and the disseminating of these practices throughout Probation and Youth Justice Services in the UK.	• Adaptation of these practices in the United Kingdom
Creating Public Value. **Mark Moore (1995)** ***The Fifth Discipline: The Art and Practice of the Learning Organization.*** **Peter Senge (1990)** **Do not have original pub.**	N.A.	N.A.	The organizational developmental component of the NIC EBP model is predicated on the models presented in these two books. They provide a frameworks for organizations to implement internal modifications.	
Underdown (1998). "Strategies for Effective Offender Supervision: Report of the HMIP	Generic	Adult	What Works Project focused on community supervision, and a commitment that the work would be informed by published effectiveness research.	This report drew together all available evidence about the impact of work of probation

This review was completed for CPOC by Drs. Shirley Hunt and Ellen Dellis, Research Division, Orange County Probation Department, and Christina Nyikes, Grants and Planning, San Diego County Probation Department, under the direction of Vincent Iaria, Chief Probation Officer, San Diego County and with support from Colleene Preciado, Chief Probation Officer, Orange County and John Hensley, Deputy Chief Probation Officer, San Diego County.

MODEL REFERENCES: EVIDENCED-BASED PRACTICES - ADULT PROBATION MODELS
PRELIMINARY (LAST UPDATE - 9/16/05)

REFERENCE SOURCE	GENERIC/ SPECLZD.	ADULT/ JUV.	ABSTRACT/SUMMARY	IMPLEMENTED IN/ ENDORSED BY_
What Works Project" (England & Wales)			Project was established in 1996 by HM Chief Inspector of Probation to provide best practice guidance to Probation areas with regard to effective types of programming appropriate for supervising offenders in the community and advice on the management arrangements needed to support their effective provision	services with offenders. This report demonstrates that community penalties provide the courts with an effective and cost-effective response to a wide range of offenders.
Chapman and Hough (1998) "Evidence Based Practice: A Guide to Effective Practice" An initiative of the Home Office Probation Unit and Association of Chief Probation Officers to support probation services (England & Wales)	Generic	Adult	The Effective Practice Guide prepared as part of HMIP's "What Works" Project, and provides help and advice to probation managers and practitioners about evidence-based practice. Focuses on the supervision of offenders on probation, community service and combination orders. The recommended approach is readily transferable to some aspects of probation work, such as pre and post-release supervision. Specific guidance is provided on: ▪ Assessment ▪ Case management ▪ Program delivery ▪ Community reintegration.	Practical guidance for putting "What Works" into practice, both resource and reference book. Aimed at both practitioners and their managers. Key processes are described in supervision practice and ways of ensuring that practice is effective
Partridge (2004). "Examining case management models for community sentencing" (England & Wales)	Generic	Adult	Examination of supervision models for the purpose of comparison and exploration of all aspects of community supervision (initial offender risk and needs assessment, program delivery, completion of order). Review/Analysis of 5 case study areas representing 3 main models (specialist, generic, hybrid). Key finding: regardless what model is delivered, the following core principles were found to enhance offender engagement: ▪ The need to acknowledge offender experiences and needs ▪ Continuity of contact with same case manager and other staff ▪ The greater level of task separation the more the offenders were confused by why they were undertaking different elements of their supervision, particularly when contact with the case manager has been limited	Identifies key components of supervision models and discusses the variations between models for the purpose of recommendations for future practice.

This review was completed for CPOC by Drs. Shirley Hunt and Ellen Dellis, Research Division, Orange County Probation Department, and Christina Nyikes, Grants and Planning, San Diego County Probation Department, under the direction of Vincent Iaria, Chief Probation Officer, San Diego County and with support from Colleene Preciado, Chief Probation Officer, Orange County and John Hensley, Deputy Chief Probation Officer, San Diego County.

MODEL REFERENCES: EVIDENCED-BASED PRACTICES - ADULT PROBATION MODELS
PRELIMINARY (LAST UPDATE - 9/16/05)

REFERENCE SOURCE	GENERIC/ SPECLZD.	ADULT/ JUV.	ABSTRACT/SUMMARY	IMPLEMENTED IN/ ENDORSED BY_
			▪ Face to face contact with a small case management team was beneficial for both staff and offenders ▪ Openness, flexibility, and support were key factors in motivating offenders. ▪	
Hollis, et al. (2004) "Pathfinder programmes in the Probation Service: a retrospective analysis" (England & Wales)	Generic	Adult	The Crime Reduction Programme (CRP) was established to develop and implement a national evidence-based crime reduction strategy. One area highlighted as important was the need to work effectively with offenders. This led to the development of Pathfinders programmes for offenders serving probation orders.	Analysis of the Pathfinders Programmes, which are based on "What Works" principles.
OASys: The New Offender Assessment System (2003) (England & Wales)	Generic	Adult	The Offender Assessment System is a standardized process for the assessment of offenders developed by the National Probation Service and the Prison Service. Replaced ACE and LSI-R. ▪ Assess how likely an offender is to be reconvicted ▪ Identify and classify offending-related needs including basic personality characteristics, thinking deficits and social issues ▪ Assess risk of harm to others and also to themselves ▪ Assist with the management of risk of harm ▪ Link assessments with supervision plans and sentence plans ▪ Indicate need for further specialist assessments Measure how an offender changes during the period of supervision/sentence	Offender Assessment that is research based, and will assess an offender's likelihood of reoffending, the criminogenic factors associated with reoffending, and the risk of harm he/she presents. OASys was developed to provide a consistent and in-depth assessment for the Prison and Probation Services.
The NOMS (National Offender Management Service) Offender Management Model (England & Wales)	Generic	Adult	Offender Management, detailing a Whole System Approach. "System" is made up of the following areas: leadership, human resources, resources, partnership, policy and strategy, systems, structures, monitoring and evaluation, and research and development. This Whole System perspective needs to be applied at national, regional and operational levels. The model encourages thinking about each offender's period of engagement with NOMS as a project, and then applying contemporary project management wisdoms to it. Thus, the Sentence Plan is the Project Plan.	Goal is to provide a universal way of understanding and developing components of effectively working with offenders. The model is intended to provide a single framework within which members of different organizations can function.

This review was completed for CPOC by Drs. Shirley Hunt and Ellen Dellis, Research Division, Orange County Probation Department, and Christina Nyikes, Grants and Planning, San Diego County Probation Department, under the direction of Vincent Iaria, Chief Probation Officer, San Diego County and with support from Colleene Preciado, Chief Probation Officer, Orange County and John Hensley, Deputy Chief Probation Officer, San Diego County.

MODEL REFERENCES: EVIDENCED-BASED PRACTICES - ADULT PROBATION MODELS
PRELIMINARY (LAST UPDATE - 9/16/05)

REFERENCE SOURCE	GENERIC/ SPECLZD.	ADULT/ JUV.	ABSTRACT/SUMMARY	IMPLEMENTED IN/ ENDORSED BY_
			Core features of the Model: ▪ Model is built around an Offender-Focused Human Service Approach to work with individual offenders ▪ It is a Differentiated Approach, enabling different resources and styles to be matched to different cases ▪ "One Sentence: One Manager" structure is considered to be the baseline against which all delivery arrangements are judged ▪ It is a Brokerage Approach in which an Offender Manager brokers resources, but does not commission or purchase them ▪ The model incorporates a New Concept of Teamwork ▪ It is a Whole System Approach, which requires that organizational support functions support the core business process of Offender Management	
Martin and Roberts (2004) From Incarceration to Community *A Roadmap to Improving Prisoner Reentry and System Accountability in Massachusetts* Crime and Justice Institute	Generic	Adult	Addresses policy areas related to reentry (sentencing through post-release follow-up), with specific focus on the state prison system, houses of corrections, and parole. Outlines a system focused on high-risk offenders that hopes to reduce their risk of re-offending, and re-victimizing. The Transition from Prison to Community Initiative (TCPI) provided guidance for this report and serves as a guide to incorporating research-based and proven approaches throughout the reentry process.	Outlines a comprehensive model for reentry in Massachusetts, drawing on national research literature of evidence based practices and interviews with experts, officials, practitioners, and community based service providers.
Transition from Prison to Community Initiative (2002) (National Institute of Corrections)	Generic	Adult	Designed to help states improve offenders' transition from prison to communities by incorporating proven reforms (What works literature) and best practices for managing high risk and special needs offenders. Objectives: ▪ Promote public safety by reducing the threat of harm to persons and property by released offenders in the community ▪ Increase success rates of offenders who transition from prison Premise of TCPI: ▪ Corrections, law enforcement and human services agencies are	Model based on best practices and "what works" literature.

This review was completed for CPOC by Drs. Shirley Hunt and Ellen Dellis, Research Division, Orange County Probation Department, and Christina Nyikes, Grants and Planning, San Diego County Probation Department, under the direction of Vincent Iaria, Chief Probation Officer, San Diego County and with support from Colleene Preciado, Chief Probation Officer, Orange County and John Hensley, Deputy Chief Probation Officer, San Diego County.

MODEL REFERENCES: EVIDENCED-BASED PRACTICES - ADULT PROBATION MODELS
PRELIMINARY (LAST UPDATE - 9/16/05)

REFERENCE SOURCE	GENERIC/ SPECLZD.	ADULT/ JUV.	ABSTRACT/SUMMARY	IMPLEMENTED IN/ ENDORSED BY
			stakeholders in the transition process ▪ Stakeholders should freely share information relating to transition among stakeholder organizations ▪ Transition should be built on proven reforms and best practices ▪ Transition reforms should be affordable, transferable, adaptable ▪ Basic transition reforms should apply to all imprisoned offenders ▪ The allocation of resources should vary directly with the level of risk that groups of offenders pose.	
The Supervision of Federal Offenders Monograph 109 (Revised 2003)	Generic	Adult	Sets national policy for supervision of federal offenders, with the purposes to: ▪ Establish the desired outcomes, goals, and principles of good supervision ▪ Provide guidance to Probation Officers in carrying out supervision responsibilities in accordance with these principles.	Revisions in 2003 reflect advances in knowledge and incorporate best practice findings from research
The Supervision of Federal Defendants Monograph 111 (Revised 2004)			Sets national policy for supervision of federal defendants, with the purposes to: ▪ Establish the desired outcomes, goals, and principles of effective supervision ▪ Provide guidance to Probation and Pretrial Service Officers in carrying out supervision responsibilities in accordance with these principles.	Provides guidance in the practical aspects of the supervision planning process. Revisions reflect changes in supervision populations, case law and policies, and advances in knowledge of approaches that are effective in promoting desired supervision outcomes.

This review was completed for CPOC by Drs. Shirley Hunt and Ellen Dellis, Research Division, Orange County Probation Department, and Christina Nyikes, Grants and Planning, San Diego County Probation Department, under the direction of Vincent Iaria, Chief Probation Officer, San Diego County and with support from Colleene Preciado, Chief Probation Officer, Orange County and John Hensley, Deputy Chief Probation Officer, San Diego County.

Appendix B: *Evidence-Based Practice Research References*

RESEARCH REFERENCES : EVIDENCED-BASED PRACTICES - ADULT PROBATION MODELS

PRELIMINARY (LAST UPDATE - 9/16/05)

REFERENCE SOURCE	GENERIC/ SPECLZD.	ADULT/ JUV.	ABSTRACT/SUMMARY	VALUE
Taxman (2002). "Supervision: Exploring the Dimensions of Effectiveness. *Federal Probation*, September.	Generic (EBP model includes some examples of specialized offender components)	Adult	Review of research studies on effectiveness of supervision (general vs. intensive) on recidivism. Results of that review found very little research on different components of supervision outside of contacts and reduced caseloads (increased PO & offender contacts and reduced caseloads did NOT reduce recidivism. Best example: Petersilia & Turner study of 14 sites.) Effectiveness needs to consider purpose of supervision & case management protocols. E.g. what's provided in addition to "monitoring" (treatment interventions) & qualitative nature of contacts. Discusses Risk Assessment (NIC recommended model from 80's -- few agencies now using systematic screening/assessment to target resources). Presents different "theoretical' models of supervision (e.g. constructs of procedural justices; cognitive theories; Areas of Evidenced-based practices to consider (review of findings) • Use of Informal Social Controls; Intervention Duration; Dosage Units; Continuity; Graduated responses; **Presents overview of EBP Model components (based on cognitive behavioral & treatment interventions.)**	Good review of research findings by 2002 on Supervision. Major focus: Presentation of the EBP model (basis for NIC/NIJ model)
International Community Corrections Association (monograph series project)	Generic	Adult and Juvenile	Monograph series that summarizes the research on the effects of correction practices and treatment services.	International document on "what works" in correctional intervention
Mark Gornik (2002). "Moving from Correctional Program to Correctional Strategy: Using Proven Practices to Change Criminal Behavior."	Generic	Adult and Juv. Sup.	Research in the corrections area has established that cognitive behavioral and social leaning approaches have provided an answer to the question "What works?". Elucidates the principles and practices that are general strategies to change offender behavior ,although they have been found to be effective specifically in the area in substance abuse treatment.	Excellent integration of cognitive and behavioral and social learning research with correction practices. Used as a reference paper in the NIC Integrated Model article
American Correctional Association Standards and Accreditation	Generic	Adult and Juv. Sup.	The Standards Committee revises standards based on changing practices, current case law and agency experiences. Approval reflects the views of correctional practitioners, medical and legal experts.	National Association Florida Dept. of Corrections

This review was completed for CPOC by Drs. Shirley Hunt and Ellen Dellis, Research Division, Orange County Probation Department, and Christina Nyikes, Grants and Planning, San Diego County Probation Department, under the direction of Vincent Iaria, Chief Probation Officer, San Diego County and with support from Colleene Preciado, Chief Probation Officer, Orange County and John Hensley, Deputy Chief Probation Officer, San Diego County.

RESEARCH REFERENCES : EVIDENCED-BASED PRACTICES - ADULT PROBATION MODELS

PRELIMINARY (LAST UPDATE - 9/16/05)

REFERENCE SOURCE	GENERIC/ SPECLZD.	ADULT/ JUV.	ABSTRACT/SUMMARY	VALUE
Alan Leschied, Gary Bernfeld and David P. Farrington. (July 2001). Offender Rehabilitation in Practice: Implementing and Evaluating Effective Programs	Generic	Adult and Juv. Sup	Research and evaluation fields suggest that community safety is best achieved through policies promoting human services rather than on systems predicated on sanctions and deterrence. Don Andrews of Canada and Scott Henggeler of the United States suggest that "promoting intervention in an individual's own environment-referred to as 'ecological integrity'-is closely associated with effective intervention." The research literature consistently documents evidence and reports on replication of programs that have demonstrated effectiveness-- "The extension of knowledge, what is popularly referred to as '*technology transfer*', is the next level of systemic intervention in criminal justice. This volume would be the first to be concerned with that transfer of knowledge. Prominent researchers and practitioners in the criminal justice field will contribute their knowledge of what it takes to implement effective correctional practices--with *integrity*."	Focuses on the actual implementation of evidence-based practices in the UK.
Doris Layton Mackenzie (2005) The Importance of Using Scientific Evidence to Make Decisions About Correctional Programming	Generic	Adult and Juv. Sup	Do not have original pub. **Criminology Public Policy Vol. 4 Issue 2 Page 249 May 2005**	
Peter Raynor (2003) Evidenced-based Probation and its Critics Do not have original pub.	Generic	Adult and Juv. Sup	Reviews the critiques of the evidence-based approach and accounts for its rapid expansion within key areas (medicine, nursing, mental health, education, and social welfare.) Arguments include "that the new methods pathologized offenders, they ignore social causes of crime, that they ignore diversity, and that they are being implemented before their efficacy has been demonstrated."	Helpful to read critiques of an approach when it is being highly touted as the "next new thing."
Probation Services Task Force, Final Report, June 2003 (Administrative Office of the Courts and CSAC)			The task force undertook extensive research into probation services, examined the governance structure in California and other states, and elicited broad feedback from a variety of stakeholders through a comprehensive outreach effort. The findings and recommendations in this report sought to establish the foundation for a long-term plan that would	The task force's work represents the most thorough examination of the state's probation system by a multidisciplinary body since the Legislature authorized the

This review was completed for CPOC by Drs. Shirley Hunt and Ellen Dellis, Research Division, Orange County Probation Department, and Christina Nyikes, Grants and Planning, San Diego County Probation Department, under the direction of Vincent Iaria, Chief Probation Officer, San Diego County and with support from Colleene Preciado, Chief Probation Officer, Orange County and John Hensley, Deputy Chief Probation Officer, San Diego County.

RESEARCH REFERENCES : EVIDENCED-BASED PRACTICES - ADULT PROBATION MODELS

PRELIMINARY (LAST UPDATE - 9/16/05)

REFERENCE SOURCE	GENERIC/ SPECLZD.	ADULT/ JUV.	ABSTRACT/SUMMARY	VALUE
			enhance the delivery of services, establish a more rational governance system, and elevate the status of probation in recognition of the essential services the system provides to our courts, counties, probationers, and victims.	establishment of adult and juvenile probation in 1903.
Mental Illness and the Criminal Justice System: Redirecting Resources Toward Treatment, Not Containment (APA, 2004)	Specific	Adult/ Juvenile	This paper addresses policy issues associated with treatment of the mentally ill within the criminal and juvenile justice systems. Issues: ▪ Factors leading to individuals with mental illness being placed in the criminal justice system ▪ Consequences of non-treatment ▪ Fiscal impact ▪ Treatment vs. Containment	Discusses availability of "best practices" for treatment of the mentally ill. Discusses creation of a comprehensive system of care to structure interventions of the mentally ill at all stages of the criminal justice system.
Subcommittee on Criminal Justice: Background Paper (June 2004, New Freedom Commission on Mental Health)	Specific	Adult	This paper focuses on prioritizing the solutions for addressing the issues of persons with mental illness in the criminal justice system, and identifies 3 major responses: ▪ Diversion Programs to keep people with serious mental illness who do not need to be in the criminal justice system out of it. ▪ Institutional Services to provide constitutionally adequate services in correctional facilities for those with serious mental illness who need to be there, due to severity of the crime. ▪ Reentry Transition Programs to link people with serious mental illness to community based resources when they are released.	Discusses the key issues for persons with mental illness in criminal justice settings and highlights exemplary programs that address these issues
Improving the Odds: Women in Community Corrections (2004)	Specific	Adult	Paper explores the potential for redirecting existing resources into more effective community-based interventions that combine correctional supervision with integrated case management.	Addresses barriers and challenges facing women in the criminal justice system.

This review was completed for CPOC by Drs. Shirley Hunt and Ellen Dellis, Research Division, Orange County Probation Department, and Christina Nyikes, Grants and Planning, San Diego County Probation Department, under the direction of Vincent Iaria, Chief Probation Officer, San Diego County and with support from Colleene Preciado, Chief Probation Officer, Orange County and John Hensley, Deputy Chief Probation Officer, San Diego County.

RESEARCH REFERENCES : EVIDENCED-BASED PRACTICES - ADULT PROBATION MODELS

PRELIMINARY (LAST UPDATE - 9/16/05)

REFERENCE SOURCE	GENERIC/ SPECLZD.	ADULT/ JUV.	ABSTRACT/SUMMARY	VALUE
Bloom, Owen, Covington (May 2005) "Gender-Responsive Strategies *for Women Offenders"*	Specific	Adult	To improve policy and practice regarding women offenders in corrections, the NIC undertook this 3-year project to collect and summarize multidisciplinary research and practitioner expertise on gender-responsive strategies.	Summarizes: • Characteristics of women in correctional settings • Way gender makes a difference in criminal justice practice • Multidisciplinary research and theory on women's lives that have implications for managing women in the criminal justice system • Guiding principles and strategies for improving the system's response to women.
(May 2001) Recidivism of Sex Offenders Need full citation	Specific	Adult	Examines the critical issues in defining recidivism and provides a synthesis of the current research on the offense rates of sex offenders.	Discussion of research findings on sex offenders, factors and conditions that appear to be associated with reduced sexual offending, and implications for sex offender management.
Taxman and Young. Maryland's "Approach to Improving Outcomes through Science and Research: *The Recidivism Reduction Laboratory (RRL)"*	Generic	Adult and Juvenile	The RRL is an initiative aimed at utilizing evidence based best practices to influence the creation or expansion of new programs and to evaluate all of its grant programs.	So far, the RRL has focused on improving the practice of the Division of Parole and Probation (adult) and the Department of Juvenile Justice to improve overall outcomes. The RRL process involves working with agencies on strategic planning, operational planning performance measures and tools to improve operations.

This review was completed for CPOC by Drs. Shirley Hunt and Ellen Dellis, Research Division, Orange County Probation Department, and Christina Nyikes, Grants and Planning, San Diego County Probation Department, under the direction of Vincent Iaria, Chief Probation Officer, San Diego County and with support from Colleene Preciado, Chief Probation Officer, Orange County and John Hensley, Deputy Chief Probation Officer, San Diego County.

RESEARCH REFERENCES : EVIDENCED-BASED PRACTICES - ADULT PROBATION MODELS

PRELIMINARY (LAST UPDATE - 9/16/05)

REFERENCE SOURCE	GENERIC/ SPECLZD.	ADULT/ JUV.	ABSTRACT/SUMMARY	VALUE
Lipsey (9.12.05 telephone communication with S. Hunt) ***Currently In Progress***	Generic	Adult	Comprehensive meta-analysis of controlled studies of the effects of intervention programs for adult offenders on recidivism and other outcomes. Have over 250 experimental and quasi-experimental studies that are being reviewed and analyzed.	*Will be completed in 2006.* *May be able to access info before then upon request to Lipsey.*
(Revised 2004). The Presentence Investigation Report For Defendants Sentenced Under the Sentencing Reform Act of 1984 (Revised 2004)	Generic	Adult	Document provides guidance for U.S. Probation Officers in the preparation of presentence reports.	Provides a uniform format for presentence reports throughout the Federal judiciary.
. Burrell, William. *Implementing Evidenced-Based Practices in Community Corrections: Helpful Lessons From Unlikely Places.* May/June 3005	Generic	Adult and Juv.	Today's correction commissioners and directors have found that trying to provided a research-driven based for their operations is a Herculean task. No indication that community corrections will attract funding to implement evidence-based practices based on the belief that it could better with more resources. "It is essential that we do thins differently, not just do more of the same. We cannot hide behind 'more resources will produce better outcomes' argument any longer. We need to be able do demonstrate what we can do, so it is necessary to start with step one - the adoption of evidence-based practices to improve performance." Burrell examines the lessons to be learned from allied fields (e.g., the National Academy of Sciences' Institute of Medicine has warned of the disparity between scientific knowledge and the practice of substance abuse treatment in community based settings) as well as within the corrections field (need to deal concurrently with the anti-social attitudes, values, and beliefs of offenders along with the negative attitudes, values, and beliefs of staff when they are faced with organizational changes.)	Fire and Brimstone discussion of the ordeal of EB-P implementation. Challenge to the correction community is to "smarten up" and embrace the EB-P model.
Domurad, Frank (May/June 2005). ***Doing Evidenced-Based Policy and Practices Ain't for Sissies,***			Do not have yet.	

This review was completed for CPOC by Drs. Shirley Hunt and Ellen Dellis, Research Division, Orange County Probation Department, and Christina Nyikes, Grants and Planning, San Diego County Probation Department, under the direction of Vincent Iaria, Chief Probation Officer, San Diego County and with support from Colleene Preciado, Chief Probation Officer, Orange County and John Hensley, Deputy Chief Probation Officer, San Diego County.

RESEARCH REFERENCES : EVIDENCED-BASED PRACTICES - ADULT PROBATION MODELS

PRELIMINARY (LAST UPDATE - 9/16/05)

REFERENCE SOURCE	GENERIC/ SPECLZD.	ADULT/ JUV.	ABSTRACT/SUMMARY	VALUE
Burrell, William D. "*Reinventing Probation: Organizational Culture and Change, Community Corrections Report*, (May/June, 2000): 53-54, 63.	Generic		One of the key components of making the large-scale changes required for "reinventing probation" is organizational culture. Author outlines aspects of organizational culture, explains why they are critical in generating change, offers guidance for conducting a quick self-assessment of an agency's culture, and provides a means for changing it, including a comparison with the process of changing client behavior.	
Hinzman, Gerald. *Broken Windows, Broken Buckets: Solutions for Safer Communities..* Corrections Management Quarterly. 2000. 11p	Generic	Adult and Juv.	"Broken windows" refers to the community-oriented strategies used by "both community policing and neighborhood-based probation agencies to mobilize a community and develop competence within the community." "Broken buckets" addresses the treatment issues that must be understood and achieved to return offenders to the community.	
Burrell, William (Mar./Apr.2005) *Why What Work Isn't Working in Community Corrections.* Community Corrections Report.	Generic	Adult and Juv.	Focuses on "what works" as a new idea and the obstacles new ideas face before they are widely adopted (e.g., the adoption of the cell phone.) Analyzes the challenges of "what works" through the work of the of Everett Rogers who examines the key characteristics of all innovations which affect how rapidly and extensively they are adopted. Failing to embrace "what works" will place the corrections community in serious professional jeopardy.	
Travis, Jeremy (2004) *I Thinking About "What Works," What Works Best?*	Generic	Adult	Focuses on effective measures in e the areas of corrections, prisoner reentry, and community corrections. He believes program evaluations must be conducted based on random-assignment of clients. Travis believes there are limitations to the 'what works" movement. His three criticisms are; 1) disproportionate focus on programs and not enough on people; 2) the use of very restricted measures of success; and 3) occasional failure in measuring outcomes that truly make a difference to the public.	Well-reasoned article on the "what works" movement and several of its shortcomings. Travis is the president of the John Jay College of Criminal Justice at the City of New York

This review was completed for CPOC by Drs. Shirley Hunt and Ellen Dellis, Research Division, Orange County Probation Department, and Christina Nyikes, Grants and Planning, San Diego County Probation Department, under the direction of Vincent Iaria, Chief Probation Officer, San Diego County and with support from Colleene Preciado, Chief Probation Officer, Orange County and John Hensley, Deputy Chief Probation Officer, San Diego County.

RESEARCH REFERENCES : EVIDENCED-BASED PRACTICES - ADULT PROBATION MODELS

PRELIMINARY (LAST UPDATE - 9/16/05)

REFERENCE SOURCE	GENERIC/ SPECLZD.	ADULT/ JUV.	ABSTRACT/SUMMARY	VALUE
Federal Probation (Sept. 2002).Special Issue *"What Works" in Corrections*				
Cohn, Alvin Sept. 2002) ***Managing the correctional enterprise: the quest for 'what works'***	Generic	Adult	Examines the process by which decisions on 'what works' in correctional treatments are made in light of the rough and ready of much research evidence. Supports the typology developed by Sherman et al in 'Preventing crime: what works, what doesn't, and what's promising?' Looks at how correctional administrators make program decisions based on their knowledge of these three categories, and a fourth - what's unknown.	Cohn supports the "what works" approach but believes that it can only succeed with successful evaluations and leadership by correctional administrators.
Rhine, Edward E. ***Why 'What Works' Matters Under the 'Broken Windows' Model of Supervision.".***	Generic	Adult	Call for balance in supervision. The discussion should no long be whether probation and parole officers are performing law enforcement or social work missions. Holding offender accountable for compliance with the conditions of supervision requires "high doses" of surveillance and treatment.	Discuss the "what works" model in light of effective programs for supervision.
Latessa, Edward, Francis Cullen and Paul Gendreau, ***Beyond Correctional Quackery – Professionalism and the Possibility of Effective Treatment,***	Generic	Adult and Juv.	The authors argue that too many correctional programs are not based on the scientific evidence of what works and many of the programs are comparable to medical practices of the medieval era. Correctional boot camps are an example of contemporary quackery in corrections. Four sources produce quackery: 1) administrators do not use research when designing; 2) administrators fail to follow appropriate assessment and classification practices; 3) they fail to use effective treatment models; and 4) administrators have failed to evaluate the programs that were implemented. "In too many cases, offenders are dropped-off in intervention programs and then, eight to twelve weeks later, are deemed – without any basis for this conclusion- to have received treatment." Their review of 240 programs found that "two-thirds of the adult programs and over half of the juvenile programs did not use a treatment model that research had shown was effective."	Detailed Review of effective programs and treatment models.
Francis T. Cullen, John E. Eck, Christopher T. Lowenkamp. ***Environmental Corrections—A New Paradigm for Effective Supervision.***	Generic	Adult	Corrections is moving into an arena of accountability where credibility and funding will be predicated on the ability of agencies to show that its practices are effective. Agencies need to confront the recognition that "criminal acts are the product of offenders' propensity for crime and their access to opportunities for the crime." Extensive literature exists on "what "works" to reduce criminogenic propensities. Alternatively, there is an plethora of research that indicated what does not work with opportunity reduction. "The purpose of this paper has been to sketch the components of this new approach to community	Presents a new paradigm--environmental corrections.

This review was completed for CPOC by Drs. Shirley Hunt and Ellen Dellis, Research Division, Orange County Probation Department, and Christina Nyikes, Grants and Planning, San Diego County Probation Department, under the direction of Vincent Iaria, Chief Probation Officer, San Diego County and with support from Colleene Preciado, Chief Probation Officer, Orange County and John Hensley, Deputy Chief Probation Officer, San Diego County.

RESEARCH REFERENCES : EVIDENCED-BASED PRACTICES - ADULT PROBATION MODELS

PRELIMINARY (LAST UPDATE - 9/16/05)

REFERENCE SOURCE	GENERIC/ SPECLZD.	ADULT/ JUV.	ABSTRACT/SUMMARY	VALUE
			supervision ----a paradigm that we have called *environmental corrections*. This name was carefully chosen, because it is rooted in the belief that sound correctional practices must be based on sound criminology—that is, based on viable theories and evidence on what causes crime. In this regard, environmental criminology has provided important insights into how opportunity is implicated in crime."	

Appendix C: *Logic Model*

Transitional Youth Logic Model

May 2007 to December 2008

Theory of Change

Through developmentally appropriate strategies, 18-25 year old probationers can achieve success.

Aim

- Improve transitional youth outcomes

Outcome Measure

- Fewer violations
- Reduced recidivism
- Life skills improvement

Strategies

Evidence-based practices for transitional youth probationers

Training

Information Dissemination

Expanded access to health and health related services. Expanded vocational and educational services.

Benchmarks

Guidelines distributed to all depts.

All POs trained in EBP(s). EBP implemented in every county.

Briefing paper on strategies distributed

Briefing paper distributed

Activities

- Review EBPs.
- Produce briefing paper on selected practices.
- Tie into Goal 1, Objective 1 of Strategic Plan.
- Produce guidelines for departments.
- Develop collaborations

- Establish training committee.
- Train probation officers statewide in EBP.
- Conduct follow up on implementation of practice.

- Develop case management standards/guidelines

Draft document: 9/11/07