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# Reentry Experiences of Confined Juvenile Offenders: Characteristics, Service Receipt, and Outcomes of Juvenile Male Participants in the SVORI Multi-site Evaluation

THE MULTI-SITE EVALUATION OF THE SERIOUS AND VIOLENT OFFENDER REENTRY INITIATIVE

**DECEMBER 2009** 



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For more information about the SVORI Multi-site Evaluation, please visit our Web site at http://www.svori-evaluation.org/.

## **Abstract**

#### **Statement of Purpose**

The Serious and Violent Offender Reentry Initiative (SVORI) funded agencies in 2003 to develop programs to improve criminal justice, employment, education, health, and housing outcomes for released prisoners. Sixty-nine agencies received federal funds to develop 89 programs.

The SVORI Multi-site Evaluation was funded by the National Institute of Justice in spring 2003. Sixteen programs—12 adult and 4 juvenile—were included in an impact evaluation to determine the effectiveness of the programming provided under SVORI. Nearly 2,400 prisoners returning to their communities were interviewed during the evaluation.

#### **Research Subjects**

This report presents SVORI Multi-site Evaluation findings from the pre-release and post-release interviews conducted with released juveniles in four impact sites. The sample comprises 152 juvenile males enrolled in SVORI programs and 185 comparison juvenile males who did not receive SVORI programming. The respondent profile revealed a high-risk, high-need study group. Most respondents had serious problems with school: before confinement, fewer than half of respondents were regularly attending school, and nearly all respondents had been suspended or expelled at some point. A majority of respondents had family and friends with criminal histories or problems with alcohol or drugs. Most respondents had used alcohol or marijuana. Their average age at first use of these substances was 12. Although nearly half of respondents held a job in the 6 months before confinement, about one third reported having supported themselves by illegal means. Respondents' delinguency histories were serious and chronic:

on average, respondents were 13 years old at the time of their first arrest, had been arrested six times, and had been adjudicated three times; most had been previously confined. In the 6 months before confinement, a majority of respondents had engaged in violent behavior.

#### **Study Methods**

The evaluation focused on assessing whether SVORI respondents received more services than non-SVORI respondents and assessing differences between the groups on various post-release outcomes. Propensity score weights were developed, tested, and applied to improve the comparability of the SVORI and non-SVORI groups. Weighted analyses were used to examine the treatment effect of SVORI.

#### **Major Findings**

Service receipt for SVORI and non-SVORI respondents was highest during confinement. Although the levels of post-release service receipt for both groups were considerably lower than their reported levels of service need, SVORI respondents generally reported higher levels of service receipt than non-SVORI respondents.

The most notable post-release outcomes show that SVORI respondents were significantly more likely than non-SVORI respondents to be in school 3 months after release from confinement and, 15 months after release, SVORI respondents were much more likely to have a job with benefits. No significant differences were found between SVORI and non-SVORI respondents in substance use, physical health, mental health, or recidivism outcomes.

#### **Conclusions**

Confined juveniles have high levels of need and, although some juveniles reported having received services that exceeded their needs, the needs of many went unmet. It is critically important that juvenile justice practitioners and policy makers understand the wide range and degree of deficits that often characterize confined juveniles. This understanding can inform decisions about what types of services are most needed and for whom.

The second policy implication addresses how best to do the work of juvenile reentry programming—namely, how to manage the coordination of services to prepare for reentry. Findings

suggest that SVORI programs were able to make modest improvements in the approach to delivery of reentry services (e.g., intensive case management, greater use of needs assessments, reentry planning) and that this model of care may have resulted in small improvements in outcomes.

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# **Executive Summary**

The Serious and Violent Offender Reentry Initiative (SVORI) funded agencies in 2003 to develop programs to improve criminal justice, employment, education, health, and housing outcomes for released prisoners. Sixty-nine agencies received federal funds (\$500,000 to \$2,000,000 over 3 years) to develop 89 programs.

The SVORI Multi-site Evaluation was funded by the National Institute of Justice in the spring of 2003 and included pre-release and follow-up interviews with nearly 2,400 returning prisoners. Sixteen programs were included in an impact evaluation (to determine the effectiveness of programming), comprising 12 adult programs and 4 juvenile programs located in 14 states: Colorado (juveniles only), Florida (juveniles only), Indiana, Iowa, Kansas (adults and juveniles), Maine, Maryland, Missouri, Nevada, Ohio, Oklahoma, Pennsylvania, South Carolina (adults and juveniles), and Washington.

This report presents findings from the pre-release and post-release interviews conducted with juveniles in four impact sites. The sample includes 152 juvenile males who were enrolled in SVORI programs and 185 comparison juvenile males who did not receive SVORI programming. The data presented in this report describe characteristics of the respondents, as well as their experiences preconfinement, during confinement, and post-confinement. Differences between SVORI and non-SVORI respondents are presented for three purposes: to assess pre-release comparability between groups, to assess whether SVORI participation increased access to programs and services, and to assess the impact of SVORI participation on a wide range of post-release outcomes.

## Pre-release Characteristics of the SVORI and Non-SVORI Juvenile Respondents

#### **Demographics**

- The average age of the respondents was 17; 54% were black, 20% were white, and 20% were Hispanic.
- At their pre-release interview, most respondents reported that they were currently in school. In the school year before their confinement, less than half of respondents reported that they were regularly attending school.
- Nearly all respondents reported that they had at some time been suspended or expelled from school.
- Most respondents reported that, before confinement, they were living in a house or apartment that belonged to someone else (including parents' house or apartment).

#### Family and Peers

- Respondents most frequently reported their natural mothers as the primary person who raised them and the person with whom they had lived the longest.
- Nearly all respondents agreed or strongly agreed that they felt close to their families and wanted their families to be involved in their lives.
- More than three quarters of respondents reported that they had family members who had been convicted of a crime or had been incarcerated. More than half of respondents reported that they had family members who had had problems with alcohol or drugs.
- A large majority of respondents reported that they had friends who had been convicted of a crime, had been incarcerated, or who had had problems with alcohol or drugs.

#### Substance Use and Physical and Mental Health

- Nearly all respondents reported that they had used alcohol. The average age at first use was 12.
- A large majority of respondents reported that they had used marijuana. The average age at first use was 12.
- Most respondents reported that they had used alcohol or other drugs in the 30 days before confinement.
- About half of all respondents reported that they had received treatment for a substance abuse or mental health problem at some point during their lifetimes.

 Most respondents rated their current physical health as excellent or very good. More than half of all respondents described their mental health status as excellent or very good.

#### **Employment History and Financial Support**

- Nearly half of all respondents reported having worked at some time before confinement. More than one third reported that they were employed in the 6 months before confinement.
- Of those working in the 6 months before confinement, about half described their most recent job as permanent.
- The majority of respondents reported that they received financial support from their family. About one third of respondents reported that they supported themselves by illegal income.

#### **Delinquency History and Current Offense**

- On average, respondents were 13-years-old at the time of first arrest, had been arrested about six times, and had been adjudicated about three times.
- Nearly all respondents previously had been ordered to a juvenile correctional facility.
- In the 6 months before confinement, about three quarters of respondents reported that they had engaged in violent behavior, and nearly two thirds reported that they had been victims of violence.
- More than 10% of respondents reported having been a member of a gang.
- Nearly half of respondents reported that they were currently confined for a violent crime.
- At the time of their pre-release interview, respondents reported an average length of confinement of more than one year.

#### Differences Between SVORI and Non-SVORI

Although the SVORI and non-SVORI comparison respondents were similar on many of the several hundred measures, they differed significantly on a few measures:

- SVORI respondents were older and less likely to be white than comparison respondents.
- SVORI respondents were more likely than comparison respondents to report that they had family members who had been convicted of crimes.

- SVORI respondents were more likely than comparison respondents to report that they had relatives who were gang members.
- SVORI respondents were more likely than comparison subjects to report that they had received formal pay at their most recent job.
- Comparison respondents reported better physical health than SVORI respondents.
- SVORI respondents were more likely than comparison respondents to indicate symptoms of phobic anxiety and psychoticism.
- SVORI respondents were more likely than comparison respondents to report that they had at some time used alcohol and hallucinogens.
- SVORI respondents were less likely than comparison respondents to be currently confined for a drug or public-order crime.
- On average, SVORI respondents had fewer prior terms of confinement to a juvenile correctional facility than comparison respondents but were significantly more likely to report that they had at some time been detained for more than 24 hours at one time.

#### Levels of Service Needs

- Before their release from confinement, respondents reported needing, on average, slightly less than half of the wide array of services measured.
- Before SVORI respondents' release from confinement, the most common needs that they reported were more education (93%), a driver's license (90%), job training (89%), a job (87%), and life skills training (76%).
- SVORI and non-SVORI respondents were similar on most pre-release service need measures, but non-SVORI respondents were significantly more likely than SVORI respondents to report that they needed anger management programming and needed to change their attitudes toward criminal behavior.

#### Levels of Service Receipt

 SVORI programs achieved modest increases in providing access to a wide range of pre-release services and programs. Overall, SVORI respondents were more likely than non-SVORI respondents to report receiving most of the 60 services measured.

- SVORI respondents were significantly more likely than non-SVORI respondents to report that they had received nearly one quarter of all of the services measured.
- The most common services SVORI respondents reported having received before their release from confinement were educational services (94%), a meeting with a case manager (90%), a needs assessment (83%), collaboration with someone to plan for release (78%), and medical treatment (73%).
- SVORI respondents reported having received 39% of the service items while confined, on average, whereas non-SVORI respondents reported having received 36% of the items.

## Post-release Experiences of the SVORI and Non-SVORI Juvenile Respondents

#### Levels of Service Needs

- After release, respondents reported levels of service need that were lower than their pre-release levels of need. At each post-release interview, respondents reported that they needed more than one third of the services measured, on average.
- At each post-release interview, at least half of SVORI respondents reported that they needed more education, a driver's license, a job, job training, transportation, and life skills training. Similar levels of need were reported by non-SVORI respondents.
- At each post-release interview, SVORI and non-SVORI respondents were similar on most service need measures. However, 9 months after release, SVORI respondents were significantly more likely than non-SVORI counterparts to report that they needed life skills training; 15 months after release, non-SVORI respondents were significantly more likely than SVORI respondents to report that they needed transportation.

#### Levels of Service Receipt

- Overall, the reported levels of service receipt were highest for SVORI and non-SVORI respondents before their release from confinement, dropped dramatically in the 3 months after release, and remained low throughout the post-release period.
- Although SVORI and non-SVORI respondents reported low levels of post-release service receipt, SVORI respondents generally reported higher levels of service receipt than non-SVORI respondents. In fact, 3 months

- after release, SVORI respondents reported receiving a significantly higher level of services than non-SVORI respondents.
- At each post-release interview, the most common services SVORI respondents reported having received were a meeting with a case manager, a needs assessment, educational services, collaboration with someone to reintegrate into the community, and employment services.
- At each post-release period and for each service bundle, the levels of service receipt reported by SVORI and non-SVORI respondents were considerably lower than their reported levels of service need.

#### **Outcomes**

- Non-SVORI respondents were significantly more likely than SVORI respondents to achieve housing independence 15 months after release from confinement. No other housing differences were found between groups.
- SVORI juvenile males were significantly more likely than non-SVORI juvenile males to be in school 3 months after release from confinement
- SVORI juvenile males were significantly more likely to have jobs with benefits than their non-SVORI counterparts, but this finding was only at 15 months post-release from confinement.
- No significant differences were found between SVORI and non-SVORI juvenile males in substance use outcomes, physical health and mental health outcomes, or criminal behavior and recidivism outcomes.

#### **Conclusions and Implications**

This report focused on four juvenile programs that were part of the SVORI Multi-site Evaluation. For assessment of program effects of SVORI, the findings lead to two important policy implications for juvenile reentry programming. The first addresses the advantage of assessing and responding to the needs of delinquent youth; the second addresses how best to do the work of reentry planning. This report also suggests areas of future study to expand what is known about effective reentry approaches.

Similar to findings from previous research about juvenile offenders, the findings from the SVORI evaluation revealed that juvenile offenders confined to juvenile correctional facilities

have wide-ranging needs. The profile typical of the juvenile male who participated in the SVORI evaluation revealed that he had family and friends who were involved with the criminal justice system or who had drug and alcohol problems; he had substantial difficulties in school, as illustrated by his irregular attendance and likely suspension or expulsion from school; he reported high rates of alcohol and marijuana use and started using these substances at a young age. He probably had engaged in violent behavior or had been victimized before being confined. And he had incurred a history of delinquency that could be described as *chronic*, given his young age.

Although findings indicate that some youth received services that exceeded their stated needs, the majority of youth lacked services adequate to meet their needs. Given the gap between juveniles' expressed needs for services and their reported receipt of services, it is critically important that juvenile justice practitioners and policy makers reflect on how needs are assessed, in order to better understand the wide range of deficits that often characterize youth confined to juvenile correctional facilities. Gaining this understanding has implications for treatment and program planning—for deciding what types of services are most needed and for whom. In addition, understanding levels of need can help establish realistic expectations about what improvements programs can achieve in terms of immediate and longer-term outcomes for juveniles.

The second policy implication addresses how best to do the work of reentry—namely, how to manage the coordination of services for juvenile offenders preparing to reenter their communities. Evidence from this report suggests that SVORI programs were able to make modest improvements in the approach to delivery of reentry services (e.g., intensive case management, greater use of needs assessments, reentry planning) and that this model of care may have resulted in small improvements in outcomes. For example, it is perhaps the case that the SVORI-funded programs' enhanced case management and service coordination approach, coupled with their emphasis on providing greater levels of employment and education services, contributed to the small improvements in these particular outcomes.

Although some of these findings of improvement in levels of service for SVORI participants offer encouragement, they should not be overstated. Service receipt levels were far from 100%, particularly in the months following release from confinement. With the remarkably low levels of service receipt and relatively high levels of self-reported need throughout the study period, the fact that few significant improvements in outcomes were observed for SVORI respondents is not surprising.

Although beyond the scope of the current evaluation, an examination of the factors that may have contributed to low levels of service receipt (e.g., implementation issues, the voluntary nature of some of the SVORI programs, respondents' perceptions of the quality of programs and services, the intensity and quality of post-release supervision, the use of sanctions and rewards, the "aging out" of some from juvenile justice jurisdiction) would be an important contribution to the field. In addition, although small sample sizes preclude a rigorous site analysis, an exploration of program implementation and service receipt by site—with their varied reentry approaches—may provide insight into the relationships between SVORI program operations and service delivery, the levels of service needs and service receipt, and reentry outcomes. Finally, secondary analyses, without regard to SVORI participation, could explore "what works for whom" with regard to reentry programming for youth. Exploration of these topics holds out the possibilities for further expanding what is known about effective reentry programming.

## **Introduction**

The Serious and Violent Offender Reentry Initiative (SVORI) was a collaborative federal effort, established in 2003, to improve outcomes for adults and juveniles returning to their communities after a period of incarceration. The initiative sought to help states better utilize their correctional resources to address outcomes along criminal justice, employment, education, health, and housing dimensions. Funded by the U.S. Departments of Justice, Labor, Education, Housing and Urban Development, and Health and Human Services, SVORI was an unprecedented national response to the challenges of prisoner reentry.

Sixty-nine state and local grantees (corrections and juvenile justice agencies) received SVORI funding, representing all 50 states, the District of Columbia, and the U.S. Virgin Islands. These grantees developed 89 programs that targeted adult and juvenile correctional populations. SVORI funding was intended to create for returning prisoners a three-phase continuum of services that began during the period of incarceration, intensified just before release and during the early months post-release, and continued for several years after release as former inmates took on more productive and independent roles in the community. The SVORI programs attempted to address the initiative's goals and provide a wide range of wellcoordinated services to prisoners returning to the community. Although SVORI programs shared the goals of improving outcomes across various dimensions and improving service coordination and systems collaboration, programs differed substantially in their approach and implementation (Lattimore, Visher, Winterfield, Lindquist, & Brumbaugh, 2005; Lindquist, 2005; Winterfield & Brumbaugh, 2005; Winterfield, Lattimore, Steffey, Brumbaugh, & Lindquist, 2006).

In spring 2003, the National Institute of Justice (NIJ) awarded RTI International, a nonprofit research organization, a grant to evaluate programs funded by SVORI. The Urban Institute, a nonpartisan economic and social policy research organization, is collaborating on this project, which is one of the largest evaluation studies ever funded by NIJ. With data collected from grantee staff, partnering agencies, and returning prisoners, this 6-year study involved a comprehensive implementation evaluation of all 89 SVORI programs, an intensive impact evaluation of 16 selected programs, and an economic analysis on a subset of the impact sites (see Lattimore et al., 2005). The goal of the SVORI evaluation was to document the implementation of SVORI programs and determine whether they had accomplished SVORI's overall goal of increasing public safety by reducing recidivism among the populations served.

The *implementation assessment* addressed the extent to which the 89 SVORI programs (69 grantees) increased access to services and promoted systems change. The *impact evaluation* addressed the effectiveness of SVORI by comparing key outcomes among those who received services as part of SVORI and those among a comparable group of individuals who received "treatment as usual" in the 16 sites participating in the impact evaluation. The impact evaluation included a longitudinal study of 2,391 returning prisoners (adult males, adult females, and juvenile males) who were interviewed approximately one month before release and then again at 3, 9, and 15 months after release. The third component of the evaluation, an *economic analysis*, was intended to determine the return on SVORI investment and included both a costbenefit and a cost-effectiveness analysis.

This report presents findings from all four waves of interviews conducted with juvenile males in the four impact sites. The sample includes 152 SVORI program participants and 185 comparison juvenile males who were not enrolled in SVORI programs.

The data presented in the pre-release section of this report, which are based on the interviews conducted 30 days (on average) before release from confinement, are primarily descriptive. Specifically, this section of the report describes the respondents' demographic characteristics, family and peer relationships, educational attainment and employment, physical

and mental health, delinquency history, and substance use. The pre-release section also provides detailed information on respondents' need for and receipt of services before their release from confinement. A comparison between pre-release service receipt reported by SVORI respondents and that reported by non-SVORI respondents assesses the SVORI initiative's success in increasing access to programs and services in the pre-release period.

The post-release section of the report, which is based on the interviews conducted 3, 9, and 15 months after release from confinement, describes the post-release experiences among the juvenile respondents, assesses whether SVORI respondents received more services than non-SVORI respondents during the post-release follow-up period, and examines differences between the groups on a variety of outcomes. In the post-release section, weighted outcome analyses (which adjust for selection into the SVORI programs) were used to examine the treatment effect of SVORI. Both the pre- and the post-release sections highlight differences between juvenile respondents and adult male respondents, based on comparisons of the juvenile and adult male samples (using unweighted t-tests).

The next section provides an overview of the design of the SVORI impact evaluation, including the selection of respondents and the interview process. In addition, a brief summary of the literature on community reentry and juveniles, as well as a description of the four juvenile SVORI programs as derived from site visits, is included. This description is followed by a presentation of findings from all four waves of interviews (prerelease, and 3, 9, and 15 months post-release). A discussion of policy implications concludes the report.

## THE SVORI MULTI-SITE EVALUATION—DESIGN AND METHODS

Here the methods employed in the SVORI Multi-site Evaluation are summarized. A detailed description of the design, data collection procedures, instrumentation, and analytic strategy can be found in Lattimore and Steffey (2009).

The impact evaluation component of the SVORI Multi-site Evaluation included a longitudinal study of adult male, adult female, and juvenile male returning prisoners.¹ On the basis of an extensive site selection process, 16 programs were chosen (from among the 89 SVORI programs) for the impact study, with the objective of achieving diversity in programmatic approach and geographical representation. The 16 programs included 12 adult programs and 4 juvenile programs located in 14 states: Colorado (juveniles only), Florida (juveniles only), Indiana, Iowa, Kansas (adults and juveniles), Maine, Maryland, Missouri, Nevada, Ohio, Oklahoma, Pennsylvania, South Carolina (adults and juveniles), and Washington. Exhibit 1 shows the distribution of juvenile respondents who are the focus of this report.

Exhibit 1. Juvenile male sample sizes, by state and group

State	SVORI	Non-SVORI	Total	% of Total
Colorado	23	37	60	17.8
Florida	40	89	129	38.3
Kansas	49	20	69	20.5
South Carolina	40	39	79	23.4
Total	152	185	337	100.0

A site-specific research design was developed for each impact site. Comparison groups were developed by isolating the criteria that local site staff used to identify individuals eligible for enrollment in their SVORI program (these included factors such as age, criminal history, risk level, post-release supervision, transfer to pre-release facilities, and county of release) and replicating the selection procedures on a different population. Where possible, the comparison participants came from the same pre-release facilities and were returning to the same post-release geographic areas as the SVORI participants. In some instances, comparison participants were identified as those who met all eligibility criteria except pre- or post-release geographic parameters. When this exception occurred, the comparison sample was selected from pre-release facilities that were comparable to facilities in which SVORI was available, or individuals were selected from SVORI facilities who were returning to a separate but similar geographic area. Eligible respondents (both SVORI and comparison) were identified

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<sup>&</sup>lt;sup>1</sup> Juvenile females were excluded from the impact evaluation because of the extremely small number of SVORI participants in this subgroup.

monthly during the 16-month enrollment period for the impact evaluation.

Data collection consisted of four waves of in-person, computer-assisted interviews: the pre-release interview (Wave 1) conducted about one month before expected release and three follow-up interviews (Waves 2 through 4) conducted 3, 9, and 15 months after release.<sup>2</sup> In addition, oral swab drug tests were conducted during the 3- and 15-month interviews for respondents who were interviewed in a community setting.

All interviews were conducted in private settings by experienced RTI field interviewers using computer-assisted personal interviewing. Pre-release interviews were conducted from July 2004 through November 2005 in more than 150 prisons and juvenile detention facilities. Pre-release interviews were conducted approximately 30 days before release and were designed to obtain data on the respondents' characteristics and preconfinement experiences, as well as their experiences during confinement and services received since admission to a facility. These interviews also obtained data on the respondents' post-release plans and expectations about reentry.

Post-release interviews were conducted from January 2005 through May 2007. The post-release interviews were similar in content across waves and obtained data on reentry experiences, housing, employment, family and community integration, substance use, physical and mental health, supervision and criminal history, service needs, and service receipt. The interview instruments were developed through an extensive instrumentation process involving substantive domain experts and the use of existing, validated measures and scales used in previous RTI and Urban Institute studies.

In addition to obtaining approval from the Institutional Review Boards at RTI and the Urban Institute, memoranda of agreement or formal research agreements were negotiated with all agencies, and evaluation staff ensured that study procedures were approved by all facilities in which interviews were conducted (or by correctional agencies overseeing the facilities).

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<sup>&</sup>lt;sup>2</sup> The median time to release at the time of the first interview was 30 days.

# APPROACH FOR ADDRESSING NONRESPONSE AND ATTRITION

A total of 447 juvenile males were eligible to be included in the study. Completed Wave 1 (pre-release) interviews were obtained from 75% of the eligible juveniles. Among eligible sample members approached for interviews, refusal rates were very low: on average, 8% across the four juvenile sites. A breakdown of the categories of refusals and ineligible cases is available in Appendix Exhibit A-1. As shown in the exhibit, most of the noninterviews among eligible juveniles were due to their release before their Wave 1 interview could be completed (14.8%).

Of the juveniles who were interviewed at Wave 1, 87% also responded to at least one of the follow-up interviews. The response rates for the Wave 2, 3, and 4 interviews were 70%, 71%, and 74%, respectively.

Although the response rates for the juveniles were fairly high, the possibility remains that respondents who "dropped out" of subsequent waves of interviews differed from those who completed the follow-up interviews. As preliminary evidence that the attrition was random or affected the SVORI and non-SVORI groups similarly, analyses suggested that the SVORI and comparison groups were similar at each wave on a range of characteristics. Unfortunately, the relatively small juvenile sample size precluded a more rigorous examination of nonresponse as was conducted for the men (see Lattimore & Steffey, 2009). Diagnostic tests for response bias in the male sample did not indicate any problems. These results, combined with the higher response rates found, at each wave, in the juvenile sample as compared with the male sample, and combined with the comparability between groups across waves, suggest that attrition did not introduce any substantial problem into the data on juvenile respondents.

# APPROACH FOR ADDRESSING SELECTION BIAS

In addition to limitations posed by attrition, the potential for selection bias must be examined because juveniles were not randomly assigned to SVORI or non-SVORI conditions. On initial examination, the raw data showed that the two groups differed significantly on a number of characteristics. For

example, SVORI participants were younger at the time of confinement and less likely to be white. They were also less likely to be currently confined for a drug or public-order crime and served fewer prior terms of confinement, on average. However, SVORI respondents were more likely to report that they had used alcohol and hallucinogens. In addition, SVORI respondents were more likely to report that they had family members who had been convicted of a crime (see Lattimore & Steffey, 2009).

For the analysis of program effects, weights were developed to improve the comparability between the SVORI and non-SVORI groups. To develop the weights, a logit model was developed to generate the estimated probability of assignment to SVORI. The propensity model used 23 variables measured before SVORI assignment, including characteristics such as age, race, school attendance, family and peer measures, substance use, delinquency history, and types of crime leading to the current period of confinement. The resulting propensity score weights were used to examine balance, as well as program effects. Once the propensity score weights were applied, the SVORI and non-SVORI respondents exhibited balance on each of the 23 variables included in the propensity model, conferring confidence that the groups were indeed comparable and permitting examination of the effect of SVORI on outcomes measured in the follow-up interviews.

As an additional check, differences between the SVORI and comparison groups on these 23 Wave 1 characteristics were examined at each follow-up interview wave. The SVORI and non-SVORI respondents did not differ significantly on any of the variables included in the propensity model at any wave. The results suggest that the propensity score model provided balance across all four waves of interview data.

## BRIEF LITERATURE REVIEW ON COMMUNITY REENTRY AND JUVENILES

#### **Juvenile Justice System and Reentry**

The United States has one of the highest incarceration rates in the modern world (Freudenberg, Daniels, Crum, Perkins, & Richie, 2005), and the role that juveniles play in these incarceration rates is not inconsequential. In 2007 an estimated 2.18 million youth were arrested in the United States

(Puzzanchera, 2009). Data from the 2006 Juvenile Residential Facility Census show that approximately 95,000 juveniles were held in juvenile facilities (Sickmund, Sladky, & Kang, 2008), and among this total about 65,000 were *committed*, meaning they were placed in the facility by a court-ordered disposition. From a developmental perspective, juvenile confinement often leads to inadequate preparation for young adulthood, and often a juvenile's delinquent involvement is likely to manifest in adult criminality (McCord, 1992). Snyder and Sickmund (2006) report that approximately "one quarter of juveniles who offended at ages 16–17 also offended as adults at ages 18–19."

Juvenile reentry and transition services may serve as an opportunity to intervene and reverse a downward trajectory for many youth (Freudenberg et al., 2005). The transition phase of community reentry, which has been considered to be between one month pre-release and up to 6 months post-release, is an important time for juvenile offenders to establish lifestyles that do not support delinquent and criminal activity (Altschuler & Brash, 2004). Juvenile offenders often encounter problems similar to those that adult offenders encounter when reentering their communities, such as establishing supportive familial and peer relations after release. For example, juveniles frequently return to the same environments and family structure that had contributed to their delinquent involvement; moreover, they often return to their communities with serious unmet needs that complicate their opportunities for successful reentry (Bouffard & Bergseth, 2008; Chung, Schubert, & Mulvey, 2007). Although similar obstacles confront adult and juvenile offenders, it is important to understand the role that reentry uniquely plays in the lives of juveniles offenders after their release from correctional institutions.

#### **Challenges Facing Juvenile Offenders**

Juvenile offenders have been found to have serious and wideranging deficits, including negative family influences and functioning, mental health problems, low academic functioning, and high rates of substance use. For example, juvenile offenders often have unmet mental health needs, as illustrated by a rate of mental health disturbance 2 to 3 times as high as that of the general adolescent population (Grisso, 2004). It is estimated that 80% of juvenile offenders suffer from minor mental health problems, including conduct disorder, attention-

deficit disorder, and mood and anxiety disorders (Cocozza & Skowya, 2000; Mears, 2001). Together with mental health problems, juvenile offenders often experience physical health problems, as well as learning disorders (National Council on Disability, 2003). In addition, the National Research Council and Institute of Medicine (2001) has found that delinquency is associated with poor school performance, truancy, and leaving school at an early age. Substance use is also common among juvenile offenders: when asked about the use of drugs and alcohol at the time that they committed the crime that lead to their confinement, 9% of juvenile offenders younger than age 18 reported having used alcohol, 15% reported having used illicit drugs, and 23% reported having used both alcohol and drugs (Kazdin, 2000). Other common characteristics of juvenile offenders included criminally involved parents (Farrington, 1989), poor parent-child relationships, and inadequate parental supervision (Hawkins et al., 1998; Lipsey & Derzon, 1998). Because of these challenges, it is unsurprising that, when these factors are not adequately addressed, juveniles often fail to succeed in school, work, personal relationships, and drug-free, crime-free post-confinement lives. Altschuler and Brash (2004) summarized the challenges that confront juvenile offenders upon release from confinement, noting,

When underlying factors that predispose or propel them toward offending behavior are not addressed during incarceration and afterward, the likelihood is great that young offenders will reoffend upon release. If being literate, holding a legitimate job, and maintaining stable and positive personal relationships are key to making successful transitions both to adulthood and law abidance in the community, then lacking such attributes—as is the case presently with many young offenders—would logically make it much more difficult to succeed. (p. 75)

#### **Juvenile Reentry Programs**

The juvenile justice system was originally established with the goals of promoting the development of troubled youth and training youth for successful adulthood, as well as, to a lesser extent, punishing youth for their offenses (Steinberg, Chung, & Little, 2004). Feld (1998) suggests that, in response to youth delinquency, in recent years the contemporary juvenile court has increasingly emphasized punitive sanctions and public safety over rehabilitation. Youth who complete their time with

the juvenile justice system too often reenter their communities with as many, if not more, problems than they had when they first entered the system (Steinberg et al., 2004).

Because of the growing populations and the crowding in juvenile confinement facilities effected by "get tough" policies, the ever-increasing costs of confinement, and the high recidivism rates, the 1980s marked a period when policy makers and practitioners started to reconsider the issue of juvenile reentry (Altschulter & Armstrong, 1994). In response to this increased attention, in 1987 the Office of Juvenile Justice and Delinquency Prevention sought to assess, test, and disseminate information about effective reentry programming for serious, violent, and chronic juvenile offenders. The result of this effort was the development of the Intensive Aftercare Program (IAP), a theoretical and research-based model that promotes intensive case management, the assessment and identification of risk and needs factors, individualized case planning, intensive supervision and monitoring, the use of sanctions and rewards, and coordinated community-based services. Moreover, IAP recognizes the importance of involving all actors in the juvenile justice system, including providers from child services agencies, to develop and implement a seamless provision of reentry services (Altschulter & Armstrong, 1994).

In the past several years, the literature on reentry services for confined youth has grown (Abrams, Shannon, & Sangalang, 2008; Bouffard & Bergseth, 2008; Freudenberg et al., 2005; Mears & Travis, 2004; Steinberg et al., 2004). Attention has been given to the domains and areas in which youth experience particular challenges during reentry. According to Altschuler and Brash (2004), these domains and areas include family and living arrangements, peer groups, mental and physical health, education, vocational training and employment, substance use, and leisure activities.

Lipsey (2009) conducted a meta-analysis of juvenile reentry programs and found that interventions that provide a therapeutic element, serve high-risk offenders, and are implemented with expertise are considered most effective. Similarly, MacKenzie (2006) contends that multisystemic therapy, which is a community-based treatment program for serious juvenile offenders, is most effective for serious offenders who are reuniting with the families, because therapists and case managers are present to facilitate the transition process. In their examination of a juvenile reentry program that offers the mentoring component of transitional coordinators to released juveniles, Bouffard and Bergseth (2008) conclude that juveniles who participate in this structured reentry program, in which services and group planning are major elements, are more likely to successfully reintegrate into the community. After a short-term follow-up, such juveniles were found to have lower rates of recidivism than juveniles who did not receive any reentry services. Nevertheless, although these studies are encouraging, research on juvenile aftercare and reentry has been predominated by null findings for program effects, small sample sizes, and implementation challenges (Bouffard & Bergseth, 2008). As some scholars assert, the skills acquired in juvenile correctional facilities will not be sustained unless they are reinforced in the community and are highly relevant to the real-life setting and situations these youth will confront once they return to their communities (Abrams, 2006; Steinberg et al., 2004).

#### **SVORI Goals**

- To improve quality of life and self-sufficiency through employment, housing, family, and community involvement
- To improve health by addressing substance use (sobriety and relapse prevention) and physical and mental health
- To reduce criminality through supervision and monitoring of noncompliance, reoffending, rearrest, reconviction, and reincarceration
- To achieve systems change through multiagency collaboration and case management strategies

#### SVORI PROGRAM OVERVIEW

The federal guidance accompanying SVORI funding placed few restrictions on the state agencies with respect to the design of the individual SVORI programs. The primary restrictions placed on local SVORI programs were an age limit—the programs were required to target prisoners 35 or younger—and a requirement for post-release community supervision.<sup>3</sup> Other broad requirements were that the program should include three phases (in-prison, supervised post-release, and post-supervision); provide holistic case management and service delivery; improve participants' quality of life and self-sufficiency through employment, housing, family, and community

<sup>&</sup>lt;sup>3</sup> Some programs requested and received exemptions for one or both of these requirements.

involvement; improve participants' health by addressing substance use and physical and mental health; and reduce participants' criminality through supervision and monitoring of noncompliance. The programs also were encouraged to include needs and risk assessments, reentry plans, transition teams, community resources, and graduated sanctions (see Winterfield et al., 2006). Because a SVORI program model was not specified, each program was locally designed, and the programs varied considerably in approach, services provided, and target populations.

Although the SVORI programs were diverse in their use of funds and program implementation, some similarities existed. For example, many of the programs had specialized staff that focused only on the youth in the SVORI program. In addition, two of the SVORI programs highlighted service coordination as one of the major accomplishments of the SVORI funding.

To provide greater depth of information available on reentry programs for youth, SVORI research team members conducted 2- to 3-day site visits to each of the juvenile programs. A summary description of each juvenile program follows.

#### Colorado

The Colorado Department of Corrections used SVORI grant funds to develop and implement the Colorado Affirms Reentry Effort (CARE) juvenile program. The goals of the CARE program were to reduce recidivism; obtain good, sustainable resources; and confidently say what worked and what did not work during the course of the program. Participation in the CARE program was voluntary. The initial focus of the CARE program was to fill and expand services with a particular emphasis on (1) employment/vocation, (2) family support, and (3) community integration. These program emphases were accomplished by means of the "backing in" of services before release by parole advocates and by focusing on individual services after release.

Parole advocates were hired specifically to support the CARE participants. They provided additional, more concentrated resources for youth during the reentry process. Although all youth received a client manager on entry into the Division of Youth Corrections, the caseloads for these client managers were high (30–36 youth), so they did not time to focus on

individuals to the extent necessary for intensive reentry planning. The parole advocates filled this need gap.

Approximately 1.5 to 2 years after the start of the CARE program for juveniles, the focus of the program shifted to incorporate more evidence-based programs and services. The new focus included an initiative to make the family an integral part of the incarceration and transition process. Services provided at the outset of the program focused on the transitional needs of the juveniles. Consequently, CARE kids had access to services that other kids lacked because of scarce resources. Program stakeholders noted that youth's access to these services was key to their reentry planning.

#### **South Carolina**

The South Carolina Department of Juvenile Justice (SCDJJ) used SVORI grant funds to develop and implement the Reintegration Initiative Project. This program was conceived to expand existing services and target youth incarcerated in any SCDJJ facility who were returning to any one of five specific counties (Orangeburg, Calhoun, Dorchester, Florence or Spartanburg). Participation in the Reintegration Initiative Project was mandatory. In addition, the general "serious and violent" offender population was targeted, rather than a subset of offenders with specific service needs.

Program stakeholders indicated that the three primary areas in which the program focused its resources were family support and community integration, mental health, and education or skills building. During incarceration, all youth in SCDJJ facilities identified for post-release supervision were assigned a community caseworker. For the SVORI participants, Reintegration coordinators were hired to serve in place of community caseworkers. Community caseworkers did not have specialized caseloads (so they had more youth to supervise) and typically did not provide services to youth committed to a SCDJJ facility until after release. Reintegration coordinators provided much more intensive case management and supervision than community caseworkers.

With the Reintegration coordinators in place, the transition/reintegration planning occurred earlier for SVORI participants than for comparison youth, so community services were more likely to be "lined up" for SVORI participants on

release than they were for comparison youth. The program's strategy for facilitating the transition from confinement to the community for individual youth was based on Altschuler's intensive aftercare program model. Program stakeholders acknowledged that SVORI changed the way that participating agencies coordinated with one another; one consequence of the grant was, therefore, dissatisfaction with the old status quo.

#### **Florida**

The Florida Department of Juvenile Justice (FLDJJ) used SVORI funds to implement the Going Home (GH) program, which aimed, with the use of flexible and individualized treatment, to reduce recidivism among the serious and violent juvenile offenders judged most at risk for recidivism. Participation in GH was mandatory. The GH program divided its focus between prerelease and post-release services. The pre-release services included curriculum and participation in release planning activities; the post-release services included ongoing educational and vocational support. While the post-release services primarily targeted vocational and educational support, the pre-release curriculum was broader, with an array of service areas, from personal accountability to goal setting to planning for release. The goals of the GH program were to (1) facilitate a smooth transition from residential placement to community living, (2) offer constructive alternatives for economic self-sufficiency to youth coming out of residential programs, (3) create a path for youth to become better prepared with independent-living skills, and (4) increase public safety by decreasing recidivism.

The GH program was originally planned to target male and female offenders, aged 15 to 19, in Duval, Miami-Dade, and Hillsborough Counties; however, the FLDJJ ultimately chose to concentrate on Miami-Dade County and contracted out all services through Transitions, Inc. Although the SVORI post-release services were voluntary, meaning that some youth would choose not to use them after conditional release, the grant provided a continued relationship with youth who normally would not be eligible for services, either because they were no longer under the FLDJJ jurisdiction, or because they had aged out of FLDJJ services at age 19: the grant provided services to youth until they were 21. Services were coordinated for GH youth in monthly meetings between providers, which

fostered knowledge-sharing and collaboration. The GH program marked the first time that conditional release and residential programs regularly met.

#### Kansas

The Kansas Juvenile program used SVORI funds to implement the Going Home Initiative (GHI). Participation in GHI was voluntary. All Juveniles returning to one of the five judicial districts in northeastern and south-central Kansas were able to participate in GHI, which was designed to provide intensive support for serious and violent juvenile offenders in the period leading up to and following release from a correctional facility. Youth participating in the program received intensive support and planning services from a community reentry facilitator (CRF) focused on serving youth once they had returned to the community. Only youth in GHI received the services of the CRFs and long-term support specialists. These staff members focused on building relationships with youth and their families, which they were able to do because they carried small caseloads and no authority to sanction the youth. A major component of the program was Family Group Conferencing (involving family members, service providers, education representatives, law enforcement officers, community case managers, and other individuals important to the youth), with the conference occurring immediately after release.

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# Characteristics of the SVORI and Non-SVORI Comparison Respondents

Provided here is descriptive information about the 337 juvenile male respondents interviewed before their release from juvenile facilities in the four juvenile impact sites. The sample comprises 152 juvenile males who were enrolled in SVORI programs and 185 comparison juvenile males who did not receive SVORI programming (for the means, standard deviations, and t-statistics for the variables discussed in this section, see Appendix Exhibit A-2).

Although the data are not shown, this section also explores similarities and differences between the pre-release characteristics of the full juvenile sample and the 1,697 adult males interviewed as a part of the SVORI evaluation (for complete pre-release data on the male sample, see Lattimore, Visher, & Steffey, 2008).

Because the pre-release data are used entirely for descriptive purposes in this section, the data presented are unweighted. As will be discussed in the post-release section, weighting for selection bias was necessary to examine actual program effects among the SVORI and non-SVORI groups.

#### **DEMOGRAPHIC CHARACTERISTICS**

The juvenile males in the SVORI and non-SVORI samples were almost exclusively born in the United States (94% of both the SVORI and non-SVORI groups) and spoke English as a first

language (91% and 90%, respectively). In addition, as shown in Exhibit 2, more than half (59%) of the SVORI respondents were black; 14% were white. The SVORI sample included a higher percentage of black juveniles and a lower percentage of white juveniles than the non-SVORI comparison sample, which was 51% black and 24% white. Nearly one quarter of SVORI respondents and one fifth of non-SVORI respondents identified themselves as Hispanic (23% of SVORI and 17% of non-SVORI).

Exhibit 2. Demographic characteristics of respondents at time of pre-release interview, by group

Variable	SVORI	Non-SVORI
Race		
Black	59%	51%
White*	14%	24%
Hispanic	23%	17%
Other race	4%	8%
Age		
Age at interview (mean)*	17.0	16.7
Education		
Currently in school	88%	94%
Completed 12th grade/GED	20%	15%
Regularly attended school before commitment	54%	43%
Ever suspended/expelled from school	95%	91%

Notes: Respondents were allowed to select all that applied. Individuals who reported more than one race were coded here as "other," which also included American Indian or Alaska Native, Asian or East Indian, and Native Hawaiian or other Pacific Islander. Individuals were coded Hispanic if they chose "Hispanic, Latino or Spanish," regardless of whether they chose a race category. GED = General Education Development credential.

On average, SVORI respondents were older than non-SVORI respondents (17 years and 16.7 years, respectively). Because school attendance is required for school-age juveniles during confinement, not surprisingly the great majority of respondents in both groups reported being in school (88% of SVORI and 94% of non-SVORI). Only 20% of SVORI respondents and 15% of non-SVORI respondents had completed 12th grade or earned a Graduate Education Development credential at the time they were confined to a juvenile facility. As is evident from Exhibit 2, respondents in both groups had substantial difficulties in school. Only 54% of SVORI respondents and 43% of non-SVORI respondents reported regularly attending school in the

<sup>\*</sup>p < 0.05

school year before confinement. Furthermore, nearly all respondents in both groups had received an out-of-school suspension or been expelled from school (95% of SVORI and 91% of non-SVORI).

The demographic profile of juvenile respondents differs from that of adult male respondents in the SVORI evaluation. For example, a significantly greater proportion of adult male respondents were white (20% of juvenile respondents and 34% of adult male respondents), while a significantly greater proportion of juvenile respondents were Hispanic (20% of juvenile respondents and 4% of adult male respondents). The average age at the time of the pre-release interview was 17 for juvenile respondents and 29 for adult male respondents.

#### **HOUSING**

Less than 10% of respondents reported that they were primarily homeless, were living in a shelter, or had no set place to live during the 6 months before confinement.

For the 6 months before confinement, the most commonly reported housing situation was living in a house or apartment that belonged to someone else (including parents' house or apartment). About 79% of SVORI and 85% of non-SVORI respondents reported having lived primarily in a house or apartment that belonged to someone else. SVORI respondents were significantly more likely than non-SVORI respondents to report that they had lived in a facility (e.g., group home, juvenile correctional facility, treatment facility) before confinement (10% of SVORI and 4% of non-SVORI). Less than 10% of respondents reported as their primary housing situation that they were homeless, were living in a shelter, or had no set place to live (7% of SVORI and 9% of non-SVORI). Juvenile respondents' rate of reported homelessness was significantly lower than that of adult male respondents (8% of juvenile respondents and 13% of adult male respondents).

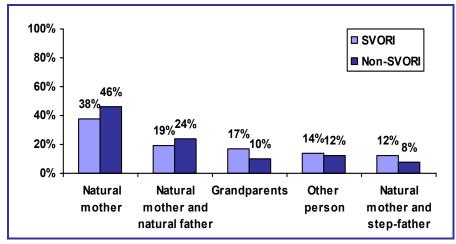
#### **FAMILY AND PEERS**

#### **Primary Caregiver**

Respondents most frequently reported their natural mothers as the primary persons who raised them and with whom they had lived the longest.

Respondents most frequently reported their natural mothers as the primary persons who raised them (38% and 46%, SVORI and non-SVORI, respectively). In addition, as shown in Exhibit 3, nearly one fifth of SVORI respondents and one fourth of non-SVORI respondents reported that both their natural mothers and fathers to be the primary people who raised them (19% of SVORI and 24% of non-SVORI). Seventeen percent of

Exhibit 3. Primary persons or person who raised juvenile respondents, by group



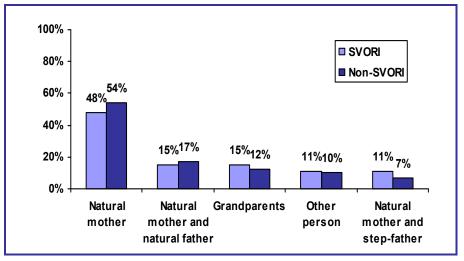
Note: Differences between SVORI and non-SVORI were not statistically significant at the 0.05 level.

SVORI respondents and 10% of non-SVORI respondents reported that their grandparents were primarily responsible for raising them. About 13% of respondents reported other relatives or nonrelatives to be primarily responsible for raising them (14% of SVORI and 12% of non-SVORI). About one in 10 respondents reported that a mother and stepfather or mother's boyfriend filled this role (12% of SVORI and 8% of non-SVORI).

#### **Living Arrangements**

Respondents were also asked who they had lived with the longest while they were growing up. SVORI and non-SVORI respondents reported similar living arrangements. About half of respondents reported that they had lived longest with their natural mothers (48% of SVORI and 54% of non-SVORI). In addition, as shown in Exhibit 4, 16% of respondents reported that they had lived longest with both natural parents (15% of SVORI and 17% of non-SVORI). Thirteen percent of respondents reported that they had lived longest with their grandparents (15% of SVORI and 12% of non-SVORI). About one in 10 respondents reported that they had lived longest with another relative or nonrelative (11% of SVORI and 10% of non-SVORI). Finally, 9% of respondents reported that they had lived longest with their natural mothers and a stepfather or mother's boyfriend (11% of SVORI and 7% of non-SVORI).

Exhibit 4. Primary persons or person whom juvenile respondents lived with the longest, by group



Note: Differences between SVORI and non-SVORI were not statistically significant at the 0.05 level.

#### **Family Emotional Support**

Nearly all respondents agreed or strongly agreed that they felt close to their families and wanted their families to be involved in their lives.

To measure the degree of family emotional support that respondents felt at the time of the pre-release interview, a scale was created based on the degree to which they agreed with 10 statements about their relationships with their families. These statements included items such as "I have someone in my family who understands my problems" and "I have someone in my family to love me and make me feel wanted." The items were combined to create a scale with possible values ranging from zero to 30, where higher scores indicated higher levels of family emotional support. Respondents in both groups reported relatively high levels of family emotional support according to this scale (23.19 for SVORI and 22.89 for non-SVORI). Nearly all respondents agreed or strongly agreed that they felt close to their families (99% of SVORI and 96% of non-SVORI) and wanted their families to be involved in their lives (99% of SVORI and 97% of non-SVORI). In addition, nearly all respondents agreed or strongly agreed that they had someone in their families to turn to (94% of SVORI and 92% of non-SVORI) and someone who understood their problems (95% of SVORI and 92% of non-SVORI).

<sup>&</sup>lt;sup>4</sup> Response categories were "strongly agree," "agree," "disagree," and "strongly disagree." Values of zero through 3 were assigned to response categories, with higher values representing greater family emotional support. The values for each of the 10 items were summed to create the family emotional support scale.

On average, the family emotional support score for adult male respondents in the SVORI evaluation was significantly lower than that of juvenile respondents (average scores of 23.0 and 21.4 for juvenile and adult male respondents, respectively).

Parental Relationship

When describing the relationship with their parent(s) before confinement, nearly all respondents agreed or strongly agreed with the statements "We wanted to spend time together" and "We respected each other."

Similarly, to measure the strength of relationship to parents that respondents felt before confinement, a scale was created based on the degree to which they agreed with 10 statements. These statements included items such as "We wanted to spend time together" and "We respected each other." The items were combined to create a scale with possible values ranging from zero to 30, where higher scores indicated a stronger parental relationship. Respondents in both groups shared similar, fairly high scores on the strength of their parental relationships (21.5 for SVORI and 21.2 for non-SVORI). Specifically, nearly all respondents agreed or strongly agreed with the statements "We wanted to spend time together" (89% of SVORI and 92% of non-SVORI), "We respected each other" (93% of both groups), and "They were important to me" (99% of SVORI and 98% of non-SVORI).

During the pre-release interview, respondents were also asked a series of questions about how they felt about their current relationship to their parents. As with the measure of preconfinement parental relationship, the responses to the current relationship items were combined to create a scale with possible values ranging from zero to 30, where higher scores indicated a stronger relationship. Overall, both groups reported that their current relationships with parents were stronger (average scores of 22.9 for SVORI and 22.1 for non-SVORI) than the relationships before confinement.

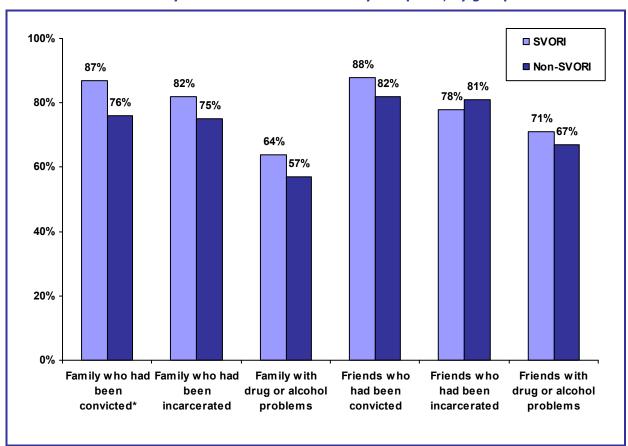
<sup>&</sup>lt;sup>5</sup> Response categories were "strongly agree," "agree," "disagree," and "strongly disagree." Values of zero through 3 were assigned to response categories, with higher values representing a stronger parental relationship. The values for each of the 10 items were summed to create the parental relationship scale.

# A majority of respondents reported having family members who had been convicted of a crime, incarcerated, or had problems with drugs or alcohol.

#### **Family Criminality**

Although they provided a substantial source of emotional support for the juvenile respondents, family members also may have served as negative influences. As shown in Exhibit 5, more than three quarters of respondents reported having family members who had been convicted of a crime (87% of SVORI and 76% of non-SVORI) or incarcerated (82% of SVORI and 75% of non-SVORI). In addition, more than half of respondents reported having family members who had problems with drugs or alcohol (64% of SVORI and 57% of non-SVORI). Similarly, a majority of adult males in the SVORI evaluation reported having family members who had been convicted of a crime (76%), had been incarcerated (74%), or had had problems with drugs or alcohol (73%).

Exhibit 5. Criminal history and substance use of family and peers, by group



<sup>\*</sup>p < 0.05 for test of significant difference between SVORI and non-SVORI.

#### **Peer Criminality**

A large majority of respondents reported having criminally involved friends before confinement.

Juvenile respondents overwhelmingly reported having friends involved in crime and substance use. A large majority of both SVORI and non-SVORI respondents reported having friends before confinement who had been convicted of a crime (88% of SVORI and 82% of non-SVORI) or incarcerated (78% of SVORI and 81% of non-SVORI). Most respondents also reported that, before confinement, they had friends who had problems with drugs or alcohol (71% of SVORI and 67% of non-SVORI). Most adult males in the SVORI evaluation also reported having friends who had been convicted of a crime (83%), had been incarcerated (81%), or had had problems with drugs or alcohol (82%).

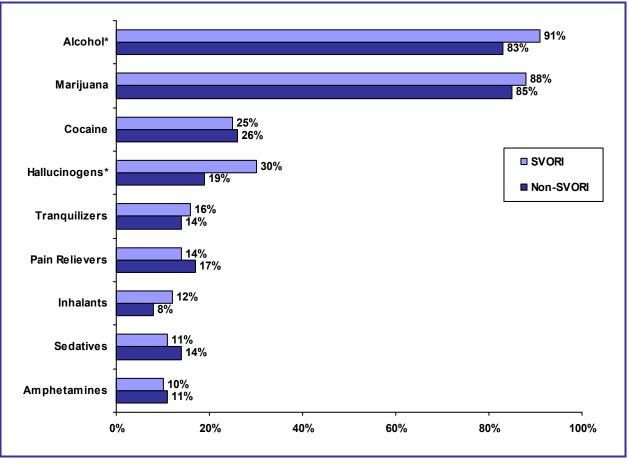
# SUBSTANCE USE AND PHYSICAL AND MENTAL HEALTH

Respondents were asked a variety of questions about their preconfinement alcohol and drug use, as well as their substance use treatment experiences. They were also asked about their lifetime and current experiences with a variety of physical illnesses. In addition, they were asked to respond to a series of items that compose three well-known scales—the 12-Item Short-Form Health Survey (SF-12) physical health scale, the SF-12 mental health scale (Ware, Kosinski, Turner-Bowker, & Gandek, 2002), and the Symptom Assessment–45 Questionnaire (SA-45) Global Severity Index (GSI; Strategic Advantages, 2000).

#### **Substance Use and Treatment**

Nearly all of the respondents reported having used alcohol or drugs during their lifetimes (92% of SVORI and 94% of non-SVORI). On average, respondents reported having used two different drugs. Exhibit 6 shows responses for lifetime use for the most common drugs.

A large majority of respondents reported having used alcohol (91% of SVORI and 83% of non-SVORI), and the average age of first use was about 12 years (12.2 years for SVORI and 12.5 years for non-SVORI). Although reported use of alcohol by adult male respondents in the SVORI evaluation was also high (97%), juvenile respondents were, on average, significantly younger than their adult counterparts at the time that they had first used alcohol (12.4 years for juvenile respondents and 13.7 years for adult male respondents).



**Exhibit 6. Lifetime substance use, by group** 

\*p < 0.05 for test of significant difference between SVORI and non-SVORI.

Nearly all of the respondents reported having used alcohol and drugs during their lifetimes.

Compared with adult male respondents in the SVORI evaluation, juvenile respondents reported similar rates of alcohol and marijuana use and were, on average, significantly younger at the time they first used these drugs.

Most juvenile respondents reported having used marijuana (88% of SVORI and 85% of non-SVORI) and reported a young average age of first use (12.2 years for SVORI and 12.5 for non-SVORI). Again, reported use of marijuana by juvenile respondents was similar to that of their adult counterparts (86% of juvenile respondents and 93% of adults). In addition, juvenile respondents were, on average, significantly younger than adult respondents at the time that they had first used marijuana (12.4 years for juvenile respondents and 14.0 for adult male respondents).

About one quarter of all juvenile respondents reported having used cocaine (25% of SVORI and 26% of non-SVORI) and hallucinogens (30% of SVORI and 19% of non-SVORI), much lower rates of use than reported by adult males in the SVORI

A large majority of respondents reported having used alcohol or other drugs during the 30 days before their confinement.

evaluation (56% cocaine and 46% hallucinogens). Fewer juvenile respondents reported using other substances.<sup>6</sup>

Respondents were also asked about substance use during the 30 days before their current confinement. A large majority in both groups reported having used alcohol or other drugs during the 30 days before their confinement (70% of SVORI and 68% of non-SVORI). About 60% of the respondents in both groups reported having used one or more drugs other than alcohol during the 30 days before their confinement (59% of SVORI and 61% of non-SVORI). Similarly, about two thirds of adult male respondents reported using one or more drugs in the 30 days before incarceration. Fewer juvenile respondents reported using other substances.<sup>7</sup>

Exhibit 7 compares the two groups' reported drug use during the 30 days before confinement for the most commonly reported drugs. Nearly 60% of both SVORI and non-SVORI respondents reported having used marijuana; about half of both SVORI and non-SVORI respondents reported having used alcohol; about one in every 10 respondents reported having used cocaine.

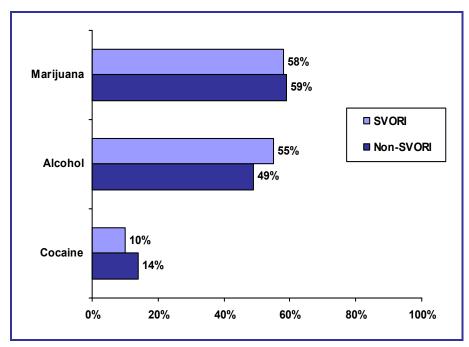
About half of all respondents had received treatment for a substance use or mental health problem at some point during their lifetime.

About half of SVORI and non-SVORI respondents had received treatment for a substance use or mental health problem at some point during their lifetimes (53% of SVORI and 48% of non-SVORI). Of these, 26% reported that they had received treatment for drug use or dependence (25% of SVORI and 28% of non-SVORI), 22% had received treatment for attention-deficit/hyperactivity disorder (21% of SVORI and 22% of non-SVORI), 19% had received treatment for alcohol use or dependence (19% of SVORI and 20% of non-SVORI), and 16% had received treatment for depression (19% of SVORI and 13%

<sup>&</sup>lt;sup>6</sup> Less than 10% reported ever using methadone (1% and 3% for the SVORI and non-SVORI respondents, respectively), anabolic steroids (1% for both the SVORI and non-SVORI respondents), or heroin (3% and 4% for SVORI and non-SVORI respondents, respectively).

<sup>&</sup>lt;sup>7</sup> Less than 10% reported using hallucinogens (8% and 6%, SVORI and non-SVORI, respectively), pain relievers (7% and 5%, SVORI and non-SVORI, respectively), tranquilizers (6% and 8%, SVORI and non-SVORI, respectively), sedatives (5% of each group), amphetamines (5% of each group), inhalants (2% and 1%, SVORI and non-SVORI, respectively), stimulants (1% and 4%, SVORI and non-SVORI, respectively), or heroin (1% and 2%, SVORI and non-SVORI, respectively).

Exhibit 7. Use of specific substances during the 30 days before confinement, by group



Note: Differences between SVORI and non-SVORI were not statistically significant at the 0.05 level.

of non-SVORI). On average, those who reported having received treatment had started a treatment program on more than two separate occasions.

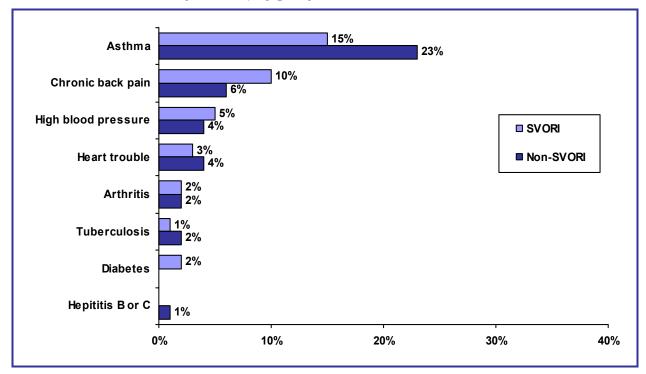
Adult males in the SVORI evaluation reported somewhat higher rates of treatment receipt. About half of respondents (55%) reported that they had received treatment for a substance use or mental health problem during their lifetime. Of these, 39% reported that they had received treatment for drug abuse or dependence, 27% had received treatment for alcohol abuse or dependence, and 20% had received treatment for depression.

#### **Physical Health**

Overall, the study participants reported currently experiencing few physical health problems.

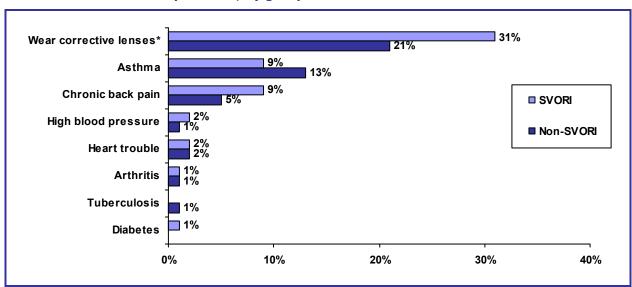
Overall, the study participants reported currently experiencing few physical health problems. Most respondents rated their current physical health as excellent or very good (70% of SVORI and 71% of non-SVORI). The percentages of subjects in each group who reported ever or currently having specific diseases are shown in Exhibits 8 and 9.

Exhibit 8. Lifetime health problems, by group



Note: Differences between SVORI and non-SVORI were not significant at the 0.05 level.

Exhibit 9. Current health problems, by group



 $^{\star}p$  < 0.05 for test of significant difference between SVORI and non-SVORI.

Needing corrective lenses and having asthma were the most commonly reported health problems. Less than 5% of the respondents reported that they had been diagnosed with heart trouble (4%), arthritis (2%), tuberculosis (2%), diabetes (1%),

or hepatitis B or C (0.3%). None of the respondents reported that he was HIV positive or had been diagnosed with AIDS.

#### **Mental Health**

No differences were found between SVORI and non-SVORI respondents on three of the four scales measuring physical and mental functioning and mental health.

No differences were found between SVORI and non-SVORI respondents in their scores on three of the four scales measuring physical and mental functioning (the SF-12 scales) and mental health (the SA-45 GSI and Positive Symptom Total [PST]). While slightly more than half of each group responded that they had no limitations with respect to each of the five items that constitute the SF-12 physical health scale (51% of SVORI and 52% of non-SVORI), non-SVORI respondents had a significantly higher average physical health score (average scores of 53.39 for SVORI and 54.96 non-SVORI). Scores on the SF-12 mental health scale were nearly 50 for each group (49.63 for SVORI and 49.53 for non-SVORI). Both groups scored less than 70 on the GSI, which has a range of 45 to 225; higher scores indicate more psychopathology (64.03 for SVORI and 62.04 for non-SVORI). Average scores on the PST index were 11.85 for SVORI and 10.34 for non-SVORI respondents, meaning that SVORI respondents reported experiencing, on average, 11 of the 45 symptoms included in the SA-45 during the 7 days before the interview and non-SVORI respondents reported experiencing, on average, 10 symptoms.

SVORI respondents were significantly more likely than non-SVORI respondents to indicate symptoms of phobic anxiety and psychoticism.

In addition to the GSI, the SA-45 includes a set of subscales indicating symptoms of specific psychopathologies, the Brief Symptom Inventory. Of the nine subscales, statistically significant differences emerged for two measures—in each case indicating that the SVORI respondents were slightly worse on these measures than the non-SVORI respondents. Results are shown in Exhibit 10. Scores on these subscales can range from a low of 5 to a high of 25, and all results were on the lower end of the range. Scores were similar between groups for anxiety, depression, hostility, interpersonal sensitivity, obsessive-compulsive disorder, paranoid ideation, and somatization. SVORI respondents were significantly more likely than non-SVORI respondents to indicate symptoms of phobic anxiety (6.07 for SVORI and 5.62 for non-SVORI) and psychoticism (6.49 for SVORI and 6.05 for non-SVORI).

Exhibit 10. Average scores on Brief Symptom Inventory subscales, by group

Measure	SVORI	Non-SVORI
Anxiety scale	6.6	6.4
Depression scale	7.8	7.3
Hostility scale	6.8	7.3
Interpersonal sensitivity scale	7.0	6.9
Obsessive-compulsive scale	8.1	7.8
Paranoid ideation scale	8.6	8.3
Phobic anxiety scale*	6.0	5.6
Psychoticism scale*	6.5	6.1
Somatization scale	6.7	6.4

<sup>\*</sup>p < 0.05 for test of significant difference between SVORI and non-SVORI.

Attentiondeficit/hyperactivity disorder was cited as the most common reason for the treatment. As reported previously, more than half of SVORI and non-SVORI respondents had received treatment for a substance use or mental health problem at some point during their lifetimes (53% of SVORI and 48% of non-SVORI). Of those who reported that they had ever received mental health treatment, attention-deficit/hyperactivity disorder was cited as the most common reason for treatment. One fifth of juvenile respondents in both groups reported that they had received care for this problem (21% of SVORI and 22% of non-SVORI). In comparison, the most common reason for treatment cited by adult male respondents in the SVORI evaluation was depression (20%).

Less than 10% of juvenile respondents reported that they were currently receiving treatment for any mental health problem. Of those who reported that they were currently receiving treatment, the most common diagnosis was attention-deficit/hyperactivity disorder (10% of SVORI and 14% of non-SVORI). Similarly, less than 10% of adult males reported that they were currently receiving treatment. For these men, the most common diagnosis was depression or dysthymia (8%).

More than half of all respondents described their mental health status at the time of the prerelease interview as excellent or very good.

More than half of all juvenile respondents described their mental health status at the time of the pre-release interview as excellent or very good (55% of SVORI and 58% of non-SVORI). During their current period of confinement, 17% of all juvenile respondents were prescribed medication for emotional problems (18% of SVORI and 15% of non-SVORI). About one fifth of all respondents felt they needed treatment for mental health problems (23% of SVORI and 20% of non-SVORI). Similarly, 16% of adult male respondents were prescribed

medication for emotional problems, and 26% felt they needed treatment for mental health problems.

### EMPLOYMENT HISTORY AND FINANCIAL SUPPORT

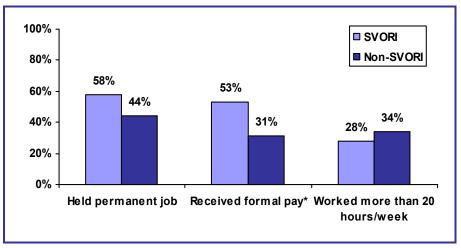
This subsection covers the respondents' employment histories before confinement and describes additional sources of financial support.

#### **Employment History**

Nearly half of all respondents reported having worked at some time before confinement.

Nearly half of all juvenile respondents reported having worked at some time before confinement—43% of SVORI and 51% of non-SVORI. More than one third of respondents reported that they were employed during the 6 months before confinement (35% of SVORI and 41% of non-SVORI). As shown in Exhibit 11, a greater proportion of SVORI respondents described their most recent respective jobs as permanent (58% of SVORI and 44% of SVORI) and received formal pay (53% of SVORI and 31% of non-SVORI). Nearly one third of respondents who held jobs in the 6 months before confinement reported working more than 20 hours per week (28% of SVORI and 34% of non-SVORI). Non-SVORI respondents reported a slightly higher average hourly rate of \$9.72, compared with the average \$8.66 reported by SVORI respondents.

Exhibit 11.
Characteristics of respondents' jobs before confinement, by group



Note: Results are for respondents who worked during the 6 months before confinement.

\*p < 0.05 for test of significant difference between SVORI and non-SVORI.

The jobs that respondents typically held were "blue-collar" jobs. More than one third of all respondents who had been employed

during the 6 months before confinement reported a last job they as laborer, which includes construction workers, day laborers, landscapers, and roofers (32% of SVORI and 39% of non-SVORI). More than one third of respondents had worked in the service industry as cooks, waiters, janitors, cashiers, and dishwashers (38% of SVORI and 33% of non-SVORI). Less than 10% of respondents worked as skilled craftsmen (8% of SVORI and 7% of non-SVORI) or in sales (6% of SVORI and 8% of non-SVORI). A few respondents reported having a jobs as operators or transportation equipment operators (3% of all respondents).

About one third of the respondents reported supporting themselves with income from illegal activities during the 6 months before confinement.

#### **Financial Support**

Respondents were asked how they had supported themselves, in addition to being legally employed, during the 6 months before confinement. Overall, the majority of respondents in each group reported that they had received support from their family (70% of SVORI and 68% of non-SVORI). About one third of respondents in each group reported that they had supported themselves by illegal income (34% of SVORI and 35% of non-SVORI).

Exhibit 12 shows the sources of financial support for SVORI and non-SVORI respondents, disaggregated by their employment status during the 6 months before confinement. As shown in the exhibit, within employment status were relatively few differences between SVORI and non-SVORI respondents with respect to whether they reported having received financial support from each of the four sources. Regardless of employment status, the majority of respondents reported having received financial support from family. While about one third of respondents reported that they had received financial support from illegal activity, a greater proportion of nonworking respondents than working respondents reported having received this type of support.

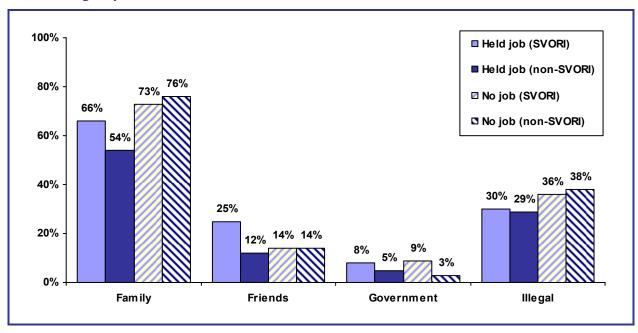


Exhibit 12. Sources of income during the 6 months before confinement, by employment status and group

Note: Differences between SVORI and non-SVORI were not significant at the 0.05 level.

# DELINQUENCY HISTORY, VIOLENCE, VICTIMIZATION, AND GANG INVOLVEMENT

This subsection describes respondents' involvement with the juvenile justice system before confinement and outlines preconfinement perpetration of violence and victimization. A brief description of respondents' involvement as gang members is also provided.

#### **Delinquency History**

Respondents reported considerable involvement with the juvenile justice system before their current confinement.

SVORI and non-SVORI respondents reported considerable involvement with the juvenile justice system before their current confinement (Exhibit 13). On average, respondents were about 13 years old at the time of their first arrest, and had been arrested about 6 times and adjudicated about 3 times. While most respondents had been previously ordered to a juvenile detention facility, training school, or other kind of juvenile correctional facility, non-SVORI respondents reported significantly more terms of confinement, on average, than SVORI respondents (3.0 for SVORI and 3.7 for non-SVORI).

Exhibit 13. Delinquency history of respondents, by group

Delinquency History	SVORI	Non-SVORI
Age at first arrest (mean)	12.9	13.2
Times arrested (mean)	5.7	6.6
Times adjudicated (mean)	2.9	3.3
Ever been previously ordered to a juvenile detention facility, training school, or other kind of juvenile correctional facility	88%	93%
Times previously confined (mean)*	3.0	3.7

<sup>\*</sup>p < 0.05 for test of significant difference between SVORI and non-SVORI.

On average, respondents reported being about 13 years old at the time of first arrest.

Almost half of respondents reported that they were currently confined for a violent crime.

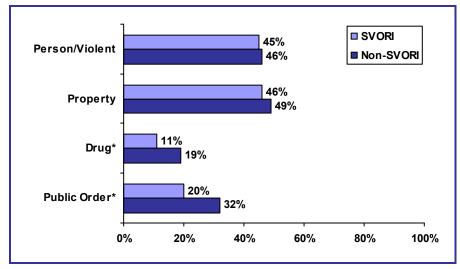
Compared with adult male respondents in the SVORI evaluation, juvenile respondents were significantly younger, on average, at the time of first arrest (13 years old for juvenile respondents and 16 years old for adult male respondents). Half of adult male respondents reported that they had spent time in a juvenile correctional facility for committing a crime. These men reported being detained 3.5 times, on average, mirroring the correctional experiences of juvenile respondents who reported being detained 3.3 times, on average.

Exhibit 14 shows the offenses that led to the current terms of confinement as reported by the respondents. Almost half of respondents reported that they were currently confined for a person/violent crime (45% of SVORI and 46% of non-SVORI). About 47% reported a property crime (46% of SVORI and 49% of non-SVORI). SVORI respondents were significantly less likely than non-SVORI respondents to report that their current confinement was for a drug crime (11% of SVORI and 19% of non-SVORI) or public-order crime (20% of SVORI and 32% of non-SVORI).

Compared with adult male respondents, juvenile respondents were significantly more likely to report that their current confinement was for a property crime (47% juvenile respondents and 25% adult male respondents) or public-order crime (27% juvenile respondents and 19% adult male respondents). Juvenile respondents were significantly less likely than adult male respondents to report that they were currently confined for a drug offense (15% juvenile respondents and 33% adult male respondents).

One percent of the non-SVORI respondents reported that their adjudicated offense was "other." This category includes unspecified felonies and gang activity.

Exhibit 14. Offenses resulting in current confinement, by group



\*p < 0.05 for test of significant difference between SVORI and non-SVORI.

#### **Perpetration of Violence**

For the 6 months before confinement, about three quarters of respondents (79% of SVORI and 70% of non-SVORI) reported violent behavior (including threats of violence), a slightly higher proportion than for adult male respondents in the SVORI evaluation (68%).

Most also reported being victims of violence.

About three quarters of

violent behavior before

respondents reported

incarceration.

#### **Victimization**

Two thirds of respondents reported having been victims of violence in the 6 months before confinement (70% of SVORI and 63% of non-SVORI). Similarly, most adult male respondents in the SVORI evaluation reported having been victimized (59%).

#### **Gang Membership**

More than one in every 10 respondents reported having been a gang member (13% of SVORI and 14% of non-SVORI). Of the respondents in gangs, more than half (53% of SVORI and 58% of non-SVORI) considered their gang to be family. In comparison, only about 5% of adult male respondents in the SVORI evaluation reported gang membership. As with juvenile respondents, about half of adult male respondents considered their gang to be family.

#### **EXPERIENCES DURING CONFINEMENT**

This subsection describes respondents' experiences during confinement on several dimensions, including length of

confinement and disciplinary infractions. These findings are followed by a description of work performed during confinement and a discussion of interaction with family during confinement.

#### **Length of Confinement**

At the time of the pre-release interview, SVORI respondents had been incarcerated longer than non-SVORI respondents (an average of 1.9 years for SVORI and 1.1 years for non-SVORI).

#### **Disciplinary Infractions and Administrative Segregations**

SVORI respondents also reported more disciplinary infractions and administrative segregations than were reported by the non-SVORI respondents. As shown in Exhibit 15, 59% of SVORI respondents reported at least one disciplinary infraction, compared with 56% of non-SVORI respondents. Fewer respondents reported administrative segregation during the current term of confinement (43% of SVORI and 36% of non-SVORI).

Exhibit 15. Disciplinary infractions and administrative segregations during current confinement, by group

SVORI	Non-SVORI
41%	44%
7%	11%
52%	45%
57%	64%
15%	12%
28%	24%
	41% 7% 52% 57% 15%

Note: Differences between SVORI and non-SVORI were not statistically significant at the 0.05 level.

#### **Work Assignment During Confinement**

About one third of the respondents said that they had a work assignment in the institution where they were confined (34% of SVORI and 31% of non-SVORI). On average, respondents with a work assignment spent about 14 hours per week working (15.4 and 12.6 hours for SVORI and non-SVORI for respondents, respectively).

Very few respondents reported having a work-release job: only 3% of SVORI and 6% of non-SVORI respondents reported that

About one third of respondents said that they had a work assignment in the institution where they were confined.

Few respondents reported having a work-release job.

they were on work release. Those with work-release jobs reported working more hours than those with institution jobs. On average, SVORI and non-SVORI respondents reported working about the same number of hours per week (28 hours for SVORI and 27 hours for non-SVORI).

#### **Family Contact**

Respondents were asked about the frequency of contact with family members and friends. Response options for each type of contact ranged from "never" to "daily." SVORI and non-SVORI respondents reported similar frequencies of contact with their family members through phone calls, mail, and in-person visits (Exhibit 16). About two thirds of respondents reported weekly phone contact with family members (63% of SVORI and 70% of non-SVORI). Nearly half of respondents reported weekly contact with family members by mail (42% of SVORI and 47% of non-SVORI). More than one third of respondents reported weekly in-person visits with family members (38% of SVORI and 39% of non-SVORI). Both SVORI and non-SVORI respondents reported less frequent phone, mail, and in-person contact with friends.

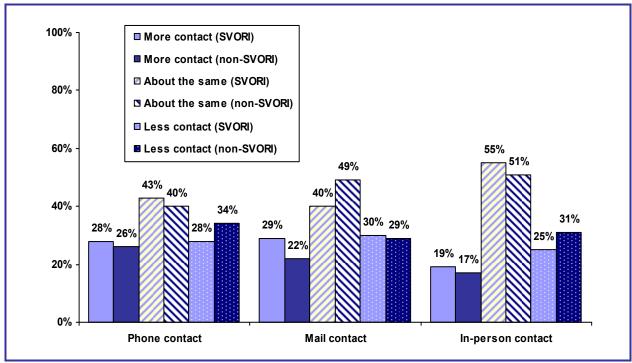
Exhibit 16. Frequency of contact with family members and friends during confinement, by group

	Contact with	Contact with Family Members		Contact with Friends	
Form of Contact	SVORI	Non-SVORI	SVORI	Non-SVORI	
Phone Contact					
Never	2%	2%	45%	36%	
A few times	8%	7%	13%	16%	
Monthly	17%*	7%*	10%	10%	
Weekly	63%	70%	24%	24%	
Daily	10%	15%	8%	12%	
Mail Contact					
Never	6%	11%	20%	27%	
A few times	21%	23%	19%	20%	
Monthly	20%	14%	13%	14%	
Weekly	42%	47%	37%	33%	
Daily	11%	5%	10%	6%	
In-Person Visits				·	
Never	16%	18%	80%	87%	
A few times	17%	19%	6%	7%	
Monthly	28%	23%	7%*	2%*	
Weekly	38%	39%	6%	4%	
Daily	1%	1%	1%	0%	

<sup>\*</sup>p < 0.05 for test of significant difference between SVORI and non-SVORI.

Respondents were also asked whether the amount of each type of contact with family and friends was currently more than, about the same as, or less than the amount when they were first confined (i.e., during the first 6 months of confinement). Almost half of the respondents in both groups reported that they had about the same amount of contact with family and friends as they did when they were first confined (Exhibit 17). More respondents reported having less contact, rather than more contact, with family and friends than when they were first confined.

Exhibit 17. Amount of contact with family members and friends at time of interview, compared with contact when first confined



Note: Differences between SVORI and non-SVORI were not significant at the 0.05 level.

#### COMPARABILITY OF SVORI AND NON-SVORI RESPONDENTS

The impact evaluation findings depend on the comparability of the two evaluation study groups—those who participated in SVORI programs and the non-SVORI respondents who were identified as comparison subjects for this evaluation. The evaluation team worked with the local program staff to identify appropriate populations from which to identify comparison subjects. The goal of this exercise was to find groups of

subjects who were similar to those participating in SVORI programs and to have local staff in the sites (usually individuals working with agency management information systems) provide lists of these individuals to the evaluation team during the first wave of interviews. If identification of comparable non-SVORI respondents were successful, then the expectation would be that few differences would be found between the groups on variables that measured characteristics before the time at which assignment to SVORI could be made. For the interview data, this expectation refers to variables measuring preconfinement characteristics.

The characteristics of the respondents and comparisons of the average values for the SVORI and non-SVORI groups having been thoroughly discussed earlier in this section, the focus of the following discussion is the few variables for which statistically significant differences between the two groups were identified.<sup>9</sup>

Exhibit 18 lists the few variables for which the differences between groups were statistically significant at the 0.05 level. Those participating in SVORI programs were older and less likely to be white. SVORI respondents were more likely than non-SVORI respondents to report that they had family members who had been convicted. Although few respondents reported that they were gang members, SVORI respondents were more likely than non-SVORI respondents to report that they had relatives who were members of their gang.

Responses differed on one of the employment measures. SVORI respondents were more likely than non-SVORI respondents to report that they had received formal pay at their last job.

With regard to physical health, non-SVORI respondents scored higher than SVORI respondents on the SF-12 physical health scale, indicating better physical health for non-SVORI respondents. SVORI respondents were more likely than non-SVORI respondents to report wearing corrective lenses. On mental health, SVORI respondents were more likely than non-SVORI respondents to indicate symptoms of phobic anxiety and

 $<sup>^9</sup>$  Here, statistical significance is defined by a two-tailed test at  $\alpha = 0.05$ . For the means, standard deviations, and t-statistics for many of the variables discussed earlier in this section, see Appendix Exhibit A-2.

Exhibit 18. Statistically significant differences between SVORI and non-SVORI respondents

Variable	N	SVORI Mean (SD)	Non-SVORI Mean (SD)
<b>Demographic Characteristics</b>			
Age at pre-release interview	337	17.0 (1.30)	16.7 (1.36)
Race: White	337	0.14 (0.35)	0.24 (0.43)
Family			
Anyone in family ever convicted	307	0.87 (0.34)	0.76 (0.43)
Any relatives members of respondent's gang	45	0.74 (0.45)	0.42 (0.50)
Employment			
Received formal pay for last job	128	0.53 (0.50)	0.31 (0.46)
Physical and Mental Health			
SF-12 physical health scale	333	53.39 (7.88)	54.96 (6.20)
Wear corrective lenses	337	0.31 (0.46)	0.21 (0.41)
Phobic anxiety scale (range 5–25; higher is worse)	337	6.07 (2.33)	5.62 (1.41)
Psychoticism scale (range 5–25; higher is worse)	337	6.49 (2.01)	6.05 (1.81)
Drug Use			
Ever used alcohol	337	0.91 (0.29)	0.83 (0.37)
Ever used hallucinogens	336	0.30 (0.46)	0.19 (0.39)
<b>Delinquency History</b>			
Conviction offense: drug crime	335	0.11 (0.31)	0.19 (0.39)
Conviction offense: public-order crime	335	0.20 (0.40)	0.32 (0.47)
Times previously confined	327	2.97 (2.64)	3.65 (2.77)
Ever in jail/prison for more than 24 hours at one time	337	0.60 (0.49)	0.48 (0.50)

Note: All differences between SVORI and non-SVORI were significant at p < 0.05.

psychoticism, although scores on both measures for each group were low.

In terms of drug use experience, only two statistically significant differences were found in the substance use measures. SVORI respondents were more likely than non-SVORI respondents to report having ever having used alcohol and to report having ever used hallucinogens.

With respect to the delinquency history domain, SVORI respondents were less likely than non-SVORI respondents to be currently confined for a drug or public-order crime. In addition, SVORI respondents were more likely than non-SVORI respondents to report having been confined for more than 24 hours at one time. Conversely, non-SVORI respondents had more prior terms of confinement than SVORI respondents, on average.

# **Pre-release Service Needs**

The pre-release interviews provided an opportunity for the respondents to identify the extent to which they needed a wide range of specific services. <sup>10</sup> The evaluation team asked questions about 28 different types of services and then grouped them into five service categories or "bundles." These bundles are

- services to help with the transition from confinement to the community;
- health care services (including substance use treatment and mental health);
- employment, education, and skills services;
- domestic violence-related services; and
- child-related services.

To summarize needs in the domains of transition, health, employment/education/skills, domestic violence–related, and child-related services, service need bundle scores were developed from the interview data. Scores for each individual were generated by summing zero/one indicators for whether the individual did not/did report needing each of the items within a bundle; then this sum was divided by the number of items in the bundle. At the individual-respondent level, this

Responses were "a lot," "a little," or "not at all." These were subsequently recoded to "some" and "not at all."

<sup>&</sup>lt;sup>11</sup> Only 30 respondents (less than 10% of the sample) reported that they had children so the discussion of the need for child-related services is not discussed in this section.

<sup>&</sup>lt;sup>12</sup> For a list of these items by bundle, see Appendix Exhibit A-3; these items are presented bundle-by-bundle in the subsections that follow.)

bundle score can be interpreted as the proportion of the bundle that the individual reported needing.<sup>13</sup>

This section of the report provides descriptive information about SVORI and non-SVORI respondents' needs for an array of services. Although the data are not shown, this section also explores the differences and similarities in service needs reported by juvenile respondents and adult male respondents in the SVORI evaluation.

# PRE-RELEASE SERVICE NEED BUNDLE SCORES

The levels of expressed need for employment, education, and skills were very high.

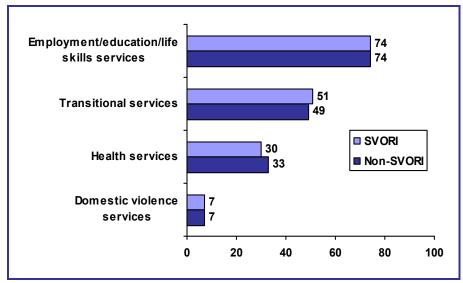
Exhibit 19 compares the service need bundle scores for all SVORI and non-SVORI respondents. As can be seen, the levels of expressed need for employment, education, and skills were very high—on average, respondents reported needing nearly three quarters of all of the service items in the employment bundle (average bundle scores of 74 for both groups). Respondents also expressed a high level of need for the services and assistance contained in the transition services bundle. On average, respondents reported needing about half of these services, which included financial assistance, transportation, and obtaining a driver's license and other documentation (average scores of 51 for SVORI and 49 for non-SVORI).

On average, SVORI and non-SVORI respondents had about the same level of need for health services (average bundle score of 30 for SVORI and 33 for non-SVORI). Relatively few respondents felt the need for domestic violence services. There were no statistically significant differences in the expressed levels of service need between the two groups.

Juvenile respondents and adult male respondents in the SVORI evaluation reported very similar levels of service need within each of the service bundles. On average, juvenile and adult male respondents reported needing about three quarters of the items in the employment, education, and skills-related service bundle. Although adult male respondents reported a significantly higher level of need for transition services than juvenile respondents, both groups reported a high level of need

<sup>&</sup>lt;sup>13</sup> Data from the pre-release interview were used to develop individuallevel bundle scores for each respondent.

Exhibit 19. Service need bundle scores across service bundles, by group



Note: Differences between SVORI and non-SVORI were not statistically significant at the 0.05 level.

for these services. On average, juvenile and male respondents reported needing about one third of the items in the health services bundle. Finally, juvenile and adult male respondents reported similar, low levels of need for domestic violence services.

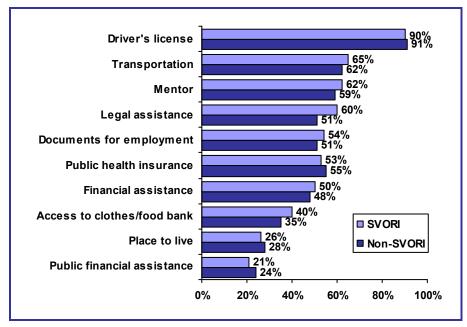
The following subsections provide additional information on the individual bundles.

#### **Transition Services**

Before release from confinement, nearly all SVORI and non-SVORI respondents reported needing at least some transition services to address immediate needs upon release, such as financial, public, or legal assistance; a place to live; various identification documents; transportation; health insurance; and access to emergency resources, such as clothing and food (98% of SVORI and 99% of non-SVORI). Exhibit 20 displays the percentages of respondents who reported needing these types of services. There were no significant differences between SVORI and non-SVORI respondents in their reported needs for transition services.

Nearly all respondents reported needing to obtain a driver's license (90% of SVORI and 91% of non-SVORI). Half or more of all respondents reported needing transportation (65% of

Exhibit 20. Self-reported need for specific transition services, by group



Note: Differences between SVORI and non-SVORI are not statistically significant at the 0.05 level.

Obtaining a driver's license was the most commonly reported transitional need.

SVORI and 62% of non-SVORI), a mentor (62% of SVORI and 59% of non-SVORI), legal assistance (60% of SVORI and 51% of non-SVORI), documents for employment such as a birth certificate, Social Security card, and photo identification (54% of SVORI and 51% of non-SVORI), public health insurance (53% of SVORI and 55% of non-SVORI), and financial assistance (50% of SVORI and 48% of non-SVORI).

Respondents also reported needing basic services, including housing and access to clothing and food. Approximately 30 days before release, more than one third of all respondents reported needing access to clothing and food banks after release (35% of SVORI and 40% of non-SVORI), and more than one quarter of all respondents reported needing a place to live (26% of SVORI and 28% of non-SVORI).

As mentioned, the service need bundle score at the individual-respondent level can be interpreted as the proportion of services in the bundle that the individual reported needing. Respondents generally expressed a high level of need for the services and assistance included in the transition services bundle, with average bundle scores of 49 for SVORI respondents and 51 for non-SVORI respondents.

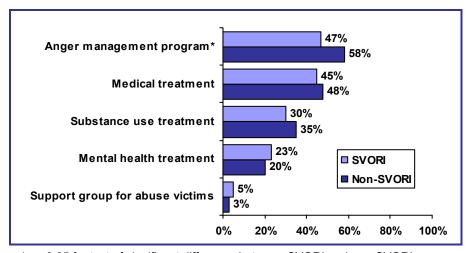
Although the level of need for transition services reported by both juvenile and adult male respondents was high, juvenile respondents reported a significantly lower level of need than their adult counterparts. Compared with adult male respondents, juvenile respondents were significantly less likely to report that they needed financial assistance, public health insurance, transportation, public financial assistance, access to clothes/food banks, or a place to live. Juvenile respondents were significantly more likely than adult male respondents to report that they needed a driver's license or legal assistance.

#### **Health Services**

The most common health service need was for anger management programming.

Respondents' perceived needs regarding health services are shown in Exhibit 21. The majority of both SVORI and non-SVORI respondents reported needing some kind of health services (73% of SVORI and 77% of non-SVORI). The most common health service need was for anger management programming, with reported need being significantly higher among the non-SVORI respondents (47% of SVORI and 58% of non-SVORI).

Exhibit 21. Self-reported need for specific health services, by group



\*p < 0.05 for test of significant difference between SVORI and non-SVORI.

Nearly half of both groups reported that they needed medical treatment (45% of SVORI and 48% of non-SVORI). Nearly one third of both groups reported needing substance use treatment (30% of SVORI and 35% of non-SVORI). About one quarter of both groups reported needing mental health treatment (23% of SVORI and 20% of non-SVORI). Very few of the respondents reported needing a support group for victims of abuse (5% of SVORI and 3% of non-SVORI).

In terms of the bundle scores for this category (see Exhibit 19), respondents generally reported needing about one third of the health services, with SVORI respondents needing a smaller proportion of services in this bundle (average bundle scores were 30 for SVORI respondents and 33 for non-SVORI respondents). The difference was driven primarily by higher reported need for anger management programming by the non-SVORI respondents (as shown in Exhibit 21).

Juvenile and adult male respondents in the SVORI evaluation reported the same level of need for health. Within this service bundle, juvenile respondents were significantly less likely than adult male respondents to report needing medical treatment and substance use treatment; however, juvenile respondents were significantly more likely than adult male respondents to report needing anger management programming.

#### **Employment/Education/Skills Services**

54% of non-SVORI).

All respondents reported needing some kind of employment, education, or skills-related services to prepare them for their return to the community. As shown in Exhibit 22, half or more of all respondents reported needing each of the services in this bundle.

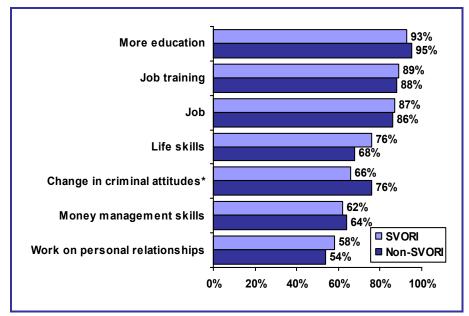
The most common need in this service bundle was for more education after release (93% of SVORI and 95% of non-SVORI). This was followed closely by respondents' reported need for job training (89% of SVORI and 88% of non-SVORI) and a job (87% of SVORI and 86% of non-SVORI).

In addition to education and employment, skills-building services such as money management and life skills training were needed by the majority of respondents. Most respondents recognized that some aspect of their own behavior needed to change to improve their lives after release. Nearly two thirds of respondents reported that they needed to change their attitudes related to criminal behavior, with a significantly greater need for change being reported by non-SVORI respondents (66% of SVORI and 76% of non-SVORI). Finally, more than half of respondents in both groups reported needing to work on their personal relationships (58% of SVORI and

All respondents reported needing some kind of employment, education, or skills-related services to prepare them for release.

The majority of respondents recognized that some aspect of their own behavior needed to change to improve their lives after release.

Exhibit 22. Self-reported need for specific employment, education, and skills services, by group



\*p < 0.05 for test of significant difference between SVORI and non-SVORI.

As explained (see discussion of Exhibit 19), the bundle scores for employment, education, and skills services were very high—on average, respondents reported needing about three quarters of the service items in the employment bundle (average scores of 74 for both groups).

Juvenile and adult male respondents in the SVORI evaluation reported the same high level of need for employment, education, and skills-related services. Juvenile respondents were significantly more likely than adult male respondents to report needing job training and a job. Juvenile respondents were significantly less likely than adult male respondents to report needing money management and work on personal relationships.

#### **Domestic Violence Services**

Respondents were asked about their need for two types of domestic violence services—batterer intervention programs and domestic violence support groups—which were combined into a domestic violence services bundle. Very few respondents reported needing these services—less than one in every 10 respondents reported needing either of these two types of programming.

Juvenile and male respondents in the SVORI evaluation reported similar, low levels of need for domestic violence

Very few respondents reported needing domestic violence services.

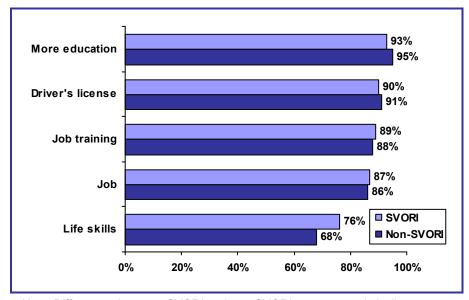
services. No significant differences were found between juvenile and adult male respondents in reported need for specific service items in this bundle.

#### LEVELS OF NEED ACROSS SERVICES

SVORI and non-SVORI respondents were similar on most measures and reported high need across the spectrum of services.

SVORI and non-SVORI respondents were similar on most measures and reported high need across the spectrum of services (see Appendix Exhibit A-3). As shown in Exhibit 23, SVORI respondents commonly reported needing more education (93%), a driver's license (90%), job training (89%), a job (87%), and life skills training (76%)—levels of need mirrored by non-SVORI respondents.

Exhibit 23. Most commonly reported service needs, by group



Note: Differences between SVORI and non-SVORI were not statistically significant at the 0.05 level.

When asked for their "top two" service needs, nearly half of all respondents mentioned needing a job after release (47% of SVORI and 46% of non-SVORI). More than one quarter listed needing more education (34% of SVORI and 22% of non-SVORI) and a driver's license (28% of SVORI and 30% of non-SVORI) in their top two needs. About one in every 10 respondents mentioned change in criminal attitudes as one of their top two needs (7% of SVORI and 11% of non-SVORI).

Few significant differences were found between the two groups with respect to their top two needs. Non-SVORI respondents were much more likely than SVORI respondents to mention

Pre-release Service Needs

anger management programming (4% of SVORI and 14% of non-SVORI) and transportation (5% of SVORI and 13% of non-SVORI) as one of their top two needs. SVORI respondents were much more likely than non-SVORI respondents to mention more education (34% of SVORI and 22% of non-SVORI) and access to clothing or food banks (7% of SVORI and 2% of non-SVORI) as one of their top two needs.

On average, juvenile respondents reported needing less than half of all service items.

In addition to the service bundles already described, an "all services" bundle was created, which captures the level of overall need across all services (for individual items, see Appendix Exhibit A-3). On average, juvenile respondents reported needing less than half of all service items (average score of 48 for both groups). In comparison, adult male respondents reported needing more than half of all service items (average score of 54), a significantly higher level of need than that reported by juvenile respondents.

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## **Pre-release Service Receipt**

The previous section demonstrated the levels of expressed need for a wide variety of services—particularly those services critical to moving from confinement to the community, including those associated with basic transitional needs (e.g., education, job training, and transportation). The SVORI programs were intended to increase access to the services and programs that address these and other needs. In the Introduction, profiles of each SVORI site program were presented that suggested that its programming was providing a variety of services to SVORI program participants, particularly in the transition and employment, education, and skills-related services domains.

In this section pre-release interview results are presented that enable insight into the delivery of services at the pre-release phase of SVORI programming for SVORI respondents, as compared with the "treatment as usual" received by non-SVORI respondents. These interviews were conducted between July 2004 and November 2005, so individuals would have received pre-release services and programming during the first one to 2 years of SVORI program development and implementation.

Service receipt bundle scores were calculated as were the service need bundle scores: the number of "yes" responses to items in a bundle was divided by the number of bundle items and multiplied by 100. Individual bundle scores were averaged to yield overall scores. For service receipt, a "bundle" comprising service coordination items was added.

This section of the report provides descriptive information about SVORI and non-SVORI respondents' levels of service receipt in

each of the five service bundles.<sup>14</sup> Although the data are not shown, this section also explores differences and similarities in service receipt reported by juvenile respondents and adult male respondents in the SVORI evaluation.

### PRE-RELEASE SERVICE RECEIPT BUNDLE SCORES

SVORI programs achieved modest increases in providing access to a wide range of services and programming.

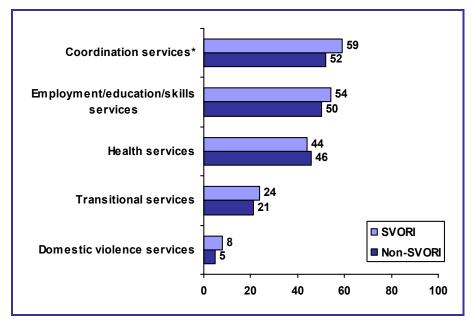
Exhibit 24 shows the service receipt bundle scores for all SVORI and non-SVORI respondents and demonstrates that SVORI programs achieved modest increases in providing access to a wide range of services and programming. Except for the health services bundle, SVORI respondents reported receipt of more services, on average. On average, SVORI respondents reported receipt of a significantly higher level of coordination services, which included needs assessment and reentry planning, than non-SVORI respondents (average score of 59 for SVORI and 52 for non-SVORI). In addition, SVORI respondents reported having received, on average, 54% of the items in the employment, education, and skills-related bundle, whereas non-SVORI respondents reported having received 50% of the items in this bundle. Conversely, non-SVORI respondents reported receipt of slightly higher levels of service in the health bundle than SVORI respondents (average score of 44 for SVORI and 46 for non-SVORI). Although receipt of domestic violencerelated services was low for both groups, SVORI respondents reported having received, on average, more of the items in this bundle than non-SVORI respondents (average score of 8 for SVORI and 5 for non-SVORI).

Consistent with the rehabilitative focus of the juvenile justice system, service receipt levels reported by juvenile respondents were fairly high when compared with those of adult male respondents in the SVORI evaluation. Within service receipt bundles, juvenile respondents reported significantly higher levels of service receipt than their adult counterparts in the employment, education, and skills-related services bundle, the coordination services bundle, and the health services bundle.

The following subsections provide additional detail on individual service receipt bundles.

<sup>&</sup>lt;sup>14</sup> Because only 30 juvenile respondents (less than 10% of the sample) reported that they had children, the discussion of the receipt of child-related services was omitted from this section.

Exhibit 24. Service receipt bundle scores across service bundles, by group



\*p < 0.05 for test of significant difference between SVORI and non-SVORI.

#### **Coordination Services**

The use of needs assessments and the coordination of services were integral to the concept of the SVORI programs—both as defined by the federal funders and as described by the SVORI programs—in order to ensure that identified needs were met with appropriate services and programming. For example, in response to the evaluation team's 2005 program director survey, 81% of the juvenile program directors said that they were attempting to provide all needed services to participants rather than focusing on a specific service or set of services.

Exhibit 25 shows the proportions of SVORI and non-SVORI respondents who reported having received each of the seven coordination services. SVORI respondents were more likely than non-SVORI respondents to report that they had received coordination services. Specifically, SVORI respondents were significantly more likely to report having received release planning (78% of SVORI and 65% of non-SVORI), development of a reentry plan (55% of SVORI and 41% of non-SVORI), and meeting with a caseworker or social worker (42% of SVORI and 30% of non-SVORI).

SVORI respondents were more likely than non-SVORI respondents to report that they had received coordination services. Exhibit 25. Self-reported receipt of specific coordination services, by group



\*p < 0.05 for test of significant difference between SVORI and non-SVORI.

Only about half of SVORI respondents reported having develop a reentry plan or having received a needs assessment to prepare for release.

While the overall levels of service receipt were fairly high, only about half of SVORI respondents reported having developed a reentry plan (55%) or having received a needs assessment specifically designed to help in preparation for release (46%).

Compared to adult male respondents in the SVORI evaluation, juvenile respondents were significantly more likely to report receiving most of the items in the coordination services bundle. Most notably, juvenile respondents were much more likely to report that they had met with a case manager, received a needs assessment, and worked with someone to plan for release.

#### **Transition services**

In general, SVORI respondents were more likely than non-SVORI respondents to report that they had received transition services

Transition services are programs and assistance that help individuals prepare for returning to the community, including assistance finding housing and transportation. Exhibit 26 shows responses about 30 days before release for the 12 transition services included in this bundle. In general, SVORI respondents were more likely to report that they had received transition services. Specifically, SVORI respondents were significantly more likely than non-SVORI respondents to report that they had participated in release preparation classes (65% of SVORI and 54% of non-SVORI) and had received help finding a place to live (30% of SVORI and 19% of non-SVORI). Although

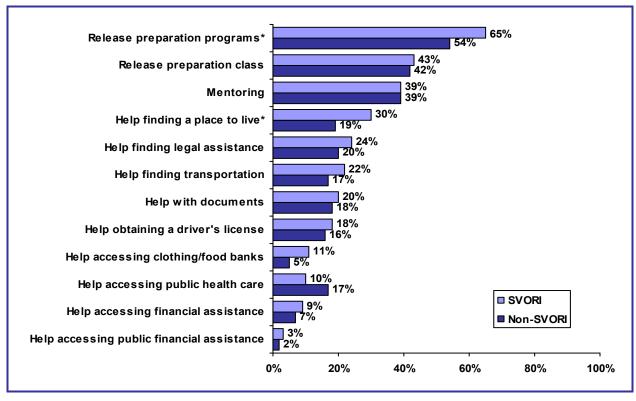


Exhibit 26. Self-reported receipt of specific transition services, by group

SVORI respondents reported a higher level of service receipt than non-SVORI respondents, their service levels were far less than 100%. Overall, less than one quarter of SVORI respondents reported having received 8 of the 12 items in this bundle, including help finding legal assistance (24%), finding transportation (22%), obtaining documents such as a birth certificate or Social Security number (20%), obtaining a driver's license (18%), accessing clothing/food banks (11%), accessing public health care (10%), and accessing financial assistance (9%) or public financial assistance (3%).

Juvenile and adult male respondents in the SVORI evaluation reported the same level of transition services; however, several specific differences emerged. For example, juvenile respondents were significantly more likely than adult male respondents to report that they had received mentoring services and legal assistance. Juvenile respondents were significantly less likely than their adult counterparts to report that they had taken a class to prepare for release, had received

<sup>\*</sup>p < 0.05 for test of significant difference between SVORI and non-SVORI.

help to obtain documents, or had received help accessing public financial assistance.

#### **Health Services**

SVORI respondents were significantly more likely than non-SVORI respondents to report that they had participated in Alcoholics Anonymous/Narcotics Anonymous and received information on accessing alcohol/other drug treatment in the

community.

At their pre-release interview, most respondents reported that they had received some type of medical treatment (73% of SVORI and 68% of non-SVORI). Exhibit 27 shows the proportion of each group who reported having received each of the different types of medical services.

SVORI respondents were more likely than non-SVORI respondents to report that they had received preventive medical services (54% of SVORI and 43% of non-SVORI) and information on accessing physical health care (23% of SVORI and 17% of non-SVORI) or mental health care (18% of SVORI and 15% of non-SVORI). In addition, SVORI respondents were more likely than non-SVORI respondents to report that they had received substance use treatment (60% of SVORI and 57% of non-SVORI), participated in drug education classes (53% of SVORI and 50% of non-SVORI), and received group counseling for substance use problems (43% of SVORI and 40% of non-SVORI). SVORI respondents were significantly more likely to report that they had participated in Alcoholics Anonymous or Narcotics Anonymous (40% of SVORI and 28% of non-SVORI) and had received information on accessing substance use treatment in the community (42% of SVORI and 29% of non-SVORI). Conversely, non-SVORI respondents were significantly more likely than SVORI respondents to report that they had participated in anger management classes (51% of SVORI and 62% of non-SVORI). Non-SVORI respondents were also more likely to report that they had received dental services (47% of SVORI and 53% of non-SVORI), had received individual substance use counseling (24% of SVORI and 29% of non-SVORI) and had received mental health treatment (25% of SVORI and 31% of non-SVORI).

Very few respondents in either group reported that they had participated in groups designed to help victims of abuse (7% of SVORI and 5% of non-SVORI), had received any detoxification (2% of each group), or had received methadone treatment (1% of each group).

On average, juvenile respondents reported a significantly higher level of health services receipt than adult male

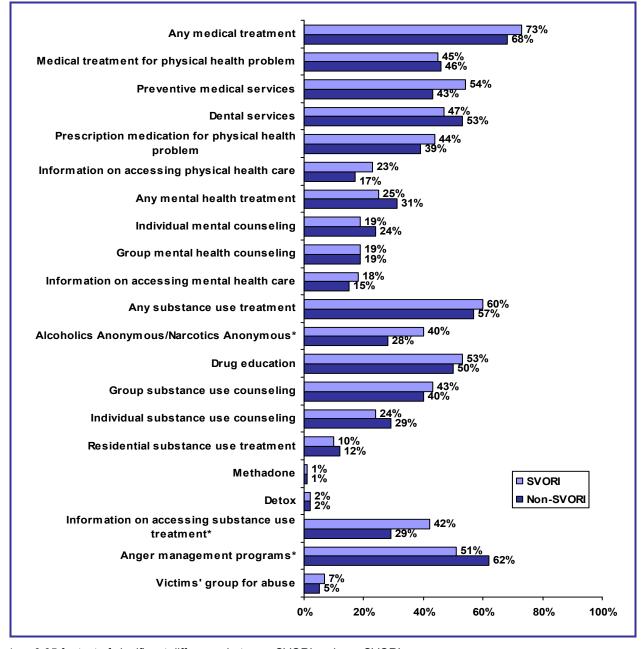


Exhibit 27. Self-reported receipt of specific health services, by group

respondents in the SVORI evaluation. Juvenile respondents were significantly more likely than their adult counterparts to report that they had received 11 of the 21 specific health services, including medical treatment, substance use counseling and treatment, mental health counseling and treatment, and anger management programming.

<sup>\*</sup>p < 0.05 for test of significant difference between SVORI and non-SVORI.

SVORI respondents were much more likely than non-SVORI respondents to report that they had received employment services.

#### **Employment/Education/Skills Services**

Nearly all respondents reported they had received some kind of employment, education, or skills-related service while confined (97% of SVORI and 99% of non-SVORI). As shown in Exhibit 28, the most frequently reported item in this bundle was education services, with 94% of SVORI respondents and 95% of non-SVORI respondents reporting that they had received this type of service. SVORI respondents were significantly more likely than non-SVORI respondents to report that they had received employment services (43% of SVORI and 27% of non-SVORI). In addition, SVORI respondents were more likely to report that they had received money management services (24% of SVORI and 17% of non-SVORI), other life skills training (52% of SVORI and 47% of non-SVORI), and assistance with personal relationships (39% of SVORI and 35% of non-SVORI). Non-SVORI respondents were significantly more likely than SVORI respondents to report that they had received training to change their attitudes toward criminal behavior (70% of SVORI and 79% of non-SVORI).

Respondents were also asked about a variety of services related to finding employment in the community after release. About one third of SVORI respondents reported that they had received advice about how to behave on the job (37%), about job interviewing (36%), or about answering questions from potential employers about their criminal history (32%). By contrast, less than one quarter of non-SVORI respondents had received advice about job behavior (22%) or job interviewing (23%), and only about one out of every seven had received advice about answering questions about criminal history (15%). In addition, twice as many SVORI respondents as non-SVORI respondents reported that they had participated in employment readiness programs (21% of SVORI and 11% of non-SVORI). Roughly one fifth of SVORI respondents reported they had composed a resume (19%) while confined, compared with one tenth of non-SVORI respondents (10%).

On average, juvenile respondents reported a significantly higher level of receipt for employment, education, and skills-related services than adult male respondents in the SVORI evaluation. Juvenile respondents were significantly more likely than their adult counterparts to report that they had received 8

Exhibit 28. Self-reported receipt of specific employment, education, and skills services, by group

Employment/Education/Skills Services	SVORI	Non-SVORI
Received any employment services*	43%	27%
Participated in employment readiness program*	21%	11%
Participated in job training program	23%	15%
Talked to potential employer	11%	7%
Received advice about job interviewing*	36%	23%
Received advice about answering questions about delinquency history*	32%	15%
Received advice about how to behave on the job*	37%	22%
Received names of people to contact in community to find a job*	19%	10%
Composed a resume	22%	18%
Received any educational services	94%	95%
Received money management services	24%	17%
Received other life skills training	52%	47%
Received assistance with personal relationships	39%	35%
Received training to change criminal behavior attitudes*	70%	79%

<sup>\*</sup>p < 0.05 for test of significant difference between SVORI and non-SVORI.

of the 14 specific items included in this service bundle, including educational services, training to change their attitudes toward criminal behavior, and other life skills training.

#### **Domestic Violence Services**

Domestic violence services included two programs: a batterer intervention program and a domestic violence support group. Overall, 12% of the SVORI and 8% of the non-SVORI respondents reported having participated in domestic violence support groups, while only 3% of SVORI and 2% of non-SVORI respondents reported that they had participated in batterer intervention programs.

Juvenile and adult male respondents in the SVORI evaluation reported similar, low levels of receipt for domestic violence services. No significant differences were found between juvenile and adult male respondents in the receipt of specific domestic violence services.

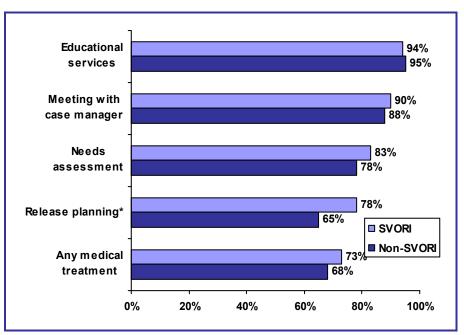
#### LEVELS OF RECEIPT ACROSS SERVICES

Appendix Exhibit A-4 shows the proportion of each group who reported that they had received each of the 60 services included in the pre-release service receipt bundles. Overall, the SVORI respondents were more likely than non-SVORI

respondents to report having received most of these services before release from confinement.

Not surprisingly, as shown in Exhibit 29, nearly all respondents reported having received education services during confinement (94% of SVORI and 95% of non-SVORI). For the other services commonly reported as received, SVORI and non-SVORI respondents reported similar receipt levels, with SVORI respondents reporting slightly higher rates of service receipt. For example, SVORI respondents were more likely than non-SVORI respondents to report that they had met with a case manager before release (90% of SVORI and 88% of non-SVORI), received a needs assessment before release (83% of SVORI and 76% of non-SVORI), received release planning (78% of SVORI and 65% of non-SVORI), and received any medical treatment (73% of SVORI and 68% of non-SVORI).

Exhibit 29. Most commonly reported services received, by group



\*p < 0.05 for test of significant difference between SVORI and non-SVORI.

Overall, SVORI respondents were more likely than non-SVORI respondents to report that they had received most (72%) of the pre-release services measured (see Appendix Exhibit A-3). In fact, SVORI respondents were significantly more likely than non-SVORI respondents to report they had received nearly one quarter of all of the service measured. Non-SVORI respondents were more likely than SVORI respondents to report they had received only 10 (16%) of the pre-release services. For only 3

Pre-release Service Receipt

Respondents reported having received about one third of the service items, on average, with SVORI respondents reporting a slightly higher level of service receipt than non-SVORI respondents.

of these services (help in accessing public health care, participation in anger management programs, and training to change criminal-behavior attitudes) was the difference in service receipt between the two groups significant.

As with the "all services" need bundle, an "all services" receipt bundle was created, which captures the level of overall prerelease service receipt across all 60 services measured.
Respondents reported having received about one third of the service items, on average, with SVORI respondents reporting that they had received slightly more services than non-SVORI respondents (average service receipt bundle scores of 39 for SVORI and 36 for non-SVORI). Compared with adult male respondents in the SVORI evaluation, juvenile respondents reported that they had received significantly more services, on average.

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# Post-release Experiences of the SVORI and NonSVORI Comparison Respondents

Examined in this section are post-release service needs and receipt for juvenile males who participated in SVORI programming, as well as their reentry outcomes, especially as compared with those of juvenile males who received only "treatment as usual." Because juveniles were not randomly assigned to SVORI treatment, potential bias associated with treatment group membership must be adjusted for.

As detailed in Lattimore and Steffey (2009), propensity modeling was employed to model the likelihood of SVORI status. The propensity score weights developed from these models were applied to the raw data; therefore, all of the data presented in this section are weighted to adjust for selection bias (unlike the "Pre-release Characteristics of the SVORI and non-SVORI Comparison Respondents" section, which presents unweighted data). Because it is of interest to examine patterns across waves in a comparable manner (beginning with the pre-release interviews), weighted Wave 1 (pre-release) data are presented in several places in this section.

To assess whether SVORI participation had a significant impact on a range of outcomes, we ran a series of weighted bivariate regression (for continuous outcomes) and logistic regression (for dichotomous outcomes) models (with treatment status as the independent variable and the outcome of interest as the dependent variable). Due to the relatively small sample sizes, regression models were not always appropriate and were occasionally excluded from the exhibits; weighted means are presented for all outcomes. The exhibits present regression results only when there were at least 20 respondents (with a minimum of 10 SVORI and 10 non-SVORI respondents) in each cell. For example, at the 3-month post-release interview only 7 SVORI and 7 non-SVORI respondents reported needing money management skills; because these cells are too small to render logistic regression results meaningful, only weighted means are presented.

Importantly, although descriptive comparisons of trends across time are discussed, the number of respondents varied at each wave, and significance tests of differences across time were not conducted. The outcome analyses were not limited to individuals who responded to all interviews, so the possibility that some of the differences across time result from differences in respondents across waves cannot be ruled out.

After presenting information about service needs reported by SVORI and non-SVORI respondents at each interview wave, service receipt from the pre- and post-release interview waves is discussed. This section is followed by an assessment of whether SVORI programming increased access to programs and services. In addition, a presentation of reentry outcomes for SVORI and non-SVORI respondents is provided. Study conclusions and implications complete the section.

#### **POST-RELEASE SERVICE NEEDS**

The three waves of post-release interviews provided another opportunity for the respondents to identify the extent to which they needed a wide range of specific services after release from confinement. Much as with the pre-release interviews, the evaluation team asked questions about 28 different types of services and then grouped them into five service categories or "bundles." These bundles are

Responses were "a lot," "a little," or "not at all." These responses were subsequently recoded to "some" and "not at all."

- services to help with transitioning to the community;
- health care services (including substance use and mental health treatment);
- employment, education, and skills services;
- domestic violence-related services; and
- child-related services.

Following the approach to analyzing pre-release service needs, the evaluation team developed post-release service need bundle scores from the interview data to summarize needs for each domain. Scores for each individual were generated by summing zero/one indicators for whether the individual did not/did report needing each of the items within a bundle; then this sum was divided by the number of items in the bundle. At the individual-respondent level, this bundle score can be interpreted as the proportion of the bundle that the individual reported needing.

This section of the report provides information about SVORI and non-SVORI respondents' needs for an array of services at each of the four interview waves (pre-release and 3, 9, and 15 months post-release). Because few juveniles reported that they had a need for domestic violence–related services (less than 10% of the sample at each post-release interview wave), the discussion of this service need was omitted from this section of the report. As in the pre-release needs section, the discussion of child-related service needs was also omitted from this section, because of the low number of respondents who reported that they had children.

Although the data are not shown, this section also explores the differences and similarities in service needs reported by juvenile respondents and adult male respondents in the SVORI evaluation.

#### SERVICE NEED BUNDLE SCORES

Exhibit 30 shows the service need bundle scores for all SVORI and non-SVORI respondents at each of the four interview waves (pre-release and 3, 9, and 15 months post-release). The exhibit also shows the proportion of respondents who reported needing specific items in each service bundle. Needs for specific items are discussed in the subsections that follow.

Exhibit 30. Weighted means and parameter estimates of the effect of SVORI on service need

		Wa	ave 1			W	lave 2				W	ave 3			Wave 4						
		Non-	1001			Non-	I ave 2				Non-	ave o				Non-	ave <del>-</del>				
	SVORI				SVORI					SVORI					SVORI						
	Mean	Mean	Est.	SE OR	Mean	Mean	Est.	SE	OR	Mean	Mean	Est.	SE	OR	Mean	Mean	Est.	SE	OR		
Transition	52	49	2.57	2.70 NA	38	39	-0.48	3.20	NA	40	41	-0.86		NA	37	42	-5.74	3.43	NA		
Legal assistance	63%	51%	0.50	0.25 1.65*	33%	37%	-0.20	31.00	0.82	49%	37%	0.50	0.30	1.60	31%	35%	-0.18	0.30	0.83		
Caseworker	NA	NA	_		6%	7%	-0.18	0.55	0.84	7%	5%	0.24	0.53	1.28	4%	10%	_	_	_		
After-school/weekend/																					
summer sports program	NA	NA	_		33%	26%	0.31	0.34	1.37	28%	25%	0.19	0.38	1.21	23%	20%	0.20	0.45	1.22		
Financial assistance	50%	48%	0.08	0.24 1.08	25%	35%	-0.48	0.31	0.62	27%	35%	-0.42	0.31	0.66	36%	47%	-0.47	0.29	0.63		
Public financial assistance	21%	24%	-0.21	0.29 0.81	13%	17%	-0.34	0.40	0.71	10%	19%	-0.71	0.39	0.49	17%	20%	-0.16	0.36	0.85		
Public health care																					
insurance	50%	55%	-0.17	0.24 0.84	40%	39%	0.05	0.29		39%	42%	-0.15		0.86	34%	40%	-0.28		0.76		
Mentor	65%	59%	0.25	0.25 1.29	38%	32%	0.28	0.30	1.33	34%	31%	0.12		1.13	30%	37%	-0.30	0.30	_		
Documents for employment	59%	52%	0.27	0.24 1.31	27%	18%	0.49	0.35	1.64	35%	30%	0.23		1.26	31%	21%	0.55		1.73		
Place to live	24%	28%	-0.22	0.27 0.80	28%	38%	-0.41	0.30	0.66	40%	49%	-0.35		0.70	37%	50%	-0.54				
Transportation	66%	62%	0.17	0.25 1.19	65%	72%	-0.31	0.31	0.73	60%	66%	-0.24	0.31	0.79	59%	74%	-0.66				
Driver's license	90%	91%	-0.09	0.40 0.92	86%	82%	0.29	0.37	1.34	69%	75%	-0.27	0.34	0.76	67%	76%	-0.44		0.65		
Clothing/food banks	41%	35%	0.26	0.25 1.29	33%	34%	-0.07	0.30	0.93	43%	39%	0.15		1.16	29%	41%	-0.51	0.30			
Health	30	32	-2.04	3.17 NA	18	15	2.30	3.02	NA	17	15	2.18	2.98	NA	17	18	-0.56	2.78	NA		
Medical treatment	44%	47%	-0.13	0.24 0.88	37%	33%	0.18	0.29	1.19	32%	27%	0.25	0.32	1.29	35%	38%	-0.13	0.30	0.88		
Mental health treatment	25%	19%	0.34	0.29 1.40	9%	9%	-0.02	0.49	0.98	11%	11%	-0.04	0.44	0.96	9%	16%	_	_	_		
Substance use treatment	29%	36%	-0.28	0.26 0.75	13%	10%	0.30	0.44	1.35	11%	11%	0.06	0.48	1.06	11%	10%	0.21	0.41	1.23		
Victim support group	5%	3%	0.59	0.59 1.80	0%	2%	_	_	_	0%	1%	_	_	_	2%	2%	_	_	_		
Anger management	48%	57%	-0.36	0.24 0.70	29%	22%	0.33	0.33	1.40	30%	24%	0.33	0.33	1.39	29%	24%	0.28	0.31	1.32		
Employment/Education/Life																					
Skills	75	75	0.66	2.74 NA	56	52	3.56	4.19	NA	63	54	9.54	4.00	NA *	58	59	-1.57	3.99			
Job training	88%	87%	0.02	0.40 1.02	67%	59%	0.33	0.30	1.39	71%	65%	0.27	0.30	1.32	56%	64%	-0.36				
Job	86%	88%	-0.19	0.38 0.83	74%	69%	0.21	0.33	1.24	72%	66%	0.27	0.31	1.31	65%	74%	-0.42	0.30	0.66		
Education	95%	95%	-0.05	0.48 0.96	88%	87%	0.05	0.41	1.06	91%	85%	0.62	0.45	1.86	85%	91%	-0.50	0.40	0.60		
Money management skills	64%	66%	-0.09	0.25 0.92	46%	44%	0.06	0.29	1.06	52%	46%	0.23	0.29	1.26	49%	42%	0.28	0.29	1.32		
Life skills	78%	71%	0.33	0.26 1.38	52%	42%	0.42	0.29	1.52	72%	55%	0.76	0.29	2.14 *	64%	62%	0.08	0.28	1.09		
Work on personal																					
relationships	60%	53%	0.27	0.24 1.31	40%	36%	0.17		1.19	46%	33%		0.30	1.73	44%	40%	0.16	0.29			
Change in criminal attitudes	70%	75%	-0.26	0.26 0.77	34%	34%	0.01	0.30	1.01	47%	38%	0.35	0.29	1.42	38%	46%	-0.33				
Domestic Violence	7	9	-1.30	3.00 NA	9	4	5.15	3.97	NA	6	3	2.80	3.39	NA	3	5	-2.50	2.77	NA		
Batterer intervention	6%	8%	_		7%	4%	_	_	_	6%	4%	_	_	_	3%	5%	_		_		
Support group	9%	10%	-0.12	0.43 0.89	12%	5%	_	_		7%	2%	_	_	_	2%	5%	_				
Child-related services	29	27	2.91	11.71 NA	19		-21.69	12.20	NA	50	26	_	_	NA	24		-10.22	8.87	NA		
Child support payments <sup>a</sup>	22%	16%	_		5%	27%	_	_	_	17%	11%	_	_	_	4%	29%	_	_	_		
Modification in child support				<del></del>				-	-										-		
debt <sup>b</sup>	0%	100%	_		0%	100%	_	_	_	100%	100%	_	_	_	0%	100%	_	_	_		
Modification in custody <sup>a</sup>	19%	24%	_		16%	41%	_	_	_	28%	17%	_	_	_	19%	16%	_		_		
Parenting skills <sup>a</sup>	64%	42%	_		39%	60%	_	_	_	80%	42%	_	_	_	56%	59%	-0.10	0.62	0.90		
Child care <sup>a</sup>	17%	24%			17%	35%				72%	32%				18%	33%					

(continued)

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Exhibit 30. Weighted means and parameter estimates of the effect of SVORI on service need (continued)

		Wa	ave 1				W	Wave 3					Wave 4							
		Non-					Non-					Non-					Non-			
	SVORI	SVORI				SVORI	SVORI SVORI					SVORI SVORI					SVORI SVORI			
	Mean	Mean	Est.	SE	OR	Mean	Mean	Est.	SE	OR	Mean	Mean	Est.	SE	OR	Mean	Mean	Est.	SE	OR
All Services Need	49	49	0.61	2.18	NA	36	35	1.32	2.75	NA	38	35	2.81	2.69	NA	35	38	-3.60	2.69	NA

Notes: Regression results not shown when cell sizes <10. NA = not applicable. Wave 1 = 30 days pre-release; Wave 2 = 3 months post-release; Wave 3 = 9 months post-release; Wave 4 = 15 months post-release.

<sup>&</sup>lt;sup>a</sup>Asked only of respondents with children.

<sup>&</sup>lt;sup>b</sup>Asked only of respondents who owed back child support.

<sup>\*</sup>p < 0.05.

The levels of need reported by SVORI and non-SVORI respondents were similar at each interview wave.

From the service need bundle scores across the interview waves, as shown in Exhibit 30, several themes emerge about respondents' service needs. First, the levels of need for services reported by SVORI and non-SVORI respondents were similar at each interview wave. The only significant difference in the level of need reported by the two groups was for employment, education, and skills-related services 9 months after release (average bundle scores of 63 and 54 for SVORI and non-SVORI, respectively).

Second, the levels of need for services reported by SVORI and non-SVORI respondents before release were, on average, higher than their reported needs after release. For example, respondents reported needing about half of the items in the transition service bundle before release (average bundle scores of 52 and 49 for SVORI and non-SVORI respondents, respectively; however, in the 15 months after release, respondents reported needing about 40% of transition services.

The levels of expressed need across the 15-month follow-up period were consistently the highest for employment, education, and skills services.

Finally, the levels of expressed need across the 15-month follow-up period were consistently the highest for employment, education, and skills-related services. For the entire follow-up period, respondents reported needing at least half of the services included in this bundle.

While the levels of service need reported by juvenile and adult male respondents in the SVORI evaluation were very similar before release, adult male respondents often reported significantly higher levels of need after release. Across the 15-month post-release follow-up period, adult male respondents consistently reported needing significantly more transition, health, and employment, education, or skills-related services.

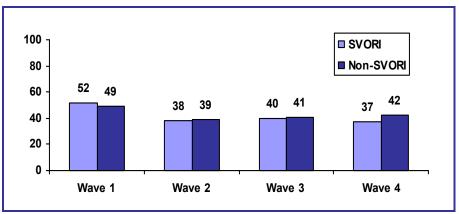
The following subsections provide additional information on the individual service bundles.

#### **Transition services**

Before release, nearly all respondents (98% of SVORI and 99% of non-SVORI) reported needing at least some transition services to address immediate needs upon release. Similarly, at least 90% of respondents reported needing some transition services at each post-release interview.

Exhibit 31 displays the transition services need bundle scores from pre-release (Wave 1) through 15-months post-release (Wave 4). As already noted, the levels of need for transition services reported by SVORI and non-SVORI respondents were highest before release, with respondents reporting that they needed about half of the services contained in this bundle (average scores of 52 and 49 for SVORI and non-SVORI respondents, respectively). After release, respondents consistently reported needing only about 40% of the items in this bundle. No significant differences were found between SVORI and non-SVORI respondents in their levels of need for transition services at any of the interview waves.

Exhibit 31. Average level of need for transition services, by interview wave and group



Note: Differences between SVORI and non-SVORI were not statistically significant at the 0.05 level. Data are weighted. Wave 1 = 30 days pre-release; Wave 2 = 3 months post-release; Wave 3 = 9 months post-release; Wave 4 = 15 months post-release.

Obtaining a driver's license was the most commonly reported transitional need across all interview waves.

Exhibit 30 shows the proportion of respondents who reported needing specific items in the transition services bundle at each interview wave. As shown in the exhibit, obtaining a driver's license was the most commonly reported transitional need across all interview waves. Before release, nearly all respondents reported needing to obtain a driver's license (90% of SVORI and 91% of non-SVORI). Fifteen months after release, a large majority of respondents reported needing to obtain a driver's license (67% of SVORI and 76% of non-SVORI).

Transportation was another high-need transition item during the follow-up period. Before release, more than 60% of all respondents reported needing transportation (66% of SVORI and 62% of non-SVORI). Although significantly fewer SVORI respondents than non-SVORI respondents reported needing transportation 15-months after release, a majority of respondents in both groups reported having this need (59% of SVORI and 74% of non-SVORI).

Notably, a decrease in the need for documents for employment emerged (e.g., Social Security card, identification card) during the study period. Before release, more than half of all respondents reported needing these types of documents (59% of SVORI and 52% of non-SVORI). Fifteen months after release, about one quarter of respondents reported that they needed such documents (31% of SVORI and 21% of non-SVORI).

Decreases in need were also observed for other transition services. As shown in Exhibit 30, before release, at least half of all respondents reported needing a mentor, legal assistance, and public health care insurance. Fifteen months after release, about one third of all respondents reported needing each of these services. Similarly, before release, nearly half of all respondents reported that they needed financial assistance. By 15-months post-release, about 40% of all respondents reported needing this type of assistance. No significant differences were found between SVORI and non-SVORI respondents in the post-release levels of need for these services.

At their pre-release interviews, respondents reported needing basic services, such as housing and access to clothing and food banks. More than one third of all respondents reported needing access to clothing and food banks after release (41% of SVORI and 35% of non-SVORI) and more than one quarter of all respondents reported needing a place to live (24% of SVORI and 28% of non-SVORI). In the 15 months after release, many respondents continued to report needing these basic services. In fact, compared with the expressed need for housing before release, the need after release, in each group at each post-release interview, was higher (see Exhibit 30).

During the three post-release interviews, respondents were asked about their needs for a child welfare caseworker and afterschool, weekend, or summer sports programming. At each of the post-release interviews, less than 10% of respondents reported that they needed a child welfare caseworker, and about 25% of all respondents reported that they needed

afterschool, weekend, or summer sports programming (see Exhibit 30).

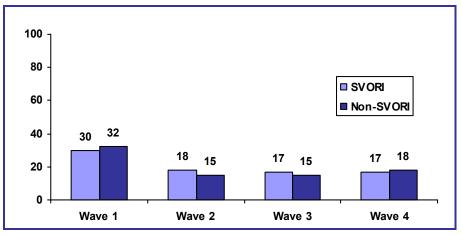
Compared with adult male respondents in the SVORI evaluation, juvenile respondents reported significantly lower levels of need for transition services across all interview waves. Throughout the follow-up period, juvenile respondents were significantly less likely than adult male respondents to report that they needed financial assistance, public financial assistance, or public health care assistance.

#### **Health Services**

Before release, nearly three quarters of all respondents reported needing some kind of health service (71% of SVORI and 77% of non-SVORI). During the post-release follow-up period, about half of all respondents reported needing some kind of health service.

Exhibit 32 shows respondents' reported levels of need for health services across all interview waves. Before release, respondents reported needing nearly one third of the items included in the health services bundle (average scores of 30 and 32 for SVORI and non-SVORI respondents, respectively). After release, respondents consistently reported needing less than one fifth of the items in this bundle. No significant differences were found between SVORI and non-SVORI respondents in their level of need for health services at any of the interview waves.

Exhibit 32. Average level of need for health services, by interview wave and group



Note: Differences between SVORI and non-SVORI were not statistically significant at the 0.05 level. Exhibit shows weighted data. Wave 1 = 30 days pre-release; Wave 2 = 3 months post-release; Wave 3 = 9 months post-release; Wave 4 = 15 months post-release.

Before release, the most common health service need was for anger management programming. After release, the most common health service need was medical treatment.

Exhibit 30 shows the proportion of respondents who reported needing specific items in the health services bundle at each interview wave. As shown in the exhibit, the most common health service need before release was for anger management programming (48% of SVORI and 57% of non-SVORI). At each of the post-release interviews, however, the most common health service need was medical treatment. About one third of all respondents consistently reported that they needed medical treatment. During the 15 months after release from confinement, about one quarter of all respondents reported that they needed anger management programming.

As shown in Exhibit 30, before release, about one third of all respondents reported that they needed substance use treatment (29% of SVORI and 36% of non-SVORI), and nearly one quarter of all respondents reported that they needed mental health treatment (25% of SVORI and 19% of non-SVORI). After release, far fewer respondents reported that they needed either of these services. For example, 15 months after release, 11% of all respondents reported that they needed substance use treatment (11% of SVORI and 10% of non-SVORI) and 12% reported that they needed mental health treatment (9% of SVORI and 16% of non-SVORI). During the 15-month follow-up period, very few of the respondents reported needing a support group for victims of abuse.

Before release, juvenile and adult male respondents in the SVORI evaluation reported the same level of need for health services; however, during the post-release follow-up period, juvenile respondents consistently reported lower levels of need than adult male respondents. After release, juvenile respondents were significantly less likely than adult male respondents to report needing medical treatment, substance use treatment, or mental health treatment.

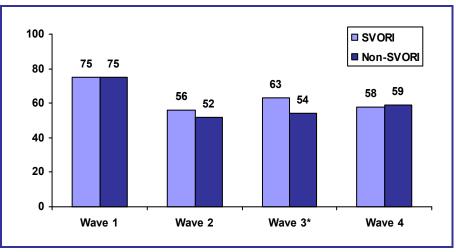
#### **Employment/Education/Skills Services**

Before release, all respondents reported needing some kind of employment, education, or skills-related services. Similarly, at least 93% of respondents in each group reported needing some of these services at each post-release interview.

Before release, all respondents reported needing some kind of employment, education, or skills—related services. Similarly, at least 93% of respondents in each group reported needing these services at each post-release interview.

Exhibit 33 shows respondents' reported levels of need for employment, education, or skills-related services across all interview waves. Before release from confinement, respondents in both groups reported needing three quarters of the services in this bundle (average bundle score of 75 for each group). After release, the reported levels of need for employment, education, or skills-related services dropped but remained consistently high for both groups. As shown in the exhibit, respondents reported that they needed more than half of the services in this bundle at each post-release interview. Nine months after release from confinement, SVORI respondents reported a significantly higher level of need than non-SVORI respondents (average bundle scores of 63 and 54 for SVORI and non-SVORI respondents, respectively).

Exhibit 33. Average level of need for employment, education, or skills-related services, by interview wave and group



Note: Data are weighted. Wave 1 = 30 days pre-release; Wave 2 = 3 months post-release; Wave 3 = 9 months post-release; Wave 4 = 15 months post-release.

\*p < 0.05 for test of significant difference between SVORI and non-SVORI.

Across all interview waves, the most common need in the employment, education, or skills-related bundle was for more education.

Exhibit 30 shows the proportion of respondents who reported needing specific items in the employment, education, or skills-related services bundle at each interview wave. Across all interview waves, the most common need in this service bundle was for more education. Before release, 95% of respondents in each group reported that they needed more education. At each post-release interview, at least 85% of respondents in each group reported needing more education.

At each interview wave, a majority of respondents reported that they needed job training or a job. Before release, nearly 9

of every 10 respondents reported that they needed job training (88% of SVORI and 87% of non-SVORI) or a job (86% of SVORI and 88% of non-SVORI). Fifteen months after release, about 6 of every 10 respondents reported that they needed job training (56% of SVORI and 64% of non-SVORI), and about 7 of 10 respondents reported that they needed a job (65% of SVORI and 74% of non-SVORI).

As shown in Exhibit 30, before release from confinement, a majority of respondents reported needing skills-building services such as money management (64% of SVORI and 66% of non-SVORI) and life skills training (78% of SVORI and 71% of non-SVORI). While fewer respondents reported needing these services after release, nearly half of all respondents reported that they needed money management skills (49% of SVORI and 42% of non-SVORI), and more than half of all respondents reported that they needed life skills training (64% of SVORI and 62% of non-SVORI) at their 15-month post-release interview.

Exhibit 30 shows that, before release, most respondents reported that they needed to work on their personal relationships (60% of SVORI and 53% of non-SVORI) or to change their attitudes toward criminal behavior (70% of SVORI and 75% of non-SVORI). At each post-release interview, less than half of all respondents reported that they felt the need to change these aspects of their lives.

As mentioned earlier, before release from confinement juvenile and adult male respondents in the SVORI evaluation reported the same high level of need for employment, education, or skills-related services. Although the level of need reported by juvenile respondents remained high after release, their level of need was significantly lower than that reported by adult male respondents. After release, juvenile respondents were significantly less likely than adult male respondents to report that they needed to work on their personal relationships or that they needed money management skills training.

Although the levels of service needs reported by SVORI and non-SVORI respondents generally decreased after release, a few service-item needs remained consistently high.

No significant differences were found in the average levels of overall service need reported by SVORI and non-SVORI respondents at any of the interview waves.

#### LEVELS OF NEED ACROSS SERVICES

Before release from confinement, SVORI and non-SVORI respondents reported similar high levels of need across a wide array of services. Although the levels of service need reported by respondents generally decreased after release, a few service-items needs remained consistently high. For example, at each of the post-release interviews at least half of SVORI respondents consistently reported that they needed more education, a driver's license, a job, job training, transportation, and life skills training (Exhibit 34). Similar levels of need for these services were reported by non-SVORI respondents.

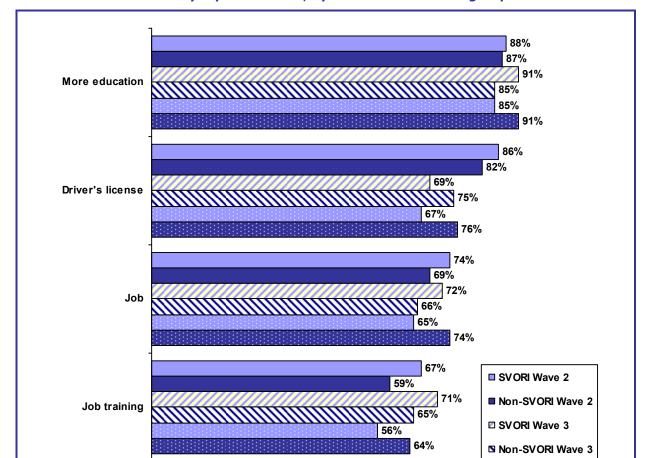
In addition to the service bundles already described, an "all services" bundle was created, which captures the level of overall need across all services at each interview wave. Exhibit 35 shows the average service need bundle scores for SVORI and non-SVORI respondents at each interview wave. Before release from confinement, respondents in both groups reported needing nearly half of all service items (average score of 49 for each group). After release, respondents in both groups consistently reported needing fewer service items—slightly more than one third of the services, on average, at each post-release period. No significant differences were found in the average levels of overall service need reported by SVORI and non-SVORI respondents at any of the interview waves.

Compared with adult male respondents in the SVORI evaluation, juvenile respondents reported needing significantly fewer service items at each interview wave.

#### POST-RELEASE SERVICE RECEIPT

Results from the four interview waves enable insight into the delivery of services and programs as reported by SVORI and non-SVORI respondents throughout the entire study period. These results show whether SVORI programming led to increases in participants' access to an array of services and programming.

Analogous to the service need bundle scores, service receipt bundle scores were calculated: the number of "yes" responses to items in a bundle was divided by the number of bundle items and multiplied by 100. At the individual-respondent level, this bundle score can be interpreted as the proportion of the bundle



SVORI Wave 4

■ Non-SVORI Wave 4

100%

65%

64% 62%

60%

60%

52%

42%

72%

80%

Exhibit 34. Most commonly reported needs, by interview wave and group

Note: Data are weighted. Wave 2 = 3 months post-release; Wave 3 = 9 months post-release; Wave 4 = 15 months post-release.

40%

20%

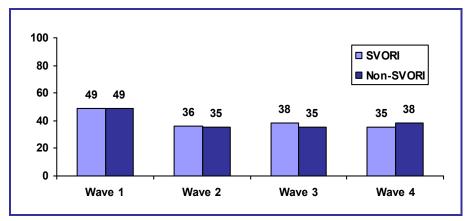
Transportation

Life skills

0%

<sup>\*</sup>p < 0.05 for test of significant difference between SVORI and non-SVORI.

Exhibit 35. Level of need for all services, by interview wave and group



Note: Differences between SVORI and non-SVORI were not statistically significant at the 0.05 level. Data are weighted. Wave 1 = 30 days pre-release; Wave 2 = 3 months post-release; Wave 3 = 9 months post-release; Wave 4 = 15 months post-release.

that the individual reported receiving. Individual bundle scores were averaged to yield overall scores. In addition to the service need bundles introduced previously, a bundle of service coordination items was included.

Next information is provided about SVORI and non-SVORI respondents' level of service receipt in the coordination, transition, health, and employment, education, and skills-related bundles at each of the four interview waves (showing the weighted service receipt scores, including those for the pre-release time period as a reference point). <sup>16</sup> Although the data are not shown, service receipt reported by juvenile respondents as compared with receipt reported by adult male respondents in the SVORI evaluation is briefly discussed. This discussion is based on data that are unweighted.

#### SERVICE RECEIPT BUNDLE SCORES

Exhibit 36 shows the service receipt bundle scores for all SVORI and non-SVORI respondents at each of the four interview waves (pre-release and 3, 9, and 15 months post-release). The exhibit also shows the proportion of respondents who reported

<sup>&</sup>lt;sup>16</sup> The discussion of domestic violence-related service receipt has been omitted because less than 2% of juvenile respondents reported that they had received these services at each post-release interview. Similarly, the discussion of child-related service receipt has been omitted because few respondents reported having children at each interview wave.

Exhibit 36. Weighted means and parameter estimates of the effect of SVORI on service receipt

		Wa	ve 1				V	lave 2				W	ave 3			Wave 4					
		Non-					Non-					Non-					Non-				
	SVORI	SVORI				SVORI	SVORI				SVORI	SVORI				SVORI	<b>SVORI</b>				
	Mean	Mean	Est.	SE	OR	Mean	Mean	Est.	SE	OR	Mean	Mean	Est.	SE	OR	Mean	Mean	Est.	SE	OR	
Coordination services	57	53	4.90		NA	43	42	1.64	3.79	NA	24	18	6.25	3.07	NA *	13	14	-1.30	2.61	NA	
Needs assessment	83%	79%			1.25	74%	54%	0.89	0.31	2.42*	23%	12%	0.82	0.40	2.27*	9%	16%	_	_		
Meeting with case manager	89%	88%	0.18	0.38	1.19	66%	66%	-0.01	0.30	0.99	39%	30%	0.42	0.31	1.52	14%	27%	-0.83	0.37	0.44*	
Collaboration with someone																	/				
to reintegrate	76%	66%	0.49	0.29	1.63	40%	39%	0.03	0.30	1.03	29%	16%	0.76	0.35	2.13*	18%	13%	0.37	0.44	1.44	
Assistance accessing child	222/	0=0/				•••	201				201	201				201	-00/				
welfare caseworker	23%	25%	-0.09	0.28	0.91	9%	9%	-0.06	0.57	0.94	6%	3%				2%	3%				
Meeting with child welfare	4.40/	000/	0.00			470/	400/	0.07	0.44	4.0=	<b>-</b> 0/	70/				40/	=0/				
caseworker	41%	33%	0.36	0.26	1.44	17%	16%	0.07	0.44	1.07	7%	7%				1%	5%				
Current probation/parole	NA	NA O1	0.40	0.40	NIA	90%	82%	0.65	0.49	1.92	45%	45%	0.00	0.29	1.00	39%	28%	0.49	0.31	1.63	
Transition services	23	21	2.10	2.10	NA	12	8	3.49	1.81	NA	8	7	0.41	1.58	NA	8	5	2.99	1.45	NA *	
Afterschool/weekend/	NA	NA				9%	18%	_		_	8%	16%			_	6%	16%				
summer sports program Financial assistance	NA 8%	6%	0.31	0.42	1.36	13%	7%	0.74	0.53	2.10	6%	1%				2%	1%				
Public financial assistance	3%	2%	<u> </u>	0.43	1.30	2%	2%	<u>0.74</u>	0.53	2.10	1%	3%				2% 1%	4%				
Public linaricial assistance  Public health care	3%	Z%				Z70	Z%				170	3%				170	4%				
insurance	9%	17%	-0.75	0.35	0.47*	16%	8%	0.77	0.42	2.17	14%	8%	0.65	0.46	1.91	6%	5%				
Legal assistance	23%	21%	0.10		1.11	17%	7%	1.08	0.42	2.17	14%	4%	<u> </u>	0.40	- 1.91	11%	6%				
Documents for employment	20%	18%		0.31	1.14	18%	11%	0.63	0.39	1.88	15%	16%	-0.14	0.40	0.87	11%	4%				
Mentoring	37%	42%	-0.21	0.25		9%	15%	— —	<del>-</del>	T.00	11%	9%	0.14	0.48	1.27	4%	12%				
Place to live	31%	18%	0.68		1.97 *	10%	6%				2%	5%	— U.Z-T	—	- 1.21	7%	2%				
Transportation	21%	17%		0.29		18%	10%	0.70	0.42	2.02	8%	14%				19%	7%	1.18	0.45	3.24 *	
Driver's license	16%	16%	0.00		1.00	12%	10%	0.27	0.48	1.31	6%	8%				17%	6%		<del></del>	<u> </u>	
Access to clothing/food	9%	6%			1.61	9%	7%	<u> </u>	—		4%	3%				5%	1%				
Health services	42	47	-5.40	_	NA *	12	7	4.62	2.23	NA *	8	10	-1.34	2.04	NA	10	7	3.19	1.93	NA	
Victim support group	6%	6%				0%	0%				3%	1%				0%	0%		_		
Anger management	0,0	0,70				0,0	0 70				0,0	.,,				0,0	0,70				
program	48%	63%	-0.61	0.24	0.55*	15%	8%	0.62	0.48	1.85	6%	7%	_	_	_	5%	5%	_	_	_	
Medical treatment	69%	69%	-0.02		0.98	20%	15%	0.34	0.36	1.40	14%	21%	-0.55	0.38	0.57	26%	12%	0.93	0.37	2.55*	
Dental services	42%	54%	-0.46	0.24	0.63	14%	8%	0.56	0.47	1.75	12%	13%	-0.15	0.43	0.86	14%	10%	0.46	0.47	1.58	
Mental health treatment	25%	31%	-0.29		0.75	9%	5%	_		_	7%	5%	_	_	_	6%	2%	_	_		
Substance use treatment	56%	58%	-0.06	0.25	0.95	16%	8%	0.80	0.42	2.22	8%	10%	_	_	_	8%	10%	_	_		
Employment/education/life																					
skills services	52	50	2.04	3.02	NA	21	16	5.02	2.38	NA *	18	13	4.29	2.65	NA	14	9	4.65	2.49	NA	
Money management skills	22%	18%	0.27	0.29	1.31	7%	5%	_	_	_	4%	5%	_		_	3%	3%	_	_		
Life skills	50%	47%	0.11	0.24	1.12	6%	11%		_	_	13%	9%	0.44	0.44	1.55	10%	7%	_	_	_	
Work on personal																					
relationships	38%	35%		0.25		5%	11%				11%	6%				5%	2%				
Change in criminal attitudes		80%	-0.61	0.28	0.54 *	22%	24%	-0.10	0.36	0.91	28%	16%	0.67	0.38	1.95	16%	12%	0.97	0.74	2.65	
Any educational services	93%	96%	-0.55		0.58	56%	28%	1.19	0.30	3.28 *	30%	29%	0.08	0.32	1.09	35%	22%	0.61	0.36	1.83	
Any employment services	42%	27%	0.69	0.25	2.00 *	29%	15%	0.81	0.36	2.25*	21%	15%	0.37	0.37	1.45	16%	10%	0.54	0.44	1.71	
																		(60)	ntinua	۹/	

(continued)

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Exhibit 36. Weighted means and parameter estimates of the effect of SVORI on service receipt (continued)

		Wa	ive 1				V	Vave 2				W	ave 3				W	ave 4		
	SVORI Mean	NS Mean	Est.	SE	OR	SVORI Mean	NS Mean	Est.	SE	OR	SVORI Mean	NS Mean	Est.	SE	OR	SVORI Mean	NS Mean	Est.	SE	OR
Domestic violence-related																				
services	7	5	1.48	2.20	NA	0	1	-0.81	0.60	NA	0	0	_	_	NA	0	0	_	_	NA
Support group	11%	9%	0.23	0.42	1.26	0%	2%	_	_	_	0%	0%	_	_	_	0%	1%	_	_	
Batterer intervention	3%	2%	_	_	_	0%	0%	_	_	_	1%	0%	_	_	_	0%	0%	_	_	
Child-related services	17	6	10.97	6.48	NA	0	2	-1.93	1.91	NA	4	2	_	_	NA	3	1	1.69	3.29	NA
Child support payments <sup>a</sup>	0%	0%	_	_	_	0%	0%	_	_	_	0%	0%	_	_	_	0%	0%	_	_	
Modification in child support																				
debt <sup>b</sup>	0%	0%	_	_	_	0%	0%	_	_	_	0%	100%	_	_	_	0%	0%	_	_	_
Modification in custody <sup>a</sup>	6%	0%	_		_	0%	0%			_	0%	0%	_	_	_	4%	0%	_		
Parenting skills <sup>a</sup>	50%	12%	_	_	_	0%	0%	_	_	_	14%	0%		_	_	4%	5%	_	_	
Child care <sup>a</sup>	13%	12%	_	_		0%	10%	_	_	_	0%	0%		_	_	4%	0%	_	_	
All Services Receipt	38	37	1.23	1.85	NA	19	16	3.33	1.61	NA *	12	10	2.05	1.52	NA	9	7	2.02	1.24	NA

Notes: Regression results not shown when cell sizes <10. NA = not applicable. Wave 1 = 30 days pre-release; Wave 2 = 3 months post-release; Wave 3 = 9 months post-release; Wave 4 = 15 months post-release.

<sup>&</sup>lt;sup>a</sup> Asked only of respondents with children.

<sup>&</sup>lt;sup>b</sup> Asked only of respondents who owed back child support.

p < 0.05

Reported levels of service receipt were highest for SVORI and non-SVORI respondents before their release from confinement, declined dramatically in the 3 months after release, and remained low during the post-release period.

Although SVORI and non-SVORI respondents reported low levels of post-release service receipt, SVORI respondents generally reported slightly higher levels of service receipt than their non-SVORI counterparts.

At each post-release follow-up period and for each service bundle, the levels of service receipt reported by SVORI and non-SVORI respondents were considerably lower than the levels of service need reported by each group.

receiving specific items in each service bundle. Receipt of specific items is discussed in the subsections that follow.

From Exhibit 36 several common themes emerge about service delivery across all four interview waves. First, reported levels of service receipt were highest for SVORI and non-SVORI respondents before their release from confinement, declined dramatically in the 3 months after release, and remained low during the post-release period. For example, before release, respondents reported having received more than one fifth of the services in the transition services bundle (average scores of 23 and 21 for SVORI and non-SVORI respondents, respectively). After release, respondents consistently reported that they had received less than one tenth of the services in this bundle.

Second, although SVORI and non-SVORI respondents reported low levels of post-release service receipt, SVORI respondents generally reported slightly higher levels of service receipt than their non-SVORI counterparts. For example, in the 3 months after release, SVORI respondents reported that they had received 12% of the services in the transition services bundle, on average, whereas non-SVORI respondents reported that they had received 8% of these services. Fifteen months after release, SVORI respondents reported that they had received 8% of the transition service items, on average, whereas non-SVORI respondents reported having received 5% of the items.

Third, as shown in Exhibit 36, after release SVORI and non-SVORI respondents consistently reported the highest level of service receipt to be in the coordination services bundle. This bundle includes case management and service coordination activities such as needs assessment, meeting with a child welfare caseworker, and working with someone to reintegrate into the community.

Finally, at each post-release period and for each service bundle, the levels of service receipt reported by SVORI and non-SVORI respondents were considerably lower than the levels of service need reported by each group. For example, 3 months after release, respondents reported needing more than half of the services in the education, employment, or skills-related bundle (average scores of 56 and 52 for SVORI and non-SVORI respondents, respectively). In contrast, respondents reported that they had received less than one fifth of the services in this

bundle in the 3 months after release (average scores of 21 and 16 for SVORI and non-SVORI respondents, respectively). Fifteen months after release, respondents reported needing nearly 60% of the services in this bundle (average scores of 58 and 59 for SVORI and non-SVORI respondents, respectively) yet reported having received only about 10% of these services (average scores of 14 and 9 for SVORI and non-SVORI respondents, respectively).

As noted earlier, before release from confinement juvenile respondents reported significantly higher levels of service receipt of employment, education, and skills-related services, and of health services than adult male respondents in the SVORI evaluation. After release, however, juvenile respondents consistently reported significantly lower rates of service receipt in the health services bundle than adult male respondents reported. Throughout the post-release follow-up period, juvenile respondents continued to report significantly higher levels of receipt of employment, education, and skills-related services.

The following subsections detail the receipt of specific service items within each service bundle. To add context to the reported levels of service receipt, the levels of need for specific service items are also provided.

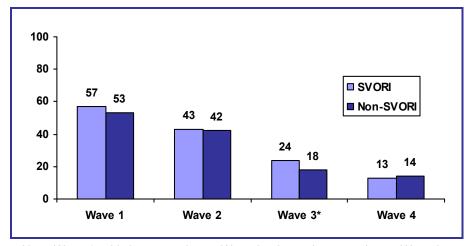
#### **Coordination Services**

Three months after release, most respondents reported that they had received some coordination services (94% of SVORI and 93% of non-SVORI); however, the proportion of respondents who reported receipt of any coordination services steadily declined during the post-release follow-up period. By 15 months after release, less than half of respondents in each group reported that they had received any of these services (47% of SVORI and 45% of non-SVORI).

Receipt of coordination services was highest for both groups before their release from confinement and then steadily declined after release.

Exhibit 37 displays the coordination service receipt scores from pre-release through 15-months post-release. Receipt of coordination services was highest for both groups before their release from confinement and then steadily declined after release. Nine months after release, SVORI respondents reported that they had received a significantly higher level of coordination services, on average, than their non-SVORI counterparts (average scores of 24 and 18 for SVORI and non-SVORI respondents, respectively).

Exhibit 37. Average level of coordination service receipt, by interview wave and group



Note: Wave 1 = 30 days pre-release; Wave 2 = 3 months post-release; Wave 3 = 9 months post-release; Wave 4 = 15 months post-release.

Exhibit 36 shows the proportion of SVORI and non-SVORI respondents at each interview wave who reported having received each of the five coordination services. Overall, the proportion of respondents who reported receipt of each of the coordination services items was highest before release and declined steadily over time. For example, before release, a large majority of respondents in each group reported that they had received a needs assessment (83% of SVORI and 79% of non-SVORI), met with a case manager (89% of SVORI and 88% of non-SVORI), or worked with someone to reintegrate into the community (76% of SVORI and 66% of non-SVORI). In contrast, 15 months after release, remarkably fewer respondents reported having received a needs assessment (9% of SVORI and 16% of non-SVORI), having met with a case manager (14% of SVORI and 27% of non-SVORI), or having collaborated with someone to reintegrate (18% of SVORI and 13% of non-SVORI).

<sup>\*</sup>p < 0.05 for test of significant difference between SVORI and non-SVORI. Data are weighted.

Three and 9 months after release, SVORI respondents were significantly more likely than non-SVORI respondents to report that they had received a needs assessment.

Exhibit 36 shows that 3 and 9 months after release, SVORI respondents were significantly more likely than non-SVORI respondents to report that they had received a needs assessment. In addition, 9 months after release, SVORI respondents were significantly more likely than non-SVORI respondents to report that they had worked with someone to reintegrate into the community (29% of SVORI and 16% of non-SVORI). Fifteen months after release, non-SVORI respondents were significantly more likely than SVORI respondents to report that they had met with a case manager (14% of SVORI and 27% of non-SVORI).

At each post-release interview, relatively few respondents reported meeting with a child welfare caseworker or receiving assistance to access a child welfare worker. Three months after release, 9% of respondents in each group reported that they had received assistance to access a child welfare caseworker, and less than 20% of respondents in each group reported that they had met with a child welfare caseworker (17% of SVORI and 16% of non-SVORI). Fifteen months after release, less than 5% of respondents reported having received either of these services.

Exhibit 36 also shows the proportion of respondents who were under probation or parole supervision at each of the post-release interview waves. Most respondents reported that they were under supervision 3 months after their release from confinement (90% of SVORI and 82% of non-SVORI). Nine months after release, 45% of respondents in each group were under supervision. Fifteen months after release, although the proportion of respondents in each group who reported that they were under supervision decreased, SVORI respondents were more likely than non-SVORI respondents to report that they were under supervision (39% of SVORI and 28% of non-SVORI).

#### **Transition services**

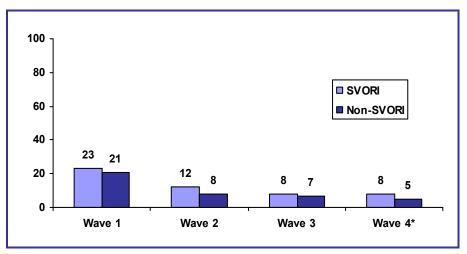
Three months after release, more than half of SVORI and non-SVORI respondents reported that they had received any transition services (62% of SVORI and 55% of non-SVORI). The proportion of respondents who reported having received any of these services steadily declined during the post-release follow-up period. By 15 months after release, less than half of

Overall, while SVORI respondents reported that they received more transition services, on average, than non-SVORI respondents, the level of service receipt was low for both.

respondents in each group reported that they had received any transition services (43% of SVORI and 33% of non-SVORI).

Exhibit 38 displays the transition services receipt bundle scores from pre-release through 15-months post-release. Service receipt was highest for SVORI and non-SVORI respondents before release (average scores of 23 and 21 for SVORI and non-SVORI, respectively), sharply declined 3 months after release (average scores of 12 and 8 for SVORI and non-SVORI, respectively), and declined slightly over the post-release followup period. Overall, although the levels of service receipt were low for both groups, SVORI respondents reported slightly higher levels of service receipt than non-SVORI respondents at each interview wave. In fact, 15 months after release, SVORI respondents reported a significantly higher level of service receipt, on average, than their non-SVORI counterparts (average scores of 8 and 5 for SVORI and non-SVORI respondents, respectively). This result suggests that SVORI programs were modestly successful in providing transition services beyond "treatment as usual" levels of service.

Exhibit 38. Average level of transition services receipt, by interview wave and group



Note: Wave 1 = 30 days pre-release; Wave 2 = 3 months post-release; Wave 3 = 9 months post-release; Wave 4 = 15 months post-release.

\*p < 0.05 for test of significant difference between SVORI and non-SVORI. Data are weighted.

Exhibit 36 shows the proportions of SVORI and non-SVORI respondents who, at each interview wave, reported having received each of the 10 transition service items. Overall, service receipt reported by both groups was remarkably low for most of these items, particularly 9 and 15 months after release, but, in general, SVORI respondents were more likely than non-

SVORI respondents to report that they had received these services.

Before release, the most commonly reported type of service received by each group was mentoring services (37% of SVORI and 42% of non-SVORI). After release, only about 10% of respondents reported, at each post-release interview, having received these services. At the same time, at least 30% of respondents in each group consistently reported needing mentoring services after release (see Exhibit 30).

Across all four interview waves, obtaining a driver's license was the highest transitional need reported by SVORI and non-SVORI respondents.

In general, SVORI respondents were more likely than non-SVORI respondents to report that they had received help to obtain a driver's license.

Across all four interview waves, obtaining a driver's license was the highest transition service need reported by SVORI and non-SVORI respondents (see Exhibit 30). In general, SVORI respondents were more likely than non-SVORI respondents to report that they had received help to obtain a driver's license. Nevertheless, in comparison with reported need rates, few respondents in either group reported having received help. For example, 15 months after release, about 70% of respondents reported that they needed help to obtain a driver's license (67% of SVORI and 76% of non-SVORI), but only about 10% of respondents reported that they had received such assistance (17% of SVORI and 6% of non-SVORI).

As shown in Exhibit 36, in general, SVORI respondents were more likely than non-SVORI respondents to report that they had received transportation assistance. Before release from confinement, 21% of SVORI respondents, compared with 17% of non-SVORI respondents, reported that they had received help with their transportation issues. Similarly, 15 months after release, 19% of SVORI respondents, compared with 7% of non-SVORI respondents, reported that they had received this type of help. Receipt of this service was lower than respondents' expressed level of need. Across all interview waves, at least 59% of respondents in each group reported that they needed transportation (see Exhibit 30).

In general, SVORI respondents were more likely than non-SVORI respondents to report that they had received legal assistance (see Exhibit 36). In fact, 3 months after release from confinement, SVORI respondents were significantly more likely than non-SVORI respondents to report that they had received assistance (17% of SVORI and 7% of non-SVORI). Fifteen months after release, 11% of SVORI and 6% of non-SVORI respondents reported that they had received this type of

assistance. The need for legal assistance consistently fell below reported need, however: at each post-release interview, roughly 40% of respondents in each group reported that they needed legal assistance (see Exhibit 30).

At each post-release interview, SVORI respondents were more likely than non-SVORI respondents to report that they had received public health care insurance (see Exhibit 36). Unlike the receipt of other transition services, receipt of public health care insurance was highest for SVORI respondents in the 3 months after release (16%), not before release (9%). However, as with other services, the need for public health care insurance as reported by respondents in both groups outweighed receipt. About 40% of respondents in each group consistently reported needing this service after release (see Exhibit 30).

In general, SVORI respondents were more likely than non-SVORI respondents to report that they had received help accessing basic services such as housing and clothing or food banks; however, at each post-release interview, less than 10% of all respondents reported that they had received help accessing these resources.

Exhibit 36 shows that, in general, SVORI respondents were more likely than non-SVORI respondents to report that they had received help accessing basic services such as housing and clothing or food banks; however, at each post-release interview, less than 10% of all respondents reported that they had received help to access these resources. Consistent with the pattern for other transition services, respondents' need for assistance in the 15-month period after release exceeded their receipt of assistance. For example, 3 months after release, about one third of respondents reported that they needed help finding a place to live (33% of SVORI and 34% of non-SVORI), while less than 10% of respondents reported that they had received such help (10% of SVORI and 6% of non-SVORI). Fifteen months after release, nearly 50% of respondents reported that they needed assistance with housing (37% of SVORI and 50% of non-SVORI), yet only about 5% of respondents reported having received help (7% of SVORI and 2% of non-SVORI).

As shown in Exhibit 36, at each interview wave, few respondents reported having received financial assistance or public financial assistance. Three months after release, about 10% of respondents reported that they had received financial assistance (13% of SVORI and 7% of non-SVORI); by 15 months after release, about 2% of respondents reported receipt of this service (2% of SVORI and 1% of non-SVORI). At each post-release interview, only about 2% of respondents reported that they had received public financial assistance. In the 15

months after release from confinement, needs for these services remained relatively constant for each group and outweighed reported receipt. At each post-release interview, more than one quarter of respondents reported that they needed financial assistance, and nearly one fifth of respondents reported that they needed public financial assistance (see Exhibit 30).

During the three post-release interviews, respondents were asked if they had participated in afterschool, weekend, or summer sports programs. At each follow-up interview, nearly 20% of non-SVORI respondents reported that they had participated in these types of programs, compared with less than 10% of SVORI respondents (see Exhibit 36). With regard to the need for this type of programming, at each follow-up interview at least 20% of respondents in each group reported that they had a need (see Exhibit 30).

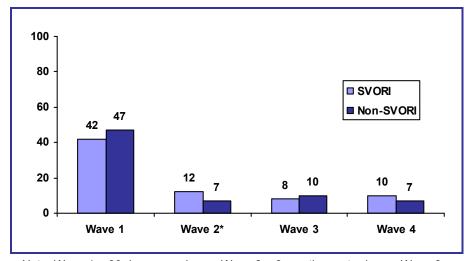
No significant differences were found between juvenile respondents and adult male respondents in level of receipt of transition services, at any of the interview waves.

#### **Health Services**

Three months after release, less than half of SVORI and non-SVORI respondents reported that they had received any health services (44% of SVORI and 30% of non-SVORI). Fifteen months after release, about one third of respondents reported that they had received any type of health service (35% of SVORI and 30% of non-SVORI).

Exhibit 39 displays the health services receipt bundle scores from pre-release through 15-months post-release. The level of service receipt was highest for both groups before release (average scores of 42 and 47 for SVORI and non-SVORI, respectively), declined dramatically in the 3 months after release (average scores of 12 and 7 for SVORI and non-SVORI, respectively), and remained low throughout the post-release follow-up period. Before release, non-SVORI respondents reported having received a significantly higher level of health services. Three months after release, SVORI respondents reported a significantly higher level of service receipt, on average, than their non-SVORI counterparts (average scores of 12 and 7 for SVORI and non-SVORI respondents, respectively).

Exhibit 39. Average level of health services receipt, by interview wave and group



Note: Wave 1 = 30 days pre-release; Wave 2 = 3 months post-release; Wave 3 = 9 months post-release; Wave 4 = 15 months post-release.

Exhibit 36 shows the proportion of SVORI and non-SVORI respondents, at each interview wave, who reported having received each of the 6 health service items. At each post-release interview, respondents were more likely to report receipt of medical treatment than receipt of the other services in this bundle. Three months after release, nearly 20% of respondents reported that they had received medical treatment (20% of SVORI and 15% of non-SVORI). Fifteen months after release, SVORI respondents were significantly more likely than non-SVORI respondents to report that they had received this type of treatment (26% of SVORI and 12% of non-SVORI). While nearly one fifth of respondents consistently reported that they had received medical treatment after release from confinement, about one third of respondents reported that they needed this service (see Exhibit 30).

As shown in Exhibit 36, at each post-release interview, few respondents reported having received help to manage their anger. Three months after release, about 10% of respondents reported having received anger management programming (15% of SVORI and 8% of non-SVORI). By 15 months after release, only 5% of respondents in each group reported that they had received help with anger management. While receipt of anger management programming was low after release, about one quarter of respondents consistently reported that they needed it (see Exhibit 30).

<sup>\*</sup>p < 0.05 for test of significant difference between SVORI and non-SVORI. Data are weighted.

While the proportion of respondents who reported that they had received substance use treatment after release was consistently low—about 10% of respondents at each post-release interview—few respondents reported that they had a need for this type of treatment. For example, 3 months after release, 13% of SVORI respondents reported that they needed substance use treatment, and 16% reported that they had received treatment. Likewise, 10% of non-SVORI respondents reported that they needed substance use treatment, and 8% reported that they had received treatment.

Similarly, few SVORI and non-SVORI respondents reported receipt of mental health treatment after release, but few respondents in each group reported that they needed this type of treatment. For example, 3 months after release, 9% of SVORI respondents reported that they needed mental health treatment, and 9% reported that they had received treatment. For non-SVORI respondents, 9% reported that they needed mental health treatment, and 5% had received this type of treatment.

As mentioned, before release from confinement, juvenile respondents reported a significantly higher level of health services receipt than adult males in the SVORI evaluation. However, after release, juvenile respondents reported significantly lower levels of health services receipt than adult male respondents. At each post-release interview, juvenile respondents were significantly less likely than adult male respondents to report that they had received substance use treatment.

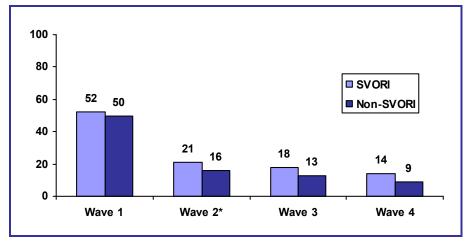
In the 15 months after release from confinement, SVORI respondents were consistently more likely to report that they had received any employment, education, or skills-related services.

#### **Employment/Education/Skills Services**

In the 15 months after release from confinement, SVORI respondents were consistently more likely than non-SVORI respondents to report that they had received any employment, education, or skills-related services. In fact, 3 months after release, SVORI respondents were significantly more likely than non-SVORI respondents to report that they had received any of these services (79% of SVORI and 56% of non-SVORI).

Exhibit 40 displays the employment, education, and skills-related services receipt bundle scores from pre-release through 15-months post-release. As with the other services measured, the level of receipt was highest for both groups before release

Exhibit 40. Average level of employment, education, and skills services receipt, by interview wave and group



Note: Wave 1 = 30 days pre-release; Wave 2 = 3 months post-release; Wave 3 = 9 months post-release; Wave 4 = 15 months post-release.

(average scores of 52 and 50 for SVORI and non-SVORI, respectively), declined dramatically in the 3 months after release (average scores of 21 and 16 for SVORI and non-SVORI, respectively), and gradually declined throughout the post-release follow-up period. The receipt of these services was, on average, higher for SVORI respondents than for non-SVORI respondents at all interview waves—significantly higher 3 months after release—which suggests that SVORI programs were successful in providing a higher level of these kinds of services and programming than the "treatment as usual" approaches.

At each post-release interview, SVORI respondents were more likely than non-SVORI respondents to report that they had received educational services and employment services.

Exhibit 36 shows the proportions of SVORI and non-SVORI respondents who reported receipt for each of the 6 employment, education, or skills-related service items at each interview wave. At each interview, respondents in both groups were more likely to report having received educational services than to report having received the other services in this bundle. Three months after release, a majority of SVORI respondents reported that they had received educational services (56%)—significantly more than non-SVORI respondents (28%). Throughout the follow-up period, SVORI respondents were more likely than non-SVORI respondents to report that they had received these services. Although receipt of educational services was higher than that of the other services in this bundle, needs for these services far exceeded receipt. At each

<sup>\*</sup>p < 0.05 for test of significant difference between SVORI and non-SVORI. Data are weighted.

post-release interview, nearly all respondents reported that they needed more education (see Exhibit 30), while less than one third of respondents reported that they had received educational services.

At each post-release interview, SVORI respondents were more likely than non-SVORI respondents to report that they had received employment services. In fact, 3 months after release, SVORI respondents were significantly more likely than non-SVORI respondents to report that they had received these services (29% of SVORI and 15% of non-SVORI).

As shown in Exhibit 36, nearly one quarter of respondents reported 3 months after release that they had participated in training to change their attitudes toward criminal behavior (22% of SVORI and 24% of non-SVORI), and they reported similarly 9 months after release (28% of SVORI and 16% of non-SVORI). Fewer respondents reported participation in this type of training 15 months after their release (16% of SVORI and 12% of non-SVORI). In contrast, at each post-release interview, more than one third of respondents reported that they needed to change their attitudes toward criminal behavior (see Exhibit 30).

After release from confinement, receipt of programs and services to address life skills development, money management, and personal relationship issues was low for respondents in both groups. As shown in Exhibit 36, less than 10% of respondents reported receipt for each of these services at their post-release interviews. Conversely, at each post-release interview, more than half of respondents in both groups reported that they needed life skills training; nearly half of respondents in both groups reported they needed money management skills training; and at least of one third of respondents in each group reported that they needed to work on their personal relationships (see Exhibit 30).

As noted earlier, before release from confinement, juvenile respondents reported a significantly higher level of receipt of employment, education, and skills-related services than adult males in the SVORI evaluation. After release, juvenile respondents continued to report significantly higher levels of receipt of these services than adult male respondents. At each post-release interview, juvenile respondents were significantly

more likely than adult male respondents to report that they had received educational services.

#### LEVELS OF RECEIPT ACROSS SERVICES

Exhibit 41 shows the most commonly reported services received by respondents in both groups across all service domains in the 15 months after release from confinement. These common services were in the coordination and employment, education, and skill-related domains.

While overall service receipt was low for respondents in both groups, SVORI respondents received more services, on average, than their non-SVORI counterparts. In fact, three months after release, SVORI respondents reported receiving a significantly higher level of services than non-SVORI respondents.

Overall, although service receipt for SVORI respondents was far below 100%, notable differences in service receipt were found between SVORI and non-SVORI respondents, as was illustrated by these commonly received services. As shown in the exhibit, at most post-release periods, SVORI respondents were more likely—even significantly more likely—than non-SVORI respondents to report that they had received each of these common services. For example, SVORI respondents were much more likely than non-SVORI respondents to report that they had received a needs assessment 3 months after release (74% of SVORI and 54% of non-SVORI) and 9 months after release (23% of SVORI and 12% of non-SVORI). In addition, 3 months after release, SVORI respondents were much more likely than non-SVORI respondents to report that they had received educational services (56% of SVORI and 28% of non-SVORI) and employment services (29% of SVORI and 15% of non-SVORI). Finally, 9 months after release, SVORI respondents were much more likely than non-SVORI respondents to report that they had worked with someone to help reintegrate into the community (29% of SVORI and 16% of non-SVORI). For these common coordination and employment, education, and skillsrelated services, it appears that SVORI programs were able to provide modest and sometimes significant increases in the delivery of services, over "treatment as usual."

In addition to the services just described, an "all services" bundle was created, which captured the level of overall receipt across all services at each interview wave. Exhibit 42 shows the average service receipt bundle scores for SVORI and non-SVORI respondents at each interview wave. The pattern in the overall level of service receipt for SVORI and non-SVORI respondents at each interview wave mirrors the pattern found

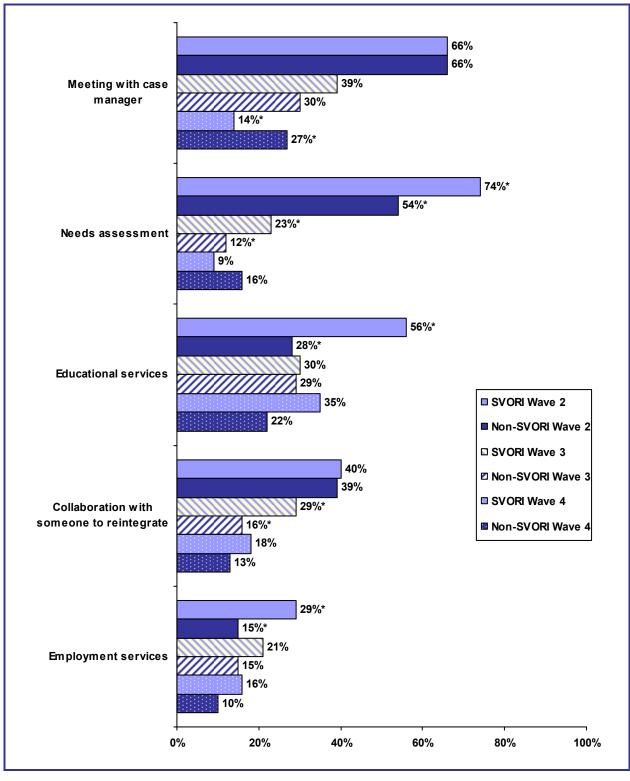


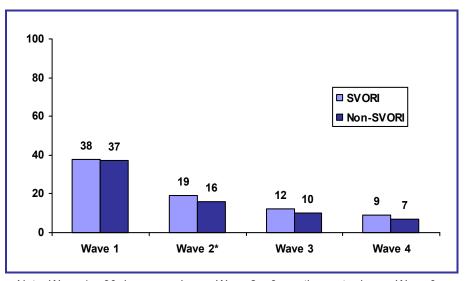
Exhibit 41. Most commonly reported services received, by interview wave and group

Note: Wave 2 = 3 months post-release; Wave 3 = 9 months post-release; Wave 4 = 15 months post-release. \*p < 0.05 for test of significant difference between SVORI and non-SVORI. Data are weighted.

for the individual service receipt domains—service receipt was highest for both groups before release, declined dramatically immediately after release, and steadily declined throughout the post-release period.

Exhibit 42 shows that, although overall service receipt was low for respondents in both groups, SVORI respondents received more services, on average, than their non-SVORI counterparts. In fact, 3 months after release, SVORI respondents reported having received a significantly higher level of services than non-SVORI respondents (average scores of 19 and 16 for SVORI and non-SVORI). Nonetheless, a substantial gap remained between the level of services received and the level of need for respondents in both groups at each interview wave (see Exhibit 30).

Exhibit 42. Level of receipt of all services, by interview wave and group



Note: Wave 1 = 30 days pre-release; Wave 2 = 3 months post-release; Wave 3 = 9 months post-release; Wave 4 = 15 months post-release.

As mentioned, before release from confinement, juvenile respondents reported a significantly higher level of overall service receipt than adult male respondents in the SVORI evaluation; however, after release, no significant differences in service receipt were found between the two groups.

<sup>\*</sup>p < 0.05 for test of significant difference between SVORI and non-SVORI. Data are weighted.

# Post-release Outcomes

The focus of this section is the outcomes of SVORI participants at 3, 9, and 15 months post-release, on several key domains. Detailed findings are present for housing; education and employment; family, peer, and community relations; substance abuse and physical and mental health; and criminal behavior and recidivism.

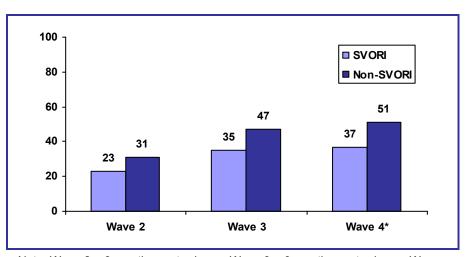
Although the data are not shown, this section also explores the differences and similarities in outcomes as reported by juvenile respondents and adult male respondents in the SVORI evaluation.

#### HOUSING

As youth transition from juvenile facilities back to their communities, housing is a critical element of this reentry experience. In the SVORI Multi-site Evaluation, three "core" housing outcomes were housing independence, housing stability, and the extent of challenge in locating housing after release. Juvenile males who were housing-independent lived in their own houses or apartments, contributed to the costs of housing, or had their names on their current leases or mortgages. Juvenile males who had stable housing had lived in only one place during the reference period, or in two places if the move was to attain their own place or a nicer place. Juvenile males were classified as not having housing challenges if they were not homeless, reported that they had no trouble finding a place to live, and reported that their current living situation was better or about the same as the last place they lived in.

No significant differences were found between the SVORI and non-SVORI juvenile males at 3 and 9 months post-release (Waves 2 and 3) on these three core housing outcomes; however, a significant difference between these groups was found at 15 months post-release for housing-independence only (Wave 4; Exhibit 43). At 15 months post-release, non-SVORI juvenile males had significantly more housing independence than SVORI juvenile males. Overall findings suggest that SVORI programming did not significantly improve the post-release housing experiences for juvenile males returning to their communities (Exhibits 43–45).

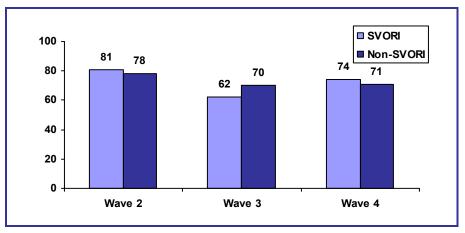
Exhibit 43. Self-reported housing independence since release/last interview



Note: Wave 2 = 3 months post-release; Wave 3 = 9 months post-release; Wave 4 = 15 months post-release.

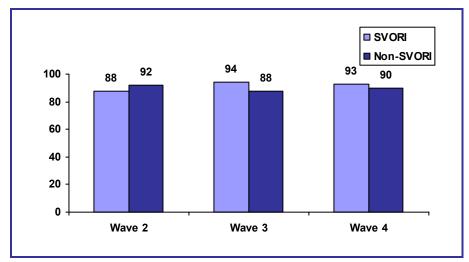
\*p < 0.05 for test of significant difference between SVORI and non-SVORI. Data are weighted.

Exhibit 44. Self-reported housing stability



Note: Differences between SVORI and non-SVORI are not statistically significant at the 0.05 level. Data are weighted. Wave 2 = 3 months post-release; Wave 3 = 9 months post-release; Wave 4 = 15 months post-release.

Exhibit 45. Self-reported lack of housing challenges since release/last interview



Note: Differences between SVORI and non-SVORI are not statistically significant at the 0.05 level. Data are weighted. Wave 2 = 3 months post-release; Wave 3 = 9 months post-release; Wave 4 = 15 months post-release.

Also informing the housing experiences of returning juvenile males are the difference in changes in housing experiences between SVORI and non-SVORI juvenile males over the 15 months after release. For both groups, housing independence improved gradually over the post-release follow-up periods; housing stability and housing challenges did not follow a consistent pattern between groups. For the SVORI group, housing stability decreased from the 3-month follow-up to the 9-month follow-up period and then increased at the 15-month follow-up period. The non-SVORI group had a decrease from the 3-month to 9-month follow-up period and then experienced a stable period from 9 months to 15 months post-release. The SVORI juvenile males experienced their greatest decrease in housing challenges during the time between their 3-month follow-up period and 9 month follow-up period. By their 15month follow-up period, they had experienced slightly more housing challenges. Non-SVORI juvenile males experienced the opposite pattern. They experienced their greatest increase in housing challenges during the time between their 3-month and 9-month post-release follow-up period. By their 15-month postrelease follow-up period, they had experienced a decrease in housing challenges.

A juvenile's living arrangements after confinement have implications for his successful reentry. Of particular interest in the living arrangements of juveniles when they reenter their communities is whether they resided with criminally involved people. More than two thirds (68%) of the SVORI juvenile males at 3 months post-release lived with people who had never been to jail. This rate increased over the next 6 months to nearly three quarters of juvenile males at the 9-month follow-up (72%) and 15-month follow-up (73%). This trend was similar for the non-SVORI juvenile males (71% at 3-month follow-up; 71% at 9-month follow-up; 73% at 15-month follow-up). In addition to living with people who had never been to jail, SVORI and non-SVORI juvenile males primarily lived with people who did not use drugs and who did not use alcohol in their presence. In fact, the majority of SVORI and non-SVORI juvenile males lived with their mothers up to 15 months post-release.

The last housing dimension that has significant impact on juvenile reentry is neighborhood quality. In the SVORI Multisite Evaluation, answers to the following interview items were combined to create an overall neighborhood quality score:

- "It is hard to stay out of trouble in your neighborhood."
- "Drug selling is a major problem in your neighborhood."
- "You think your neighborhood is a good place to live."
- "You think your neighborhood is a good place to find a job."
- "Living in your neighborhood makes it hard to stay out of incarceration."

No significant differences were found between the SVORI and non-SVORI juvenile males, and their perceptions of neighborhood quality remained relatively stable from 3 months to 15 months post-release. Exhibit 46 shows the weighted proportions of SVORI and non-SVORI juvenile males for each of the housing variables discussed (with estimates, standard errors, odds ratios, and significance) from the logistic regression models. As can be seen in Exhibit 46, SVORI and non-SVORI juvenile males viewed their neighborhoods as having moderate quality (average score of 9 out of 15).

		V	Vave 2				V	lave 3		Wave 4					
	SVORI Mean	Non- SVORI Mean	Est.	SE	OR	SVORI Mean	Non- SVORI Mean	Est.	SE	OR	SVORI Mean	Non- SVORI Mean	Est.	SE	OR
Housing independence	23%	31%	-0.43	0.31	0.65	35%	47%	-0.50	.29	.61	37%	51%	-0.61	.30	0.54 *
Housing stability	81%	78%	0.16	0.35	0.21	62%	70%	-0.37	0.32	0.69	74%	71%	0.17	0.33	1.18
No housing challenges	88%	92%	-0.47	0.45	0.63	94%	88%	0.70	0.56	2.01	93%	90%	0.31	0.57	1.37
Living with people who have never been to jail	68%	71%	-0.15	0.32	0.86	72%	71%	0.04	0.34	1.04	73%	73%	0.09	0.33	0.07
Living with people who don't use drugs	86%	92%	-0.58	0.50	0.56	95%	94%	0.13	0.63	1.14	94%	91%	0.36	0.54	1.44
Living with people who don't use alcohol in	•		•		•	•	•		•	•	•				
juvenile's presence	81%	80%	0.05	0.36	1.05	73%	79%	-0.33	0.33	0.72	75%	77%	-0.14	0.35	0.18
Neighborhood quality	9	9	-0.01	0.41	NA	10	9	0.53	0.42	NA	10	9	0.16	0.46	NA

Note: Regression results not shown when cell sizes <10. NA = not applicable. Wave 2 = 3 months post-release; Wave 3 = 9 months post-release; Wave 4 = 15 months post-release.

<sup>\*</sup>p < 0.05 for test of significant difference between SVORI and non-SVORI.

An examination of how the juvenile males compared with the adult males on housing experiences yielded expected findings, given the age difference between the two (data not shown). Significant differences for each of the follow-up periods for housing independence and housing challenges were found between juvenile males and adult males. Adult males had significantly greater housing independence at each follow-up period than juvenile males, whereas juvenile males had significantly fewer housing challenges at each follow-up period than adult males. Another noted difference was with the living arrangements post-release. At each follow-up period (3, 9, and 15 months post-release), males lived with people who had never been to jail significantly more often than juvenile males. Adult males also perceived their neighborhoods to be of better quality significantly more often than juvenile males at 3 months post-release. At 9 and 15 months post-release, adult males and juvenile males appeared to have similar perceptions of their neighborhood quality.

#### **EDUCATION AND EMPLOYMENT**

Education and employment are key issues in the reentry outcome for the SVORI Multi-site Evaluation. All SVORI programs for juvenile males placed some emphasis on education, employment, or both. Several outcomes were of particular interest:

- currently enrolled in school
- receiving no money from illegal activity
- currently supporting oneself with a job
- currently or recently holding a permanent job
- holding a job with benefits (a summary measure indicating whether the job provided health insurance or fully paid leave)
- having no problem finding a job

The weighted proportion of juvenile males in each group (with estimates, standard errors, odds ratios, and significance) from the logistic regression models are shown in Exhibit 47.

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Exhibit 47. Weighted means and parameter estimates of the effect of SVORI on education and employment outcomes

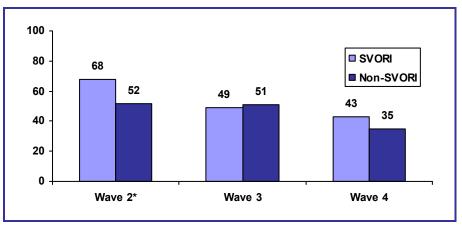
		V	Vave 2				V	Vave 3		Wave 4					
	SVORI Mean	Non- SVORI Mean	Est.	SE	OR	SVORI Mean	Non- SVORI Mean	Est.	SE	OR	SVORI Mean	Non- SVORI Mean	Est.	SE	OR
Currently in school	68%	52%	0.68	0.29	1.98	* 49%	51%	-0.09	0.29	0.91	43%	35%	0.34	0.29	1.41
Currently supported self with a job	32%	40%	-0.35	0.30	0.70	32%	39%	-0.31	0.30	0.74	53%	44%	0.37	0.30	1.45
Current job was permanent	48%	61%	-0.50	0.41	0.60	64%	53%	0.48	0.39	1.62	65%	66%	-0.04	0.38	0.96
Job had benefits	25%	37%	-0.58	0.43	0.56	45%	42%	0.13	0.38	1.14	59%	40%	0.80	0.35	2.22 *
Had no problem finding job	24%	36%	-0.57	0.59	0.57	37%	30%	0.31	0.39	1.36	38%	32%	0.24	0.36	1.28
Received no money from illegal activity	90%	95%	-0.65	0.53	0.52	76%	87%	-0.71	0.40	0.49	83%	91%	-0.73	0.45	0.48

Note: Regression results not shown when cell sizes <10. Wave 2 = 3 months post-release; Wave 3 = 9 months post-release; Wave 4 = 15 months post-release.

\*p < 0.05 for test of significant difference between SVORI and non-SVORI.

SVORI juvenile males were significantly more likely to be in school at the first follow-up period (3 months, Wave 2). Exhibit 48 graphically depicts the differences between the SVORI and non-SVORI groups in education across the 3-, 9-, and 15-month post-release timepoints. As can be seen, the significant difference in education at the 3-month follow-up was not sustained (during the 9-month and 15-month post-release follow-ups). At 9 months post-release (Wave 3), the percentage of SVORI juvenile males who were currently in school decreased to similar levels as that of non-SVORI juvenile males (49% of SVORI and 51% of non-SVORI). At 15 months post-release, the SVORI group continued to decline (43%), and the percentage of non-SVORI juvenile males who were currently in school decreased to 35%.

Exhibit 48. Self-reported currently in school

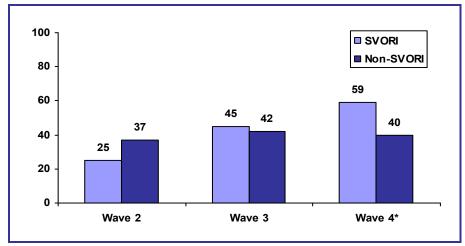


Note: Wave 2 = 3 months post-release; Wave 3 = 9 months post-release; Wave 4 = 15 months post-release.

Despite SVORI respondents' being significantly more likely to report receiving employment services at pre-release, only one significant difference was found between SVORI and non-SVORI juvenile males at any of the post-release time periods: SVORI juvenile males were significantly more likely to have a job with benefits than their non-SVORI counterparts at 15 months post-release. Exhibit 49 shows that SVORI juvenile males had a steady increase in the number of participants who had jobs with benefits from the 3-month post-release wave through 15 months post-release, whereas the non-SVORI group had an increase from 3 to 9 months post-release but experienced a

<sup>\*</sup>p < 0.05 for test of significant difference between SVORI and non-SVORI. Data are weighted.





Note: Wave 2 = 3 months post-release; Wave 3 = 9 months post-release; Wave 4 = 15 months post-release.

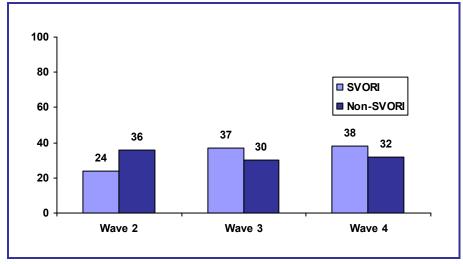
\*p < 0.05 for test of significant difference between SVORI and non-SVORI. Data are weighted.

drop-off at the 15-month post-release time period. This finding may reflect SVORI programming.

Over the 15 months post-release, only one third of juvenile males in both groups (SVORI and non-SVORI) indicated that they had no problem finding jobs, and about 50% or less of juvenile males in both groups currently supported themselves with jobs. Despite this finding, more than three fourths of participants in both groups indicated that they did not receive money from illegal activity throughout all follow-up time periods; more than 50% of those who had job indicated that their jobs were permanent. These findings are displayed in Exhibits 50–53.

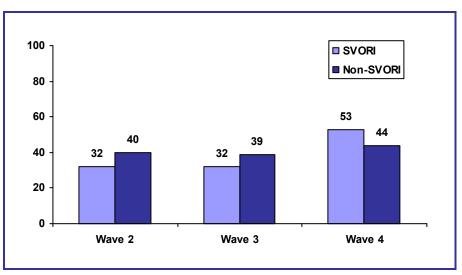
Overall, the education and employment findings indicate that SVORI programming for juvenile males was associated with significant improvements in two outcomes: (1) being enrolled in school and (2) the likelihood of having a job with benefits. Neither of these outcomes was significant across all post-release time points, but they do suggest some positive impact of SVORI programming. The employment finding may also suggest that the type of job held by SVORI juvenile males may be of higher quality that those held by their non-SVORI counterparts in that they offered benefits.

Exhibit 50. Self-reported lack of problem finding a job



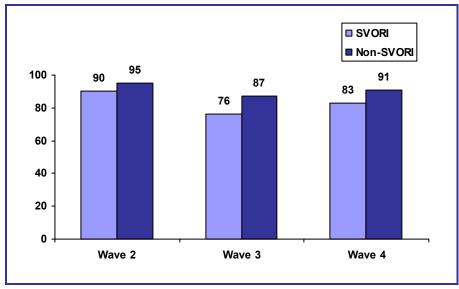
Note: Differences between SVORI and non-SVORI were not statistically significant at the 0.05 level. Data are weighted. Wave 2 = 3 months post-release; Wave 3 = 9 months post-release; Wave 4 = 15 months post-release.

Exhibit 51. Self-reported current support of self with a job



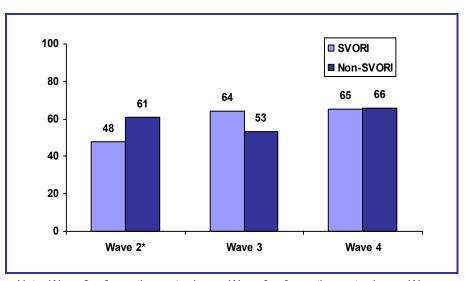
Note: Differences between SVORI and non-SVORI were not statistically significant at the 0.05 level. Data are weighted. Wave 2 = 3 months post-release; Wave 3 = 9 months post-release; Wave 4 = 15 months post-release.

Exhibit 52. Self-reported nonreceipt of money from illegal activity



Note: Differences between SVORI and non-SVORI were not statistically significant at the 0.05 level. Data are weighted. Wave 2 = 3 months post-release; Wave 3 = 9 months post-release; Wave 4 = 15 months post-release.

Exhibit 53. Self-reported current or recent job status as permanent



Note: Wave 2 = 3 months post-release; Wave 3 = 9 months post-release; Wave 4 = 15 months post-release.

\*p < 0.05 for test of significant difference between SVORI and non-SVORI. Data are weighted.

## FAMILY, PEERS, AND COMMUNITY INVOLVEMENT

Adolescence is traditionally known as a period when juveniles have more challenges with family members, especially parents, and closer relationships with peers. Both family and peer

relationships are critical for juveniles returning to their communities.

#### **Family Relationships**

Most of the SVORI juvenile programs emphasized family support or family involvement in the reentry process. Some SVORI outcomes related to family functioning were of particular interest. First among these was *family emotional support*, which refers to how the juvenile felt about his relationship with his family since his release from confinement. To measure the degree of family emotional support, a scale was created based on the degree to which the respondent agreed with 10 statements about his relationship with his family. <sup>17</sup> The items were combined to create a scale with possible values ranging from zero to 30, where higher scores indicated higher levels of family emotional support.

Another outcome of particular interest was *parental relationship*, which refers to the relationship the juvenile had with his parental figure since his release from confinement. To measure the strength of the relationship with parents, a scale was created based on the degree to which the respondent agreed with 10 statements. <sup>18</sup> The items were combined to create a scale with possible values ranging from zero to 30, where higher scores indicated a stronger parental relationship.

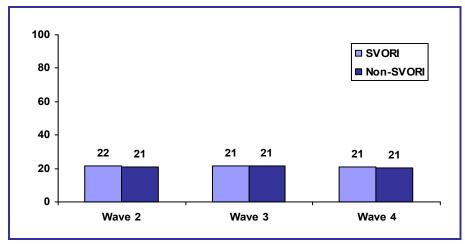
Despite the focus on family support or involvement in the SVORI programs, no differences were observed between the SVORI and non-SVORI groups at any of the post-release time periods, and little to no variability emerged for either group over the 15 months after release from confinement. These finding are depicted in Exhibits 54 and 55.

Respondents in both groups appeared to have moderately high levels of family emotional support across the 15-month follow-up period, which suggests that they felt loved and supported by their families.

<sup>&</sup>lt;sup>17</sup> Response categories were "strongly agree," "agree," "disagree," and "strongly disagree." Values of zero through 3 were assigned to response categories, with higher values representing stronger family emotional support.

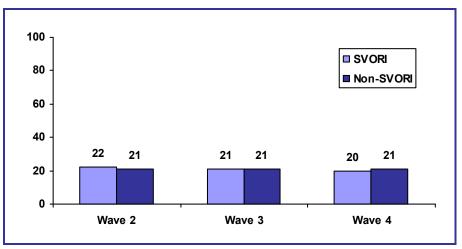
Response categories were "strongly agree," "agree," "disagree," and "strongly disagree." Values of zero through 3 were assigned to response categories, with higher values representing a stronger relationship.

Exhibit 54. Self-reported family emotional support



Note: Differences between SVORI and non-SVORI were not statistically significant at the 0.05 level. Data are weighted. Wave 2 = 3 months post-release; Wave 3 = 9 months post-release; Wave 4 = 15 months post-release.

Exhibit 55. Self-reported parental relationship



Note: Differences between SVORI and non-SVORI were not statistically significant at the 0.05 level. Data are weighted. Wave 2 = 3 months post-release; Wave 3 = 9 months post-release; Wave 4 = 15 months post-release.

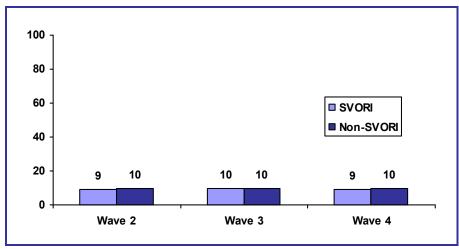
Respondents in both groups appeared to have moderately strong relationships with their parents across the 15-month follow-up period, which suggests that parental figures offered these juvenile males significant love and support.

#### **Peer Relationships**

As previously mentioned, juveniles tend to emphasize and rely on peers for support. Consequently, the SVORI Multi-site Evaluation was interested in peer instrumental support, which encompassed types of support the juvenile had received from peers since his release from confinement. As with the findings

for family relationships, no differences were observed between the SVORI and non-SVORI groups at any of the post-release time periods, and little to no variability emerged for either group over the 15 months after release from confinement. Unlike the findings for family relationships, both SVORI and non-SVORI juvenile males had moderately low levels of peer instrumental support across the 15 month follow-up period, suggesting they did not believe they had a particular friend who would help them in a time of need or be supportive in difficult situations. These findings are depicted in Exhibit 56.

Exhibit 56. Self-reported peer instrumental support



Note: Differences between SVORI and non-SVORI were not statistically significant at the 0.05 level. Data are weighted. Wave 2 = 3 months post-release; Wave 3 = 9 months post-release; Wave 4 = 15 months post-release.

The weighted proportion of juvenile males in each group (with estimates, standard errors, odds ratios, and significance) from the logistic regression models are shown in Exhibit 57.

The comparison of juvenile males and adult males on the family and peer variables revealed significant differences. At 3 months post-release, adult males had significantly more family emotional support than juvenile males. This difference was not sustained over the 9-month and 15-month post-release time periods.

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Exhibit 57. Weighted means and parameter estimates of the effect of SVORI on family and peer outcomes

		W	ave 2				W	Wave 4							
	Non- SVORI SVORI					SVORI	Non- SVORI	Non- SVORI SVORI							
	Mean	Mean	Est.	SE	OR	Mean	Mean	Est.	SE	OR	Mean	Mean	Est.	SE	OR
Family emotional															
support	22	21	0.67	0.63	NA	21	21	0.14	0.58	NA	21	21	0.10	0.64	NA
Parental relationship	22	21	0.48	0.66	NA	21	21	-0.25	0.60	NA	20	21	-0.31	0.83	NA
Peer instrumental support	9	10	-0.38	0.41	NA	10	10	-0.45	0.52	NA	9	10	-0.30	0.44	NA

Note: NA = not applicable. Wave 2 = 3 months post-release; Wave 3 = 9 months post-release; Wave 4 = 15 months post-release.

<sup>\*</sup>p < 0.05 for test of significant difference between SVORI and non-SVORI.

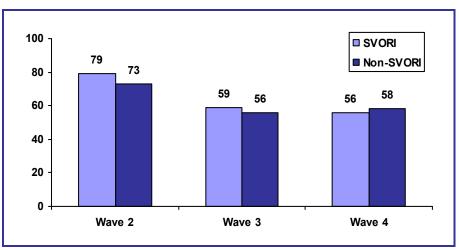
## SUBSTANCE USE AND PHYSICAL AND MENTAL HEALTH

#### **Substance Use**

Substance use outcomes were measured by self-report at each follow-up time period (3-, 9-, and 15-months post-release). Although SVORI respondents were more likely than non-SVORI respondents to report having received substance use treatment, having participated in drug education classes, and having received group counseling for substance use problems, no significant differences between the SVORI and non-SVORI groups and little variability across the 15-month post-release time period were found on measures of substance use. From one half to three quarters of SVORI and non-SVORI participants indicated that they did not use drugs, with at least two thirds indicating that they did not use drugs in the 30 days before the follow-up interview. These findings are shown graphically in Exhibits 58 and 59.

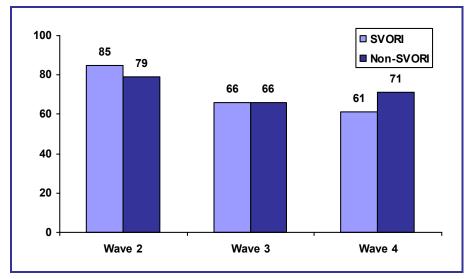
When adult males' drug use was compared with juvenile males' drug use during the post-release follow-up period, no differences were found. The adult males and juvenile males reported equivalent levels of substance use.

Exhibit 58. Self-reported lack of drug use



Note: Differences between SVORI and non-SVORI are not statistically significant at the 0.05 level. Data are weighted. Wave 2 = 3 months post-release; Wave 3 = 9 months post-release; Wave 4 = 15 months post-release.

Exhibit 59. Self-reported lack of drug use in past 30 days

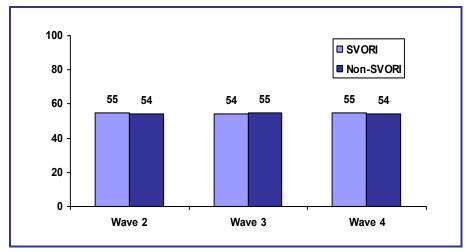


Note: Differences between SVORI and non-SVORI were not statistically significant at the 0.05 level. Data are weighted. Wave 2 = 3 months post-release; Wave 3 = 9 months post-release; Wave 4 = 15 months post-release.

#### **Physical Health**

The SVORI juvenile programs did not particularly emphasize physical health outcomes; however, a juvenile's physical health may impact his ability to obtain gainful employment or may influence other outcomes of interest to SVORI. The SF-12 physical health scale was used to measure five dimensions of physical health functioning (moderate activities such as moving a table, climbing several flights of stairs; accomplishing less than he would have liked to have accomplished, because of his physical health; being limited in the kind of work or activities he did as a result of his physical health; and having pain that interfered with his normal work). As seen in Exhibit 60, no significant differences were found between the SVORI and non-SVORI groups, with little variability emerging across postrelease follow-up time periods. Overall, both the SVORI and non-SVORI juvenile males reported no major physical health problems.

Exhibit 60. Self-reported physical health scale

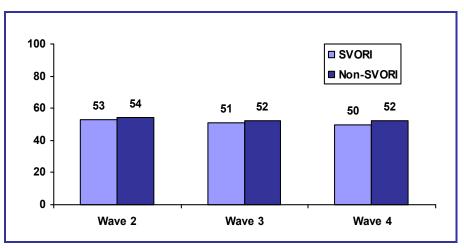


Note: Differences between SVORI and non-SVORI were not statistically significant at the 0.05 level. Data are weighted. Wave 2 = 3 months post-release; Wave 3 = 9 months post-release; Wave 4 = 15 months post-release.

#### **Mental Health**

Mental health services are an integral part of most juvenile reentry programs. In the SVORI Multi-site Evaluation, the SF-12 mental health scale (a measure of mental health functioning) was used to measure mental health symptoms that may impede functioning. Results showed no significant differences in mental health functioning between the SVORI and non-SVORI groups and little variability across post-release follow up time periods (Exhibit 61). As with the physical health of juvenile males, both SVORI and non-SVORI juvenile males reported no major mental health problems.

Exhibit 61. Self-reported mental health scale



Note: Differences between SVORI and non-SVORI are not statistically significant at the 0.05 level. Data are weighted. Wave 2 = 3 months post-release; Wave 3 = 9 months post-release; Wave 4 = 15 months post-release.

Post-release Outcomes

For youth, the beliefs they have about themselves (selfefficacy) and their perspective about the amount of control they have in their lives (locus of control) is likely to have significant impacts on their reentry successes. Changes in self-efficacy and locus of control may be direct outcomes of some of the SVORI programming offered to juveniles. When these outcomes were examined at the 3-, 9-, and 15- month post-release follow-up time periods, no significant differences emerged between SVORI and non-SVORI groups in their self-efficacy; however, significant differences were found in locus of control. SVORI participants had significantly greater locus of control than non-SVORI participants at 9 months post-release (Wave 3). Exhibit 62 shows the weighted proportions of the SVORI and non-SVORI groups for the substance use, physical health, and mental health variables. No differences were found in the comparison of adult males with juvenile males on any of the physical or mental health outcomes.

Exhibit 62. Weighted means and parameter estimates of the effect of SVORI on self-reported mental health, physical health, and substance use outcomes

		V	lave 2				W	ave 3			Wave 4					
	SVORI Mean	Non- SVORI Mean	Est.	SE	OR	SVORI Mean	Non- SVORI Mean	Est.	SE	OR	SVORI Mean	Non- SVORI Mean	Est.	SE	OR	
Mental health scale	53	54	-0.58	1.11	NA	51	52	-1.02	1.36	NA	50	52	-1.71	1.23	NA	
Physical health scale	55	54	0.61	0.88	NA	54	55	-0.56	0.67	NA	55	54	0.63	0.89	NA	
No self-reported drug use	79%	73%	0.33	0.33	1.40	59%	56%	0.12	0.30	1.13	56%	58%	-0.08	0.30	0.93	
No self-reported drug use in past 30 days	85%	79%	0.38	0.37	1.46	66%	66%	0.00	0.32	1.00	61%	71%	-0.46	0.31	0.63	
Locus of control	8.1	8.0	0.10	0.22	NA	8.2	7.5	0.69	0.25	NA *	8.2	7.9	0.24	0.89	NA	
Self-efficacy	8.1	8.1	-0.05	0.23	NA	8.0	7.8	0.18	0.25	NA	8.2	7.9	0.32	0.30	NA	

Note: NA = not applicable. Wave 2 = 3 months post-release; Wave 3 = 9 months post-release; Wave 4 = 15 months post-release.

<sup>\*</sup>p < 0.05 for test of significant difference between SVORI and non-SVORI.

#### CRIMINAL BEHAVIOR AND RECIDIVISM

In the SVORI Multi-site Evaluation, several self-reported measures were used to assess criminal behavior and recidivism. Core criminal behavior, or recidivism, outcomes are shown in Exhibit 63. Overall, no significant differences were found between the SVORI and non-SVORI groups for criminal behavior or recidivism.

The perpetration of violence was measured for SVORI and non-SVORI participants. Respondents were asked about several specific types of violence: threatening to hit, throwing, pushing/grabbing/shoving, slapping/kicking/biting/hitting, and threatening or using a weapon. The responses were summed to create the summary measure. Exhibit 64 graphically illustrates the patterns for this outcome. As can be seen in the exhibit, about 50% of the SVORI and non-SVORI juvenile males reported no perpetration of violence.

Another measure of criminal behavior or recidivism is compliance with conditions of supervision. As shown in Exhibit 65, more than two thirds of the SVORI and non-SVORI groups indicated that they had complied with all conditions of supervision. Slightly more participants (in both groups) indicated compliance in the 3-month post-release follow-up than in the 9- or 15-month post-release follow-up.

The SVORI Multi-site Evaluation assessed whether juvenile males avoided sanctions after their release from confinement. While more than two thirds of the SVORI and non-SVORI groups indicated that they complied with the conditions of their supervision, only between one third and one half of males from both groups were successful in avoiding sanctions during the 15 months after confinement (Exhibit 66).

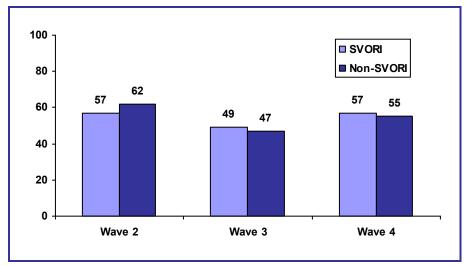
Exhibit 63. Weighted means and parameter estimates of the effect of SVORI on self-reported recidivism outcomes

		V	Vave 2				1	Nave 3			Wave 4					
	SVORI Mean	Non- SVOR IMean	Est.	SE	OR	SVORI Mean	Non- SVOR IMean	Est.	SE	OR	SVORI Mean	Non- SVOR IMean	Est.	SE	OR	
No perpetration of violence	57%	62%	-0.21	0.29	0.81	49%	47%	0.10	0.29	1.10	57%	55%	0.09	0.28	1.09	
Complied with conditions of supervision	80%	86%	-0.39	0.39	0.68	71%	74%	-0.17	0.47	0.85	66%	77%	-0.56	0.65	0.57	
No sanctions received for noncompliance	53%	48%	0.21	0.31	1.23	41%	41%	-0.02	0.44	0.98	37%	38%	-0.05	0.52	0.95	
No self-reported criminal behavior	76%	75%	0.08	0.33	1.08	54%	58%	-0.18	0.29	0.83	62%	57%	0.19	0.28	1.21	
Not reincarcerated at follow-up	92%	92%	0.01	0.50	1.01	73%	82%	-0.50	0.36	0.61	73%	80%	-0.37	0.33	0.69	

Note: Wave 2 = 3 months post-release; Wave 3 = 9 months post-release; Wave 4 = 15 months post-release.

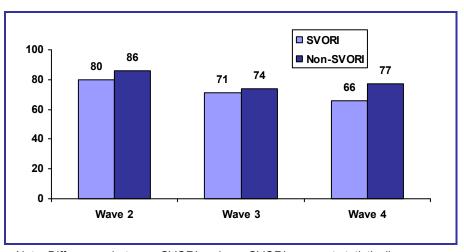
<sup>\*</sup>p < 0.05 for test of significant difference between SVORI and non-SVORI.

Exhibit 64. Self-reported nonperpetration of violence since release or last interview



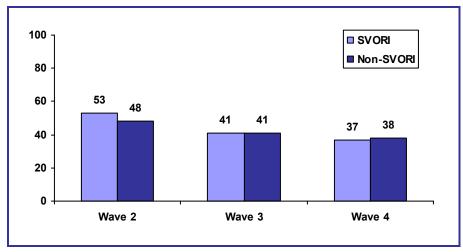
Note: Differences between SVORI and non-SVORI were not statistically significant at the 0.05 level. Data are weighted. Wave 2 = 3 months post-release; Wave 3 = 9 months post-release; Wave 4 = 15 months post-release.

Exhibit 65. Compliance with conditions of supervision



Note: Differences between SVORI and non-SVORI were not statistically significant at the 0.05 level. Data are weighted. Wave 1 = 30 days pre-release; Wave 2 = 3 months post-release; Wave 3 = 9 months post-release; Wave 4 = 15 months post-release.

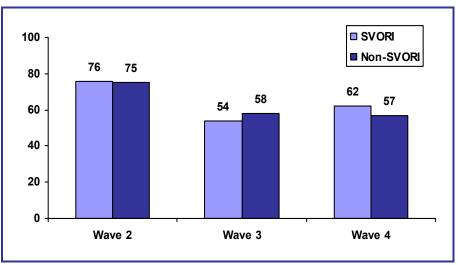
Exhibit 66. Self-reported lack of sanctions post-release



Note: Differences between SVORI and non-SVORI were not statistically significant at the 0.05 level. Data are weighted. Wave 2 = 3 months post-release; Wave 3 = 9 months post-release; Wave 4 = 15 months post-release.

Juvenile males were also asked if they had committed any crimes during the post-release follow-up period. As mentioned previously, no significant differences were found between SVORI and non-SVORI groups: 75% of the juvenile males from both groups indicated that they had not committed a crime at 3-months post-release (Exhibit 67). This rate decreased to slightly more than one half for both groups at 9 months post-release (54% SVORI and 58% non-SVORI) and was slightly less than two thirds for both groups at 15-months post-release (62% SVORI and 57% non-SVORI).

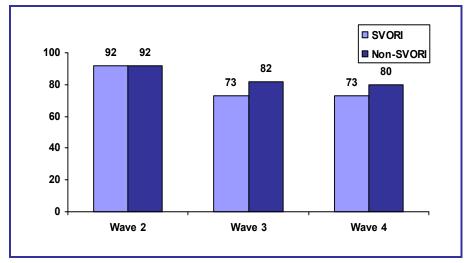
Exhibit 67. Self-reported noncommission of any crime post-release



Note: Differences between SVORI and non-SVORI were not statistically significant at the 0.05 level. Data are weighted. Wave 2 = 3 months post-release; Wave 3 = 9 months post-release; Wave 4 = 15 months post-release.

The final criminal behavior or recidivism outcome of interest is whether the juvenile males had been reincarcerated at the time of the follow-up interview. More than three quarters of juvenile males in both groups reported they had not been reincarcerated at 3-, 9-, or 15-months post-release (Exhibit 68).

Exhibit 68. Not reincarcerated at follow-up interview



Note: Differences between SVORI and non-SVORI were not statistically significant at the 0.05 level. Data are weighted. Wave 2 = 3 months post-release; Wave 3 = 9 months post-release; Wave 4 = 15 months post-release.

One key differences was found when juvenile males were compared with adult males. Juvenile males were significantly more likely, at each of the follow-up waves (3-, 9-, and 15-months), to have perpetrated violence than adult males.

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### **Conclusions**

This report has presented findings from four waves of interviews conducted with juvenile males in the four juvenile impact sites included in the SVORI evaluation. The sample included 152 SVORI program participants and 185 comparison juvenile males who were not enrolled in SVORI programs. Respondents were interviewed approximately one month before release and then again at 3, 9, and 15 months after release. All four interview waves have provided information on the characteristics of study respondents, their family and peer relationships, educational attainment and employment, physical and mental health, delinquency, and substance use, as well as detailed data on their need for and receipt of services and programs. The three post-release interviews have provided information about the impact of SVORI programming on a variety of reentry outcomes, including housing, education and employment, mental and physical health, substance use, and criminal behavior.

This section provides a summary description of respondents' characteristics and their pre-release service needs and receipt; it also discusses the comparability of the two study groups. Discussed here, as well, are respondents' post-release experiences, including their post-release service needs, their post-release service receipt, and the impact of SVORI program participation on their reentry outcomes. The final subsection discusses the implications of findings for juvenile males' successful reentry into their communities.

#### **CHARACTERISTICS OF RESPONDENTS**

The respondents were about 17 years of age, on average, and the majority reported their race as black. Before their current confinement, most reported that they had lived in a house or apartment that belonged to someone else (including parents' home). Less than 10% reported that they were homeless, living in a shelter, or had no set place to live during the 6 months before their current confinement. Before confinement, respondents had substantial difficulties in school: nearly all reported that they had at some time been suspended or expelled, and more than half reported that they had not been regularly attending school. Respondents most frequently reported that their natural mother was the primary person who raised them and the person with whom they had lived the longest. Nearly all respondents agreed or strongly agreed that they felt close to their families and wanted their families to be involved in their lives. More than three quarters of the respondents reported that they had family members who had been convicted or who had been incarcerated. More than half of the respondents reported that they had family members who had alcohol or drug problems. Similarly, more than three quarters reported that, before confinement, they had friends who had been convicted or who had been incarcerated. More than two thirds of the respondents reported that they had friends who had drug or alcohol problems.

Overall, the study participants reported being physically healthy, with most reporting that their health did not limit their current physical activities. Additionally, few study participants reported currently experiencing physical health problems. Wearing corrective lenses and asthma were the most commonly reported health problems. Less than 5% of the respondents reported that they had been diagnosed with heart trouble, arthritis, tuberculosis, diabetes, or hepatitis B or C. None of the respondents reported that he was HIV-positive or had been diagnosed with AIDS. More than half of the respondents rated their mental health status as excellent or very good. About half of the respondents reported that they had received treatment for a mental health or substance use problem—the most common reasons for this treatment were drug use or dependence (26%), attention-deficit/hyperactivity disorder (22%), and alcohol use or dependence (19%).

Nearly all of the respondents reported having used alcohol and marijuana during their lifetimes, and about half reported having used cocaine or hallucinogens. Reported age at first use for alcohol and marijuana was about 12 years, on average. Less

than 10% of respondents reported having ever used heroin, methadone, or anabolic steroids. About 7 in every 10 respondents reported having used alcohol or other drugs in the 30 days before confinement.

Nearly half of the respondents reported that they had at some time held a job. More than one third reported that they had worked during the 6 months preceding their current confinement, with most having worked as laborers (e.g., landscapers, roofers, day laborers) or in the service industry (e.g., as cooks, waiters, janitors, cashiers, dishwashers).

On average, respondents were 13 years old at the time of their first arrest and reported that they had been arrested six times and adjudicated three times. Nearly all respondents reported that they had been previously locked up in a juvenile detention facility, training school, or other type of juvenile correctional facility, averaging three terms of confinement. Nearly half of respondents reported that they were currently confined for a violent offense; fewer respondents reported that their current offenses included drug or public order offenses. At the time of the interviews, SVORI respondents reported that they had been incarcerated an average of 1.9 years, compared with an average of 1.1 years as reported by the non-SVORI respondents.

### COMPARABILITY OF SVORI AND NON-SVORI RESPONDENTS

The impact evaluation findings depend on the comparability of the two evaluation study groups—those who participated in SVORI programs and the non-SVORI respondents who were identified as comparison subjects for this evaluation. If identification of comparable non-SVORI respondents succeeded, then the expectation would be that few differences between the groups would be found on variables that measured characteristics before the time at which assignment to SVORI could be made.

The interview data collected before respondents' release from confinement showed a few characteristics for which the differences between the study groups were statistically significant at the .05 level. For example, those participating in SVORI programs were older and less likely to be white. SVORI respondents were more likely than non-SVORI respondents to

report that they had family members who had been convicted. While few respondents reported that they were gang members, SVORI respondents were more likely than non-SVORI respondents to report that they had relatives who were members of their gang.

No significant differences were found between the two groups on the education measures, and only one significant difference was found on employment history: SVORI respondents were more likely than non-SVORI respondents to report that they received formal pay at their last job.

With regard to health measures, non-SVORI respondents scored higher than SVORI respondents on the SF-12 physical health scale, indicating better physical health for non-SVORI respondents. SVORI respondents were more likely than non-SVORI respondents to report wearing corrective lenses. SVORI respondents were more likely than non-SVORI respondents to indicate symptoms of phobic anxiety and psychoticism, although scores on both measures for each group were low.

On substance use and delinquency measures, SVORI respondents were more likely than non-SVORI respondents to report having ever used alcohol and to report having ever used hallucinogens. SVORI respondents were less likely than non-SVORI respondents to be currently confined for a drug or public-order crime. In addition, SVORI respondents were more likely than non-SVORI respondents to report having been confined for more than 24 hours at one time; however, non-SVORI respondents had more prior terms of confinement than SVORI respondents, on average.

Although few significant differences in characteristics were found, propensity score matching techniques were used to improve the comparability between the SVORI and non-SVORI groups. A logit model to generate the probability of assignment to SVORI was estimated with 23 variables measured before SVORI assignment, including characteristics such as age, race, school attendance, family and peer measures, substance use, delinquency history, and types of crime leading to current period of confinement. Propensity score weights were developed to examine balance and SVORI program effects. Once the propensity score weights were applied, the SVORI and non-SVORI respondents exhibited balance on each variable included in the propensity model, conferring confidence on the

conclusion that the groups were comparable. This conclusion permitted examination of the effect of SVORI on outcomes measured in the follow-up interviews.

#### PRE-RELEASE SERVICE NEEDS

Respondents reported high levels of need for a wide array of services—particularly for transition services and services related to employment, education, and skills development. Nearly all of the respondents reported needing at least some transition services to address immediate needs upon release. In fact, of the 10 items included in the transition service needs bundle, at least half of the respondents reported that they needed 7. The most common transition service need was for a driver's license (90%). More than 6 in every 10 respondents reported needing transportation or a mentor. About 55% reported that they needed legal assistance. About half of respondents reported that they needed public health insurance (54%), documents for employment (53%), or financial assistance (49%). More than one third reported that they needed access to clothing or food banks, and one-quarter reported that they needed a place to live.

All respondents reported needing some kind of employment, education, or skills-related services. More than half of the respondents reported that they needed each of the seven items included in this bundle. The most common need was for more education (94%), followed closely by job training (88%) and a job (87%). About 7 in every 10 respondents reported that they needed life skills training or needed to change their attitudes toward criminal behavior, while 6 in every 10 respondents reported that they needed help learning money management. More than half of the respondents expressed the need to work on their personal relationships (55%).

About three quarters of the respondents reported needing health services after release. The most commonly reported need in this bundle was for anger management programming (53%). Nearly half of the respondents reported that they would need medical treatment, and about one third reported that that they would need substance use treatment. About one fifth of respondents reported that they would need mental health treatment.

Very few of the respondents reported needing either of the two domestic violence services—batterer intervention programs or domestic violence support groups.

#### PRE-RELEASE SERVICE RECEIPT

Although reported needs were similar for the SVORI and non-SVORI respondents, some notable differences emerged in reports of the services received during confinement. SVORI programs achieved modest increases in provision of services and programming before participants' release from confinement. Programs made the most impact in providing greater access to coordination services and to employment, education, and skills-related services.

SVORI respondents reported that they had received a significantly higher level of coordination services, on average, than non-SVORI respondents (average score of 59 for SVORI and 52 for non-SVORI). Nearly all respondents in each group reported that they had met with a case manager—the most commonly reported coordination service received. SVORI respondents were significantly more likely to report that they had worked with someone to plan for release, had developed a reentry plan, and had met with a social worker or caseworker.

SVORI respondents reported a higher level rate of receipt for transition services, on average, than non-SVORI respondents (average score of 24 for SVORI and 21 for non-SVORI). SVORI respondents were significantly more likely to report that they had participated in release preparation programs and had received help in finding a place to live. Non-SVORI respondents were significantly more likely than non-SVORI respondents to report that they had received help in accessing public health care. For the remaining nine items in the transition services bundle, SVORI respondents reported receipt at about the same rate, or slightly more, for these services as non-SVORI respondents.

Respondents in both groups reported having received less than half of the services in the health services bundle (average score of 44 for SVORI and 46 for non-SVORI); however, respondents in both groups reported similar, high levels of medical treatment. SVORI respondents were more likely than non-SVORI respondents to report that they had received preventive medical services, substance use treatment, and information on

accessing physical health care or mental health care in the community. In addition, SVORI respondents were significantly more likely than non-SVORI respondents to report that they had received specific substance use treatment services, such as Alcoholics Anonymous or Narcotics Anonymous, and information on accessing substance use treatment in the community. Non-SVORI respondents were much more likely than SVORI respondents to report that they had participated in anger management programs—consistent with the finding that non-SVORI respondents were more likely to report needing help with anger management.

SVORI respondents reported having received a higher level of employment, education, and skills-related services, on average, than non-SVORI respondents (average score of 54 for SVORI and 50 for non-SVORI). SVORI respondents were significantly more likely than non-SVORI respondents to report that they had received employment services. About twice as many SVORI respondents as non-SVORI respondents reported that they had been given advice on answering questions about delinquency history, had participated in an employment readiness program, or had been given names of people to contact in their communities to find jobs. In addition, SVORI respondents were significantly more likely than non-SVORI respondents to report that they had been given advice about job interviewing. Non-SVORI respondents were significantly more likely than SVORI respondents to report that they had received training to change their attitudes toward criminal behavior—consistent with the finding that non-SVORI respondents were more likely to report needing to change these attitudes.

Very few respondents reported participation in either a batterer intervention program or a domestic violence support group.

Overall, SVORI respondents reported receiving 39% of all service items measured before release from confinement, on average, while non-SVORI respondents reported receiving 36% of the services, on average. Although pre-release service receipt levels were less than 100%, SVORI programs were successful in modestly increasing the level of services and programming provided to participants before their release to the community.

#### **POST-RELEASE SERVICE NEEDS**

The levels of service need reported by SVORI and non-SVORI respondents were similar at each of the three post-release interviews. On average, respondents in both groups reported that they needed slightly more than one third of all the services measured at each post-release wave. The levels of expressed need across the 15-month post-release follow-up period were consistently highest for employment, education, and skills-related services.

The levels of need reported by respondents in both groups before their release from confinement were, on average, higher than their reported needs after release. While respondents' levels of service need generally declined after release, at each post-release interview at least 90% of respondents reported needing some transition services; at least 93% reported needing some employment, education, or skills-related services; and, about half reported needing some kind of health service. Obtaining a driver's license was the most commonly reported transitional need across all post-release interview waves. At each post-release interview, the most commonly reported need in the employment, education, and skills-related bundle was for more education, and the most common health service need was for medical treatment.

For a few items, needs remained consistently high for SVORI and non-SVORI respondents. At each post-release interview, at least half of SVORI respondents reported that they needed more education, a job, job training, life skills training, a driver's license, and transportation. Non-SVORI respondents reported similar high levels of need for these services.

#### POST-RELEASE SERVICE RECEIPT

SVORI programs continued to achieve modest increases in provision of services and programming in the months following participants' release from confinement. Programs made the most impact in providing greater access to employment, education, and skills-related services, as well as to coordination services. In fact, 3 months after their release from confinement, SVORI respondents were significantly more likely than non-SVORI respondents to report that they had received a needs assessment, educational services, and employment services. In addition, 9 months after release, SVORI

respondents were significantly more likely than non-SVORI respondents to report that they had received a needs assessment and had worked with someone to reintegrate into their community.

For each service domain, reported levels of service receipt were highest for SVORI and non-SVORI respondents before their release from confinement, declined dramatically in the 3 months following release, and remained low over the post-release period. Respondents in both groups consistently reported having received the highest level of services in the coordination bundle.

Although SVORI and non-SVORI respondents reported low levels of service receipt after their release from confinement, respondents in both groups reported relatively high levels of service needs during this time. In fact, at each post-release period and for each service bundle, the levels of service receipt reported by respondents in both groups were considerably lower than their reported needs.

Overall, while respondents in both groups reported relatively high levels of post-release service needs and low levels of service receipt across all service bundles, SVORI respondents reported slightly higher levels of overall service receipt than their non-SVORI counterparts. In fact, 3 months after release, SVORI respondents reported a significantly higher level of overall service receipt, on average, than non-SVORI respondents. So, although service receipt for SVORI respondents was far below 100% during the post-release period, SVORI programs were able to provide modest increases in the delivery of programs and services over "treatment as usual."

#### **POST-RELEASE OUTCOMES**

Several notable outcomes for juvenile males emerged as a result of SVORI programming. The first is that housing was not significantly impacted by SVORI programming, despite the efforts dedicated to transition planning for SVORI participants. SVORI and non-SVORI juvenile males were similar in their abilities to find stable housing, the challenges they confronted when looking for housing, living with people who did not have a history of criminal involvement and did not use drugs or alcohol, and their perceptions of neighborhood quality. The sole

area in which SVORI and non-SVORI participants differed was housing independence: non-SVORI participants were significantly more likely to achieve housing independence 15 months after release from confinement.

As indicated in the pre-release service needs section, all SVORI respondents reported needing some kind of employment, education, or skills-related services. Post-release outcomes in the area of education and employment confirm that SVORI programming met this need for some areas of education and employment; however, the success of SVORI programming in these areas were time limited. SVORI juvenile males were significantly more likely than non-SVORI juvenile males to be in school 3 months after their release from confinement, but at 9 and 15 months post-release, the significant differences diminished. SVORI juvenile males were also significantly more likely to have a job with benefits than their non-SVORI counterparts, but this finding was only at 15 months post-release from confinement.

All of the SVORI juvenile programs attempted to include family members as a part of the reentry process. Although significant differences did not exist in the level of family emotional support and the strength of parental relationships between SVORI and non-SVORI respondents, SVORI programming appeared to have a moderate impact on the type of support both SVORI and non-SVORI groups received from their families throughout the follow-up periods.

Even though SVORI respondents were more likely than non-SVORI respondents to report having received substance use treatment and information on accessing physical health care or mental health care in the community while confined, no significant differences were found between SVORI and non-SVORI juvenile males in substance use, physical health, or mental health outcomes, suggesting that this area was not one in which SVORI programming had a unique impact on SVORI participants.

One of the primary outcomes of the SVORI program was criminal behavior and recidivism. SVORI was successful in supporting 50% or more of the participating juvenile males in their compliance with conditions of supervision and avoidance of sanctions, perpetrating violence after their release, committing crimes after release, and being reincarcerated after

release. Despite this outcome, SVORI failed to generate differences between juvenile males in the SVORI program and their non-SVORI counterparts.

#### **IMPLICATIONS**

The juvenile justice system is mandated to promote public safety, to hold youthful offenders accountable for their delinquent behavior, and to promote youth development (Howell, 2003; King, 2006). While the "get tough" policies of the past two decades have resulted in an increase in the population of confined juveniles, reoffending persists. Faced with these ineffective policies, practitioners and researchers continue to experiment with research-based reentry models to improve outcomes for confined juvenile offenders (Gies, 2003) Similar to the research-based IAP, SVORI was intended to create a multiphase continuum of well-coordinated, individualized services that began during the period of confinement and intensified just before release and during the early months post-release, with continuing support spanning a longer-term post-release period. The overarching goals of the initiative were to improve not only criminal and juvenile justice outcomes, but also education, employment, and housing outcomes for juvenile released from confinement. This report focused on four juvenile programs that were part of the SVORI Multi-site Evaluation. In assessing program effects of SVORI, the findings lead to two important policy implications for juvenile reentry programming. The first addresses the advantage of assessing and responding to the needs of delinquent youth; the second addresses how best to do the work of reentry.

#### **Addressing the Needs of Juvenile Offenders**

The profile of the typical juvenile male who participated in the SVORI evaluation revealed that he had family and friends who were criminal justice–involved or who had drug and alcohol problems; he had substantial difficulties in school, as illustrated by his irregular attendance and likely suspension or expulsion from school; he reported high rates of alcohol and marijuana use and started using these substances at a young age. Most likely, he had engaged in violent behavior or had been victimized before being confined. And he had incurred a history of delinquency that could be described as chronic, given his young age. These findings are consistent with previous

research on the wide range of challenges juvenile offenders face, including crime-involved parents (Farrington, 1989), low academic functioning (National Research Council and Institute of Medicine, 2001), and a history of substance use (Kazdin, 2000).

Youth who are deeply involved in the juvenile justice system, much like the SVORI youth, often have a myriad of family, health, and mental health issues that accompany their delinquent behaviors. For some youth, like those in the SVORI program, their involvement in the juvenile justice system initiates a range of services designed to address these problems. For other youth, continued involvement in delinquency may reflect a failure of community-based services to adequately meet the myriad needs of youth (Schwalbe, Smith Hatch, & Maschi, 2009).

In the case of SVORI youth, the juvenile justice system took on the role of gatekeeper for specialized case management, needs assessment, and supervision, as well as access to individualized services and interventions. The findings presented in this report reveal that some youth received services that exceeded their stated need, but the majority of youth lacked services adequate to meet their needs. Because of the gaps between juveniles' expressed need for services and reported receipt of services, it is critically important that juvenile justice practitioners and policy makers reflect on how needs are assessed, in order to better understand the wide range of deficits that often characterize youth confined to juvenile correctional facilities. Once gained, this understanding would have implications for program and treatment planning and coordination for deciding what types of services are most needed and for whom. Understanding the levels of need may also help establish realistic expectations about what improvements programs can achieve, in terms of both immediate and longer-term outcomes for juveniles.

#### **Improving How Reentry Works**

The second policy implication addresses how best to do the work of reentry—namely, how to manage the coordination of services for juvenile offenders preparing to reenter their communities. Evidence from this report suggests that SVORI programs were able to make modest improvements in the approach to the delivery of reentry services (e.g., intensive

case management, greater use of needs assessments, reentry planning) and that this model of care may have resulted in small improvements in outcomes. For example, evidence suggests that short-term, significant improvements were made in some employment and education outcomes—another primary service area of SVORI juvenile programs. It is perhaps the case that the SVORI-funded programs' enhanced case management and service coordination approach, coupled with their emphasis on providing greater levels of employment and education services, contributed to the small improvements in these particular outcomes. Similarly, evaluation of IAP, a reentry model with an emphasis on service coordination and with a theoretical framework similar to that of SVORI, found small improvements in short-term, intermediate outcomes for IAP participants, such as fewer positive drug testing results, a higher rate of employment, and a higher proportion of participants' returns to school after release from confinement (Wiebush, Wagner, McNulty, Wang, & Le, 2005).

#### **Future Directions**

Although some of these findings of improvement in levels of service for SVORI participants offer encouragement, they should not be overstated. Service receipt levels were far from 100%, particularly in the months following release from confinement. With the remarkably low levels of service receipt and relatively high levels of self-reported need throughout the study period, the fact that few significant improvements in outcomes were observed for SVORI respondents is not surprising.

In their evaluation of IAP, Wiebush and colleagues suggest that implementation issues (e.g., staff turnover that hampered continuity/coordination of services, delayed formation of community-based service networks, difficulties in delivery of specialized services during the confinement stage) may preempt the ability to draw conclusions about the impact of IAP on reentry outcomes (Wiebush et al., 2005). It may be the case that the sites included in the SVORI Multi-site Evaluation experienced early implementation issues that are reflected in the low level of service receipt reported by SVORI respondents and few significant differences in reentry outcomes. Consequently, future study may benefit from an examination of factors that may have contributed to low levels of service

receipt, including implementation issues, among others (e.g., the voluntary nature of some of the SVORI programs, respondents' perceptions of the quality of programs and services, the intensity and quality of post-release supervision, the use of sanctions and rewards, the "aging out" of some from juvenile justice jurisdiction). In addition, although small sample sizes preclude a rigorous site analysis, an exploration of program implementation and service receipt by site—with their varied reentry approaches—may provide insight into the relationships between SVORI program operations and service delivery, the levels of service needs and service receipt, and reentry outcomes. Finally, secondary analyses, without regard to SVORI participation, might explore "what works for whom" with regard to reentry programming. Exploration of these topics holds out possibilities for expanding what is known about effective reentry programming for youth.

## References

- Abrams, L. S. (2006). Listening to juvenile offenders: Can residential treatment prevent recidivism? *Child and Adolescent Social Work Journal*, 23(1), 61-85.
- Abrams, L. S., Shannon, S., & Sangalang, C. (2008). Transition services for incarcerated youth: A mixed methods evaluation study. *Children and Youth Services Review,* 30, 522-535.
- Altschuler, D. M., & Brash, R. (2004). Adolescent and teenage offenders confronting the challenges and opportunities of reentry. *Youth Violence and Juvenile Justice*, *2*(1), 72-87.
- Altschulter, D. M., & Armstrong, T. L. (1994). *Intensive* aftercare for high risk juveniles: A community care model. Washington, DC: Office of Juvenile Justice and Delinquency Prevention.
- Bouffard, J. A., & Bergseth, K. J. (2008). The impact of reentry services on juvenile offenders' recidivism. *Youth Violence and Juvenile Justice*, *6*, 295-318.
- Chung, H., Schubert, C. A., & Mulvey, E. P. (2007). An empirical portrait of community reentry among serious juvenile offenders in two metropolitan cities. *Criminal Justice and Behavior, 34*, 1402-1426.
- Cocozza, J. J., & Skowya, K. (2000). Youth with mental health disorders: Issues and emerging responses. *Juvenile Justice*, 7, 3-13.
- Farrington, D. P. (1989). Early predictors of adolescent aggression and adult violence. *Violence and Victims*, 4(2), 79-100.
- Feld, B. C. (1998). Juvenile and criminal justice systems' responses to youth violence. In M. Tonry & M. H. Moore (Eds.), *Youth violence* (pp. 189-263). Chicago: University of Chicago Press.

- Freudenberg, N., Daniels, J., Crum, M., Perkins, T., & Richie, B. (2005). Coming home from jail: The social and health consequences of community reentry for women, male adolescents, and their families and communities.

  American Journal of Public Health, 95(10), 1725-1736.
- Gies, S. V. (2003). *Aftercare services*. Washington, DC: Office of Juvenile Justice and Delinquency Prevention.
- Grisso, T. (2004). *Double jeopardy: Adolescent offenders with mental disorders*. Chicago: University of Chicago Press.
- Hawkins, J. D., Herrenkohl, T., Farrington, D. P., Brewer, D., Catalano, R. F., & Harachi, T. W. (1998). A review of predictors of youth violence. In R. Loeber & D. P. Farrington (Eds.), Serious and violent juvenile offenders: Risk factors and successful interventions (pp. 106-146). Thousand Oaks, CA: Sage Publications.
- Howell, J. C. (2003). *Preventing and reducing juvenile delinquency: A comprehensive framework*. Thousand Oaks, CA: Sage Publications.
- Kazdin, A. (2000). Adolescent development, mental disorders, and decision making in delinquent youth. In T. Grisso & R. Schwartz (Eds.), *Youth on trial* (pp. 33-65). Chicago: University of Chicago Press.
- King, M. (2006). Guide to the state juvenile justice profiles. Technical assistance to the juvenile court: Special project bulletin. Pittsburgh, PA: National Center for Juvenile Justice.
- Lattimore, P. K., & Steffey, D. M. (2009). *The Multi-Site Evaluation of SVORI: Methodology and analytic approach*. Research Triangle Park, NC: RTI International.
- Lattimore, P. K., Visher, C. A., & Steffey, D. M. (2008). *Pre-release characteristics and service receipt among adult male participants in the SVORI Multi-site Evaluation*.

  Research Triangle Park, NC: RTI International.
- Lattimore, P. K., Visher, C. A., Winterfield, L., Lindquist, C., & Brumbaugh, S. (2005). Implementation of prisoner reentry programs: Findings from the Serious and Violent Offender Reentry Initiative Multi-site Evaluation. *Justice Research and Policy, 7*(2), 87-109.
- Lindquist, C. (2005). Reentry research in action: Implementation of SVORI programs. Research Triangle Park, NC: RTI International.

- Lipsey, M. W. (2009). The primary factors that characterize effective interventions with juvenile offenders: A meta-analytic overview. *Victims & Offenders*, *4*(2), 124–147.
- Lipsey, M. W., & Derzon, J. H. (1998). Predictors of violent or serious delinquency in adolescence and early adulthood: A synthesis of longitudinal research. In R. Loeber & D. P. Farrington (Eds.), Serious and violent juvenile offenders: Risk factors and successful interventions (pp. 86-105). Thousand Oaks, CA: Sage Publications.
- MacKenzie, D. L. (2006). What works in corrections: Reducing the criminal activities of offenders and delinquents. New York: Cambridge University Press.
- McCord, J. (1992). The Cambridge-Somerville study: A pioneering longitudinal-experimental study of delinquency prevention. In J. McCord & R. Tremblay (Eds.), Serious and violent juvenile offenders: Risk factors and successful interventions (pp. 313-345). Thousand Oaks, CA: Sage Publications.
- Mears, D. (2001). Critical challenges in addressing the mental health needs of juvenile offenders. *Justice Policy Journal*, 4, 41-61.
- Mears, D. P., & Travis, J. (2004). Youth development and reentry. *Youth Violence and Juvenile Justice*, *2*(1), 3-20.
- National Council on Disability (2003). Addressing the needs of youth with disabilities in the juvenile justice system: The current status of evidence-based research. Washington, DC: National Council on Disability.
- National Research Council and Institute of Medicine (2001).

  Juvenile crime, juvenile justice. Washington, DC:

  National Academy Press.
- Puzzanchera, C. (2009). Juvenile arrests 2007 (NCJ 225344).

  Office of Juvenile Justice and Delinquency Prevention
  Juvenile Justice Bulletin. Retrieved June 11, 2009, from http://www.ncjrs.gov/pdffiles1/ojjdp/225344.pdf
- Schwalbe, C. S., Smith Hatch, S., & Maschi, T. (2009). Effects of treatment needs and prior social services on juvenile court decision making. *Social Work Research*, *33*(1), 31-40.
- Sickmund, M., Sladky, T. J., & Kang, W. (2008). Census of juveniles in residential placement databook. Retrieved December 18, 2009, from http://www.ojjdp.ncjrs.gov/ojstatbb/cjrp/

- Snyder, H. N., & Sickmund, M. (2006). *Juvenile offenders and victims: 2006 national report*. Washington, DC: Office of Juvenile Justice and Delinquency Prevention.
- Steinberg, L., Chung, H. L., & Little, M. (2004). Reentry of young offenders from the justice system: A developmental perspective. *Youth Violence and Juvenile Justice*, *2*, 21-38.
- Strategic Advantages (2000). Symptom Assessment-45

  Questionnaire (SA-45). New York: Multi-Health Systems.
- Ware, J. E., Jr., Kosinski, M., Turner-Bowker, D. M., & Gandek, B. (2002). How to score version 2 of the SF-12 health survey (with a supplement documenting version 1). Lincoln, RI: QualityMetric.
- Wiebush, R. G., Wagner, D., McNulty, B., Wang, Y., & Le, T. N. (2005). *Implementation and outcome evaluation of the intensive aftercare program, final report*. Washington, DC: Office of Juvenile Justice and Delinquency Prevention.
- Winterfield, L., & Brumbaugh, S. (2005). Reentry research in action: Overview of the Serious and Violent Offender Reentry Initiative. Research Triangle Park, NC: RTI International.
- Winterfield, L., Lattimore, P. K., Steffey, D. M., Brumbaugh, S., & Lindquist, C. (2006). The Serious and Violent Offender Reentry Initiative: Measuring the effects on service delivery. *Western Criminology Review, 7*(2), 3-19.

# **Appendix A. Data Tables**

Exhibit A-1. Juvenile male case disposition—Wave 1 (pre-release)

	S۱	/ORI	Non-SVORI		All	Cases
	N	%	N	%	N	%
TOTAL ALL CASES	192	45.8	227	54.2	419	100.0
	S۱	/ORI	Non-	SVORI	All	Cases
•		% of		% of		
		Eligible		Eligible		% of
Case Disposition—Eligible Cases	N	SVORI	N	NS	N	Eligible
Completed			·			
Interview completed	152	75.2	185	75.5	337	75.4
Released Early						
Respondent released before Wave	31	15.3	35	14.3	66	14.8
1 interview				14.0		
Refused						
Final refusal by respondent,	17	8.4	20	8.2	37	8.3
guardian, or other				<u> </u>	•	
Access Denied						
Access to respondent denied by	1	0.5	2	0.8	3	0.7
prison		<u>.</u>	•		•	
Other Noninterview		0.0		0.0		0.4
Respondent absconded	0	0.0	2	0.8	2	0.4
Private setting not available	0	0.0	0	0.0	0	0.0
Respondent deceased	0	0.0	0	0.0	0	0.0
Language barrier—Spanish	0	0.0	0	0.0	0	0.0
Language barrier—other	0	0.0	0	0.0	0	0.0
Physically/mentally incapable Other noninterview	<u>0</u> 1	0.0	<u> </u>	0.0	2	0.0
	202	0.5 <b>100.0</b>	245	0.4 <b>100.0</b>	∠ 447	0.4 100.0
Total Eligible Cases		/ORI		SVORI		Cases
		% of	NOIT	% of	All	Cases
Case Disposition—Ineligible		Ineligible		Ineligible		% of
Cases	N	SVORI	N	NS	N	Ineligible
_						
Respondent transferred to non-	2	5.0	1	2.4	3	3.7
Respondent releasing to non-study	1	2.5	0	0.0	1	1.2
Respondent not releasing during	5	12.5	17	40.5	22	26.8
	2	5.0	5	11 9	7	8.5
	<del>_</del>			0.0	<u>.</u> 1	1.2
•					•	
			1			
	8		3			
Total Ineligible Cases	40		42		82	
study facility  Respondent releasing to non-study area  Respondent not releasing during data collection period  Date of release unknown  Case fielded incorrectly  Respondent ineligible to participate  Respondent ineligible—age  Other ineligible (groups dropped)  Other (noninterview) ineligible	1 5 2 1 11 3 7 8	2.5	0 17 5 0 5 1 10 3	0.0 40.5 11.9	1 22 7 1 16 4 17	1.2 26.8 8.5

Exhibit A-2. Respondent characteristics, by group

Characteristic	N	SVORI	Non-SVORI	t-statistic
Demographics and Housing	IN .	Mean (SD)	Mean (SD)	เ-รเสแรแน
Age at confinement	337	15.26 (7.32)	15.77 (1.28)	-0.85
Age at pre-release (Wave 1) interview	337	17.01 (1.30)	16.68 (1.36)	2.27
White	337	0.14 (0.35)	0.24 (0.43)	-2.31
Black	337	0.59 (0.49)	0.51 (0.50)	1.42
Hispanic	337	0.23 (0.42)	0.17 (0.37)	1.44
Multiracial/other	337	0.04 (0.20)	0.08 (0.27)	-1.62
Born in United States	337	0.94 (0.24)	0.94 (0.24)	0.01
English is primary language	337	0.91 (0.28)	0.90 (0.30)	0.53
Homeless/shelter/no set place to live before incarceration	337	0.07 (0.25)	0.09 (0.28)	-0.71
<b>Employment History</b>				
Ever held a job	337	0.43 (0.50)	0.51 (0.50)	-1.47
Employed during 6 months before incarceration	337	0.35 (0.48)	0.41 (0.48)	-1.07
Source of support 6 months before incarceration: family	337	0.70 (0.46)	0.68 (0.47)	0.56
Source of support 6 months before incarceration: friends	337	0.18 (0.38)	0.13 (0.34)	1.22
Source of support 6 months before incarceration: government	337	0.09 (0.28)	0.04 (0.19)	1.78
Source of support 6 months before incarceration: illegal income	337	0.34 (0.48)	0.35 (0.48)	-0.07
Source of support 6 months before incarceration: group home/training school	337	0.01 (0.08)	0.01 (0.10)	-0.42
Last job: worked more than 20 hours/week	335	0.28 (0.45)	0.34 (0.47)	-1.16
Last job: hourly salary	123	8.66 (5.61)	9.72 (6.39)	-0.94
Last job: was permanent	128	0.58 (0.50)	0.44 (0.50)	1.62
Last job: received formal pay	128	0.53 (0.50)	0.31 (0.46)	2.57
Last job: health insurance provided	126	0.15 (0.36)	0.19 (0.37)	0.93
Completed 12th grade or GED/other high school equivalent	337	0.20 (0.40)	0.15 (0.36)	1.26
Currently in school	337	0.88 (0.33)	0.94 (0.25)	-1.85
Regularly attended school in the school year before confinement	332	0.54 (0.50)	0.43 (0.50)	1.93
Ever expelled/suspended from school	333	0.95 (0.21)	0.91 (0.28)	1.53
Family and Peers				
Primary person or persons who raised respondent: natural mother and natural father	333	0.19 (0.40)	0.24 (0.43)	-0.97

Exhibit A-2. Respondent characteristics, by group (continued)

Characteristic	N	SVORI Mean (SD)	Non-SVORI Mean (SD)	t-statistic
Family and Peers (continued)				
Primary person or persons who raised respondent: natural mother only	333	0.38 (0.49)	0.46 (0.50)	-1.55
Primary person or persons who raised respondent: natural mother and stepfather/boyfriend	333	0.12 (0.33)	0.08 (0.27)	1.28
Primary person or persons who raised respondent: grandparents	333	0.17 (0.37)	0.10 (0.31)	1.61
Primary person or persons who raised respondent: other person	333	0.15 (0.35)	0.12 (0.33)	0.66
The person/persons who respondent lived with the longest: natural mother and natural father	333	0.15 (0.36)	0.17 (0.38)	-0.44
The person/persons who respondent lived with the longest: natural mother only	333	0.48 (0.50)	0.54 (0.50)	-1.12
The person/persons who respondent lived with the longest: natural mother and stepfather/boyfriend	333	0.11 (0.32)	0.07 (0.25)	1.47
The person/persons who respondent lived with the longest: Grandparents	333	0.15 (0.35)	0.12 (0.32)	0.82
The person/persons who respondent lived with the longest: other person	333	0.11 (0.32)	0.11 (0.31)	0.08
Family emotional support score (range 0– 30, where higher = more support)	333	23.19 (4.09)	22.89 (4.02)	0.66
Parental relationship before confinement score (range 0–30, where higher = stronger relationship)	328	21.53 (4.02)	21.24 (4.44)	0.61
Current parental relationship score (range 0–30, where higher = stronger relationship)	319	22.87 (4.21)	22.11 (4.65)	1.51
Has any living children	335	0.11 (0.31)	0.08 (0.27)	0.97
Number of children (only respondents with children)	30	1.00 (0.00)	1.07 (0.27)	-1.00
Had primary care responsibilities for any children 6 months before incarceration	30	0.31 (0.48)	0.21 (0.43)	0.59
Provided financial support for children 6 months before incarceration (only respondents who did not have primary care responsibilities)	22	0.27 (0.47)	0.45 (0.52)	-0.86
Has persons in life that are considered family	337	0.99 (0.11)	0.99 (0.07)	-0.72
Has a family member who has been convicted of a crime	307	0.87 (0.34)	0.76 (0.43)	2.52
Has a family member who has been in a correctional facility	313	0.82 (0.38)	0.75 (0.43)	1.49

Exhibit A-2. Respondent characteristics, by group (continued)

Characteristic	N	SVORI Mean (SD)	Non-SVORI Mean (SD)	t-statistic
Family and Peers (continued)		Medii (55)	mean (OD)	t Statistic
Has a family member who has had problems with drugs/alcohol	324	0.64 (0.48)	0.57 (0.50)	1.23
Had a friend (before incarceration) who has been convicted of a crime	311	0.88 (0.32)	0.82 (0.39)	1.71
Had a friend (before incarceration) who has been in a correctional facility	318	0.78 (0.41)	0.81 (0.40)	-0.55
Had a friend (before incarceration) who has had problems with drugs or alcohol	319	0.71 (0.45)	0.67 (0.47)	0.76
Physical and Mental Health				
Physical health scale (>better)	333	53.39 (7.88)	54.96 (6.20)	-1.99
Mental health scale (>better)	333	49.63 (9.03)	49.53 (9.66)	0.09
Received treatment for mental health problem before this period of confinement	333	0.25 (0.44)	0.29 (0.46)	-0.82
Global Severity Index (45–225: >worse)	337	64.03 (20.69)	62.04 (17.66)	0.94
Positive Symptom Total (0–45: >worse)	337	11.85 (9.84)	10.34 (9.15)	1.46
Anxiety Scale (5–25: >worse)	336	6.57 (2.43)	6.41 (2.18)	0.61
Depression Scale (5–25: >worse)	336	7.76 (3.51)	7.33 (3.08)	1.20
Hostility Scale (5–25: >worse)	336	6.79 (2.54)	7.28 (3.17)	-1.57
Interpersonal Sensitivity Scale (5–25: >worse)	336	7.01 (2.99)	6.93 (2.80)	0.26
Obsessive-Compulsive Scale (5–25: >worse)	336	8.13 (3.56)	7.80 (3.23)	0.88
Paranoid Ideation Scale (5–25: >worse)	336	8.55 (3.52)	8.26 (3.30)	0.78
Phobic Anxiety Scale (5–25: >worse)	337	6.07 (2.33)	5.62 (1.41)	2.09
Psychoticism Scale (5–25: >worse)	337	6.49 (2.01)	6.05 (1.81)	2.14
Somatization Scale (5–25: >worse)	337	6.68 (2.61)	6.39 (2.15)	1.10
No physical health–related limitations	337	0.51 (0.50)	0.52 (0.50)	-0.32
Ever had asthma	337	0.15 (0.36)	0.23 (0.42)	-1.90
Currently has asthma	335	0.09 (0.29)	0.13 (0.34)	-1.08
Receiving treatment for asthma	38	0.43 (0.51)	0.58 (0.50)	-0.91
Taking prescription for asthma	38	0.43 (0.51)	0.71 (0.46)	-1.72
Ever had diabetes	337	0.02 (0.14)	0.00 (0.00)	1.74
Currently has diabetes	337	0.01 (0.11)	0.00 (0.00)	1.42
Ever had heart trouble	337	0.03 (0.18)	0.04 (0.20)	-0.49
Currently has heart trouble	337	0.02 (0.14)	0.02 (0.13)	0.24
Receiving treatment for heart trouble	6	0.33 (0.58)	0.67 (0.58)	-0.71
Taking prescription for heart trouble	6	0.00 (0.00)	0.33 (0.58)	-1.00
Ever had high blood pressure	337	0.05 (0.22)	0.04 (0.20)	0.40
Currently has high blood pressure	335	0.02 (0.14)	0.01 (0.10)	0.66
Receiving treatment for high blood pressure	5	0.67 (0.58)	0.50 (0.71)	0.29

Exhibit A-2. Respondent characteristics, by group (continued)

		SVORI	Non-SVORI	4 -4-4:-4:
Characteristic	N	Mean (SD)	Mean (SD)	t-statistic
Physical and Mental Health (continued)		0.07 (0.50)	0.50 (0.54)	2.22
Taking prescription for high blood pressure	5	0.67 (0.58)	0.50 (0.71)	0.29
Ever had arthritis	337	0.02 (0.14)	0.02 (0.13)	0.24
Currently has arthritis	337	0.01 (0.11)	0.01 (0.10)	0.20
Taking prescription for arthritis	4	0.50 (0.71)	0.00 (0.00)	1.00
Ever had chronic back pain	337	0.10 (0.30)	0.06 (0.24)	1.31
Currently has chronic back pain	337	0.09 (0.28)	0.05 (0.23)	1.12
Receiving treatment for chronic back pain	23	0.15 (0.38)	0.30 (0.48)	-0.82
Taking prescription for chronic back pain	23	0.08 (0.28)	0.20 (0.42)	-0.84
Ever had tuberculosis	337	0.01 (0.11)	0.02 (0.13)	-0.23
Tuberculosis is currently active	336	0.00 (0.00)	0.01 (0.07)	-1.00
Ever diagnosed as being HIV-positive or having AIDS	337	0.00 (0.00)	0.00 (0.00)	_
Ever had hepatitis B or C	335	0.00 (0.00)	0.01 (0.07)	-1.00
Currently has hepatitis B or C	335	0.00 (0.00)	0.00 (0.00)	_
Wears glasses or corrective lenses	337	0.31 (0.46)	0.21 (0.41)	2.07
Needs eyeglasses	251	0.18 (0.39)	0.18 (0.38)	0.06
Currently uses a hearing aid	337	0.00 (0.00)	0.01 (0.07)	-1.00
Needs a hearing aid	335	0.01 (0.08)	0.00 (0.00)	1.00
Ever received care for mental health or alcohol/drug problems	337	0.53 (0.50)	0.48 (0.50)	0.95
Ever received care for: Alcohol abuse/dependence	167	0.19 (0.39)	0.20 (0.40)	-0.13
Ever received care for: anxiety	167	0.04 (0.19)	0.01 (0.11)	1.07
Ever received care for: attention-deficit/ hyperactivity disorder	167	0.21 (0.41)	0.22 (0.42)	-0.09
Ever received care for: bipolar disorder	167	0.08 (0.27)	0.06 (0.23)	0.45
Ever received care for: conduct disorder	167	0.03 (0.16)	0.03 (0.18)	-0.36
Ever received care for: depression/dysthymia	167	0.19 (0.39)	0.13 (0.39)	1.08
Ever received care for: drug use/dependence	167	0.25 (0.44)	0.28 (0.45)	-0.38
Ever received care for: obsessive- compulsive disorder	167	0.01 (0.11)	0.00 (0.00)	1.00
Ever received care for: oppositional defiant disorder	167	0.00 (0.00)	0.00 (0.00)	_
Ever received care for: posttraumatic stress disorder	167	0.04 (0.19)	0.02 (0.15)	0.54
Ever received care for: phobia (social or specific)	167	0.00 (0.00)	0.00 (0.00)	_
Ever received care for: schizophrenia	167	0.01 (0.11)	0.00 (0.00)	1.00

Exhibit A-2. Respondent characteristics, by group (continued)

Characteristic	N	SVORI Mean (SD)	Non-SVORI Mean (SD)	t-statistic
Physical and Mental Health (continued)	N	Mean (SD)	Mean (SD)	เ-รเสแรแน
Ever received care for: other				
problem/diagnosis	167	0.14 (0.35)	0.03 (0.18)	2.37
Did not receive care for problem/no	167	0.28 (0.45)	0.34 (0.48)	-0.97
diagnosis	107	0.20 (0.43)	0.54 (0.40)	0.91
Currently receiving treatment: alcohol use/dependence	116	0.14 (0.35)	0.16 (0.37)	-0.26
Currently receiving treatment: anxiety				
disorder	116	0.02 (0.13)	0.02 (0.13)	0.00
Currently receiving treatment: attention-	116	0.10 (0.31)	0.14 (0.35)	-0.57
deficit/hyperactivity disorder		0.10 (0.01)	0.11 (0.00)	0.07
Currently receiving treatment: bipolar disorder	116	0.03 (0.18)	0.03 (0.18)	0.00
Currently receiving treatment: conduct				
disorder	116	0.00 (0.00)	0.02 (0.13)	-1.00
Currently receiving treatment:	116	0.07 (0.26)	0.07 (0.26)	0.00
depression/dysthymia		0.07 (0.20)	0.07 (0.20)	
Currently receiving treatment: drug abuse/dependence	116	0.19 (0.40)	0.21 (0.41)	-0.23
Currently receiving treatment: obsessive-				
compulsive disorder	116	0.00 (0.00)	0.00 (0.00)	_
Currently receiving treatment: oppositional	116	0.00 (0.00)	0.00 (0.00)	_
defiant disorder				
Currently receiving treatment: posttraumatic stress disorder	116	0.02 (0.13)	0.00 (0.00)	1.00
Currently receiving treatment: phobia	110	0.00.(0.00)	0.00.(0.00)	
(social or specific)	116	0.00 (0.00)	0.00 (0.00)	_
Currently receiving treatment:	116	0.00 (0.00)	0.00 (0.00)	
schizophrenia  Currently receiving treatment: other		, ,	,	
problem/diagnosis	116	0.05 (0.22)	0.00 (0.00)	1.76
Currently not receiving treatment for any	116	0.55 (0.50)	0.53 (0.50)	0.18
condition	110	0.55 (0.50)	0.55 (0.50)	0.16
Doctor prescribed medication for	226	0.19 (0.30)	0.15 (0.36)	0.70
emotional/psychological problem during this period of confinement	336	0.18 (0.39)	0.15 (0.36)	0.78
Received the prescribed medication	56	1.00 (0.00)	0.96 (0.19)	1.00
Any victimization (6 months before	337	0.70 (0.46)	0.63 (0.48)	1.25
confinement)	J31	0.70 (0.40)	0.03 (0.40)	1.20
Victimization frequency/severity before confinement (0–30: >worse)	337	4.64 (5.70)	5.44 (6.74)	-1.18
Substance Use				
Ever drank any type of alcoholic beverage	337	0.91 (0.29)	0.83 (0.37)	2.08
Age at first drink	284	12.17 (3.01)	12.46 (3.14)	-0.80
		:=::: (0.01)	:=::: (0:::/)	J.00

Exhibit A-2. Respondent characteristics, by group (continued)

Characteristic	N	SVORI Mean (SD)	Non-SVORI Mean (SD)	t-statistic
Substance Use (continued)	IN	Wealt (SD)	Weatt (3D)	เ-รเสแรแน
Used alcohol 30 days before this period of				
confinement	335	0.55 (0.50)	0.49 (0.50)	1.22
Age at last drink if no alcohol 30 days prior	119	14.96 (1.66)	14.80 (2.38)	0.45
Ever used drugs	337	0.88 (0.33)	0.87 (0.34)	0.13
Number of drugs used in lifetime	337	2.19 (2.15)	2.11 (2.39)	0.33
Used drugs 30 days before this period of confinement	337	0.59 (0.49)	0.61 (0.49)	-0.35
Number of drugs used 30 days before this period of confinement	337	1.03 (1.29)	1.09 (1.54)	-0.43
Used drugs other than marijuana and steroids 30 days before this period of confinement	337	0.45 (0.50)	0.36 (0.48)	1.59
Ever used sedatives	336	0.11 (0.32)	0.14 (0.35)	-0.76
Age first used sedatives	43	14.71 (2.05)	14.42 (1.39)	0.54
Used sedatives 30 days before this period of confinement	336	0.05 (0.22)	0.05 (0.23)	-0.04
Age last used sedatives	25	16.33 (1.66)	15.38 (1.02)	1.80
Ever used tranquilizers	337	0.16 (0.37)	0.14 (0.35)	0.61
Age first used tranquilizers	49	14.08 (2.64)	14.36 (1.80)	-0.43
Used tranquilizers 30 days before this period of confinement	337	0.06 (0.24)	0.08 (0.27)	-0.78
Age last used tranquilizers	25	15.27 (1.58)	15.20 (1.03)	0.12
Ever used stimulants	337	0.08 (0.27)	0.10 (0.30)	-0.75
Age first used stimulants	31	13.58 (3.18)	14.00 (1.83)	-0.41
Used stimulants 30 days before this period of confinement	337	0.01 (0.11)	0.04 (0.19)	-1.46
Age last used stimulants	22	15.50 (0.85)	15.67 (0.89)	-0.45
Ever used pain relievers	337	0.14 (0.35)	0.17 (0.37)	-0.57
Age first used pain relievers	52	14.36 (1.97)	14.77 (1.97)	-0.83
Used pain relievers 30 days before this period of confinement	337	0.07 (0.25)	0.05 (0.22)	0.68
Age last used pain relievers	32	16.00 (0.77)	15.95 (1.02)	0.14
Ever used methadone	336	0.01 (0.08)	0.03 (0.16)	-1.49
Age first used methadone	6	16.00 (.)	15.20 (0.84)	_
Used methadone 30 days before this period of confinement	336	0.00 (0.00)	0.01 (0.10)	-1.42
Age last used methadone	4	17.00 (.)	16.67 (0.58)	_
Ever used anabolic steroids	337	0.01 (0.08)	0.01 (0.07)	0.14
Age first used anabolic steroids	2	15.00 (.)	14.00 (.)	_
Used anabolic steroids 30 days before this period of confinement	337	0.00 (0.00)	0.00 (0.00)	_
Age last used anabolic steroids	2	16.00 (.)	14.00 (.)	_
			` '	

Exhibit A-2. Respondent characteristics, by group (continued)

		SVORI	Non-SVORI	
Characteristic	N	Mean (SD)	Mean (SD)	t-statistic
Substance Use (continued)	007	40.40.(0.00)	40.50 (0.40)	4.00
Age first used marijuana	287	12.18 (2.06)	12.50 (2.12)	-1.26
Used marijuana 30 days before this period of confinement	335	0.58 (0.49)	0.59 (0.49)	-0.08
Age last used marijuana	94	14.82 (1.19)	14.72 (1.83)	0.31
Ever used hallucinogens	336	0.30 (0.46)	0.19 (0.39)	2.44
Age first used hallucinogens	81	14.70 (1.62)	14.74 (1.34)	-0.14
Used hallucinogens 30 days before this period of confinement	335	0.08 (0.27)	0.06 (0.25)	0.53
Age last used hallucinogens	57	15.50 (1.40)	15.48 (1.16)	0.06
Ever used cocaine	337	0.25 (0.43)	0.26 (0.44)	-0.20
Age first used cocaine	85	14.73 (1.63)	14.94 (1.29)	-0.66
Used cocaine 30 days before this period of confinement	337	0.10 (0.30)	0.14 (0.34)	-1.03
Age last used cocaine	46	15.65 (1.30)	15.39 (1.23)	0.70
Ever used heroin	337	0.03 (0.18)	0.04 (0.19)	-0.24
Age first used heroin	12	16.80 (1.92)	16.14 (0.90)	0.80
Used heroin 30 days before this period of confinement	337	0.01 (0.11)	0.02 (0.13)	-0.23
Age last used heroin	7	15.67 (0.58)	16.00 (0.82)	-0.60
Ever used amphetamines	337	0.10 (0.30)	0.11 (0.31)	-0.28
Age first used amphetamines	35	14.60 (1.30)	15.35 (1.31)	-1.68
Used amphetamines 30 days before this period of confinement	337	0.05 (0.21)	0.05 (0.23)	-0.33
Age last used amphetamines	18	15.13 (0.83)	15.90 (0.74)	-2.09
Ever used inhalants	337	0.12 (0.32)	0.08 (0.27)	1.31
Age first used inhalants	32	14.28 (2.30)	13.71 (1.94)	0.74
Used inhalants 30 days before this period of confinement	336	0.02 (0.14)	0.01 (0.07)	1.15
Age last used inhalants	28	15.13 (1.30)	14.92 (1.04)	0.47
Received alcohol/drug treatment before this period of confinement	336	0.32 (0.47)	0.24 (0.43)	0.15
<b>Current Confinement and Delinquency History</b>	y <sup>a</sup>			
Duration of confinement at Wave 1 interview (years)	337	1.87 (7.27)	1.05 (.057)	1.39
Wave 1 adjudicated offense(s) category: Person/violent crime	335	0.45 (0.50)	0.46 (0.50)	-0.21
Robbery	335	0.14 (0.35)	0.11 (0.31)	0.80
Assault	335	0.21 (0.41)	0.29 (0.45)	-1.66
Lethal crime	335	0.01 (0.08)	0.01 (0.07)	0.13
Cov offense	225	0.40 (0.20)	0.00 (0.04)	1 20
Sex offense	335	0.10 (0.30)	0.06 (0.24)	1.29

Exhibit A-2. Respondent characteristics, by group (continued)

Characteristic	N	SVORI	Non-SVORI	t etatiatia
Characteristic  Current Confinement and Delinquency History		Mean (SD)	Mean (SD)	t-statistic
Wave 1 adjudicated offense(s) category:		inueu)		
Property crime	335	0.46 (0.50)	0.49 (0.50)	-0.47
Burglary	335	0.30 (0.46)	0.25 (0.43)	0.91
Theft	335	0.09 (0.29)	0.16 (0.37)	-1.85
Car theft	335	0.16 (0.37)	0.18 (0.39)	-0.38
Fraud/forgery	335	0.01 (0.11)	0.01 (0.07)	0.71
Other property crime	335	0.05 (0.22)	0.07 (0.25)	-0.50
Wave 1 adjudicated offense(s) category: drug crime	335	0.11 (0.31)	0.19 (0.39)	-2.24
Drug dealing/manufacturing	335	0.01 (0.08)	0.06 (0.24)	-2.85
Drug possession	335	0.10 (0.30)	0.19 (0.39)	-2.31
Other drug offense	335	0.00 (0.00)	0.00 (0.00)	
Wave 1 adjudicated offense(s) category: Public-order crime	335	0.20 (0.40)	0.32 (0.47)	-2.64
Wave 1 adjudicated offense(s) category: other crime	335	0.01 (0.11)	0.00 (0.00)	1.42
Currently confined for probation or parole violation	337	0.50 (0.50)	0.45 (0.50)	0.94
Currently confined for probation violation	337	0.13 (0.33)	0.13 (0.34)	-0.13
Currently confined for parole violation	337	0.38 (0.49)	0.32 (0.47)	1.08
Parole violation: technical violation	135	0.45 (0.50)	0.43 (0.50)	0.25
Parole violation: new crime	135	0.57 (0.50)	0.57 (0.50)	-0.07
Age at first arrest	331	12.85 (1.99)	13.19 (1.96)	<b>−</b> 1.59
Number of lifetime arrests	318	5.67 (4.80)	6.61 (4.77)	-1.72
Number of lifetime adjudications	327	2.90 (2.48)	3.25 (2.80)	-1.16
Ever confined in a juvenile correctional facility for committing a crime	337	0.88 (0.33)	0.93 (0.26)	-1.67
Number of times confined in a juvenile facility (only those who reported ever being confined)	327	2.97 (2.64)	3.65 (2.77)	-2.27
Ever been in jail/prison more than 24 hours at one time	337	0.60 (0.49)	0.48 (0.50)	2.16
Any disciplinary infractions during this period of confinement	334	0.60 (0.49)	0.56 (0.50)	0.71
One disciplinary infraction during this period of confinement	334	0.07 (0.26)	0.10 (0.31)	-1.00
Two or more disciplinary infractions during this period of confinement	334	0.52 (0.50)	0.45 (0.50)	1.27
Placed in administrative segregation during this period of confinement	334	0.43 (0.50)	0.35 (0.48)	1.54

Exhibit A-2. Respondent characteristics, by group (continued)

Characteristic	N	SVORI Mean (SD)	Non-SVORI Mean (SD)	t-statistic
<b>Current Confinement and Delinquency His</b>	tory <sup>a</sup> (cor	ntinued)		
Current gang member	336	0.13 (0.33)	0.14 (0.35)	-0.39
Considers gang to be family	45	0.53 (0.51)	0.58 (0.50)	-0.33
Relatives are members of the gang	45	0.74 (0.45)	0.42 (0.50)	2.15
Any perpetration of violence (6 months before confinement)	336	0.79 (0.41)	0.70 (0.46)	1.84

Note: GED = General Education Development credential.

<sup>&</sup>lt;sup>a</sup>Results for Wave 1 Adjudicated Offenses may not sum to 100% because some respondents reported being adjudicated for multiple offenses.

Exhibit A-3. Proportion of respondents who reported needing specific services, by group

Service	N	SVORI Mean (SD)	Non-SVORI Mean (SD)	t-statistic
Transition services				
Legal assistance	324	0.60 (0.49)	0.51 (0.50)	1.52
Financial assistance	334	0.50 (0.50)	0.48 (0.50)	0.41
Public financial assistance	333	0.21 (0.41)	0.24 (0.43)	-0.68
Public health care insurance	330	0.53 (0.50)	0.55 (0.50)	-0.28
Mentor	337	0.62 (0.49)	0.59 (0.49)	0.44
Documents for employment	332	0.54 (0.50)	0.51 (0.50)	0.54
Place to live	336	0.26 (0.44)	0.28 (0.45)	-0.53
Transportation	336	0.65 (0.48)	0.62 (0.49)	0.60
Driver's license	317	0.90 (0.30)	0.91 (0.28)	-0.45
Access to clothing/food banks	335	0.40 (0.49)	0.35 (0.48)	0.95
Health Services				
Medical treatment	337	0.45 (0.50)	0.48 (0.50)	-0.50
Mental health treatment	337	0.23 (0.42)	0.20 (0.40)	0.67
Substance use treatment	337	0.30 (0.46)	0.35 (0.48)	-1.08
Victims' group for abuse	336	0.05 (0.21)	0.03 (0.18)	0.62
Anger management program	336	0.47 (0.50)	0.58 (0.49)	-1.98
Employment/Education/Skills Services				
Job	337	0.87 (0.34)	0.86 (0.34)	0.10
Job training	337	0.89 (0.31)	0.88 (0.33)	0.54
More education	337	0.93 (0.25)	0.95 (0.23)	-0.45
Money management skills	336	0.62 (0.49)	0.64 (0.48)	-0.33
Life skills	336	0.76 (0.43)	0.68 (0.47)	1.45
Work on personal relationships	337	0.58 (0.50)	0.54 (0.48)	0.80
Change attitudes on criminal behavior	337	0.66 (0.47)	0.76 (0.43)	-1.99
Domestic Violence Services				
Batterer intervention program	337	0.06 (0.24)	0.06 (0.24)	-0.01
Domestic violence support group	334	0.09 (0.28)	0.08 (0.28)	0.14
Child Services				
Child support payments	30	0.25 (0.45)	0.14 (0.36)	0.71
Modification of child support debt	1	<del>_</del>	1.00 (.)	<u> </u>
Modification of child custody	27	0.21 (0.43)	0.23 (0.44)	-0.10
Parenting skills	30	0.56 (0.51)	0.43 (0.51)	0.71
Child care	29	0.20 (0.41)	0.21 (0.43)	-0.09

Exhibit A-4. Proportion of respondents who reported receiving specific services, by group

Variable Label         N         SVORI         SVORI         L-statistic           Coordination Services         Received needs assessment         328         0.83 (0.38)         0.78 (0.41)         1.08           Received needs assessment         326         0.46 (0.50)         0.43 (0.50)         0.56           Met with case manager         336         0.90 (0.30)         0.88 (0.33)         0.76           Developed reentry plan         317         0.55 (0.50)         0.41 (0.49)         2.27           Received help to access case/social worker         329         0.26 (0.44)         0.24 (0.43)         0.28           Received help to access case/social worker         329         0.26 (0.44)         0.24 (0.43)         0.28           Met with caseworker or social worker         333         0.42 (0.49)         0.30 (0.46)         2.19           Transition services         Participated in programs to prepare for release         333         0.65 (0.48)         0.54 (0.50)         2.05           Took class specifically for release         335         0.43 (0.50)         0.42 (0.49)         0.31           Received legal assistance accessing public financial assistance         336         0.09 (0.29)         0.07 (0.26)         0.75           Received assistance accessing public health care assistance find	Exhibit A 4. Proportion of respondents who reported			Non-	
Received needs assessment   328   0.83 (0.38)   0.78 (0.41)   1.08	Variable Label	N	SVORI		t-statistic
Received release-specific needs assessment   326					
Met with case manager   336   0.90 (0.30)   0.88 (0.33)   0.76	Received needs assessment	328	0.83 (0.38)	0.78 (0.41)	1.08
Developed reentry plan   317   0.55 (0.50)   0.41 (0.49)   2.47	Received release-specific needs assessment	326	0.46 (0.50)	0.43 (0.50)	0.56
Worked with anyone to plan for release         335         0.78 (0.41)         0.65 (0.48)         2.72           Received help to access case/social worker         329         0.26 (0.44)         0.24 (0.43)         0.28           Met with caseworker or social worker         333         0.42 (0.49)         0.30 (0.46)         2.19           Transition services         Participated in programs to prepare for release         333         0.65 (0.48)         0.54 (0.50)         2.05           Took class specifically for release         335         0.43 (0.50)         0.42 (0.49)         0.31           Received legal assistance         336         0.43 (0.50)         0.42 (0.49)         0.31           Received assistance accessing financial assistance         336         0.09 (0.29)         0.07 (0.26)         0.75           Received assistance accessing public financial assistance         337         0.03 (0.18)         0.02 (0.13)         0.97           Received assistance accessing public health care assistance         337         0.39 (0.49)         0.39 (0.49)         0.39 (0.49)         0.00           Received mentoring services         337         0.39 (0.49)         0.39 (0.49)         0.00         Received assistance obtaining documents         334         0.20 (0.40)         0.18 (0.38)         0.48           Rec	Met with case manager	336	0.90 (0.30)	0.88 (0.33)	0.76
Received help to access case/social worker   329   0.26 (0.44)   0.24 (0.43)   0.28	Developed reentry plan	317	0.55 (0.50)	0.41 (0.49)	2.47
Met with caseworker or social worker   333	Worked with anyone to plan for release	335	0.78 (0.41)	0.65 (0.48)	2.72
Transition services         Participated in programs to prepare for release         333         0.65 (0.48)         0.54 (0.50)         2.05           Took class specifically for release         335         0.43 (0.50)         0.42 (0.49)         0.31           Received lassistance         331         0.24 (0.43)         0.20 (0.40)         0.96           Received assistance accessing financial assistance         336         0.09 (0.29)         0.07 (0.26)         0.75           Received assistance accessing public financial assistance         337         0.03 (0.18)         0.02 (0.13)         0.97           Received assistance accessing public health care assistance         335         0.10 (0.30)         0.17 (0.38)         -2.01           Received assistance obtaining documents         334         0.20 (0.40)         0.18 (0.38)         0.48           Received assistance obtaining documents         334         0.20 (0.40)         0.18 (0.38)         0.48           Received assistance finding transportation         337         0.39 (0.49)         0.39 (0.49)         0.00           Received assistance getting driver's license         318         0.18 (0.38)         0.16 (0.37)         0.45           Received assistance accessing clothing/food banks         37         0.11 (0.31)         0.05 (0.23)         1.71	Received help to access case/social worker	329	0.26 (0.44)	0.24 (0.43)	0.28
Participated in programs to prepare for release   333   0.65 (0.48)   0.54 (0.50)   2.05	Met with caseworker or social worker	333	0.42 (0.49)	0.30 (0.46)	2.19
Took class specifically for release   335   0.43 (0.50)   0.42 (0.49)   0.31	Transition services				
Received legal assistance         331         0.24 (0.43)         0.20 (0.40)         0.96           Received assistance accessing financial assistance         336         0.09 (0.29)         0.07 (0.26)         0.75           Received assistance accessing public financial assistance         337         0.03 (0.18)         0.02 (0.13)         0.97           Received assistance accessing public health care assistance         335         0.10 (0.30)         0.17 (0.38)         -2.01           Received mentoring services         337         0.39 (0.49)         0.39 (0.49)         0.00           Received assistance obtaining documents         334         0.20 (0.40)         0.18 (0.38)         0.48           Received assistance finding transportation         337         0.30 (0.46)         0.19 (0.40)         2.31           Received assistance finding place to live         337         0.30 (0.46)         0.19 (0.40)         2.31           Received assistance accessing clothing/food banks         337         0.11 (0.31)         0.05 (0.23)         1.71           Health Services         36         0.73 (0.45)         0.68 (0.47)         0.91           Received assistance accessing clothing/food banks         36         0.73 (0.45)         0.68 (0.47)         0.91           Health Services         336 <td< td=""><td>Participated in programs to prepare for release</td><td>333</td><td>0.65 (0.48)</td><td>0.54 (0.50)</td><td>2.05</td></td<>	Participated in programs to prepare for release	333	0.65 (0.48)	0.54 (0.50)	2.05
Received assistance accessing financial assistance   336   0.09 (0.29)   0.07 (0.26)   0.75	Took class specifically for release	335	0.43 (0.50)	0.42 (0.49)	0.31
Received assistance accessing public financial assistance   337   0.03 (0.18)   0.02 (0.13)   0.97	Received legal assistance	331	0.24 (0.43)	0.20 (0.40)	0.96
Received assistance accessing public health care assistance         335         0.10 (0.30)         0.17 (0.38)         -2.01           Received mentoring services         337         0.39 (0.49)         0.39 (0.49)         0.00           Received assistance obtaining documents         334         0.20 (0.40)         0.18 (0.38)         0.48           Received assistance finding transportation         337         0.22 (0.42)         0.17 (0.37)         1.30           Received assistance finding place to live         337         0.30 (0.46)         0.19 (0.40)         2.31           Received assistance getting driver's license         318         0.18 (0.38)         0.16 (0.37)         0.45           Received assistance accessing clothing/food banks         337         0.11 (0.31)         0.05 (0.23)         1.71           Health Services         336         0.73 (0.45)         0.68 (0.47)         0.91           Received any medical treatment         336         0.73 (0.45)         0.68 (0.47)         0.91           Received preventive medical services         336         0.47 (0.50)         0.53 (0.50)         -0.97           Received medical treatment for physical health problems         335         0.45 (0.50)         0.46 (0.50)         -0.19           Received information on accessing physical health care in communi	Received assistance accessing financial assistance	336	0.09 (0.29)	0.07 (0.26)	0.75
Received mentoring services   337   0.39 (0.49)   0.39 (0.49)   0.00	<u> </u>	337	0.03 (0.18)	0.02 (0.13)	0.97
Received assistance obtaining documents         334         0.20 (0.40)         0.18 (0.38)         0.48           Received assistance finding transportation         337         0.22 (0.42)         0.17 (0.37)         1.30           Received assistance finding place to live         337         0.30 (0.46)         0.19 (0.40)         2.31           Received assistance getting driver's license         318         0.18 (0.38)         0.16 (0.37)         0.45           Received assistance accessing clothing/food banks         337         0.11 (0.31)         0.05 (0.23)         1.71           Health Services         360         0.73 (0.45)         0.68 (0.47)         0.91           Received any medical treatment         336         0.47 (0.50)         0.53 (0.50)         -0.97           Received preventive medical services         336         0.54 (0.50)         0.43 (0.50)         1.92           Received medical treatment for physical health problems         335         0.45 (0.50)         0.46 (0.50)         -0.19           Received prescription medicine         336         0.44 (0.50)         0.39 (0.49)         1.02           Received information on accessing physical health care in community         336         0.25 (0.44)         0.31 (0.47)         -1.25           Received any mental health treatment for emotional pro		335	0.10 (0.30)	0.17 (0.38)	-2.01
Received assistance finding transportation         337         0.22 (0.42)         0.17 (0.37)         1.30           Received assistance finding place to live         337         0.30 (0.46)         0.19 (0.40)         2.31           Received assistance getting driver's license         318         0.18 (0.38)         0.16 (0.37)         0.45           Received assistance accessing clothing/food banks         337         0.11 (0.31)         0.05 (0.23)         1.71           Health Services         Received any medical treatment         336         0.73 (0.45)         0.68 (0.47)         0.91           Received dental services         336         0.47 (0.50)         0.53 (0.50)         -0.97           Received preventive medical services         336         0.54 (0.50)         0.43 (0.50)         1.92           Received medical treatment for physical health problems         335         0.45 (0.50)         0.46 (0.50)         -0.19           Received information on accessing physical health care in community         336         0.44 (0.50)         0.39 (0.49)         1.02           Received any mental health treatment for emotional problems         336         0.25 (0.44)         0.31 (0.47)         -1.25           Received group counseling for mental/emotional problems         336         0.19 (0.39)         0.24 (0.43)         -1.28 <td>Received mentoring services</td> <td>337</td> <td>0.39 (0.49)</td> <td>0.39 (0.49)</td> <td>0.00</td>	Received mentoring services	337	0.39 (0.49)	0.39 (0.49)	0.00
Received assistance finding place to live         337         0.30 (0.46)         0.19 (0.40)         2.31           Received assistance getting driver's license         318         0.18 (0.38)         0.16 (0.37)         0.45           Received assistance accessing clothing/food banks         337         0.11 (0.31)         0.05 (0.23)         1.71           Health Services           Received any medical treatment         336         0.73 (0.45)         0.68 (0.47)         0.91           Received dental services         336         0.47 (0.50)         0.53 (0.50)         -0.97           Received preventive medical services         336         0.54 (0.50)         0.43 (0.50)         1.92           Received medical treatment for physical health problems         335         0.45 (0.50)         0.46 (0.50)         -0.19           Received prescription medicine         336         0.44 (0.50)         0.39 (0.49)         1.02           Received information on accessing physical health care in community         336         0.25 (0.44)         0.31 (0.47)         -1.25           Received any mental health treatment for emotional problems         336         0.19 (0.39)         0.24 (0.43)         -1.28           Received group counseling for mental/emotional problems         336         0.19 (0.39)         0.19 (0.39)	Received assistance obtaining documents	334	0.20 (0.40)	0.18 (0.38)	0.48
Received assistance getting driver's license         318         0.18 (0.38)         0.16 (0.37)         0.45           Received assistance accessing clothing/food banks         337         0.11 (0.31)         0.05 (0.23)         1.71           Health Services           Received any medical treatment         336         0.73 (0.45)         0.68 (0.47)         0.91           Received dental services         336         0.47 (0.50)         0.53 (0.50)         -0.97           Received preventive medical services         336         0.54 (0.50)         0.43 (0.50)         1.92           Received medical treatment for physical health problems         335         0.45 (0.50)         0.46 (0.50)         -0.19           Received prescription medicine         336         0.44 (0.50)         0.39 (0.49)         1.02           Received information on accessing physical health care in community         334         0.23 (0.42)         0.17 (0.38)         1.29           Received any mental health treatment for emotional problems         336         0.25 (0.44)         0.31 (0.47)         -1.25           Received individual counseling for mental/emotional problems         336         0.19 (0.39)         0.24 (0.43)         -1.28           Received group counseling for mental/emotional community         336         0.18 (0.38)         <	Received assistance finding transportation	337	0.22 (0.42)	0.17 (0.37)	1.30
Received assistance accessing clothing/food banks         337         0.11 (0.31)         0.05 (0.23)         1.71           Health Services           Received any medical treatment         336         0.73 (0.45)         0.68 (0.47)         0.91           Received dental services         336         0.47 (0.50)         0.53 (0.50)         -0.97           Received preventive medical services         336         0.54 (0.50)         0.43 (0.50)         1.92           Received medical treatment for physical health problems         335         0.45 (0.50)         0.46 (0.50)         -0.19           Received prescription medicine         336         0.44 (0.50)         0.39 (0.49)         1.02           Received information on accessing physical health care in community         334         0.23 (0.42)         0.17 (0.38)         1.29           Received any mental health treatment for emotional problems         336         0.25 (0.44)         0.31 (0.47)         -1.25           Received individual counseling for mental/emotional problems         336         0.19 (0.39)         0.24 (0.43)         -1.28           Received group counseling for mental/emotional problems         336         0.19 (0.39)         0.19 (0.39)         -0.09           Received information on accessing mental health care in community         335         0.18	Received assistance finding place to live	337	0.30 (0.46)	0.19 (0.40)	2.31
Health Services           Received any medical treatment         336         0.73 (0.45)         0.68 (0.47)         0.91           Received dental services         336         0.47 (0.50)         0.53 (0.50)         -0.97           Received preventive medical services         336         0.54 (0.50)         0.43 (0.50)         1.92           Received medical treatment for physical health problems         335         0.45 (0.50)         0.46 (0.50)         -0.19           Received prescription medicine         336         0.44 (0.50)         0.39 (0.49)         1.02           Received information on accessing physical health care in community         334         0.23 (0.42)         0.17 (0.38)         1.29           Received any mental health treatment for emotional problems         336         0.25 (0.44)         0.31 (0.47)         -1.25           Received individual counseling for mental/emotional problems         336         0.19 (0.39)         0.24 (0.43)         -1.28           Received group counseling for mental/emotional problems         336         0.19 (0.39)         0.19 (0.39)         -0.09           Received information on accessing mental health care in community         335         0.18 (0.38)         0.15 (0.36)         0.65           Received any substance use treatment         337         0.40 (0.49)		318	0.18 (0.38)	0.16 (0.37)	0.45
Received any medical treatment         336         0.73 (0.45)         0.68 (0.47)         0.91           Received dental services         336         0.47 (0.50)         0.53 (0.50)         -0.97           Received preventive medical services         336         0.54 (0.50)         0.43 (0.50)         1.92           Received medical treatment for physical health problems         335         0.45 (0.50)         0.46 (0.50)         -0.19           Received prescription medicine         336         0.44 (0.50)         0.39 (0.49)         1.02           Received information on accessing physical health care in community         334         0.23 (0.42)         0.17 (0.38)         1.29           Received any mental health treatment for emotional problems         336         0.25 (0.44)         0.31 (0.47)         -1.25           Received individual counseling for mental/emotional problems         336         0.19 (0.39)         0.24 (0.43)         -1.28           Received group counseling for mental/emotional problems         336         0.19 (0.39)         0.19 (0.39)         -0.09           Received information on accessing mental health care in community         335         0.18 (0.38)         0.15 (0.36)         0.65           Received any substance use treatment         337         0.60 (0.49)         0.28 (0.45)         0.28 (0.45)		337	0.11 (0.31)	0.05 (0.23)	1.71
Received dental services         336         0.47 (0.50)         0.53 (0.50)         -0.97           Received preventive medical services         336         0.54 (0.50)         0.43 (0.50)         1.92           Received medical treatment for physical health problems         335         0.45 (0.50)         0.46 (0.50)         -0.19           Received prescription medicine         336         0.44 (0.50)         0.39 (0.49)         1.02           Received information on accessing physical health care in community         334         0.23 (0.42)         0.17 (0.38)         1.29           Received any mental health treatment for emotional problems         336         0.25 (0.44)         0.31 (0.47)         -1.25           Received individual counseling for mental/emotional problems         336         0.19 (0.39)         0.24 (0.43)         -1.28           Received group counseling for mental/emotional problems         336         0.19 (0.39)         0.19 (0.39)         -0.09           Received information on accessing mental health care in community         335         0.18 (0.38)         0.15 (0.36)         0.65           Received any substance use treatment         337         0.60 (0.49)         0.57 (0.50)         0.48           Participated in Alcoholics Anonymous/Narcotics         336         0.40 (0.49)         0.28 (0.45)         2.42 <td>Health Services</td> <td></td> <td></td> <td></td> <td></td>	Health Services				
Received preventive medical services         336         0.54 (0.50)         0.43 (0.50)         1.92           Received medical treatment for physical health problems         335         0.45 (0.50)         0.46 (0.50)         -0.19           Received prescription medicine         336         0.44 (0.50)         0.39 (0.49)         1.02           Received information on accessing physical health care in community         334         0.23 (0.42)         0.17 (0.38)         1.29           Received any mental health treatment for emotional problems         336         0.25 (0.44)         0.31 (0.47)         -1.25           Received individual counseling for mental/emotional problems         336         0.19 (0.39)         0.24 (0.43)         -1.28           Received group counseling for mental/emotional problems         336         0.19 (0.39)         0.19 (0.39)         -0.09           Received information on accessing mental health care in community         335         0.18 (0.38)         0.15 (0.36)         0.65           Received any substance use treatment         337         0.60 (0.49)         0.57 (0.50)         0.48           Participated in Alcoholics Anonymous/Narcotics         336         0.40 (0.49)         0.28 (0.45)         2.42	Received any medical treatment		· , , ,		0.91
Received medical treatment for physical health problems 335 0.45 (0.50) 0.46 (0.50) -0.19  Received prescription medicine 336 0.44 (0.50) 0.39 (0.49) 1.02  Received information on accessing physical health care in community 334 0.23 (0.42) 0.17 (0.38) 1.29  Received any mental health treatment for emotional problems 336 0.25 (0.44) 0.31 (0.47) -1.25  Received individual counseling for mental/emotional problems 336 0.19 (0.39) 0.24 (0.43) -1.28  Received group counseling for mental/emotional problems 336 0.19 (0.39) 0.19 (0.39) -0.09  Received information on accessing mental health care in community 337 0.60 (0.49) 0.57 (0.50) 0.48  Participated in Alcoholics Anonymous/Narcotics 336 0.40 (0.49) 0.28 (0.45) 2.42	Received dental services		0.47 (0.50)	` ,	-0.97
Received prescription medicine  Received information on accessing physical health care in community  Received any mental health treatment for emotional problems  Received individual counseling for mental/emotional problems  Received group counseling for mental/emotional problems  Received information on accessing mental health care in community  Received any substance use treatment  336 0.44 (0.50) 0.39 (0.49) 1.02  337 0.23 (0.42) 0.17 (0.38) 1.29  338 0.25 (0.44) 0.31 (0.47) -1.25  339 0.19 (0.39) 0.24 (0.43) -1.28  330 0.19 (0.39) 0.19 (0.39) 0.19 (0.39) 0.19 (0.39)  330 0.19 (0.39) 0.19 (0.39) 0.19 (0.39) 0.19 (0.39)  331 0.18 (0.38) 0.15 (0.36) 0.15  332 0.40 (0.49) 0.57 (0.50) 0.48  333 0.40 (0.49) 0.28 (0.45) 2.42			0.54 (0.50)	0.43 (0.50)	1.92
Received information on accessing physical health care in community  Received any mental health treatment for emotional problems  Received individual counseling for mental/emotional problems  Received group counseling for mental/emotional problems  Received information on accessing mental health care in community  Received any substance use treatment  Participated in Alcoholics Anonymous/Narcotics  334  0.23 (0.42)  0.17 (0.38)  1.29  336  0.25 (0.44)  0.31 (0.47)  -1.25  336  0.19 (0.39)  0.24 (0.43)  -1.28  337  0.19 (0.39)  0.19 (0.39)  0.19 (0.39)  0.19 (0.39)  0.19 (0.39)  0.19 (0.39)  0.19 (0.39)  0.10 (0.39)  0.10 (0.39)  0.10 (0.39)  0.10 (0.39)  0.10 (0.39)  0.10 (0.39)  0.10 (0.39)  0.24 (0.43)  -1.28	. , ,		` '	` ,	
in community  Received any mental health treatment for emotional problems  Received individual counseling for mental/emotional problems  Received group counseling for mental/emotional problems  Received information on accessing mental health care in community  Received any substance use treatment  Participated in Alcoholics Anonymous/Narcotics  336 0.25 (0.44) 0.31 (0.47) -1.25  336 0.19 (0.39) 0.24 (0.43) -1.28  336 0.19 (0.39) 0.19 (0.39) 0.19 (0.39) -0.09  337 0.60 (0.49) 0.57 (0.50) 0.48	·	336	0.44 (0.50)	0.39 (0.49)	1.02
Participated in Alcoholics Anonymous/Narcotics  Received individual counseling for mental/emotional problems  336 0.25 (0.44) 0.31 (0.47) -1.25  336 0.25 (0.44) 0.31 (0.47) -1.25  336 0.19 (0.39) 0.24 (0.43) -1.28  336 0.19 (0.39) 0.19 (0.39) -0.09  337 0.18 (0.38) 0.15 (0.36) 0.65  338 0.40 (0.49) 0.57 (0.50) 0.48	in community	334	0.23 (0.42)	0.17 (0.38)	1.29
Participated in Alcoholics Anonymous/Narcotics  Received group counseling for mental/emotional problems  336 0.19 (0.39) 0.24 (0.43) -1.26  336 0.19 (0.39) 0.19 (0.39) -0.09  336 0.19 (0.39) 0.19 (0.39) -0.09  337 0.18 (0.38) 0.15 (0.36) 0.65  338 0.40 (0.49) 0.57 (0.50) 0.48	problems	336	0.25 (0.44)	0.31 (0.47)	-1.25
Received information on accessing mental health care in community   335   0.19 (0.39)   0.19 (0.39)   -0.09		336	0.19 (0.39)	0.24 (0.43)	-1.28
community       335       0.18 (0.38)       0.15 (0.36)       0.65         Received any substance use treatment       337       0.60 (0.49)       0.57 (0.50)       0.48         Participated in Alcoholics Anonymous/Narcotics       336       0.40 (0.49)       0.28 (0.45)       2.42		336	0.19 (0.39)	0.19 (0.39)	-0.09
Participated in Alcoholics Anonymous/Narcotics 336 0.40 (0.49) 0.28 (0.45) 2.42	· · · · · · · · · · · · · · · · · · ·	335	0.18 (0.38)	0.15 (0.36)	0.65
336 (1411/1149) (1287/145) 247	Received any substance use treatment	337	0.60 (0.49)	0.57 (0.50)	0.48
Anonymous	Participated in Alcoholics Anonymous/Narcotics Anonymous	336	0.40 (0.49)	0.28 (0.45)	2.42
Participated in drug education 337 0.53 (0.50) 0.50 (0.50) 0.43	Participated in drug education	337	0.53 (0.50)	0.50 (0.50)	0.43
Received group counseling for substance use problems 337 0.43 (0.50) 0.40 (0.49) 0.51	Received group counseling for substance use problems	337	0.43 (0.50)	0.40 (0.49)	0.51

Exhibit A-4. Proportion of respondents who reported receiving specific services, by group (continued)

Variable Label	N	SVORI	Non- SVORI	t-statistic
Health Services (continued)				
Received individual counseling for substance use problems	337	0.24 (0.43)	0.29 (0.45)	-1.03
Received residential treatment for substance use problems	332	0.10 (0.30)	0.12 (0.33)	-0.64
Received methadone	335	0.01 (0.08)	0.01 (0.07)	0.13
Received detox	336	0.02 (0.14)	0.02 (0.13)	0.24
Received information on accessing substance use treatment in community	337	0.42 (0.50)	0.29 (0.45)	2.60
Participated in groups for victims of abuse	337	0.07 (0.25)	0.05 (0.22)	0.68
Participated in anger management program	337	0.51 (0.50)	0.62 (0.49)	-2.13
Employment/Education/Skills Services				
Received any employment services	335	0.43 (0.50)	0.27 (0.45)	3.08
Participated in employment readiness program	334	0.21 (0.41)	0.11 (0.32)	2.28
Participated in job training program	335	0.23 (0.42)	0.15 (0.35)	1.97
Talked to potential employer	335	0.11 (0.31)	0.07 (0.25)	1.31
Was given advice about job interviewing	335	0.36 (0.48)	0.23 (0.42)	2.75
Was given advice about answering questions about criminal history	335	0.32 (0.47)	0.15 (0.36)	3.57
Was given advice about how to behave on the job	335	0.37 (0.48)	0.22 (0.41)	3.08
Was given names of persons to contact in community to find job	335	0.19 (0.40)	0.10 (0.30)	2.42
Put together a resume	335	0.22 (0.41)	0.18 (0.38)	0.90
Received any educational services	337	0.94 (0.24)	0.95 (0.22)	-0.43
Received money management services	337	0.24 (0.43)	0.17 (0.38)	1.60
Received other life skills training	335	0.52 (0.50)	0.47 (0.50)	0.80
Received assistance with personal relationships	337	0.39 (0.49)	0.35 (0.48)	0.80
Received training to change criminal behavior attitudes	335	0.70 (0.46)	0.79 (0.41)	-2.00
Domestic Violence Services				
Participated in batterer intervention programs	337	0.03 (0.18)	0.02 (0.15)	0.62
Participated in domestic violence support groups	336	0.12 (0.32)	0.08 (0.27)	1.29
Child Services				
Received assistance getting child support payments	30	0.00 (0.00)	0.00 (0.00)	
Received assistance modifying child custody	30	0.06 (0.25)	0.00 (0.00)	1.00
Participated in parenting classes	30	0.56 (0.51)	0.14 (0.36)	2.55
Received assistance finding child care	30	0.19 (0.40)	0.14 (0.36)	0.32