

U.S. Department of Justice
Office of Justice Programs
Office of Juvenile Justice and Delinquency Prevention
State Relations and Assistance Division



Challenge Activities Program Areas



Challenge to the States

The 1992 reauthorization of the Juvenile Justice and Delinquency Prevention (JJDP) Act of 1974 added Part E, State Challenge Activities, to the programs funded by the Office of Juvenile Justice and Delinquency Prevention (OJJDP). The purpose of Part E is to provide initiatives for States participating in the Formula Grants Program to develop, adopt, and improve policies and programs in 1 or more of 10 specified Challenge areas.

Challenge Activity I

Increasing aftercare services for juveniles involved in the justice system by establishing programs and developing and adopting policies to provide comprehensive health, mental health, education, and vocational services, and services that preserve and strengthen the families of such juveniles.

Aftercare

Growing concerns about institutional crowding, escalating costs of confinement, and high rates of recidivism have fueled interest in bringing new ideas and innovative programming to juvenile aftercare philosophy and practice. Recidivism rates are very high, especially among juvenile offenders who have been transitioned from secure correctional confinement to the community. Repeated delinquency is especially pronounced among a subgroup of juvenile offenders who began to establish at an early age a long and often quite serious record of criminal misconduct.

Efforts to supervise the transition of offenders from the closely monitored, highly regimented life in a secure correctional facility to the relatively unstructured, temptation-filled life in the community have been difficult. Much of the difficulty can be attributed to a lack of collaboration among correctional facilities, parole authorities, and community social institutions. Today's aftercare programs are designed to address two major deficiencies in juvenile corrections:

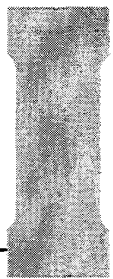
- Institutional confinement has not adequately prepared youth for return to the community.
- Positive lessons learned in confinement have not been reinforced in the community.

This paper describes six promising aftercare programs, including a major project funded by OJJDP to develop a program model and training package that was delivered to eight jurisdictions. Despite differences in program age, origin, and funding, these aftercare programs share similarities in concept and approach.

Intensive Aftercare Program Model

With funding from OJJDP, researchers from the Johns Hopkins Institute for Policy Studies and California State University, Sacramento, developed the Intensive Aftercare Program (IAP), an integrated, multifaceted aftercare program that cuts across institutional and professional boundaries. The goal of IAP is to gradually reintegrate into the community high-risk juvenile offenders who have been in secure confinement, thereby lowering historically high rates of failure and recidivism. The IAP model is based on five principles:

- Prepare youth for progressively increased responsibility and freedom in the community.
- Facilitate the involvement of and interaction between youth and the community.



- Work with both the offender and community support systems, including families, peers, schools, and employers, on the qualities needed for constructive interaction and a youth's successful community adjustment.
- Develop new resources and supports.
- Monitor and test youth and the community on their ability to deal with each other productively.

The IAP model requires that a full continuum of services be made available—either through direct service provision or referral and brokerage—to address the entire range of needs and problems manifested by the high-risk juvenile aftercare and parolee population. Possible services and interventions include:

- Intensified treatment for special-need offenders, including those who are substance abusers, have developmental disabilities, are emotionally disturbed, or have sexual disorders.
- Education and schooling.
- Vocational training, job readiness, job development, and placement.
- Changes in living arrangements.
- Social skills development.
- Leisure and recreation activities.
- Individual and group counseling.
- Family work and therapy.
- Physical health care.
- Special technology (e.g., drug testing and electronic monitoring).

Ingredients of Reintegration-Oriented Placement and Aftercare. The essence of IAP is the concept of overarching case management, a guide for how a multistage program should be designed, managed, and operated. The model requires that five discrete case management components be in place:

- Assessment, classification, and selection criteria.
- Individual case planning that incorporates a family and community perspective.
- Mix of intensive surveillance, support, and services.
- Balance of incentives and graduated consequences coupled with imposition of realistic, enforceable conditions.
- Service brokerage with community resources and linkage with social networks.

These five components require that aftercare workers and planners become actively involved as soon as residential placement begins. A brief review of each of these components follows.¹

Assessment, Classification, and Selection Criteria. "One-size-fits-all" is not a practical method for determining who should be targeted for intensive versus conventional aftercare. Because young people in juvenile correctional facilities are incarcerated for different reasons, their underlying needs and problems can be equally different.² Given these differences, the likelihood of their reoffending upon release varies enormously.

The relationship between seriousness of the presenting offense and the likelihood of committing future offenses is extremely weak, if not inverse.³ Research suggests that it is largely property offenders, not violent offenders, who are most prone to reoffending.⁴ The risk factors most closely associated with juvenile reoffending include a combination of justice system contact factors (e.g., age at first justice system contact and the number of prior offenses and referrals) and need-related factors (e.g., family dysfunctions, school disciplinary problems, negative peer group influences, and drug involvement).⁵

Despite the differences in risk, oftentimes both nonviolent and violent juveniles found to be at relatively low risk to reoffend are handled the same as higher risk juveniles, in terms of the frequency, duration, and nature of aftercare supervision and service delivery. The evidence increasingly suggests that providing intensive aftercare to lower risk juveniles results in poorer performance, not better.⁶ One reason frequently cited is that intensive supervision is almost always accompanied by an increase in technical infractions due to the increased ability to detect rule violations. But technical infractions, although relatively minor, may not be treated as such by parole officers and judges. Rather, they can and do order revocations and recommitment, especially if graduated, community-based sanctions and other alternatives are not in place. Such practices may make the situation worse.

Second, intensive aftercare is ineffective among low-risk offenders because they may react negatively to constant supervision and evaluation. Applying this kind of microscopic scrutiny creates pressure, and as a result, some youngsters rebel and act out. Administrators may want to consider limiting intensive aftercare to those juveniles who, based on a validated risk assessment process, are found to be at high risk of reoffending.

Individual Case Planning Incorporating a Family and Community Perspective. Individualized case planning for the purpose of intensive aftercare needs to begin as soon as a youth is committed to a residential placement facility. Such planning should involve both institutional and aftercare staff to determine:

- How need-related risk factors will be addressed in the facility and in aftercare programming and supervision.
- How the special needs of youth will be addressed. Particular attention should be given to the offender's social network (e.g., family members, close friends, and larger peer group) and community (e.g., schools, workplace, church, training program, and specialized-treatment program).

- How the total set of risks, needs, and associated circumstances will be addressed during a phased transition from the placement facility to aftercare.

To preserve gains made while in placement, aftercare must build on them. Whether aftercare service providers begin working with IAP youth while they are in a placement facility or while they are on prerelease furloughs, contact must be initiated well before discharge. This process can happen if the placement facility and aftercare providers are accessible to one another and if individualized planning for aftercare has occurred during the early stages of placement.

Mix of Intensive Surveillance and Services. Although close, frequent monitoring and supervision of juveniles is an important aspect of the IAP model, services and support are integral as well. As discussed previously, common risk factors include both offense and need-related items. A strictly surveillance-oriented approach does not address any of the need-related risk factors. If need-related risk factors are linked principally to the family and home situation, school and learning difficulties, negative peer influences, and substance abuse, the challenge for IAP is clear: ensure that core services are used and that families and friends are involved on a regular basis in activities, events, and programs. Evening activities and day programming that extend into weekends are important. Such programming can be tied to work, assignments, chores, recreation, volunteer activities, community service initiatives, and arts and crafts projects.

The IAP model does not view surveillance and supervision merely as a means to deter misconduct. Rather, monitoring the movement and behavior of high-risk juveniles provides IAP staff with the means to:

- Recognize immediately when infractions as well as achievements have taken place.
- Ascertain beforehand when circumstances may be prompting misconduct or leading to problems.
- Respond with the use of both rewards and graduated sanctions.

Balance of Incentives and Graduated Consequences With Imposition of Realistic, Enforceable Conditions. Juvenile aftercare has often been burdened with unrealistic and unenforceable conditions, devoid of any positive reinforcement. Although it is widely recognized that both tangible and symbolic rewards and praise play an important role in demonstrating the benefits and satisfactions that can be derived from socially acceptable accomplishments, recognition of achievement is all too rare in aftercare. A number of different approaches have been employed by various programs to routinely monitor progress, reinforce prosocial conduct, and guide advancement. These approaches range from frequent case reviews to elaborately structured token economies in which particular privileges are tied to the attainment of specific goals.

Because IAP is designed to intensify the number, duration, and nature of contacts that aftercare workers have with youth and their families, peers, teachers, employers, and service providers, it is inevitable that more technical violations will surface. In the absence of guidelines or a hierarchy of consequences at their disposal, aftercare workers may tend to do nothing—which undermines their authority—or to impose sanctions disproportionate to the violation. Besides having a graduated system of sanctions, jurisdictions considering IAP should review their current juvenile revocation policies. Possible changes include restricting reincarceration only to IAP youth with new offense convictions and creating a special short-term residential backup facility as an intermediate sanctioning alternative for IAP technical violators.

Service Brokerage With Community Resources and Linkage With Social Networks. It is unrealistic to expect that comprehensive and intensive service provision coupled with close supervision and monitoring can be achieved without the active involvement of a variety of community support systems. It is impractical to expect that the primary aftercare worker could spend all the time required with each youth and provide the full range of needed services. Thus, referral and brokerage are crucial functions, which in turn means that program monitoring and quality control are paramount.

Young people who have family problems, who associate with negative peer groups, and who are disruptive in school are at the highest risk of becoming repeat offenders. Therefore, programming must focus on:

- Improving or altering the family situation.
- Intervening with the peer group.
- Reversing the cycle of school disciplinary problems.

Meeting these goals requires linkage with the major social networks.

A number of different brokerage and linkage approaches are being pursued by jurisdictions across the country.⁷ Regardless of the approach used, the keys to IAP are to involve a variety of community support systems in service delivery and to see that each youth has a staff person who is actively reinforcing or developing a supportive network. In addition, it is essential to devise a process that ensures coordination and continuity in work being done on a case and monitors the quality of service provision.

*Contacts: David Altschuler
Johns Hopkins University
Institute for Policy Studies
Wyman Building
Baltimore, MD 21218
410-516-7179*

Troy Armstrong
California State University, Sacramento
Department of Anthropology
6000 J Street
Sacramento, CA 95819-2694
916-278-6259

The contacts at the four demonstration sites for the Intensive Aftercare Program Initiative are the following:

Contacts: David Bash
Chief, Youth Parole
Nevada Youth Parole Bureau
620 Belrose, Suite C
Las Vegas, NV 89158
702-486-5080

David Bennett
Manager, Central Region
Division of Youth Services
4111 S. Julian Way
Denver, CO 80236
303-762-4701

Valerie Boykin
Parole Manager
Department of Youth and Family Services
P.O. Box 110
Richmond, VA 23208-1110
804-371-7457

Therese Matthews
Program Development Specialist
Department of Corrections
Whittlesey Road
CN-863
Trenton, NJ 08625-0863
609-292-4640

Associated Marine Institutes Model

Associated Marine Institutes (AMI) helps delinquent boys ages 14 to 18 further their education, develop job skills, increase self-confidence, and meet personal responsibilities.⁸ Drawing on the geographic strengths of the surrounding community, programs throughout the United States and in the Cayman Islands use the ocean, wilderness, rivers, and lakes to teach oceanography, earth sciences, diving, seamanship, aquatics, and physical education. Academic and vocational counseling are also stressed.

AMI provides a continuum of aftercare services. The Student and Family Enhancement (SAFE) Program provides services for youth who are returning to their home communities following residential programs. The 4- to 8-month program is flexible to accommodate the needs of individual youth.

The purpose of the aftercare program is to:

- Provide structure and supervision during the transition from residential placement to reentry in the community.
- Improve youth educational, employment, and social skills.
- Furnish ongoing educational or employment placement.
- Monitor youth to ensure public safety.

Changes in attitude are not forced, but rather are facilitated by a warm, caring adult who provides massive amounts of discipline and affection. The attachment that forms between the staff and youth is the glue that bonds the youth to the program and the values it espouses.

Phase 1 begins while the youth is still in the residential facility. SAFE staff meet with the case manager to review the youth's needs assessment and treatment history; with the youth to begin orientation and development of a transitional plan; and with members of the family to identify what issues are likely to emerge upon the youth's release to the community.

In Phase 2, youth are transferred from the residential program to the nonresidential Institute. Day treatment is provided Monday through Friday from 8 a.m. to 5 p.m., with extended service activities until 9 p.m. An additional 8 hours of programming are provided on Saturdays and Sundays. Activities include community service projects, counseling, tutoring, job skill development, goal-setting workshops, first aid classes, recreational activities, and overnight trips. Behavior management, education, and reintegration into the home environment are emphasized. Contact outside of the home or the Institute is severely limited.

Youth participating in Phase 3 have three options:

- Continue the day program, with release from SAFE extended service to work or participate in other activities.
- Work or attend an academic program during the day and participate in SAFE extended service activities during the evening.
- Work or attend school during the day and participate in other activities during the evening.

Curfew is strictly enforced during Phase 3, and violators may be returned to extended service, placed on electronic monitoring, or returned to residential placement.

During Phase 4, youth have full-time placement in school, work, or a combination of the two. Each youth is supervised by a community coordinator, who meets regularly with the youth, family members, the youth's school or work supervisor, and other persons involved in the transitional plan. A monthly meeting provides ongoing support to the youth, who must comply with random curfew checks.

The goal of Phase 5 is to stabilize the youth in the home environment and to reduce the amount of supervision required. Unstructured time and later curfews are earned, based on adherence to program requirements.

Contact: *Rusty Russell*
Associated Marine Institute
Student and Family Enhancement Program (SAFE)
5915 Benjamin Center Drive
Tampa, FL 33634
813-887-3300

Thomas O'Farrell Youth Center Model

The Thomas O'Farrell Youth Center (TOYC) in Marriottsville, Maryland, is a 6- to 9-month nonsecure residential program with a strong emphasis on aftercare.⁹ Designed for boys under age 18, the program requires each resident to progress through three levels of treatment before reentering the community. Residents are taught new norms of behavior: accepting responsibility for one's actions; behaving in a way that is positive for oneself and the community; learning new methods of conflict resolution that show care and concern for others; and respecting the property of others. These norms are discussed in daily group counseling sessions and meetings, some of which are led by more senior residents. Residents are expected to help others in the program live up to community norms and instill the program's values.

Through the process of "inoculation," residents slowly begin the process of reentry into the community. First, they participate in carefully selected off-campus activities such as community service projects, sporting events, and overnight camping trips. Role-playing exercises help prepare residents for the many challenges that lie ahead. Later, residents may be allowed short home visits, which require them to behave in such a way that the visit is free of incident, arrive back at TOYC at the agreed-upon time, and pass a urine analysis drug test. These limited exposures to highly controlled situations build youth confidence that they can handle life outside the TOYC community and reinforce TOYC's values.

When a youth is ready to leave TOYC, he is given a comprehensive aftercare plan, which is designed to extend TOYC's caring environment into the community and ease the youth's transition to a new living situation. Two aftercare workers help the youth by providing school and vocational counseling, crisis intervention, family counseling, transportation, and mentoring. The staff contact the youth at least 12 days per month for 6 months, and often accompany the youth to counseling or Narcotics Anonymous or Alcoholics Anonymous meetings. Aftercare staff seek to involve parents, school guidance counselors, and community-based agency personnel in this component of the program. TOYC aftercare staff also work in conjunction with Maryland Department of Juvenile Services probation officers, who are responsible for surveillance and compliance with court mandates.

A study of the first 56 graduates of the TOYC program is very promising. In the 12-month period before placement, these youth were charged with 219 offenses, or an average of 4 court referrals per youth. In the year following release, however, 55 percent had no further court referrals. Those who were referred to the court were charged with a total of 51 offenses, a decline of 77 percent. Those who committed new offenses were likely to commit less serious crimes following participation in the TOYC program.

Contact: *Dr. Yitzhak Bakal*
North American Family Institute, Inc.
10 Harbor Street
Danvers, MA 01923
508-774-0774

Other Programs

The Choice Program is a public and private partnership involving the University of Maryland and Baltimore County's Center for Learning Through Work and Service. The goal is to promote individual and family responsibility while fostering academic, employment, and life skills that empower the juvenile and his family. The program combines strict supervision with intensive, community-based family advocacy services. Structured recreational activities, group counseling, and tutoring programs are offered. Youth are closely monitored by trackers, who contact them three to five times daily.¹⁰

Contact: *Monica Bucheit*
Choice Program
971 Seagull Avenue
Baltimore, MD 21225
410-353-5511

First developed in Massachusetts, the Key Program now operates in Iowa, New Hampshire, Rhode Island, and Texas. Community trackers work in teams of three under one caseworker. Each tracker is responsible for six to eight youth. The trackers monitor the youth's whereabouts, ensure compliance with the conditions of facility release, assist in school and employment issues, provide informal counseling and family intervention, and connect the youth to community resources. Trackers see their assigned youth several times a day.¹¹

Contact: *Juan Sanchez*
Key Program
3000 South IH35
Suite 410
Austin, TX 78704
512-462-2181

The Stayfree Program, based out of the Kingswood Community Center in Delaware, is a group of well-coordinated community agencies that work with juveniles and their families at both the front and back ends of the juvenile justice system. Services include removing juveniles from detention, providing alternatives to lockup facilities, and offering assistance to juveniles who are leaving secure facilities. A special program for

young black males helps them develop stronger personal identities by teaching them about their heritage and connecting them with positive male role models and mentors.¹²

Contact: Tyrone Jones
Stayfree Program
2300 Bower Street
Wilmington, DE 19802
302-762-8229

Conclusion

Strong aftercare programs strengthen juveniles' resistance to recidivism and increase their chances of successful reintegration into society. Intensive supervision flags problems so aftercare workers can intervene before the youth has relapsed into criminal behavior. Such supervision supports prosocial behavior by allowing workers to reinforce the positive values residential programs seek to instill.

Additional Resources

Additional Bibliographic Resources

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Organizations

National Council on Crime and Delinquency, 685 Market Street, Suite 620, San Francisco, CA 94105; David Onek, 415-896-6224.

Juvenile Justice Clearinghouse, P.O. Box 6000, Rockville, MD 20849-6000; 800-638-8736; Fax 301-251-5212.

Programs

Johns Hopkins Institute for Policy Studies Intensive Aftercare Program (IAP), Wyman Building, 3100 Wyman Park Drive, Fifth Floor, Baltimore, MD 21218; Dr. David Altschuler, 410-516-7179.

Endnotes

¹ Further detail can be found in Altschuler, D.M., and T.L. Armstrong, *Intensive Aftercare for High-Risk Juveniles: A Community Care Model* (Washington, DC: U.S. Department of Justice, Office of Juvenile Justice and Delinquency Prevention, 1994); Altschuler, D.M., and T.L. Armstrong, *Intensive Aftercare for High-Risk Juveniles: Policies and Procedures* (Washington, DC: U.S. Department of Justice, Office of Juvenile Justice and Delinquency Prevention, 1994); Altschuler, D.M., and T.L. Armstrong, "Intensive Aftercare Services for Institutionalized Delinquents," in B. Glick, and A. Goldstein (eds.), *Managing Delinquency Programs That Work* (Laurel, Maryland: American Correctional Association Press, 1994); and Armstrong, T.L., and D.M. Altschuler, "Recent Developments in Programming for High-Risk Juvenile Parolees: Assessment Findings and Program Prototype Development," in A.R. Roberts (ed.), *Critical Issues in Crime and Justice* (Newbury Park, CA: Sage Publications, 1994).

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⁵ Altschuler, D.M., and T.L. Armstrong, *Intensive Community-Based Aftercare Programs: Assessment Report* (Washington, DC: U.S. Department of Justice, Office of Juvenile Justice and Delinquency Prevention, 1994); and Altschuler, D.M., and T.L. Armstrong, "Intensive Aftercare for the High-Risk Juvenile Parolee: Issues and Approaches in Reintegration and Community Supervision," in T.L. Armstrong (ed.), *Intensive Interventions With High-Risk Youths: Promising Approaches in Juvenile Probation and Parole* (Monsey, New York: Criminal Justice Press, 1991).

⁶ See, for example, Andrews, D., Implications of Classification for Treatment of Juveniles (paper presented to the American Probation and Parole Association, Salt Lake City, 1987); Baird, S.C., *Report on Intensive Supervision Programs in Probation and Parole* (Washington, DC: U.S. Department of Justice, National Institute of Corrections, 1983); Erwin, B.S., and L. Bennett, *New Dimensions in Probation: Georgia's Experience With Intensive Probation Supervision*, Research in Brief (Washington, DC: U.S. Department of Justice, National Institute of Justice, January 1987); and Markley, G., and M. Eisenberg, *The Texas Board of Pardons and Paroles Case Management System* (Austin: Texas Board of Pardons and Paroles, 1986).

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⁸ Information on AMI was drawn from the SAFE Program Operations Manual, October 20, 1993.

⁹Information on the Thomas O'Farrell Youth Center was drawn from *Excellence in Adolescent Care* (San Francisco: National Council on Crime and Delinquency, 1992).

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¹¹*Ibid.*, pp. 109-110.

¹²*Ibid.*, p. 111.

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