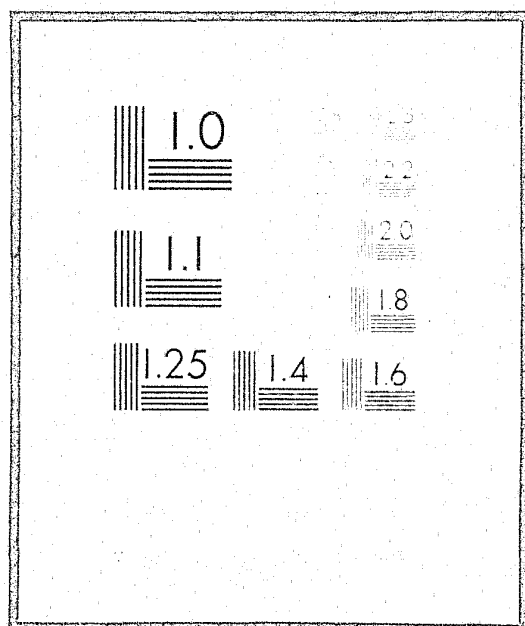


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SUMMARY, CONCLUSIONS
AND RECOMMENDATIONS*

VANIER CENTRE RESEARCH
REPORT #3
THE ADULT FEMALE OFFENDER
BEFORE-DURING-AFTER INCARCERATION --

by

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and

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* The Complete Report, Including Detailed Tables,
is Available at the Ministry of Correctional Services.

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MINISTRY OF
CORRECTIONAL
SERVICES

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Minister
Glenn R. Thompson
Deputy Minister

MINISTRY OF CORRECTIONAL SERVICES

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ACQUISITIONS

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This study reflects the cooperation and enthusiasm of a large number of people and could not have been carried out without their participation. Staff and residents of the Vanier Centre and the female wings of the Whitby and Toronto Jails in 1970 through 1972, particularly the correctional officers of Cottage One at Vanier, have provided much of the data upon which this report is based. In the follow-up phase, Probation and Parole staff throughout the Province were chiefly responsible for locating subjects, often devoting much time and ingenuity in the process.

Throughout the active period of this study, administrative staff at the Vanier Centre not only initiated interest in the project, but supported its careful and thorough conduct. Mr. G. Thompson, then Administrator, Adult Female Institutions, and Miss D. Clark, then Superintendent, Vanier Centre, were particularly encouraging and helpful. Mr. D. Mason, former Director of Probation and Parole, assisted and advised throughout the follow-up phase. Mr. B. Doyle, present Superintendent of Vanier Centre has continued in the expression of interest in the findings and interpretations of the study.

SUMMARY

A longitudinal study of 338 women admitted to the Vanier Centre in 1970-71 examined the association between pre-, intra- and post-institutional factors and recidivism and other measures of adjustment. Focusing on the effectiveness of a "therapeutic milieu" type programme in producing lasting behaviour and attitude change, the research was integrated with the activities at the Centre, involving staff and residents in a variety of data collection processes. A total of 179 of the same women was interviewed one year after their return to the community, this sub-sample shown to be highly representative of all the women included at intake.

The women at admission were typically young, having dropped out of school before completion of secondary school, often with a history of unstable work experience. They tended to come from families middle or low in terms of socio-economic status, although they did not perceive this to have been a problem area. About two-thirds of the sample had a history of prior family instability, with an even greater proportion coming from situations where drugs and/or alcohol were serious problems.

Over half the women studied had had one or more previous adult convictions. Almost half reported that member(s) of their families had been in trouble with the law; over two-thirds had friends who had been criminally involved.

The crime(s) leading to incarceration for this sample were generally property offences, or crimes involving drugs, liquor, and prostitution - rarely was a violent act involved. Psychiatric problems and even past suicide attempts were not unusual for this sample. (Table 1 provides descriptive statistics on the characteristics of the women at the time of admission as well as during and after incarceration.)

An analysis of official criminal and Ministry records of women after discharge showed that 22% (74) of the 338 women were reconvicted during their first year in the community, and an additional 2% (6) were reincarcerated for a parole violation; an additional 13% (44) had reconvictions during year two, bringing the total recidivism rate to 37%. Of the 118 recidivists, 101 (86%) were reincarcerated at some time during the two year follow-up period.

Because an increased ability to manage independently in the community was one of the goals of the Vanier programme for its residents, a longer period of time before reconviction was viewed as encouraging by treatment staff. In view of the large proportion of women in this sample who had experienced problems similar to those with psychiatric disorders (e.g., drug addiction, alcoholism, depression and suicidal tendencies), a measure of increasing length of time in the community without criminal involvement was seen as relevant.

The timing of new convictions during the two year period showed a considerable delay in further convictions for many of those who eventually did demonstrate further criminality. Although the most likely time for women to recidivate was during their first three months back in the community, with 21% of the total reconvictions occurring during that period, it took nine months before half the reconvictions took place, with only a slight tapering off after twelve months. Recidivism began declining more rapidly during the second part of year two. Some programme factors appear to have an effect in this gradual pattern of recidivism, as opposed to a more pronounced early return rate during the first year. (See Figures A and B.)

Many variables known at admission were found to be significantly related to subsequent recidivism, these having some potential for dividing women into "high" and "low-risk" groups for classification and treatment. Major factors

Figure A.

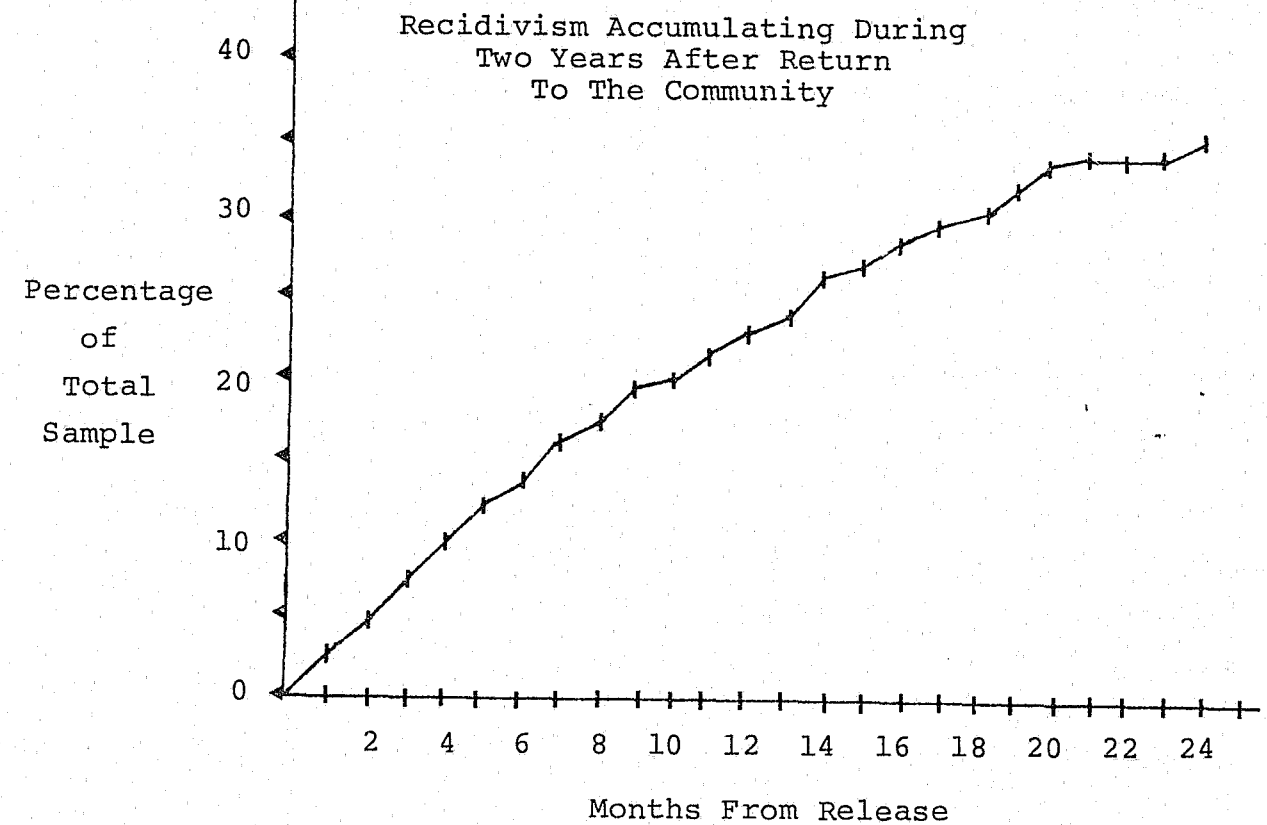
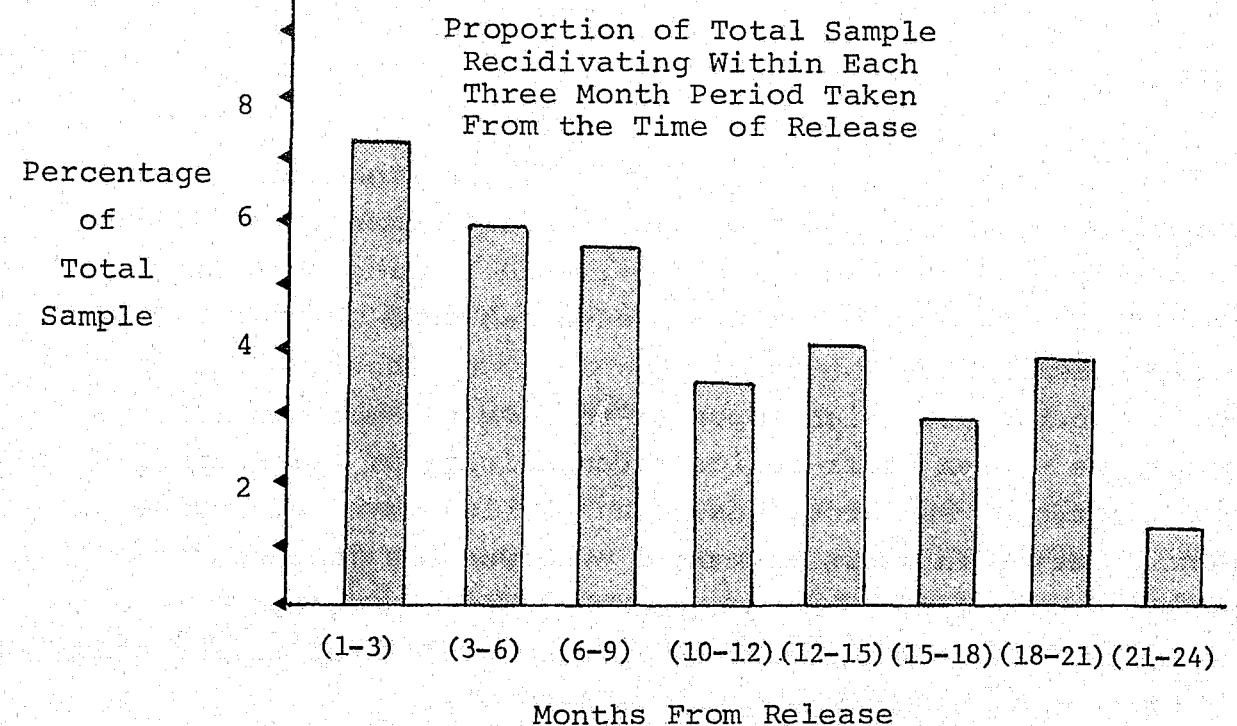


Figure B



differentiating the two groups were prior criminality, particularly as a juvenile; early family problems such as instability, criminality, and drug or alcohol abuse; serious personal problems such as drug or alcohol dependency and emotional disturbances; and an unstable history of employment. In addition, women who were Indian were more likely to recidivate than non-Indian women. (See Table 2.)

"Quality of life" after return to the community, as measured through a personal follow-up interview, included post-institutional employment situation, financial adequacy, physical health, emotional health, family relationships, and residential adequacy. Large portions of the sample were found to be experiencing serious problems in most of these areas during their first year back in the community. To a large extent, these problems reflected the individual's situation prior to Vanier and showed a continuing cycle. The women managing well in terms of employment, finances, health, family relationships and living situation after their incarceration were much less likely to be reconvicted than were those who had problems in these areas. Of particular importance in this respect were employment success and closeness of family ties. (See Table 3.) Only 16% of those with acceptable employment patterns were recidivists compared with 56% recidivists among those with poor employment experiences. Women with close family ties showed 22% recidivism, whereas those with no such ties had a 57% rate.

Many aspects of the experience at the Vanier Centre appeared to have some impact on later adjustment. Of special importance to programme planners is the finding that the specific cottage to which women were assigned was related to various measures of outcome, as well as to institutional adjustment. Cottage 3, which appeared to have the most dynamic programme - open staff-resident communication, frank discussions about personal and group goals, and a high level of resident participation in decision-making - showed the most positive results. Recidivism among women assigned to Cottage 3 tended to be lower than it was for women assigned to Cottages 2, 4, or 5 after assessment. (See Table 4.)

These results were not fully accounted for by prior characteristics of the individuals, and cannot, therefore, be explained on the basis of this being a select group. In fact, on some dimensions women assigned to Cottage 3 might have been seen as higher risks. Even among some "high-risk" women, the positive effects of this Cottage remained. Women who had experienced juvenile criminality and were assigned to Cottage 3 showed 30% recidivism, compared to 47%, 65%, and 54% recidivism among those with juvenile criminality assigned to Cottages 2, 4, and 5 respectively. Women who had come from families with drug and alcohol problems also had better outcomes after their incarceration in Cottage 3 compared to stays in the other cottages. A strong negative effect in Cottage 4, likewise could not be accounted for completely by the residents' personal factors, although that Cottage consisted of women grouped together with the expectation that they were less amenable to change.

The length of time residents spent at Vanier was found to be important, not so much in reducing ultimate recidivism, but for delaying recidivism until the second year. (See Table 4.) Very short periods of incarceration were found to be least meaningful. Women who had short periods of incarceration of less than four months showed the fastest return rate. However, during the first year in the community, women who had spent between 4 and 8 months at Vanier had the lowest recidivism rates. Recidivism for this group rose sharply, however, during the second year, indicating a lessening in the overall impact of institutional stay after time. Those with a period of incarceration beyond eight months showed fairly high reconviction rates during both years after discharge, as well as consistently negative perceptions of the institutional programmes.

Behaviour ratings done by cottage staff were fairly good indicators of later behaviour; similar ratings by school and work staff were not. Correctional staff, more than any other level of staff, were shown to have the greatest potential not only for assessing behaviour but in influencing

it. Close personal contact between correctional staff and individual residents was shown to be the most important factor in creating positive attitudes during institutionalization.

Any incident of serious misbehaviour by residents leading to segregation, transfer, etc., was found to be predictive of later problems. Related to institutional behaviour at a significant level were several of the attitude scales given during assessment, particularly those measuring self-esteem, socialization, attitudes about education, work beliefs, criminality and attitudes toward legal institutions.

Actual level of involvement in specific programmes at Vanier was difficult to measure because such records were not kept in a consistent fashion. Almost 80% of the women indicated that they participated in four or more activities, a large proportion of these problem-solving programmes. This reported participation was not related to ultimate outcome, even though residents with a high level of participation tended to feel more self-aware and better able to cope with personal problems just prior to discharge. Women who felt optimistic upon leaving Vanier about avoiding further difficulties with the law were more likely to experience good community adjustment than were those who anticipated further problems. (See Table 4.)

Once in community, the women in the sample used a variety of community resources, although only one-fourth of the sample ever used an after-care agency, (e.g., halfway house). One half of these used such an agency as a drop-in center only. Use of community resources was not related significantly to recidivism. Although the agencies were used more extensively by the "high-risk" individuals, the probability of recidivism did not diminish for them through such use. (See Table 3.)

Of all the experiences during the year following return to the community, the employment pattern had the most strength in terms of intervening in earlier patterns of prior

criminality. Women with prior criminality were shown to have an over-all recidivism rate of 46%, compared to 14% among those with no prior criminality. However, among those with prior criminality, who also had stable employment patterns, the rate dropped to 15% recidivism. The significance of this finding cannot be over-estimated in view of the fact that only 19% (32) had very stable post-institutional employment experiences, and half of those who worked at all, never earned \$2.00 an hour at any full or part time job. Increased training for employment and a change in employment opportunities could possibly reduce the continued criminality of women returning to the community.

CONCLUSIONS AND RECOMMENDATIONS

The study suggests that the goal of establishing a "therapeutic" environment, insofar as this is defined by open communication and honest problem-solving, is a realistic goal for many of the Vanier residents, and that in some areas this goal was being achieved. Where the goal was most successfully reached, resident outcomes tended to be most positive.

Correctional officers have been shown as key figures in the Vanier programme. Where they interacted most successfully with residents, both internal social climate and subsequent outcomes were improved. The role of cottage correctional officers appears far more significant than that of any other single group of staff, in their interaction with and understanding of the residents.

Continuing efforts to maximize the interpersonal skills of correctional staff should have positive results in creating a more therapeutic milieu. Relevant staff training programmes and involvement of this staff group in program-planning should have a definite positive impact. This finding is probably not unique to the Vanier setting, and can be generalized to other institutions.

Recidivism, shown to be 24% during the first year (including 2% parole violations) increasing gradually to 37% at the end of two years, cannot be an absolute measure of outcome. The length of time before reconviction is seen as an additional important factor in assessing these results.

Given the nature of the population, serious question can be raised about the expectations for "rehabilitation" from a period of incarceration. The data have shown these women to be young and unrealistic, many to be highly disturbed personally, and/or products of seriously disrupted backgrounds. Their crimes, for the most part, were not dangerous to others.

Although the data did not yield a prediction table which could be used as a mechanical tool in classification, pre-institutional factors related to outcome were determined and can help identify the "high-and low-risk" residents. "High-risk" individuals would be characterized by more of the following factors than would "low-risk" persons: early juvenile criminal involvement; criminal involvement by family and/or friends; drug and/or alcohol problems by family; prior personal emotional disorders and/or drug dependency; early instability in home environment. A positive factor to be weighed against the above list was found to be a positive pattern of prior employment, as well as the absence of the above conditions.

Programmes at the Cottage level had more impact than did various clinical programmes. Cottage programmes were most positive when residents and staff interacted in an honest, open way, and where the amount of structure was appropriate for the level of personal difficulty. Grouping together women with negative expectations was not helpful, nor were very short or very long periods at Vanier. Future assignments to cottages, decisions about T.A.P. and parole, and the nature of programmes should be planned to identify the "high-risk" group, based on factors mentioned above (e.g., early criminality, emotional problems and family disruption). Women identified as being in the "low-risk" group seem to require minimum intervention; efforts for those in the "high-risk" group should concentrate on those problems which can be altered, and which can reduce the probability of negative outcomes.

These data have shown that the greatest pay-off might come through community-oriented employment programmes. Regardless of the problems of women when entering Vanier, it appears that a successful employment experience can dramatically improve their chances for positive outcomes. Although this may be a difficult area to deal with in a period of economic recession, many innovative activities are now being tried in

Ontario and elsewhere. Mutual agreement programmes (M.A.P.), contracts, and vouchers are among the new ideas. The importance of creative activity in the area of employment is the strongest recommendation that can be made as a result of this investigation.

The importance of family relationships in obtaining successful outcomes is also a major consideration. Where none exists, other types of emotional support may be required, again not an easy goal. Where there is a possibility of family involvement, however, it should be developed and maintained. In some cases this may mean family counselling. In many situations it may simply mean providing opportunities for continued family contact through T.A. and visits. It is hoped that the relative benefits and necessity for incarcerating a person will be fully weighed prior to incarceration against the costs of family disunity, and will be reconsidered at all stages of decision-making around community programmes. Increased emphasis on restitution and/or diversion from the system should be considered for women, shown here largely non-violent and reflective of so many social/emotional problems not necessarily harmful to others.

The "quality of life" experienced by these women after discharge was very disappointing. The fact that so many were leading marginal existences in terms of emotional, financial, and residential measures raises many larger questions concerning broad social policies. In strictly correctional terms, two-thirds of those studied might be labelled "rehabilitated"; they had no further reconvictions. But about one half of these was barely "making it on the streets". Use of community agencies provided some relief, in terms of the perceptions the women had of their problems. But their problems still existed, and measures undertaken at this stage might be too late to alter the various negative social, educational, economic, and emotional conditions so intensified for this sub-group. It may be a fact of life that these people need continuing help not so much that they will change, but simply to enable them to manage outside the criminal system.

This study represents a difficult but successful effort to include all levels of operations staff in an assessment of their programmes. The successful follow-up phase of the research has demonstrated that it is possible, though time-consuming, to do long-term evaluations of how well a programme meets its goals. The findings have not only described the population of adult female incarcerates and their subsequent community outcomes, but have also analyzed ways of increasing positive results. In terms of the research process experienced at the Vanier Centre, much has been learned to aid in future, on-going research there and elsewhere in the correctional system. It is hoped that the instruments found most useful will be adapted for regular use, and that the concepts found most significant will continue to be examined so that positive influences can be maximized in programme design.

TABLE 1
CHARACTERISTICS OF THE SAMPLE

PRE-INSTITUTIONAL VARIABLES				PRE-INSTITUTIONAL VARIABLES			
		#	%			#	%
Racial Origin	white	259	81.2	Financial Situation During Childhood	problem	127	39.4
	Indian	40	12.5		fair	129	40.1
	other	<u>12</u>	<u>6.3</u>		good	<u>66</u>	<u>20.5</u>
		311	100.0			322	100.0
Age	under 20	98	30.4	Subject Ever on Welfare	yes	196	63.6
	20 - 25	92	28.6		no	<u>112</u>	<u>36.4</u>
	over 25	<u>132</u>	<u>41.0</u>			308	100.0
		322	100.0				
Previous Convictions	none	126	37.3	Parents Ever on Welfare	yes	66	21.1
	one	69	20.4		no	<u>247</u>	<u>78.9</u>
	over one	<u>143</u>	<u>42.3</u>			313	100.0
		338	100.0				
Previous Incarcerations	yes	136	40.2	Stability (# of childhood living situations)	one	138	42.9
	no	<u>202</u>	<u>59.8</u>		two	130	40.4
		338	100.0		more than 2	<u>54</u>	<u>16.8</u>
						322	100.0
Juvenile Criminality	yes	97	28.8	Ever Live without Either Parent	yes	130	41.0
	no	<u>240</u>	<u>71.2</u>		no	<u>187</u>	<u>59.0</u>
		337	100.0			317	100.0
Family Trouble with Law	yes	147	46.5	Attitude Toward Early Living Situation	negative	66	20.5
	no	<u>169</u>	<u>53.5</u>		neutral	128	39.8
		316	100.0		positive	<u>128</u>	<u>39.8</u>
					322	100.0	
Friends Trouble with Law	yes	217	69.3	Psychiatric History	no treatment	180	55.9
	no	<u>96</u>	<u>30.7</u>		out-patient	60	18.6
		313	100.0		hospitalized	<u>82</u>	<u>25.5</u>
					322	100.0	
Work and Education Status of Parents	low	90	30.6	Ever Attempted Suicide	yes	102	31.7
	med	149	50.7		no	<u>220</u>	<u>68.3</u>
	hi	<u>55</u>	<u>18.7</u>			322	100.0
		294	100.0				

TABLE 1 Continued

PRE-INSTITUTIONAL VARIABLES				TYPE OF CHARGE LEADING TO INCARCERATION			
		#	%		#	%	
Prior Drug Use	yes	166	51.7	Against Person (Assault etc.)	18	5.3	
	no	155	48.3				
		321	100.0				
Alcohol Use	none	58	18.1	Against Property - fraud, forgery uttering, etc. - theft B & E etc.	105	31.1	
	social	145	45.2				
	somewhat	50	15.6				
	great deal	68	21.2				
		321	100.0				
Drug or Alcohol Problem in Family	neither	159	49.4	Against Public Morals (prostitution, obscene literature, etc.)	34	10.1	
	alcohol	82	25.5				
	drugs	38	11.8				
	both	43	13.4				
		322	100.0				
School Grade Level	less than 7	34	10.6	Against Public Order - drug offences - unlawfully at large mischief etc.	42	12.4	
	7 - 9	138	43.0				
	10,11 or vocat.	103	32.1				
	over 11	46	14.3				
		321	100.0				
Special Job Related Training	complete	66	20.8	Liquor Offences	21	6.2	
	incomplete	62	19.5				
	none	190	59.7				
		318	100.0				
Longest Held Previous Job	over 1 yr	138	42.9	Traffic and Other	16	4.7	
	6 mos - 1 yr	47	14.6				
	under 6 mos	137	42.5				
		322	100.0				
Time Since Last Job	working at arrest	86	32.3	The total will be over 100% since one subject may be included in more than one category, having had changes in each of more than one groups.			
	less than 1 yr	119	44.7				
	over 1 yr	61	22.9				
		266	100.0				

TABLE 1 Continued

INTRA-INSTITUTIONAL VARIABLES				INTRA-INSTITUTIONAL VARIABLES				
		#	%		#	%		
Cottage Assignment	not assigned	46	13.6	Involved in T. A. P. for Work or School Program	yes	21	6.2	
	one	9	2.7		no	317	93.8	
	two	90	26.6			338	100.0	
	three	77	22.8		Involved in School Program	yes	180	54.2
	four	70	20.7			no	152	45.8
	five	40	11.8				332	100.0
	other	6	1.8		Perceived Chances of Success	much	147	57.4
	338	100.0	some	49		19.1		
			little	60		23.4		
Time in Vanier	under 2 mos	113	33.4		256	100.0		
	2 - 4 mos	86	25.4	Involvement in Clinical Programs	much	92	34.2	
	4 - 6 mos	67	19.8		some	125	46.5	
	6 - 8 mos	35	10.4		little	52	19.3	
	over 8 mos	37	10.9		269	100.0		
	338	100.0						
Indications of Serious Misbehaviour	yes	102	30.2	POST-INSTITUTIONAL VARIABLES				
	no	236	69.8	Employment Situation	poor	84	50.0	
	338	100.0	fair		52	31.0		
			acceptable		32	19.0		
Cottage Evaluation	low	102	33.3		168	100.0 *		
	med	122	39.9	Did Subject Work During Follow-up Period	yes	123	68.7	
	hi	82	26.8		no	56	31.3	
	306	100.0			179	100.0		
Work Evaluation	low	48	17.0	Employed at Time of Interview	yes	53	29.6	
	med	88	31.2		no	126	70.4	
	hi	146	51.8			179	100.0	
	282	100.0						
School Evaluation	low	16	10.3					
	med	61	39.4					
	hi	78	50.3					
	155	100.0						

* The employment index does not include 11 subjects who were either attending school or were fully supported in a home situation requiring no public support.

TABLE 1 Continued

POST-INSTITUTIONAL VARIABLES			POST-INSTITUTIONAL VARIABLES		
	#	%		#	%
Financial Adequacy			Family Relationships		
good	61	34.1	close & living with	60	33.5
fair	65	36.3	close or living with	84	46.9
problems	53	29.6	neither	35	19.6
	179	100.0		179	100.0
Additional Schooling After Vanier			Physical Health		
yes	29	16.2	serious illness	63	35.2
no	150	83.8	none	116	64.8
	179	100.0		179	100.0
Residential Adequacy			Use of Community Resources		
stable & satisfied	65	36.3	extensive	79	44.1
stable or satisfied	61	34.1	some	62	34.6
neither	53	29.6	little or none	38	21.2
	179	100.0		179	100.0
Area Living in					
city/suburb	113	63.5			
other	65	36.5			
	178	100.0			
Emotional Health					
good	74	41.3			
fair	44	24.6			
poor	61	34.1			
	179	100.0			
Treated by Psychiatrist					
yes	32	17.9			
no	147	82.1			
	179	100.0			

TABLE 2

PRE-INSTITUTIONAL VARIABLES AND RECIDIVISM

PRE-INSTITUTIONAL VARIABLES	None		Recidivism		Total Recid. #	100% =			
	#	%	1st Yr #	2nd Yr #					
Racial Origin									
white	171	(66.0)	55	(21.2)	33	(12.7)	88	(33.9)	259
Indian	16	(40.0)	15	(37.5)	9	(22.5)	24	(60.0)	40
other	16	(80.0)	2	(10.0)	2	(10.0)	4	(20.0)	20
$\chi^2=12.75$ $df=4$ $p<.05$									
Age									
under 20	61	(62.2)	24	(24.5)	13	(13.3)	37	(37.8)	98
20 - 25	61	(66.3)	21	(22.8)	10	(10.9)	31	(33.7)	92
over 25	84	(63.6)	27	(20.5)	21	(15.9)	48	(36.4)	132
$\chi^2=1.57$ $df=4$ $p>.05$									
Previous Convictions									
none	100	(79.4)	18	(14.3)	8	(6.3)	26	(20.6)	126
one	44	(63.8)	16	(23.2)	9	(13.0)	25	(36.2)	69
over one	68	(47.6)	46	(32.2)	29	(20.3)	75	(52.5)	143
$\chi^2=29.45$ $df=4$ $p<.001$									
Previous Incarcerations									
yes	63	(46.3)	47	(34.6)	26	(19.1)	73	(53.7)	136
no	149	(73.8)	33	(16.3)	20	(9.9)	53	(26.2)	202
$\chi^2=26.23$ $df=2$ $p<.001$									
Juvenile Criminality									
yes	49	(50.5)	30	(30.9)	18	(18.6)	48	(49.5)	97
no	163	(67.9)	49	(20.4)	28	(11.7)	77	(32.1)	240
$\chi^2=8.98$ $df=2$ $p<.05$									
Family Trouble with Law									
yes	80	(54.4)	41	(27.9)	26	(17.7)	67	(45.6)	147
no	122	(72.2)	29	(17.2)	18	(10.7)	47	(27.9)	169
$\chi^2=10.76$ $df=2$ $p<.01$									
Friends Trouble with Law									
yes	126	(58.1)	57	(26.3)	34	(15.7)	91	(42.0)	217
no	74	(77.1)	13	(13.5)	9	(9.4)	22	(22.9)	96
$\chi^2=10.51$ $df=2$ $p<.01$									
Work & Education Status of Parents									
low	61	(67.8)	21	(23.3)	8	(8.9)	29	(32.2)	90
med	93	(62.4)	34	(22.8)	22	(14.8)	56	(37.6)	149
hi	35	(63.6)	8	(14.5)	12	(21.8)	20	(36.3)	55
$\chi^2=5.80$ $df=4$ $p>.05$									

TABLE 2 Continued

PRE- INSTITUTIONAL VARIABLES	None		Recidivism				Total Recid. # %	100% =
	#	%	1st Yr # %	2nd Yr # %				
Financial Situation During Childhood								
problem	84	(66.1)	21 (16.5)	22 (17.3)	43 (33.8)	127		
fair	85	(65.9)	27 (20.9)	17 (13.2)	44 (34.1)	129		
good	37	(56.1)	24 (36.4)	5 (7.6)	29 (44.0)	66		
$\chi^2=11.70$ $df=4$ $p<.05$								
Stability (# of childhood living situations)								
one	100	(72.5)	25 (18.1)	13 (9.4)	38 (27.5)	138		
two	79	(60.8)	28 (21.5)	23 (17.7)	51 (39.2)	130		
more than 2	27	(50.0)	19 (35.2)	8 (14.8)	27 (50.0)	54		
$\chi^2=11.95$ $df=4$ $p<.05$								
Ever Live without Either Parents								
yes	70	(53.8)	37 (28.5)	23 (17.7)	60 (46.2)	130		
no	132	(70.6)	34 (18.2)	21 (11.2)	55 (29.4)	187		
$\chi^2=9.30$ $df=2$ $p<.01$								
Psychiatric History								
no treatment	114	(63.3)	46 (25.6)	20 (11.1)	66 (36.7)	180		
out-patient	43	(71.7)	9 (15.0)	8 (13.3)	17 (28.3)	60		
hospitalized	39	(47.6)	25 (30.5)	18 (22.0)	43 (52.5)	82		
$\chi^2=13.56$ $df=4$ $p<.01$								
Prior Drug Use								
yes	89	(53.6)	47 (28.3)	30 (18.1)	77 (46.4)	166		
no	116	(74.8)	25 (16.1)	14 (9.0)	39 (25.1)	155		
$\chi^2=15.74$ $df=2$ $p<.001$								
Alcohol Use								
none	42	(72.4)	14 (24.1)	2 (3.4)	16 (27.5)	58		
social	92	(63.4)	28 (19.3)	25 (17.2)	53 (36.5)	145		
somewhat	35	(70.0)	6 (12.0)	9 (18.0)	15 (30.0)	50		
great deal	37	(54.4)	24 (35.3)	7 (10.3)	31 (45.6)	68		
$\chi^2=17.21$ $df=4$ $p<.01$								
Drug or Alcohol Problem in Family								
neither	120	(75.5)	25 (15.7)	14 (8.8)	39 (24.5)	159		
alcohol only	50	(61.0)	20 (24.4)	12 (14.6)	32 (39.0)	82		
drugs only	17	(44.7)	10 (26.3)	11 (28.9)	21 (55.2)	38		
both	19	(44.2)	17 (39.5)	7 (16.3)	24 (55.8)	43		
$\chi^2=26.97$ $df=6$ $p<.001$								

TABLE 2 Continued

PRE- INSTITUTIONAL VARIABLES	None		Recidivism				Total Recid. # %	100% =
	#	%	1st Yr # %	2nd Yr # %				
School Grade Level								
less than 7	18	(52.9)	14 (41.2)	2 (5.9)	16 (47.1)	34		
7 - 9	92	(66.7)	24 (17.4)	22 (15.9)	46 (33.3)	138		
10,11 or vocat.	65	(63.1)	28 (27.2)	10 (9.7)	38 (36.9)	103		
over 11	30	(65.2)	6 (13.0)	10 (21.7)	16 (34.7)	46		
$\chi^2=15.95$ $df=6$ $p<.05$								
Special Job Related Training								
complete	43	(65.2)	13 (19.7)	10 (15.2)	23 (34.9)	66		
incomplete	39	(62.9)	11 (17.7)	12 (19.4)	23 (37.1)	62		
none	123	(64.7)	45 (23.7)	22 (11.6)	67 (35.3)	190		
$\chi^2=3.09$ $df=4$ $p>.05$								
Longest Held Previous Job								
over 1 yr	94	(68.1)	22 (15.9)	22 (15.9)	44 (31.8)	138		
6 mos - 1 yr	30	(63.8)	10 (21.3)	7 (14.9)	17 (36.2)	47		
under 6 mos	82	(59.9)	40 (29.2)	15 (10.9)	55 (40.1)	137		
$\chi^2=7.48$ $df=4$ $p>.05$								
Time Since Last Job								
working at arrest	65	(75.6)	9 (10.5)	12 (14.0)	21 (24.5)	86		
less than 1 yr	80	(67.2)	24 (20.2)	15 (12.6)	39 (32.8)	119		
over 1 yr	35	(57.4)	14 (23.0)	12 (19.7)	26 (42.6)	61		
$\chi^2=7.08$ $df=4$ $p>.05$								

TABLE 3
 RECIDIVISM BY QUALITY OF LIFE OUTCOME VARIABLES

OUTCOME VARIABLES	None		Recidivism				Total	100% =	
	#	%	#	1st Yr %	#	2nd Yr %			#
Employment Situation									
poor	37	(44.0)	31	(36.9)	16	(19.0)	47	(55.9)	84
fair	33	(63.5)	7	(13.5)	12	(23.1)	19	(36.6)	52
acceptable	27	(84.4)	3	(9.4)	2	(6.3)	5	(15.7)	32
	$\chi^2=21.12$		$df=4$		$p<.001$				
Financial Adequacy									
good	39	(63.9)	9	(14.8)	13	(21.3)	22	(36.1)	61
fair	37	(56.9)	18	(27.7)	10	(15.4)	28	(43.1)	65
problem	30	(56.6)	15	(28.3)	8	(15.1)	23	(43.4)	53
	$\chi^2=4.20$		$df=4$		$p>.05$				
Residential Adequacy									
stable and satisfied	47	(72.3)	9	(13.8)	9	(16.1)	18	(27.7)	65
stable or satisfied	31	(29.2)	16	(26.2)	14	(15.1)	30	(41.1)	61
neither	28	(52.8)	17	(32.1)	8	(15.1)	25	(47.2)	53
	$\chi^2=9.13$		$df=4$		$p>.05$				
Family Relationships									
close and living with	47	(78.3)	6	(10.0)	7	(11.7)	13	(21.7)	60
close or living with	44	(52.4)	21	(25.0)	19	(22.6)	40	(47.6)	84
neither	15	(42.9)	15	(42.9)	5	(14.2)	20	(57.1)	35
	$\chi^2=18.93$		$df=4$		$p<.001$				
Physical Health									
serious illness	40	(63.5)	14	(22.2)	9	(14.3)	23	(36.5)	63
none	66	(56.9)	28	(24.1)	22	(19.0)	50	(43.1)	116
	$\chi^2=0.88$		$df=2$		$p>.05$				
Emotional Health									
good	53	(71.6)	10	(13.5)	11	(14.9)	21	(28.4)	74
fair	26	(59.1)	11	(25.0)	7	(15.9)	18	(40.9)	44
poor	27	(44.3)	21	(34.4)	13	(21.3)	34	(55.7)	61
	$\chi^2=11.39$		$df=4$		$p<.05$				
Use of Resources									
extensive use	41	(51.9)	25	(31.6)	13	(16.5)	38	(48.1)	79
some use	39	(62.9)	10	(16.1)	13	(21.0)	23	(37.1)	62
little or no use	26	(68.4)	7	(18.4)	5	(13.2)	12	(31.6)	38
	$\chi^2=1.69$		$df=2$		$p>.05$				

TABLE 4
 INTRA-INSTITUTIONAL VARIABLES AND RECIDIVISM

INTRA-INSTITUTIONAL VARIABLES	None		Recidivism				Total Recid	100% =	
	#	%	#	1st Yr %	#	2nd Yr %			#
Cottage Assignment									
not assigned	26	(56.5)	16	(34.8)	4	(8.7)	20	(43.5)	46
one	7	(77.8)	0	(0.0)	2	(22.2)	2	(22.2)	9
two	60	(66.7)	18	(20.0)	12	(13.3)	30	(33.3)	90
three	55	(71.4)	11	(14.3)	11	(14.3)	22	(28.6)	77
four	36	(51.4)	23	(32.9)	11	(15.7)	34	(48.6)	70
five	27	(67.5)	9	(22.5)	4	(10.0)	13	(32.5)	40
other	1	(16.7)	3	(50.0)	2	(33.3)	5	(83.3)	6
	$\chi^2=21.21$		$df=12$		$p<.05$				
Time in Vanier									
under 2 mos	69	(61.1)	36	(31.9)	8	(7.1)	44	(39.0)	113
2 - 4 mos	56	(65.1)	24	(27.9)	6	(7.0)	30	(34.9)	86
4 - 6 mos	44	(65.7)	10	(14.9)	13	(19.4)	23	(34.3)	67
6 - 8 mos	21	(60.0)	4	(11.4)	10	(28.6)	14	(40.0)	35
over 8 mos	22	(59.5)	6	(16.2)	9	(24.3)	15	(40.5)	37
	$\chi^2=26.28$		$df=8$		$p<.001$				
Indications of Serious Misbehaviour									
yes	50	(49.0)	28	(27.5)	24	(23.5)	52	(51.0)	102
no	162	(68.6)	52	(22.0)	22	(9.3)	74	(31.3)	236
	$\chi^2=15.82$		$df=2$		$p<.001$				
Cottage Evaluation									
low	53	(52.0)	41	(40.2)	8	(7.8)	49	(48.0)	102
med	78	(63.9)	21	(17.2)	23	(18.9)	44	(36.1)	122
hi	62	(75.6)	10	(12.2)	10	(12.2)	20	(24.4)	82
	$\chi^2=27.79$		$df=4$		$p<.001$				
Perceived Chances of Success									
much	109	(74.1)	23	(15.6)	15	(10.2)	38	(25.8)	147
some	32	(65.3)	9	(18.4)	8	(16.3)	17	(34.7)	49
little	29	(48.3)	22	(36.7)	9	(15.0)	31	(51.7)	60
	$\chi^2=14.92$		$df=4$		$p>.01$				
Involvement in Clinical Programs									
much	59	(64.1)	21	(22.8)	12	(13.0)	33	(35.8)	92
some	87	(69.6)	21	(16.8)	17	(13.6)	38	(30.4)	125
little	33	(63.5)	14	(26.9)	5	(9.6)	19	(36.5)	52
	$\chi^2=2.89$		$df=4$		$p>.05$				

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