Systems for Action
National Coordinating Center
Systems and Services Research to Build a Culture of Health

Strategies to Achieve Alignment, Collaboration, and Synergy Across Delivery and Financing Systems

Addressing the Health and Social Needs of Justice-Involved Young Adults

Research In Progress Webinar
Wednesday, October 9th, 2019
12:00-1:00 pm ET/9:00-10:00am PT

colorado school of public health

Agenda

Welcome: Moderated by Glen Mays

Presenters: George Naufal, Emily Naiser, Renee Danser

Commentary: Elizabeth Henneke

Q&A: Moderated by Glen Mays

Presenter

George Naufal, PhD is an Assistant Research Scientist at the Public Policy Research Institute (PPRI) at Texas A&M University and a research fellow at the IZA Institute of Labor Economics. George is also a Visiting Scientist at the Center for Outcomes Research at Houston Methodist. Previously he was the Technical Director at Timberlake Consultants. He was also an Assistant/Associate Professor of Economics at The American University of Sharjah (2007 to 2014) in the United Arab Emirates. George earned his PhD in Economics in 2007 from Texas A&M University. His area of expertise is applied econometrics with applications to labor economics including criminal justice, and public health.

Presenter

Emily Naiser, has over ten years of research experience as a project director at PPRI. She has collaborated on projects in a range of disciplines, including public health, education and criminal justice. Emily uses both qualitative and quantitative analysis methods to ascertain program effectiveness and develop best practice recommendations to state-level policymakers. She has conducted community needs assessments and evaluations of various programs aiming to improve the health and well-being of women and children with special health care needs, and has years of experience conducting research with vulnerable populations.

Presenter

Drawing on her knowledge of justice system operations and the pressures on the justice system, Renee Danser joined the Access to Justice Lab at Harvard Law School to incorporate rigorous research into improving access to justice. Ms. Danser believes that for our research to be impactful, we must recognize the strengths and weaknesses of the communities reviewing and incorporating it. Using her court management and non-profit leadership experience, Ms. Danser encourages courts and the justice community to think about their needs and the needs of their users and how to successfully balance those interests. Reach Ms. Danser at rdanser@law.harvard.edu.

Commentary

Elizabeth A. Henneke serves on the Juvenile Council for the State Bar of Texas, the Federal Advisory Committee on Juvenile Justice, OJJDP Subcommittee on LGBTQ Issues, the Collaborative Council for the Judicial Commission on Mental Health, as an advisor to the Texas Judicial Council Subcommittee on Juvenile Justice, and the Board of Directors for the Campaign for Youth Justice. Elizabeth graduated from Yale University and the University of Texas School of Law. She then served as a law clerk for the South Africa Constitutional Court and for Judge Edward C. Prado on the U.S. Court of Appeals, Fifth Circuit, before joining Williams & Connolly in Washington, D.C. Elizabeth has been a clinical instructor for the University of Texas' National Security & Human Rights Clinic, and was the inaugural Audrey Irmas Clinical Teaching Fellow at the University of Southern California Gould School of Law. Since founding LSJA, Elizabeth has received the Travis County Women Lawyers' Association Attorney Award, been recognized as the Austin Under 40 winner in the legal category, and was named a finalist in the DivInc. Champions for Change Rising Star Award.

Team

Research Team

- Public Policy Research Institute – Texas A&M University
  - George Naufal and Emily Naiser
- Access to Justice Lab – Harvard Law School
  - Jim Greiner and Renee Danser
- University of Texas Health Science Center
  - Vanessa Schick

Program Team

- Lone Star Justice Alliance
  - Elizabeth Henneke and Yulise Waters

Context

- Criminal justice system is failing emerging adults
  - Emerging adults make up 11% of Texas' population but account for 29% of arrests
  - Distinct health needs are being ignored: substance abuse, co-occurring disorders, emotional and physical trauma
  - Underlying factors focusing an individual to engage in criminal behavior are not being addressed

- Transformative Justice (TJ) is a program that offers a multi-dimensional intervention to reduce recidivism and improve health outcomes
  - Specifically targets emerging adults 17 – 24 years of age

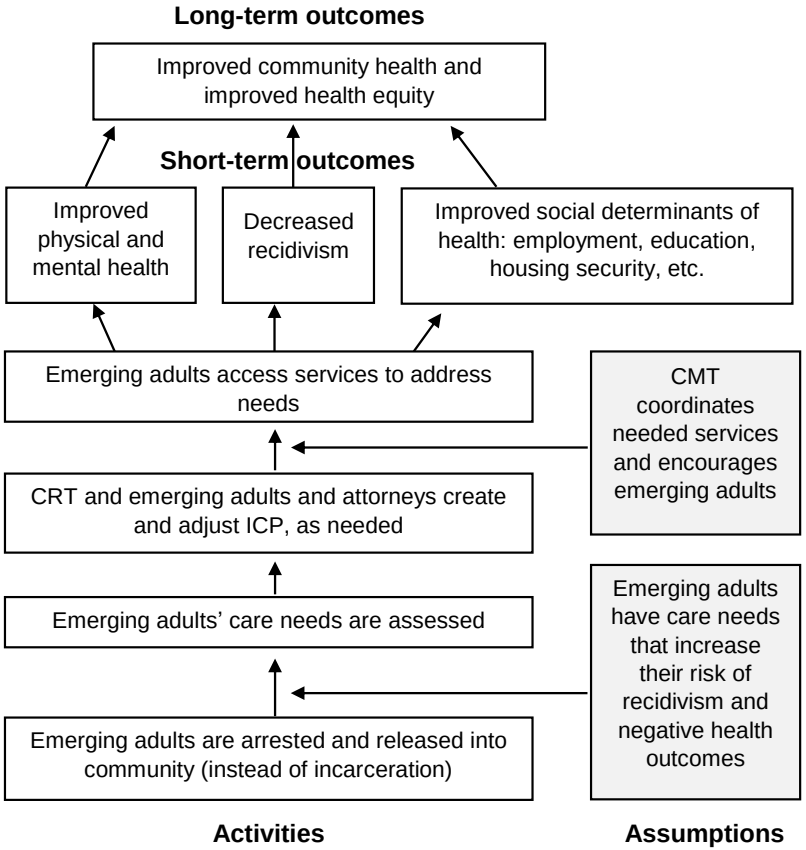
Research Questions

- Does a community-based services program led by team-based decision-makers improve emerging adults physical and mental health and reduce recidivism compared to the current criminal justice system? (RCT)
- What features of the program are driving these outcomes? How has the program changed over time? (Process Evaluation)

TJ Program

- Arrested emerging adults in treatment group will receive:
  - A needs assessment to determine factors contributing to criminal behavior
  - A case review team (CRT) will review the assessment and propose community-based services to best address these factors
  - The CRT will devise an Individual Care Plan (ICP) for each defendant
  - Each defendant will have a case management team (CMT) that will act as a liaison between the defendant and the CRT
  - Each defendant will be in the program for up to 18 months
  - The CRT will liaise with the county's criminal justice stakeholders

TJ Program – Theory of Change



Systems Approach

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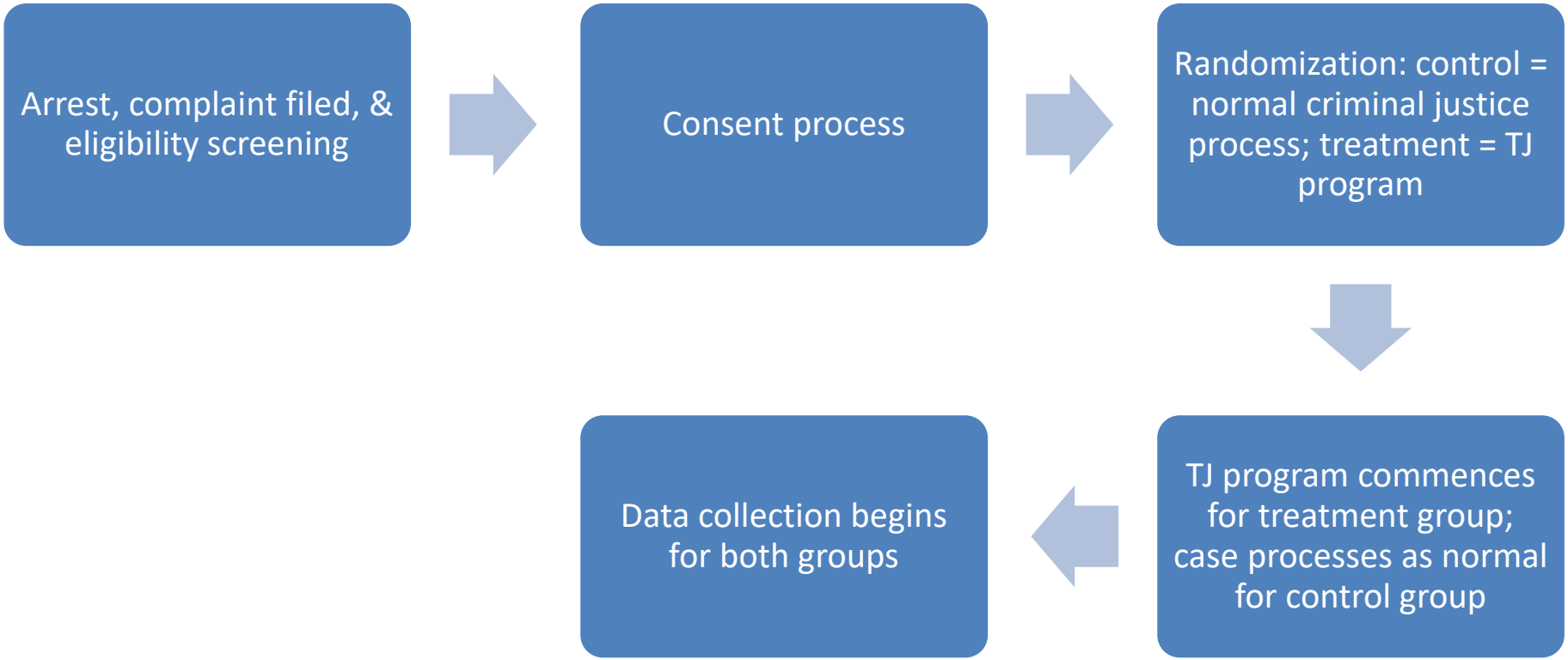
Key Ingredients of Systems for Action Research Projects	Our Proposed Project
Delivery and financing systems of interest	The TJ intervention is situated in the **criminal justice system** but will rely on a combination of **health care, mental health, substance use treatment, public health, housing and transportation services and systems in the community.**
Novel mechanisms for system alignment to be studied and tested	These complex systems and services will be primarily aligned through the **case review team (CRT) and case management team (CMT).** The CRT will be an interprofessional team that shares information and creates a care plan for each program participant based on assessed care priorities and cross-sector planning. The CMT will be relying on interorganizational partnerships to assist the participant in accessing services.
Community settings and populations groups to be engaged	The focus of the research is improving the health of emerging adults who are recently arrested. **Racial and ethnic minorities and individuals with mental illness or substance abuse issues will be a significant proportion of this.** Additionally, the TJ program will be **engaging a variety of community-based organizations including state agencies, local non-profits and other social service organizations.**
Multidisciplinary methodological approaches	The evaluation consists of 1) **Survey research** methods to collect data from program participants; 2) **Qualitative analysis** through process evaluation of program; and 3) **Data science** linking of administrative and survey data.

Study - RCT

- Eligibility
  - Any defendant between 17 and 24 arrested in Williamson County with an eligible offense

- Selection/Enrollment Process
  - Program manager and a defense attorney will inform and consent eligible defendants
  - Assignment occurs through random selection
  - We expect 12 enrollees per month; data collection will last for one year
    - Expect about 144 participants

Specifics of This RCT



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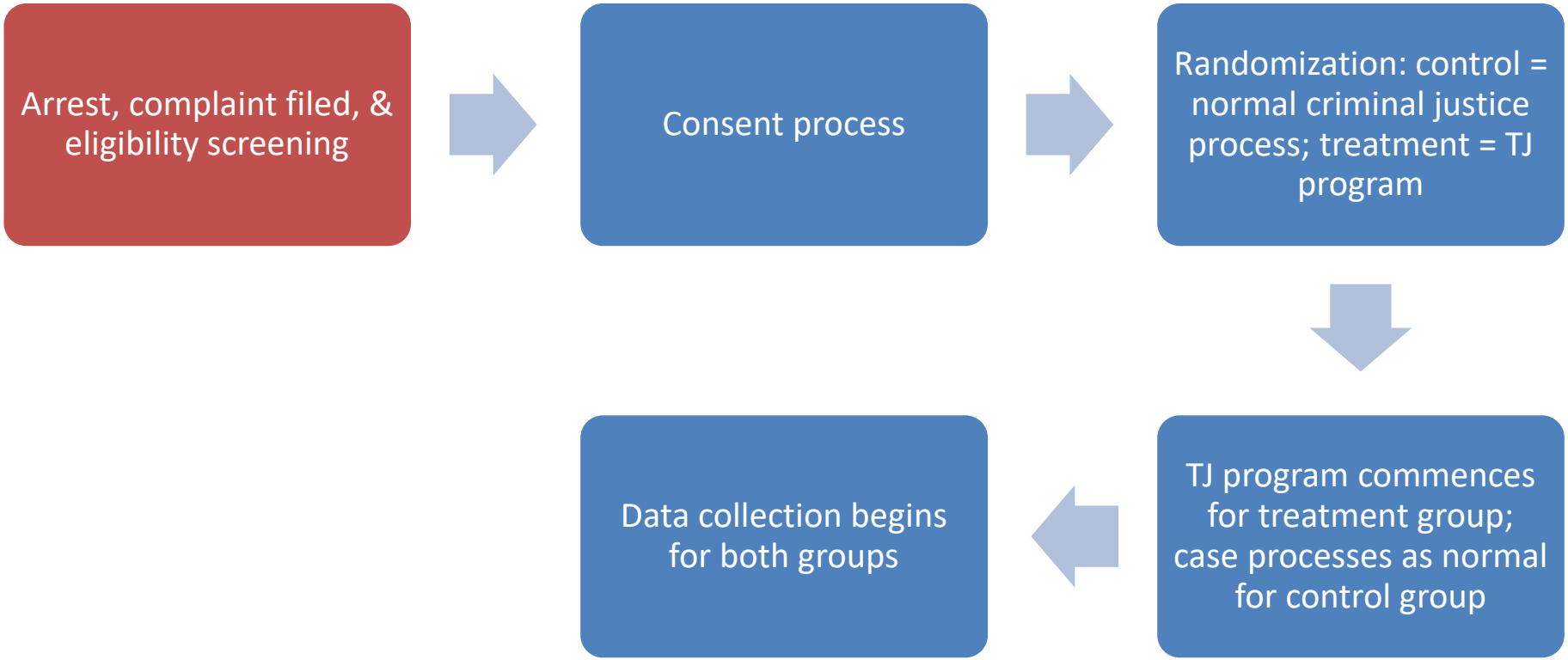

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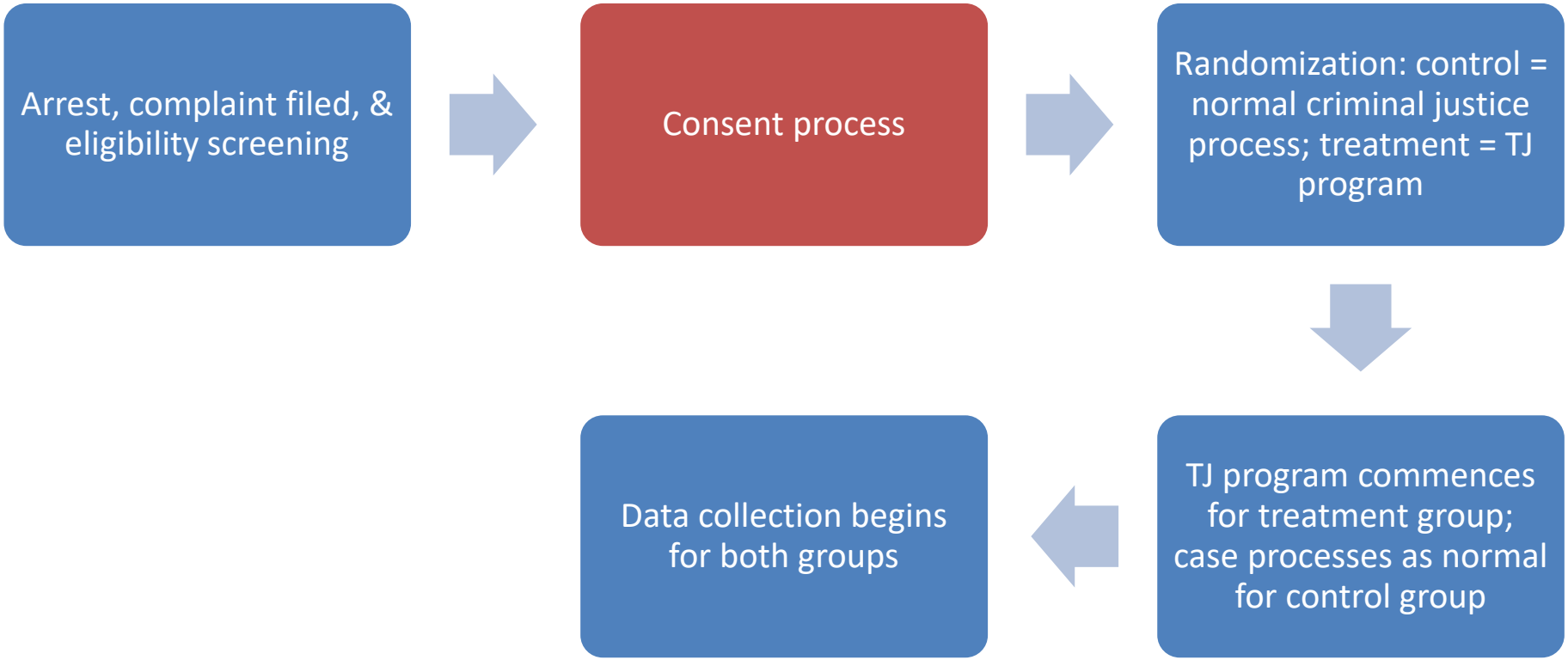

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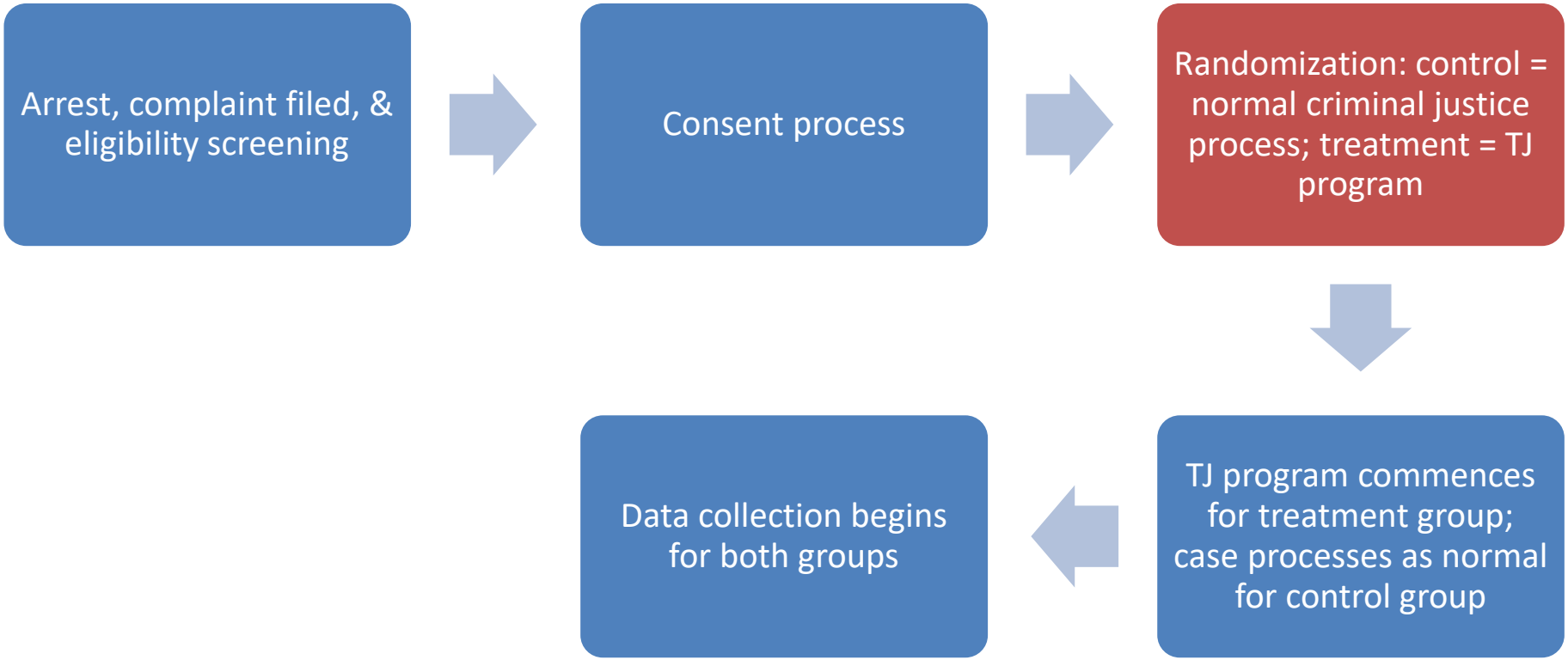

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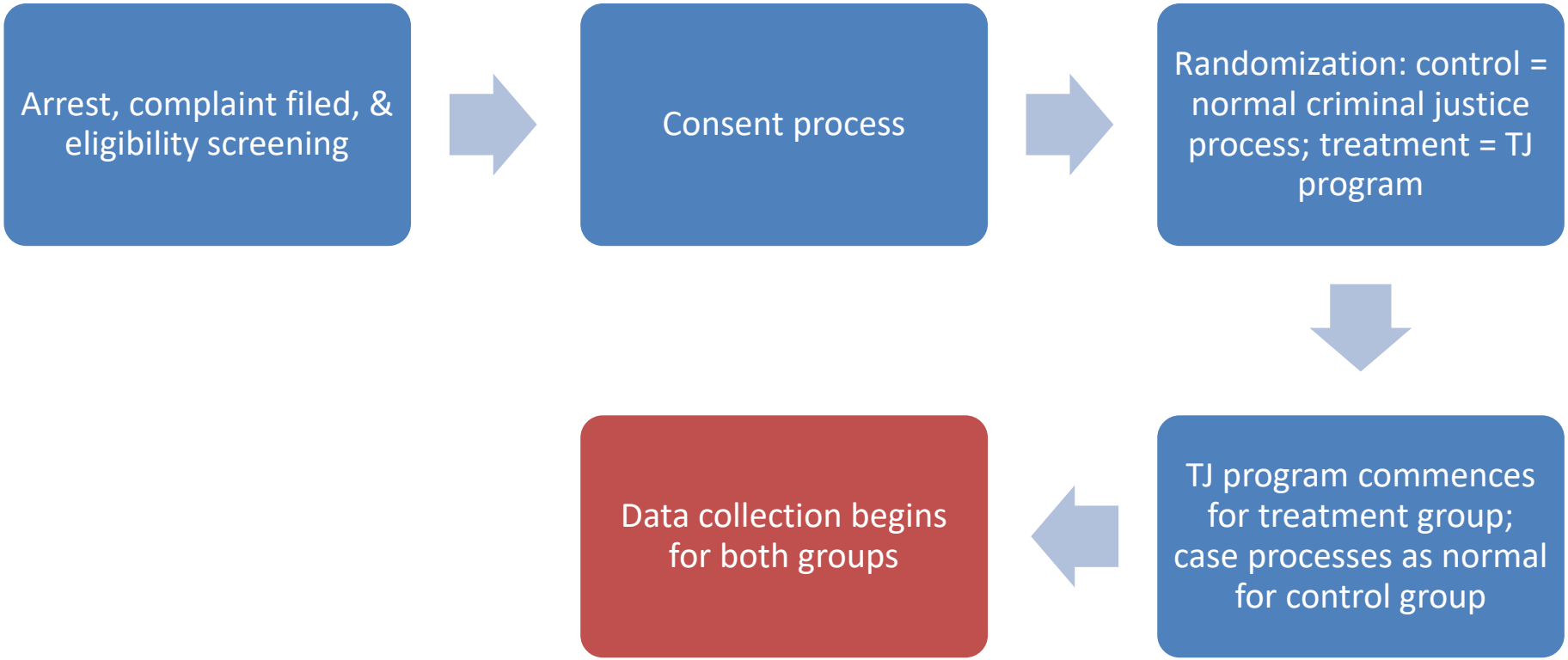
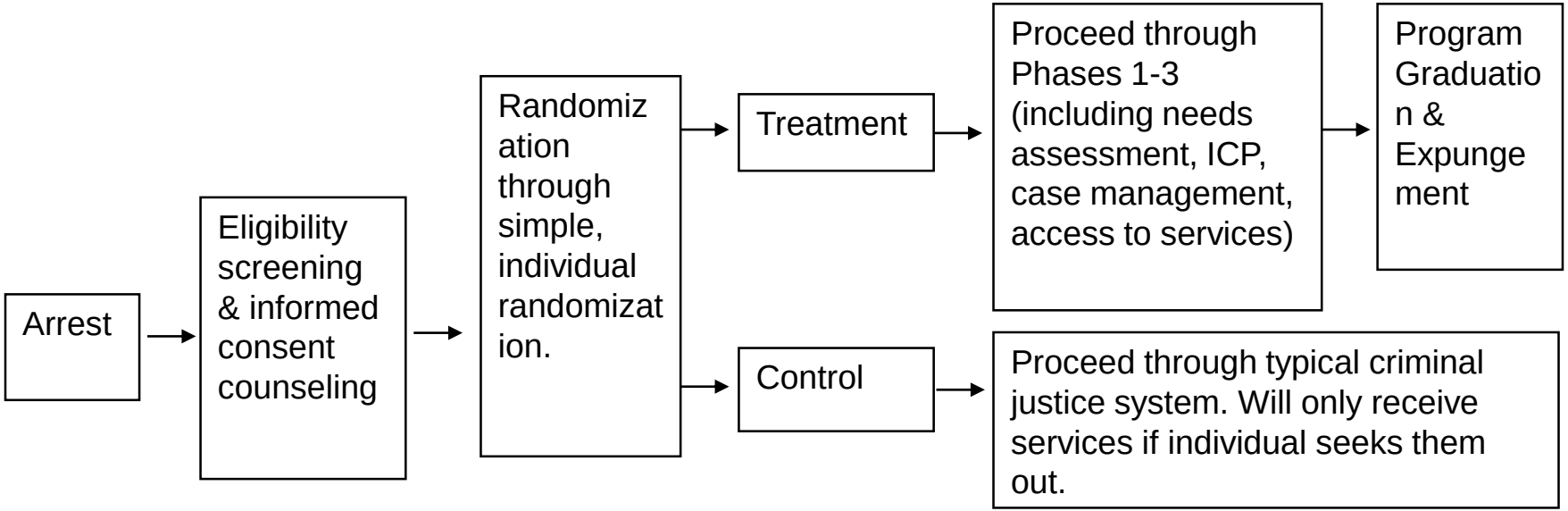


Study Flow



Evaluation data collection

Treatment and control will both:

- receive surveys on health outcomes for two years from randomization.
- be assessed via administrative records on recidivism

Outcomes of Interest

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- Recidivism
  - Defined as arrest within a specific period of time
- Health outcomes
  - Collect quarterly surveys using SF-12
- Potential other outcomes
  - Employment
  - Educational attainment
  - Housing

Data Collection

- Criminal justice data from the county
  - Allows us to compute recidivism

- Health data
  - At initial enrollment; $15 gift card for agreeing to participate in study and provide contact information
  - Collect a baseline survey in the first 5 days via a web-link and/or phone survey
  - Quarterly surveys for up to 2 year
    - Participants receive a $15 as a thank you for each completed survey

Data Collection

- Administrative data
  - Health care utilization
  - Employment
  - Educational attainment

Analysis

- Look at the difference between outcomes across groups by computing the average treatment effect (ATE)
  - Assignment-mechanism based tests (permutation tests and comparison of means)
  - Multivariate regression to control for covariates

- We construct multiple imputed datasets and implement bounds to address attrition

Study – Process Evaluation

- Essential component of the study – better understand
  - What factors are most associated with the outcomes
  - How the proposed system has changed over time

- Use a thorough approach
  - Document analysis
  - Semi-structured interviews with all involved/affected stakeholders
  - Focus groups
  - Direct observation

Study – Process Evaluation

- Main takeaways from the process evaluation will focus on
  - What are the most effective services received by participants?
  - What are the most effective elements of the program?
  - How did the program evolve over time?
  - How do participants feel about the program?
  - How has the local community (including the criminal justice system) interact with the program?

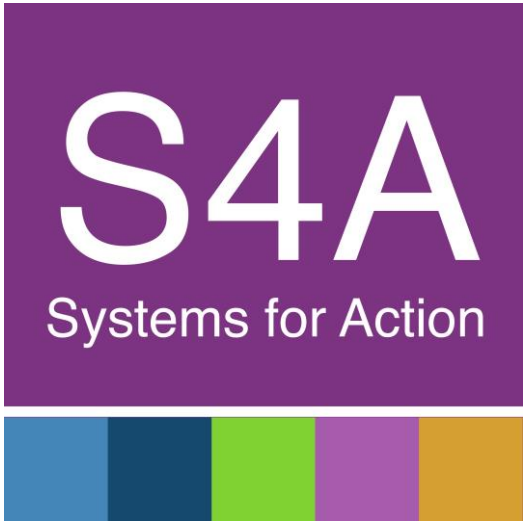
Dissemination

- Progress reports
- Presentations
- Briefs
- Final report
- Peer review articles

Progress to Date

- Program Launched at the end of September
  - Enrolling 1 person a week to refine processes until research launch
- 3 month planning period: July – October
  - Finalizing instruments and data collection

Questions?



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Upcoming Webinars

- **October 23rd, 2019**

Connecting Vulnerable Seniors to Nutrition Assistance Through a Managed Care Plan

Suzanne Kinsky, MPH, PhD, Adjust Assistant Professor, Behavioral and Community Health Sciences, University of Pittsburgh Medical Center and Alex Kalinowski, Benefits Data Trust

- **November 6th, 2019**

Can Subsidized Transportation Options Slow Diabetes Progression?

Fei Li, PhD, Assistant Professor, Georgia State University Research Foundation and Christopher Kajeian

- **November 20th, 2019**

Closing Gaps in Health and Social Services for Low-Income Pregnant Woman

Irene Vidyanti, PhD, Data Scientist, County of Los Angeles Department of Public Health and William Nicholas, PhD, Lecturer, Health Policy and Management, UCLA Fielding School of Public Health

Acknowledgements

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College of Public Health
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and

Gatton College of Business and Economics