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

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

Research-in-Progress Webinar
Wednesday, December 7, 2022
12-1pm ET
Georges Naufal, PhD is an Associate 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.
Emily Naiser, PhD 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.
Team

Research Team
• Public Policy Research Institute – Texas A&M University
  – Georges Naufal, Emily Naiser, and Heather Caspers

• Access to Justice Lab – Harvard Law School
  – Jim Greiner and Renee Danser

• University of Texas Health Science Center
  – Vanessa Schick

Program Team
• Williamson County
  – Judge Stacey Mathews, District Attorney Shawn Dick, Terence Davis
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
TJ Program

• Arrested emerging adults in treatment group receive:
  – A needs assessment to determine factors contributing to criminal behavior
  – An individual care plan utilizing community-based services to address those factors
  – Team-based case management
  – Expungement of their record upon successful completion of the program
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?
• What features of the program are driving these outcomes? How has the program changed over time?
• How is the program changing the community?
Study Methods

Randomized Control Trial
• Program manager and defense attorney consent and randomly assign eligible defendants at time of arrest
• Planned follow up for 2 years
• Primary outcomes – health (SF12), recidivism
• Expected 12 enrollees/month for 12 months (144 total)

Process Evaluation
• Multiple methods
  • Semi-structured interviews with all involved/affected stakeholders
  • Focus groups
  • Direct observation
  • Document analysis
RCT Challenges

- RCT launched November 2, 2020
- Challenges
  - Enrollment
  - Survey Completion
    - 50% Treatment; 30% Control over all followups
- Attempted Solutions
  - Doublecheck eligibility
  - Additional email after enrollment
  - Ask for additional contact-family/organization

![Total Participant Enrollment](chart)

116 after 25 months enrollment
Study Pool

• Demographics (62 defendants by Spring 2022)
  – Average Age: 20
  – Gender: 76% Male; 24% Female
  – Race: 77% White; 22% Black
  – Ethnicity: 34% Hispanic

• Charges
  – 87% have more than one charge
    • 62% have an additional felony; 38% have an additional misdemeanor
Study Pool at Baseline

- Worried about losing housing: 27%
- Do not have housing at time of arrest: 23%
- Worried food would run out in last 3 months: 24%
- Health impacted social activities in last 4 weeks: 60%
- Downhearted or depressed in last 4 weeks: 69%
- Health impacted work in last 4 weeks: 52%

Percent Participants at Baseline (n = 82)
RCT

• Randomization is still ongoing

• Stopped survey follow-up (July 2022)

• Focusing on recidivism outcome only
Process Evaluation

• Methods
  – Phase 1 of Data Collection – Summer 2021
    • Interviews with Program Implementers
      – 1 Program Director, 3 Case Managers, 2 Program Lawyers
      – 2 Judges, 1 District Attorney, 2 County Staff
      – 3 Service Providers
    • Focus groups with 14 participants (2 graduates, 12 active)
    • Observed Pre-Court planning meeting, Court Session for all active participants, and Life Skills Course
  – Phase 2 of Data Collection – May 2022
    • Interviews with Program Implementers
      – 1 Program Director, 3 Case Managers, 1 Program Lawyer, 1 Judge
    • Observed Pre-Court planning meeting, Court session for participants
    • Obtained case management notes
In Phase 1, we learned:

• What’s working on program implementation
  – Drug treatment, case management, jobs and education support, life skills
  – Build relationship with participants but still hold them accountable
  – Having a dedicated team that communicates a lot

• Challenges to program implementation
  – Transportation, housing, consistent counseling/mental healthcare
  – Getting the match between services and need just right
  – Small number of participants
In Phase 1, we learned:

- From the participant perspective:
  - Supportive team is key
  - Struggle to accommodate requirements
  - Shifting perspectives

- Program implementers and participants have dozens of stories about impact

- Seeing shifts in community about criminal justice

- Participants want to get involved with community

“I am a totally different person from who I was at the beginning of this program, so I am grateful and have a new perspective towards life. I can now reflect on my past and do not want to go back.”

“This program, because it gives us a chance in life and having a future. If it was not for this program, we would all have a bleak future. With a felony record or pending felony, we cannot even sign a lease for an apartment or we have to pay a lot more.”
Phase 2

• Discussion focused on:
  – How has program evolved?
  – Is the program still seen as impactful and in what ways?

• Deeper analysis on:
  – What is needed for program to work?
Program Evolution

• Change in participant population
  – Growth
  – Younger, more severe drugs -> different motivations, different needs

• Change in Case Management
  – Larger caseload
  – Relying more on peers

“When we had less people, we have more time to hold people's hands...be with them on a daily basis and check in with them way more, maybe a little bit too much. Now that we have less people...we have them take more accountability and keeping track of their schedules, making sure they do what they're supposed to do without us prompting them on a daily basis...I think it's been a good wake up call for us to adjust how we manage our clients because we want them at the end of the day to be more independent right and be able to when they graduate live without us...Being able to put more power into our clients’ hands has been a good change of pace that's come with having more people.”
Program Evolution

• Change in Program
  – Increasing buy-in from participants
  – Closing some of the service gaps in housing, mental health.

• Change in Court
  – If doing well, do not have to appear in court as often

“One of the things that we've been talking about too, recently, is the need for aftercare after this program...after that 18 months, maybe we want to still have our hands on them a little bit, and make sure that they're okay, and not just like cut them off completely. And I think that especially with people who are dealing with substance use issues who cannot be solved in 18 months, I think that in order to prevent a rearrest, having some kind of aftercare program after this is all done in over would be awesome, what that would look like I have no idea. But some way to still take care of their needs, even though they have that expunction now, they're still having issues that it needs to be addressed.”
“[Success is n]ot just not getting arrested again, but what led them to their arrest in the first place, acknowledging they have some part in it but also...’I experienced this’, and this doesn't have to be my life. But it can go a different way. Even if I have experienced these traumatic events, I have other options.’ That is success to me, if I can, get that little light bulb to click on and be like, Oh, I don't have to do this, or there's something else I can do to release this pain or to be more productive, that I've been successful. And sometimes that doesn't happen right away. It takes a little encouragement, or sometimes it happens, and it goes back out. So but to see that growth throughout the program, and grow for everyone isn't the same pace is not a linear growth, sometimes it's jagged, up and down. But as long as I'm seeing some type of growth, I consider it successful.”

- Participants have admitted program has kept them from re-offending.
- Stakeholders describe participant attitude and behavior change as success
“[The system is] so punitive. And what we're doing is more therapeutic. And they see that and they see how we interact with our clients, and how we present them in court. And is not just a judge staring down at you. But she's actually asking you what's happening in your life. How can your case manager support you? What do you need? And so that is changing, and I see it in the DAs face when he is there. And then when people come in and they might sit from other offices just to see how we're running operating. There really, you know, thinking back about how transformative justice runs its caseload”

“We are seeing a lot more violent crime in our community. Not in our program, but in our in the community. [Because of the pandemic and rapid community growth] we've just seen really uptick in violent crime. People are still very supportive [of the program]. If you can explain to them why lower-level nonviolent offenses, we just need to get them out of the system. So we can put our resources to [that] end. And now that we have some really violent crime, I think, people [say this is] where our resources in criminal justice should be. We still need the social resources, we still need the community resources for these lower level offenders where we can divert them out of the courts [and] let all of our time be focused on more than more serious offenders in court and trials and that kind of thing”
“The [statistic] is 85% [of this population] are going to recidivate.... that means automatically, we know, a lot of them are gonna get in trouble. And so, does that mean, we don't care? No, but it means we're fighting against tremendous odds. So if we can get that number down to 50%, or something different, better, a lot better than [85%], that still means half of the kids that we come in contact with, are going to be in trouble again. And that really hurts. But I think we have to focus on the reduction that we are doing instead of worrying about the ones that don't, you know, as hard as that is, it's kind of like, ‘well, we are making an impact’. So do we care about 3.5 of the kids? and I say yes. And so that's what this program is designed to do is focus on the 3.5, and protect the community at the same time.”
What is needed to work?

• Reconfirming many of the ideas we learned last time.
• Additionally:
  – Have flexibility
  – Get participant buy-in
  – Consider the positives and negatives of family involvement
  – Manage the community service resources and outreach takes more effort than originally thought

“Because I don't just deal with the participants because like I said, I deal with their families. I'm asking them what their support looks like, what their home life looks like, who do they live with? Who do you think will support you to complete this program...And I have that meeting and kind of with their permission, go over what the program is what their case plan might look like. And if they're open and willing to be a part of the case management experience with me.”

“the negatives are, sometimes the problems originated already. So we're just we're just now we have two participants, the parent and the child to some degree. We have one parent who's an enabler, right? And [they hand-hold the] participant to death...and then there are others that contribute to the cycle, right?...we've had some [participant] struggling with alcohol, and then [the parent says] wow, I 'like you more when you drink', you know, stupid stuff like that.”
Takeaways

• Need extended time to identify the impact of such programs

• Outcomes are multi-dimension

• Need creative ways to be able to collect data
Next Steps

• Finalize these results for publication

• Text analysis on check-in data

• County received a grant to continue program, with an evaluation
Acknowledgements

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