

Mentoring as a Critical Tool for Effective Juvenile Reentry

Written Testimony Submitted to the Congressional Briefing on Supporting Youth
Reentry from Out-of-Home Placement to the Community

Senate Hart Office Building, Room 902

12:00 pm

November 16, 2009

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*The author thanks Crystal Garcia, Richard Guernsey, William Glick, and Joann Helferich for their feedback and input on earlier drafts of this document.

Dear Senator Cardin, and Members of the Senate and House of Representatives:

My name is Roger Jarjoura. I am an associate professor in the School of Public and Environmental Affairs at Indiana University in Indianapolis. I am also the founder of a juvenile reentry program based in Indianapolis, Indiana. I thank you for the opportunity to participate on this panel and speak to you today about issues surrounding juvenile reentry and some promising strategies. I intend to offer a framework for understanding the dynamics of reentry and will tell you about an evidenced-based model that has been operating in Indiana for close to 15 years.

Aftercare for the Incarcerated through Mentoring (AIM) was launched in 1996 as a joint research project and a service-learning opportunity for students at my university. When the data showed that the program contributed to a successful reentry, we expanded the project into a statewide effort, serving youth at as many as nine juvenile correctional facilities and returning to 12 different regions across the state. In 2007, the program was transitioned out of the university and is now a division of the Indiana Juvenile Justice Task Force, Inc., a private not-for-profit corporation that seeks to impact systems and policies so as to ensure the well-being of youth and families involved in the juvenile justice system across Indiana. I am currently a member of the Board of Directors at the Task Force and chair the AIM Advisory Committee. I am accompanied here today by the executive director of the Task Force, William Glick, the program director of AIM, Joann Helferich, and two recent participants of the program that currently serve on our Advisory Committee, Brandon Jordan and Dominique Lincey.

What I will tell you about juvenile reentry is based not only on my experiences in developing and implementing a comprehensive community-based strategy since the mid-1990s. In addition, I have been an evaluator for other juvenile reentry programs in other parts of the U.S. As I became aware of common challenges facing various efforts in different locations, this led to the establishment of a Reentry Training Institute that specializes in state-of-the-art training programs to prepare reentry professionals at both the juvenile and adult levels. Since 2005, persons from nearly 200 different agencies in 37 different states across the United States have completed the AIM Training Institute. I am currently the Chair of the Indiana Juvenile Justice State Advisory Group. Our JJSAG has recently identified juvenile reentry as one of our priorities for the new three-year plan. We will lay out a model for comprehensive juvenile

reentry programming in our state. Local programs receiving Title II funding for reentry efforts must fit within the comprehensive model from this point forward.

The mission of AIM (Aftercare for the Incarcerated through Mentoring) includes a deliberate effort to support Indiana's incarcerated youth in making the transition from correctional settings to community through healthy relationships with adult mentors. As mentors, our goal is to provide as much positive reentry support as possible to incarcerated youth who are returning to local communities. We provide effective role models that target the unique needs of these youth for them to build pro-social capital. We do this by inspiring purpose, motivation and direction for as long as the youth are receptive to our help. With a focus on life skills, we steer the youth toward success by teaching them how to identify and engage the community resources and service providers that can best assist them in their transition. We inspire the youth to pursue successful and productive futures. We teach them that they can reach their full potential through self-development, utilization of community resources, and hard work.

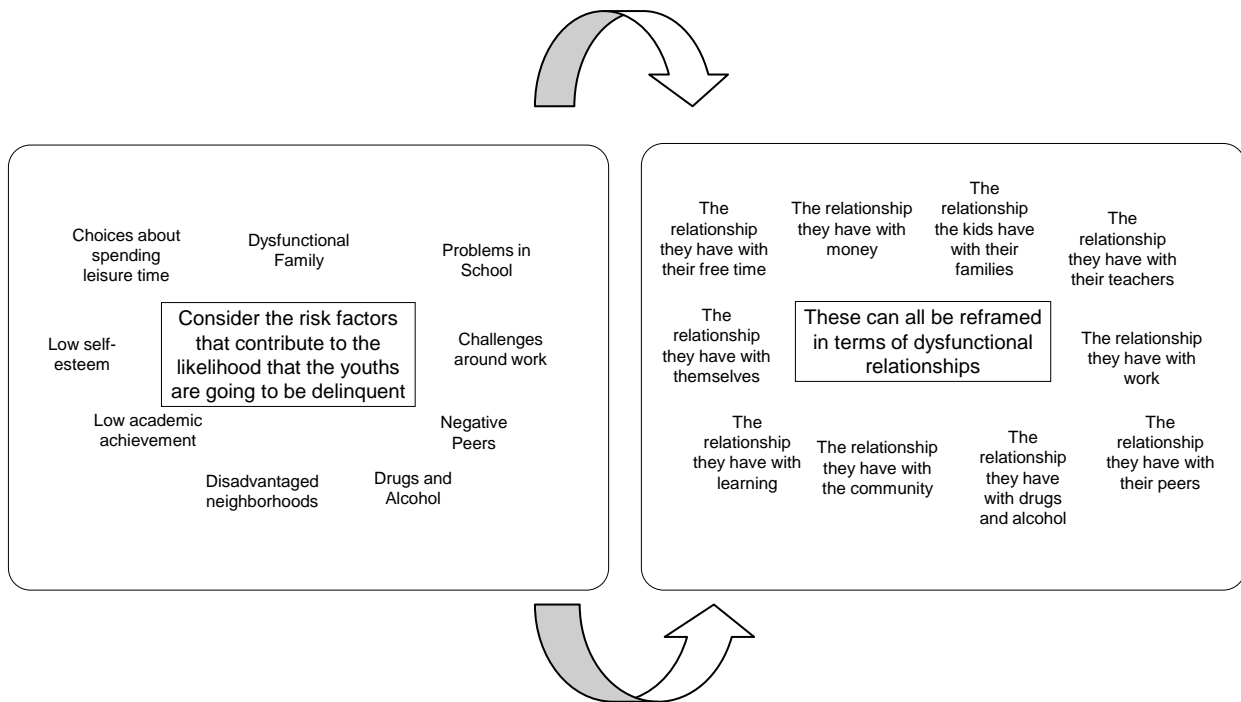
Offender reentry has become a serious public policy issue for the juvenile justice system. Unfortunately, most of our communities are simply not organized to facilitate effective transitions from prisoner to productive member of society. This is unfortunate and costly to society given that the number of obstacles to successful reentry is high. Many of the obstacles to effective reentry are the same factors that contributed to the individual's involvement in crime in the first place (and for which the offender likely did not receive treatment while incarcerated). The vision statement of the National Juvenile Detention Association indicates that "the most efficient way to return a juvenile to a healthy, law abiding lifestyle is through healthy relationships with healthy adults in healthy environments." This is a complex target, but one that we take to heart in our work with youth returning home from a correctional placement. Our model is based on Altschuler and Armstrong's Intensive Aftercare Program—a comprehensive strategy for juvenile reentry.¹ AIM is a juvenile reentry program that has served youth at nine state-run juvenile correctional facilities in Indiana. The prerelease phase of the program includes three elements: a needs assessment for each offender, a series of life skills groups, and the development of a reentry plan that addresses needs in education, employment, health, money

¹ Altschuler, D.M., & Armstrong, T.L. (1994). Intensive aftercare for high-risk juveniles: A community care model. Washington, DC: U.S. Department of Justice, Office of Juvenile Justice and Delinquency Prevention.

management, living arrangements, transportation, structuring leisure time, social skills, family relationships, and emotional well-being. In the postrelease phase of the program, AIM staff and mentors operate as service brokers by making referrals to appropriate community organizations.

Effective Reentry is All about Relationships

Mentoring can be a critically important component within a comprehensive juvenile reentry initiative. Effective reentry is, you see, all about relationships. Let’s explore this notion in some detail:



Consider the risk factors that contribute to the likelihood that the youth are going to be delinquent: things like problems in school and low academic achievement, challenges around work, negative peers associations, involvement in drugs and alcohol, coming from a disadvantaged neighborhood, low self-esteem, the choices they make about how to spend their leisure time, and having a distant, dysfunctional, or absent family. These can all be framed in terms of dysfunctional relationships: the relationship the youth have with their teachers, the relationship they have with work, the relationship they have with their peers, the relationship

they have with drugs and alcohol, the relationship they have with the community, the relationship they have with learning, the relationship they have with themselves, the relationship they have with their free time, the relationship they have with money, and the relationship they have with their families.

From this perspective, we can focus on ways to create healthy relationships in each of these areas. Mentors can play a significant role in this regard. In contrast to mentoring strategies like Big Brothers Big Sisters, in a juvenile reentry program it is not sufficient to have just a bond between the mentor and mentee. The role of the mentor should be to focus on the development of real competence on the part of the mentee. In addition, it is critical to increase the level of skills of the youth in the areas of decision making, problem solving, and accessing resources in the community. Those are skills that will serve these youth throughout the rest of their lives. Youth that master these skills and develop healthier relationships in each of the areas identified above are going to make better decisions and move toward a more positive future. We found that training effective mentors involved equipping them to use demonstration, instruction, challenge, and encouragement. We train them to look for opportunities to move the youth to more acceptable behaviors and thought processes. Even though it may not be immediately evident, we always assume the youth are “soaking up” all that the mentors do and share. Many do not have a positive adult role model in their lives. Mentors can make a significant difference for them, and in turn, for the community.

It is also critical to establish relationships between the youth and different segments of the community. The transition from confinement back to the community is difficult. Regardless of the quality of treatment they are provided in the correctional facility, most of the youth will return to the identical situation they left: the same home, same neighborhood, same peers. These are often serious obstacles to success. For instance, schools are reluctant to work with these youth and employers may be reluctant to give them a chance. If we do not provide ways to allow these youth to become productive members of the community, they will be drawn back into criminal behavior. Thus, in the interest of public safety, it is critical that we, as a community, assist these youth to find and take advantage of such opportunities.

Next, it is critical that there are effective relationships put into place between the staff in the correctional facilities and the community-based systems of support. Key stakeholder

partnerships in juvenile reentry programs include the staff at the juvenile correctional facilities, the parole agents, and the community support systems that will effectively target the needs of the juvenile offenders.² Altschuler and Armstrong have identified the five most significant needs of juvenile offenders returning to the community from incarceration: substance abuse, emotional stability, family problems, school problems, and intellectual impairment. Juvenile reentry programs should be comprehensive in their approach to all of these problems. In Indiana, we have a model for transitioning youth from restrictive placements that includes the assignment of each youth (and the family) to a home-based therapist. This therapist is assigned at the point of incarceration and works closely with the family during the period of the youth's incarceration. This home-based therapeutic support continues once the youth return to their homes and continues during the period of formal post-release supervision (typically probation). The Indiana Juvenile Justice Task Force is a leading provider of such services in our state.

The effective coordination of support between the facility and the community-based providers is often shaped in part by the location of the facilities in which the youth are incarcerated. Even in a medium-sized state like Indiana, youth may be incarcerated in a location that is more than six hours away from their home community, reducing the likelihood of visits from family and face-to-face contact with the service providers they are expected to interact with after their release. We have learned over the years that when there are obstacles to the building of relationships between the youth and the service providers, we are in fact setting these youth up to not take advantage of the support that is available to them after their release.

Much of what is needed in the form of aftercare (or reentry) services to juvenile offenders is already in place in the community. There are already good resources in place in many communities to prepare at-risk youth for employment. Many school districts have also developed resources to address the needs of troubled youth in their systems. Services are currently available from community-based agencies to youth released from correctional facilities. As such, an important strategy that government can undertake is to facilitate the linkages between the various services providers and service providers and the juvenile offenders and their families. This has always been a key focus of AIM. Our approach is simple: we assess

² Altschuler, D.M., & Armstrong, T.L. (1994). Intensive aftercare for high-risk juveniles: A community care model. Washington, DC: U.S. Department of Justice, Office of Juvenile Justice and Delinquency Prevention.

the needs of juvenile offenders who will soon be released from Indiana Department of Correction (IDOC) facilities and then bring these youth together with community agencies that effectively meet their needs. Rather than duplicating services, we work to make connections between strong programs in the community and the youth who need support to turn their lives around. Creating such linkages is a crucial element of successful juvenile reentry programs.³ AIM is a broker for services from other organizations, but its specialty is providing a high-quality mentoring program, a service that is not otherwise available for this population.

At a more macro level, there are also the critical relationships among the different agencies that comprise the juvenile justice and child welfare systems within a state. The poor coordination between these agencies often creates significant cracks that young people can fall through. Depending on how youth come to be identified as being in need of services often narrows the options that are available to the local providers trying to provide those specific services. Changes in the availability of resources may also be a function of the ever-evolving priorities in those agencies charged with allocating the resources. In the state of Indiana, AIM contracted directly with the Indiana Department of Correction for several years to provide mentoring services to a majority of youth incarcerated in the state-run facilities. At that point in time, mentoring was seen as an important component within a comprehensive case management strategy for effective reentry. Recently, required budget cuts at the Department of Correction led to a change in strategy that would entrust the provision of reentry support to the local jurisdictions. Many local communities were unable to identify resources to allow for the continuation of many community-based reentry supports, including mentoring services. An even more recent change in Indiana state law has now placed the responsibility for allocating resources for youth services with the Department of Child Services. An explicit policy within that agency is that there will be no funding for mentoring services within the reentry context.

³Altschuler, David M., and Troy L. Armstrong, "Managing Aftercare Services for Delinquents," in Barry Glick and Arnold P. Goldstein (eds.), *Managing Delinquency Programs That Work*, American Correctional Association, 1995.

An Evidence-Based Model of Juvenile Reentry

AIM was originally designed as a randomized experiment. For the year 1997, all youth leaving the Plainfield Juvenile Correctional Facility and returning to the Indianapolis metropolitan area were randomly assigned to one of three conditions: (1) those who received pre-release preparation through AIM and were assigned a mentor to work with them after their release; (2) those who received pre-release preparation through AIM, but were not assigned a mentor to work with them after their release; and (3) those who did not participate in any way with AIM. We followed these youth for more than four years after their release. Results related to reincarceration are provided in Table 1.

Table 1. Percent Reincarcerated during Follow-Up Period

	Percent Reincarcerated	
	<u>after 12 months</u>	<u>after 48 months</u>
In AIM, with mentor	25%	44%
In AIM, no mentor	29%	50%
Not in AIM	39%	62%
Assigned to mentor; mentor and youth worked closely together	13%	28%

As Table 1 indicates, when the program is implemented effectively—note the final line of the table that looks specifically at the subgroup of youth in the first group where the mentor lived up to his or her commitment and the youth actively participated in the program—it can make a significant difference in the offending behavior of the youth involved and in the strain on criminal justice resources. These results also demonstrate that mentoring is critical for the long-term success of the youth (particularly given that the mentors were actively involved with these youth for just one year in most cases).

After 1997, the program was opened up to all youth returning to Indianapolis. For the cohorts of youth participating in the program during the period of January 1, 1997 through December 31, 1999, we can also look at their involvement in criminal activity in the first four

years after their release. In Table 2, we report the mean outcomes for the two groups of youth—those in AIM and those not in AIM.

Table 2. Mean Levels of Involvement in Juvenile Justice and Criminal Justice Systems

	<u>In AIM</u>	<u>Not in AIM</u>
Arrests (mean)	4.19	5.61
Felony arrests (mean)	1.78	2.36
Convictions (mean)	1.74	2.21
Felony convictions (mean)	0.87	1.14
Days to 1 st arrest (mean)	666.50	620.96
Days to 1 st felony arrest (mean)	800.69	726.33
Days to 1 st conviction (mean)	922.99	844.73
Days to 1 st felony conviction (mean)	1,049.28	991.13

In each comparison, those youth participating in AIM experienced less failure than those youth not participating in the program. Youth participating in AIM experienced fewer arrests and fewer convictions—they also took longer before they were arrested for the first time and convicted for the first time after their release. These differences were maintained, even though beginning in 1999, there were more youth in the AIM group than in the comparison group.

We also have learned that participation in AIM is related to a lower likelihood of reincarceration even among those youth who have been arrested during the follow-up period. As demonstrated here, there is a significant difference between those participating in the full AIM model and those not participating in AIM:

Conditional Probability of Reincarceration given an Arrest has occurred

In AIM, with mentor: .474

In AIM, no mentor: .643

Not in AIM: .677

We attribute this difference to a combination of two factors: those receiving the full AIM model were arrested for less serious types of offenses, and when they went to court, those participating in the full AIM model were more likely to make a better presentation of themselves (i.e., more likely to be working or going to school, more likely to have someone in court to speak on their behalf) that would motivate a less severe sentence.

We also have data on recidivism for a cohort of girls released from the Indianapolis Juvenile Correctional Facility in 2001 and 2002 and returning to Indianapolis. These data, based on two years of follow-up after release, are presented in Table 3.

Table 3. Recidivism Results for Female Juvenile Offenders

	<u>In AIM</u>	<u>Not in AIM</u>
Arrested (Percent)	10.7%	23.4%
Parole Violators (Percent)	6.0%	15.3%
Reincarcerated (Percent)	7.1%	8.1%

For the girls in this sample, participation in AIM was associated with a lower likelihood of recidivism. In fact, the girls not participating in AIM were twice as likely to have recidivated in the first two years after release than the girls who took part in AIM. The differences were particularly evident when we considered arrests and parole violations.

Participation in AIM was also found to enhance the effectiveness of comprehensive treatment programs within the DOC. For instance, for the group of 1997-1999 releases, a number of youth took part in the Adolescent Sex Offender Program (ASOP) at the Plainfield facility. This is a comprehensive treatment program with a relapse prevention component. As seen in Table 4, AIM was particularly effective for those participating in the ASOP program. For those in ASOP, AIM participation makes a significant difference in the likelihood of reoffending. For those that did not take part in ASOP (i.e., they were not sex offenders), AIM participation was not as strong an influence on the likelihood of reoffending.

Table 4. Outcome Results Based on Participation in Comprehensive Treatment Program

	<u>In ASOP</u>		<u>Not in ASOP</u>	
	<u>In AIM</u>	<u>Not in AIM</u>	<u>In AIM</u>	<u>Not in AIM</u>
Arrests (mean)	1.91	5.82	4.87	5.57
Felony arrests (mean)	1.02	2.45	2.01	2.34
Convictions (mean)	1.09	1.97	1.93	2.25
Felony convictions (mean)	0.58	1.24	0.96	1.12
Days to 1 st arrest (mean)	902.28	782.79	596.09	589.73
Days to 1 st felony arrest (mean)	1,007.21	839.27	739.02	704.53
Days to 1 st conviction (mean)	1,093.35	971.88	872.12	820.19
Days to 1 st felony conviction (mean)	1,170.00	1,048.03	1,013.24	980.15

Similarly, AIM participation had a greater impact on those under parole supervision. It is interesting to note that for those not participating in AIM, being on parole was associated with higher likelihoods of reoffending. Yet, for those in AIM, being on parole was associated with lower levels of reoffending behaviors. For those youth discharged from the facility (no parole supervision), AIM participation was not associated with significant differences in reoffending. Yet for those released on parole, AIM participation dramatically reduced reoffending, as shown in Table 5. Also of interest, is that participation in AIM was more significant for those youth classified as high-risk. In the data presented in Table 6, larger differences were demonstrated in reoffending behaviors based on AIM participation for those youth classified as high-risk than for those classified as medium or low-risk. This is an encouraging result in that the program was designed for high-risk youth.

Table 5. Outcome Results Based on Presence of Community Supervision

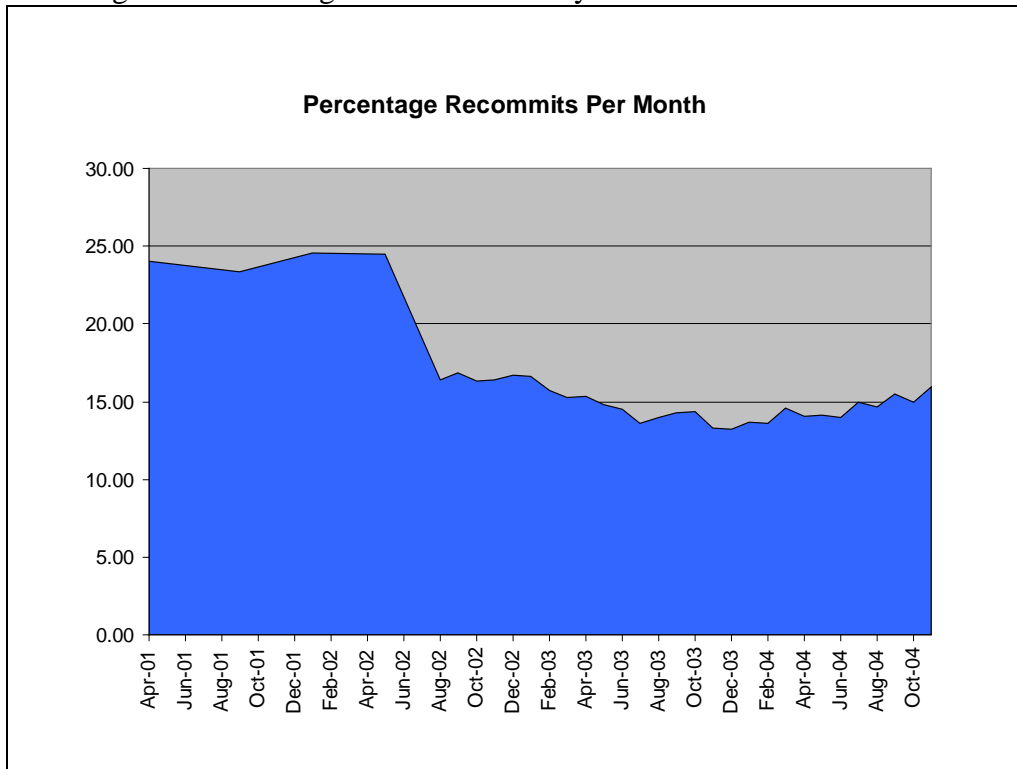
	<u>On Parole</u>		<u>Discharged</u>	
	<u>In AIM</u>	<u>Not in AIM</u>	<u>In AIM</u>	<u>Not in AIM</u>
Arrests (mean)	3.66	6.53	4.69	4.79
Felony arrests (mean)	1.87	2.80	1.69	1.95
Convictions (mean)	1.52	2.46	1.95	1.97
Felony convictions (mean)	0.79	1.14	0.95	1.14
Days to 1 st arrest (mean)	698.25	639.81	635.75	603.86
Days to 1 st felony arrest (mean)	805.62	743.21	795.92	711.03
Days to 1 st conviction (mean)	964.75	868.62	882.55	823.07
Days to 1 st felony conviction (mean)	1,068.88	1,029.19	1,030.31	956.63

Table 6. Outcome Results Based on Risk-Level of Youth

	<u>High Risk</u>		<u>Medium or Low Risk</u>	
	<u>In AIM</u>	<u>Not in AIM</u>	<u>In AIM</u>	<u>Not in AIM</u>
Arrests (mean)	4.58	6.07	3.67	4.69
Felony arrests (mean)	1.97	1.53	2.01	1.73
Convictions (mean)	1.89	2.45	1.54	1.72
Felony convictions (mean)	0.85	1.19	0.90	1.04
Days to 1 st arrest (mean)	608.52	592.12	742.37	679.91
Days to 1 st felony arrest (mean)	735.05	684.52	886.59	811.82
Days to 1 st conviction (mean)	878.86	819.88	980.74	895.52
Days to 1 st felony conviction (mean)	1,015.75	960.02	1,093.16	1,054.73

It is reasonable to consider the system-wide impact that providing a structured reentry program for the entire state may have. Unfortunately, we do not have enough information to provide the level of statistical control necessary to show that the relationships we observe are due to the impact of AIM. Nevertheless, AIM is certainly one factor that cannot be easily dismissed as a potential influence on the behavior of youth in the sample. Figure 1 demonstrates trends in the number of juvenile offenders committed to the DOC during the time since AIM was expanded to be a statewide program. The work of AIM may have something to do with the reductions in juvenile commitments. This is perhaps most apparent when we look at the percentage of youth in the facilities that are there on a recommitment, as those are individuals AIM could specifically be expected to have impacted. Since the beginning of the time when AIM first expanded statewide, the percent of the youth in the facilities on recommitments was fairly steady at just under 25%. More recently, however, the percentage of youth in the facilities hovered at around 15%. This is a significant drop in the percentage of youth that return to DOC as juveniles. This is what we would expect to occur if AIM is providing effective reentry services.

Figure 1. Percentage Reincarcerated by Month



Nationally, we know that reincarceration is a serious issue for offenders (juvenile and adult) being released to the community. We have less detailed information available about the costs of reincarcerating offenders. To examine the costs for a sample from Indiana, we conducted a careful assessment of the releases in the 1998 cohort (including members of both groups—AIM and non-AIM). If the youth reincarcerated at any time during the first four years after their release, we calculated the costs of the entire period of incarceration up to the end of the four-year period. We only included information on the first period of incarceration after release. Here's what we learned: For those participating in AIM, the total combined cost of reincarceration over that four-year period was \$681,525. For each AIM youth that failed, this is an average cost of \$20,652. For those not participating in AIM, the total combined cost of reincarceration over that four-year period was \$902,217. For each comparison group youth that failed, this is an average cost of \$23,742. Thus, even when they fail, the AIM participants cost the system more than \$3,000 less than those youth not participating in AIM. The cost for one youth to participate in AIM for one year is just under \$2,000.

When we combine the information on the reduction in the likelihood of reincarceration with the lower costs for failure for those youth participating in AIM, we can project that for every 100 youth going through the program we are able to save the state more than \$1 Million. The cost of providing the full AIM model to 100 youth for one year is just under \$200,000. This model represents a wise investment for these youth and for society.

Conclusion

Juvenile reentry is indeed an important policy issue that deserves concerted attention, leadership, and the allocation of sufficient resources from the federal government. Evidence-based, comprehensive strategies that pay particular attention to the development of the healthy relationships that will contribute to effective reentry outcomes should be the focus of such federal efforts. For many years, the federal government allocated resources to support strategies for mentoring children of prisoners. It is time to allocate a similar level of resources for the mentoring of children that are prisoners.

Thank you for the opportunity to speak to you on this critical issue.