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Report from the Criminal Justice Research Division

San Diego County District Attorney Juvenile Diversion Initiative

Final Evaluation Report 2024

October 2026

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Highlights

- There were a total of 1,611 youth referred to the JDI program during the study period, with 1,261 (78%) youth who agreed to participate. At the time of reporting, 1,165 unique participants exited the program.
- Of the 1,165 that exited the program, 952 (82%) successfully completed JDI services, while 213 (18%) did not successfully complete the program.
- Successful youth had significantly lower recidivism rates than unsuccessful youth, particularly in the months following program exit.
- Youth who successfully completed the program had significantly lower recidivism rates compared to the comparison group.

Executive Summary

The Juvenile Diversion Initiative (JDI) is a countywide pre-filing diversion program implemented in July 2021 by the San Diego County District Attorney's Office (SDCDA). The goal of the program is to reduce the number of youth involved in the criminal justice system while addressing the needs that led to their behavior and repairing the harm done to the community. Unlike many other diversion programs, JDI seeks to serve youth involved in felony crimes as well as those with misdemeanors. In partnership with the National Conflict Resolution Center (NCRC), JDI connects youth with needed services to address the root causes of their initial contact with the justice system. Additionally, JDI seeks to provide the youth with a sense of accountability for their actions by participating in Restorative Community Conferences (RCCs) that brings together the youth with the victims or persons harmed by the crime. If JDI is successfully completed by the youth, the SDCDA will drop the charges that led to the JDI participation.

The San Diego Association of Governments' (SANDAG) Criminal Justice Research Division was selected by the SDCDA to conduct a program evaluation of JDI during its first three years. This report analyzes program data from July 2021 through October 2024 and provides information about the characteristics of youth referred to the program, completion rates, program satisfaction, and recidivism outcomes for participants.

In the first 40 months of the initiative 1,611 youth were referred to the JDI program. Of these referred youth, 1,261 (78%) signed a consent form and agreed to participate in the program. Of those that agreed to participate, 1,165 (92%) had exited the program by the end of the reporting period and 96 (8%) were still active participants (i.e., October 31, 2024). Of the 1,165 that exited the program, 952 (82%) successfully completed JDI services, while 213 (18%) did not complete the program.

All participants enrolled in JDI received a risk assessment at program intake and, for those who completed services, at program exit. While most successful participants remained in the same overall risk category, these findings suggest stability in risk levels over the course of the program. Importantly, youth who completed JDI also reported positive improvements in key areas such as family relationships, school engagement, and conflict resolution skills. Together, these results indicate that even when broader risk classifications do not shift, participants may still experience meaningful changes in behaviors and supports that are associated with longer-term outcomes.

The recidivism analysis of the JDI program highlights important differences in outcomes based on program completion and participant characteristics. Youth who successfully completed the program consistently demonstrated lower rates of recidivism at both the 6- and 12-month follow-up periods compared to those who exited unsuccessfully. Additional analyses by pre-assessment risk level showed a similar pattern across low-, medium-, and high-risk youth, with successful participants having lower petition rates within each risk category. These differences were statistically significant among low- and medium-risk youth at both follow-up periods. Although successful high-risk youth also had lower petition rates than their unsuccessful counterparts, these differences were not statistically significant. However, these differences should be interpreted with caution, as youth who did not complete the program were more likely to be classified as higher-risk at intake, suggesting that baseline risk and other underlying factors may contribute to both program completion and recidivism outcomes. These findings underscore the importance of supporting sustained engagement in services, particularly for higher-risk youth who may face greater barriers to completion.

To better assess program impact, recidivism outcomes were also compared to a group of similar youth who did not receive JDI services. Overall, recidivism rates were comparable between JDI participants and the comparison group at both 6 and 12 months, with no statistically significant differences observed. However, a more focused analysis of youth who successfully completed the program showed lower recidivism rates at 6 and 12 months relative to the comparison group. A separate analysis of youth with initial felony charges showed that those who successfully completed JDI had notably lower recidivism rates than similar youth in the comparison group at both the 6 and 12 month follow up period. This shows a potential link between JDI completion and better outcomes for youth with more serious initial offenses. Together, these findings suggest that while overall program participation was not associated with measurable reductions in recidivism, successful completion and sustained engagement may contribute to improved short-term outcomes. Importantly, JDI provides an alternative to formal court processing, allowing youth to be held accountable while avoiding criminal charges and keeping them out of the juvenile justice system, without increasing recidivism risk. Continued efforts to strengthen engagement, particularly among higher-risk youth, may enhance both short- and longer-term program outcomes.

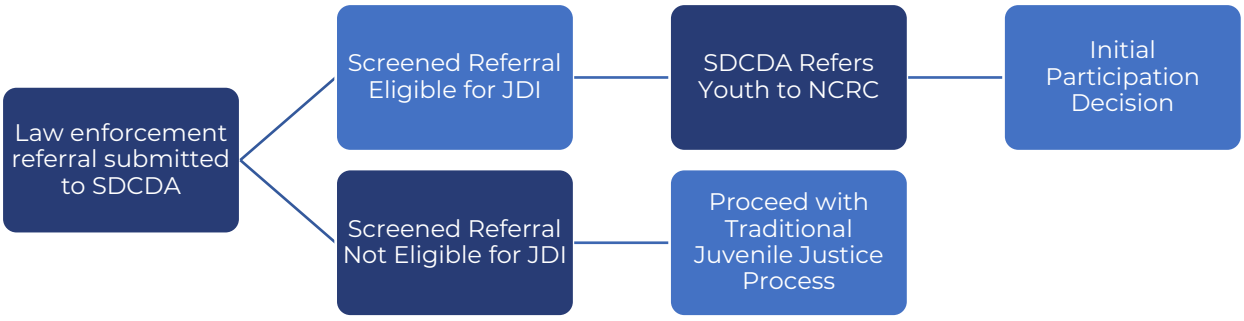
Background

In July 2021, the San Diego County District Attorney's Office (SDCDA) launched a countywide pre-filing diversion program titled the Juvenile Diversion Initiative (JDI). The program is designed for youth ages 12-18 who are referred for misdemeanor- or felony-level offenses that occurred in the County before turning 18 years old.[1] JDI was developed in response to the recognition that many youth involved in lower-level offenses were entering the formal justice system, which can increase labeling, stigma, and the likelihood of continued justice involvement. In addition to demonstrating accountability to the crime, victims, and community, the goals of JDI are to reduce the number of youth who enter the juvenile justice system, engage the community and stakeholders in youths rehabilitation, and address the causes of the delinquent behavior.

To connect youth with services in the community, the SDCDA contracts with the National Conflict Resolution Center (NCRC) to implement and administer JDI services. NCRC is San Diego-based nonprofit organization that specializes in conflict resolution, restorative justice practices, and community-based services, with extensive experience facilitating programs that support youth development, accountability, and harm repair. Program implementation by NCRC has a restorative justice approach that includes therapeutic services, pro-social skill-building opportunities, educational support, and addressing harm to ensure the participants are supported and the needs of the victims are met.

The program is voluntary, and all provable misdemeanor and felony referrals submitted to SDCDA by law enforcement are screened for JDI eligibility (Figure 1).[2] Eligible youth generally include those ages 12-17 at the time of the offense, with limited or no prior serious violent criminal history, and who are assessed as appropriate for diversion based on the nature of the offense and overall risk to public safety. Certain serious and/or violent felonies, including Welfare & Institution code section 707(b) offenses, felony sex offenses, human trafficking offenses, and other felony offenses that pose a serious public safety risk, are excluded from program eligibility.

Figure 1: JDI Referral Process to Initial Participation Decision



[1] Individuals that turn 18 after their referral are still eligible to receive JDI services. There are other diversion programs in the San Diego region, such as Community Assessment Teams (CAT). CAT is a law-enforcement-led, front-end diversion model that allows eligible youth to be referred to services at the point of contact, prior to referral to the SDCDA. In contrast, JDI operates at the pre-filing stage after a referral has been submitted to the SDCDA office, serving as a later diversion opportunity within the justice system.

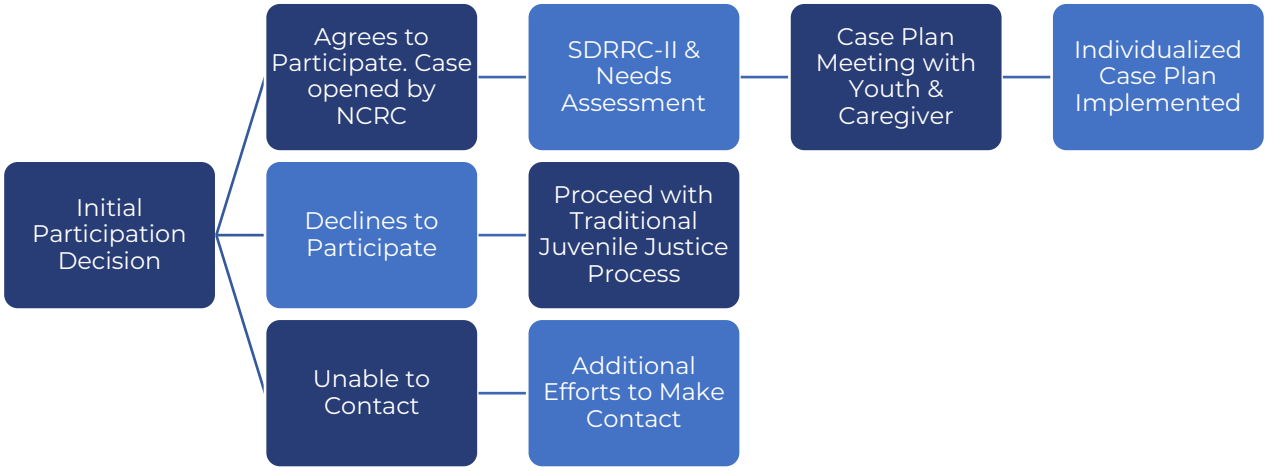
[2] Using the JDI eligibility criteria as a guide, a deputy district attorney will determine the eligibility of the youth. If the youth is deemed not eligible, the youth will go through the traditional justice process.

Once a youth is deemed eligible for JDI, the SDCDA will refer the youth and provide NCRC with youth and caregiver contact information, and a summary of the offense. In addition, if the offense involved a victim/person harmed, the person's or entity's contact information is shared as part of the individual's referral.

Upon receiving the referral, NCRC then reaches out to the youth and caregiver to explain the program and ask for their consent to participate. If the youth is a dependent of the San Diego County Juvenile Court, NCRC contacts the youth's dependency attorney, as well as the parent/guardian(s)'s dependency attorney, to explain the program and ask for their consent to participate. If the youth or caregiver declines to participate or if NCRC is unable to reach them, then JDI is considered not accepted (Figure 2).

If consent to participate is provided, NCRC opens the case and uses the San Diego Risk and Resiliency Checkup-II (SDRRC-II) to assess youth's highest needs and risk factors.[3] NCRC case managers use the assessment results with input from the youth to develop the individualized JDI case plan.

Figure 2: JDI Initial Participation Decision to Case Plan Implementation



An individualized JDI case plan must include:

a) Wellness Services: addressing individual needs (e.g., personal choices, substance abuse);

b) Pro-Social Services: addressing relational needs (e.g., social connection, negative peers);

And may include:

c) Educational Support: services can include Educational Advocacy to address youth's academic needs.

[3] The SDRRC-II is a validated youth risk assessment that is utilized by the San Diego County Probation Department, as well as community-based organizations (CBOs) to assist in developing appropriate case plans for treatment and rehabilitation for youth and families.

Each participant must complete one Wellness service and at least two or more Pro-Social services. Each item in the plan is referred to as a "sub-goal," and they directly address the needs identified in the SDRRC-II assessment and its connection to the offense committed. When those sub-goals are identified, the youth is connected with community partners who will work with them on the completion of these sub-goals.[4]

An important aspect of JDI is addressing the harm to victims. This component is directly administered by NCRC through "restorative community conferences" (RCC), which are meetings between the person that has been harmed, the youth that caused the harm, and supporting community members such as coaches or teachers. These sessions, typically held towards the end of a youth's JDI plan, allow the person(s) harmed to share their thoughts, the youth to reflect on the harm done, and to create a collaborative action plan to repair the harm.

Restorative community conferences create space for reflection, healing, and collaborative harm repair.

If the person(s) harmed chooses not to participate, the case manager still ensures that addressing the harm remains a key part of the plan by holding a "plan update meeting" with the youth and their parent or guardian to discuss the incident, its impact, and provide the youth an opportunity to reflect on what they've learned during the JDI process.

The maximum amount of time a youth can stay in the program is six months, but participation is often shorter, with duration largely dependent on what is in the youth's JDI plan and how proactive they are in completing services. If a youth is having difficulty completing their plan, NCRC can request an extension to give them additional time to complete it. After this timeframe, NCRC determines if the youth successfully completed their JDI plan and informs the SDCDA.

A youth is considered to have successfully completed JDI when they substantially complied with their individualized JDI plan, including the restorative justice component. Upon successful completion, participants do not have their arrest/referral filed and their records are sealed. A youth does not successfully complete JDI if a new charge is filed, they repeatedly miss scheduled services, withdraw consent from the program, lose contact with service providers, or require more support than the program can offer. When NCRC returns a youth's referral as unsuccessful, the SDCDA files the charge and the case continues the traditional route of the juvenile justice system.

NCRC staff can determine that the youth's needs exceed the capabilities of JDI. This could happen for several reasons: the youth would benefit, or is currently receiving, long-term inpatient treatment for addiction or mental illness; the youth does not have the capacity to meaningfully participate; the youth is currently involved in Child and Family Wellbeing Services (CFWB; formerly Child Welfare Services) and is currently receiving extensive services.[5]

If the youth completes JDI successfully, the SDCDA **does not file charges**, and their record is sealed.

[4] NCRC works with outside organizations to provide the actual services. These outside organizations are referred to as "community partners." Community partners can have a formal contractual obligation with NCRC (subcontractors) to serve JDI youth for which they are compensated, or can provide services with no direct cost to the program (linked organizations) since they derive their funding from other sources, such as Medi-Cal.
[5] Because process and procedures needed to be developed and agreed to by dependency stakeholders, referrals for CWFB youth were being returned to the SDCDA early in the program. Starting in December 2022, SDCDA has been referring San Diego County dependent youth to JDI.

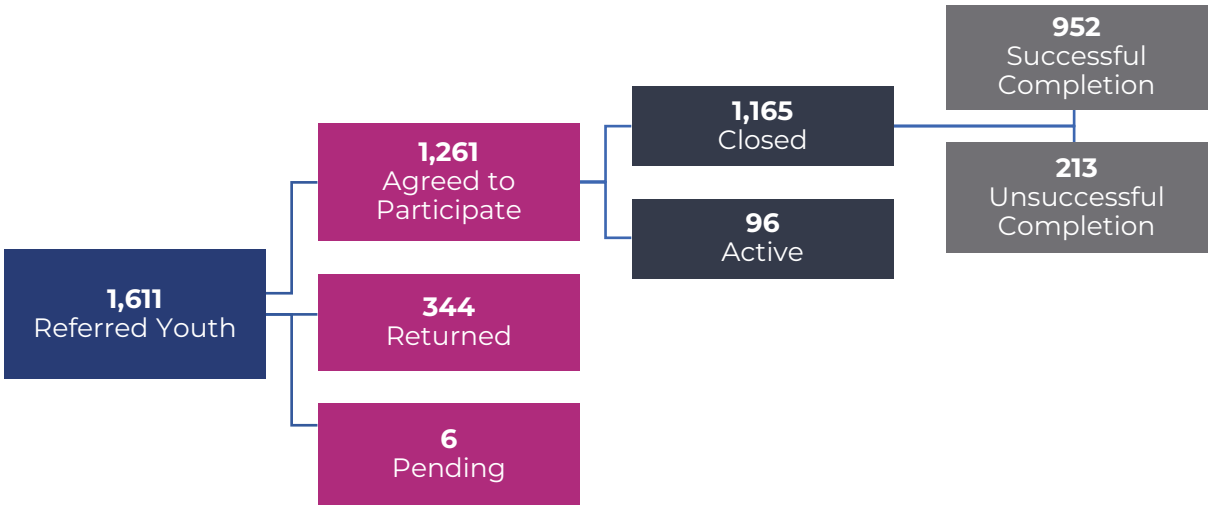
Program Statistics[6]

From July 2021 to October 2024, the SDCDA referred 1,611 unique youth to the JDI program. Out of the 1,611 referred youth, 1,261 (78%) youth signed a consent form and agreed to participate in the program, 344 (21%) youth's referrals were returned to the SDCDA, and 6 (<1%) still had a pending intake status.[7] Of those 1,261 youth that agreed to participate, 1,165 (92%) participants had completed the program at the end of the reporting period and 96 (8%) were still active participants. Of the 1,165 participants that closed their participation, 952 (82%) did so successfully and 213 (18%) completed the program unsuccessfully (Figure 3).

Program outcomes

- **82%** Successful completion
- **18%** Unsuccessful completion

Figure 3: JDI Referral Overview[8]



Note: Youth may be referred up to two times.
Sources: SANDAG; National Conflict Resolution Center (NCRC)

There were several reasons why a youth may not have successfully completed JDI services (Figure 4). The two most frequent reasons included the youth failing to attend sessions (34%) or having a newly filed petition (30%). Additionally, staff lost contact with 23 youth already in the program (11%). There were 23 (11%) youth who did not successfully complete the program for other reasons, including youth that would benefit or were already receiving long term inpatient treatment for addiction or mental illness, youth that did not have the capacity to meaningfully participate, and youth that were at the time

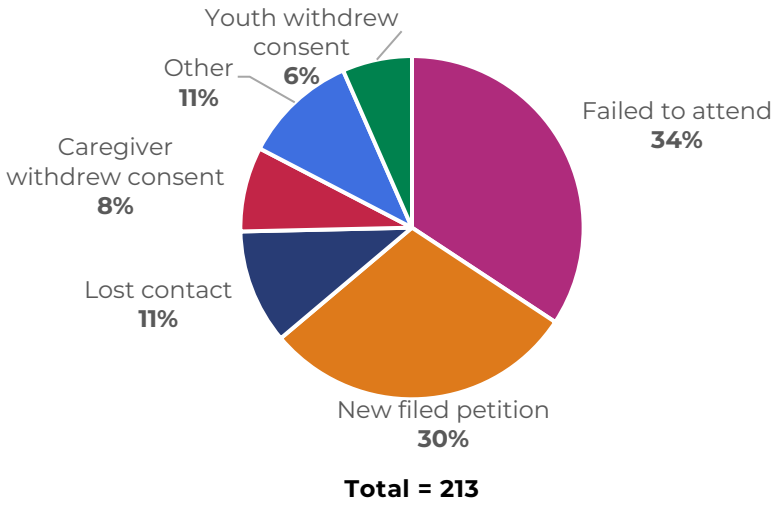
[6] Youth that did not consent to share their information with SANDAG are not included in this report. At the time of reporting, 126 did not consent to share their information.
[7] Pending is the stage where NCRC has received the referral, and the case manager is working on scheduling an intake so the youth/caregiver(s) can accept or decline participation.
[8] Youth can participate more than once in JDI. Therefore, the numbers of overall participation vary from those of unique youth. Overall, there were 1,632 total referrals, 1,278 agreements to participate, 348 referrals returned and 6 referrals pending. Of the 1,278 agreements to participate, 1,182 referrals were closed and 96 remained active at the end of the reporting period. Of those 1,182 closed referrals, 971 were considered successful and 211 unsuccessful.

involved in CFWB and were receiving extensive services. Seventeen youth (8%) had their caregiver withdraw consent when in JDI.[9]

When asked why the caregiver withdrew consent, several reasons were given, including: believing they would be successful in court; believing there would not be a charge filed because of information provided from the youth's school; the youth not having the capacity to meaningfully participate; and preferring the youth to receive more supervision or punishment. Fourteen youth (6%) withdrew their consent while enrolled in JDI mainly because they did not take it seriously; they moved far away; or lacked interest or commitment.[10]

Overall, of the 213 youth that did not have a successful completion, the average time they stayed enrolled in the program was 80 days (SD = 56.7) before disengaging (not shown).

Figure 4: Reasons for Unsuccessful JDI Completion



Note: Percentages do not equal 100% due to rounding.
Sources: SANDAG; NCRC

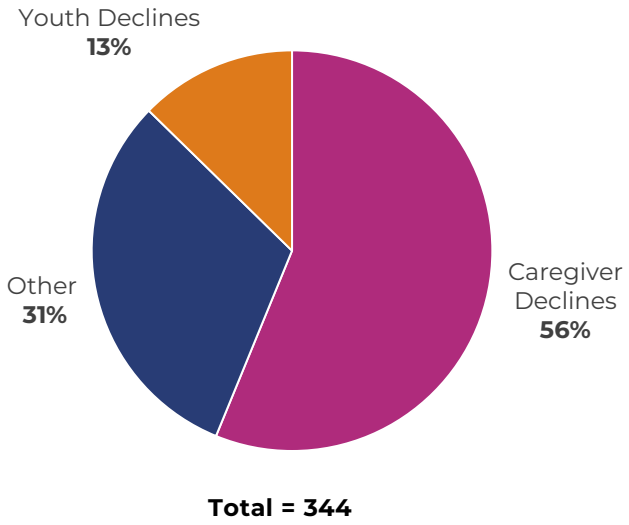
Because JDI is a voluntary program, youth that were offered JDI services could have declined to participate. When a youth or caregiver does not accept JDI services, the referral is returned to the SDCDA for filing, which means that the case can follow the traditional justice system path. Of the 1,611 youth referred, there were 344 (21%) youth that were offered JDI but did not accept, with the most common reason being that the youth's caregiver declined (Figure 5). The main reasons the caregiver declined services were generally the same as those given by caregivers who withdrew program participation consent (i.e., believing they would be successful in court, believing the charge would not be filed, the youth not having the capacity to meaningfully participate, and preferring the youth to receive more supervision or

[9] Youth who do not have the capacity to participate often have a learning disability or another mental health condition that affects their ability to understand or engage with programming. As a result, they may be unable to participate meaningfully in the process not due to unwillingness but because their cognitive or emotional challenges impact their comprehension or decision-making abilities.
[10] Moving far away does not make a youth ineligible for JDI. NCRC will accommodate as much as possible when the youth and family are willing to engage. Out-of-county, or even out-of-state residents, are still eligible for JDI because NCRC does subcontract with organizations that provide online self-study curriculum.

punishment). Reasons for unsuccessful completion are presented by race/ethnicity in Appendix Table 1.

In addition to those reasons, some caregivers expressed interest in considering program enrollment, but then stopped communicating with program partners. Other reasons why youth were not enrolled included: NCRC was unable to locate/contact the youth or caregiver, they lost contact with the youth or caregiver, the youth had needs that exceeded the capabilities of JDI, or the SDCDA withdrew the original referral because the youth received a new referral that they decided to file, which made the youth ineligible for JDI. In 13% (44) of instances where JDI was not accepted, it was the youth themselves who declined to participate. The most common reasons provided were not taking it seriously, moving far away, or having initially expressed interest and then stopped communication.

Figure 5: Reasons for Declining JDI



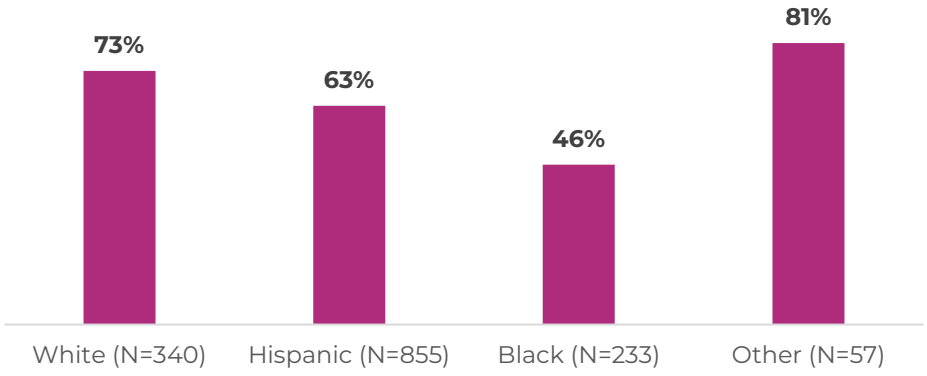
Note: Cases with missing information not included.
Sources: SANDAG; NCRC

Youth Characteristics

Youth Demographics

The demographics presented are of all referred youth that agreed to participate with a closed status (n=1,165) (meaning that they were successful or unsuccessful in completing the program) as well as youth that were returned to the SDCDA for filing (n=344). Overall, the racial/ethnicity composition of the participants was 57% Hispanic, 23% White, 16% Black, and 4% categorized as another category. Among White youth, 73% were successful, 8% unsuccessful, and 19% had a returned status. Among Hispanic youth, 63% were successful, 17% were unsuccessful, and 21% had a returned status. Among Black youth, 46% were successful, 18% were unsuccessful, and 36% had a returned status (Figure 6, Appendix Table 2).[11] A breakdown by year revealed a consistent proportion of youth across the different racial and ethnic groups in all three years of the program (Appendix Table 3).

Figure 6: JDI Youth Successful Completion Rates by Race/Ethnicity



Note: Cases with missing information not included.
Sources: SANDAG; NCRC

The majority of youth were males (70%, N=1,051) and the mean age for all three groups was between 15 and 16 years old. Of the youth that accepted JDI services, exited the program, and had school enrollment information (N=1,106), 962 (87%) were enrolled in school, 111 (10%) were not enrolled, 11 (1%) graduated or received their GED, 17 (2%) had a status of unsure enrollment status, and 5 (<1%) were suspended/expelled (not shown). Of those confirmed to be enrolled in school and with school grade information, most were in high school (Table 1).

Demographics link to exit status

When examining how demographic characteristics related to program completion, one significant pattern emerged. The analysis revealed differences in program outcomes across demographic groups. Statistical tests showed a significant link between race and how youth

[11] Further analysis to determine the relation between successful program completion and race is provided later in the Youth Assessment Need and Recidivism Outcomes sections of the report.

exited the program—whether they completed it successfully, did not complete it, or their cases were returned for filing (Appendix Table 2).[12]

Additional tests also showed that a person's level of risk at program entry plays a more important role in their likelihood of success. Because risk level could help explain differences in outcomes, exit status was analyzed alongside race/ethnicity and pre-assessment risk scores. When this was done, race/ethnicity was no longer a significant factor while risk level remained a strong predictor ($p<0.000$) (not shown). The SDRRC-II risk pre-assessment score, which measures factors that could make it harder for someone to complete the program, was strongly linked to exit status (Appendix Table 4).[13]

Table 1: JDI and Returned Youth Demographics

	Participant Total	Successful	Unsuccessful	Returned
Race/Ethnicity* **				
White	340	73%	8%	19%
Hispanic	855	63%	17%	21%
Black	233	46%	18%	36%
Asian/Native Hawaiian or Pacific Islander	31	84%	3%	13%
American Indian or Alaskan Native	10	80%	10%	10%
Middle Eastern	9	67%	22%	11%
Mixed Ethnicity	3	100%	0%	0%
Other	14	85%	0%	15%
Gender				
Male	1,051	63%	15%	22%
Female	451	63%	12%	25%
Transgender	3	67%	33%	0%
Non-Binary	3	67%	33%	0%
Gender Neutral	1	0%	100%	0%
Age (Mean)	1,509	15.4	15.2	15.3
Grade				
7th	35	83%	17%	-
8th	110	80%	20%	-
9th	187	77%	24%	-
10th	216	86%	14%	-
11th	188	82%	18%	-
12th	173	86%	14%	-

****Significant at p<0.000*

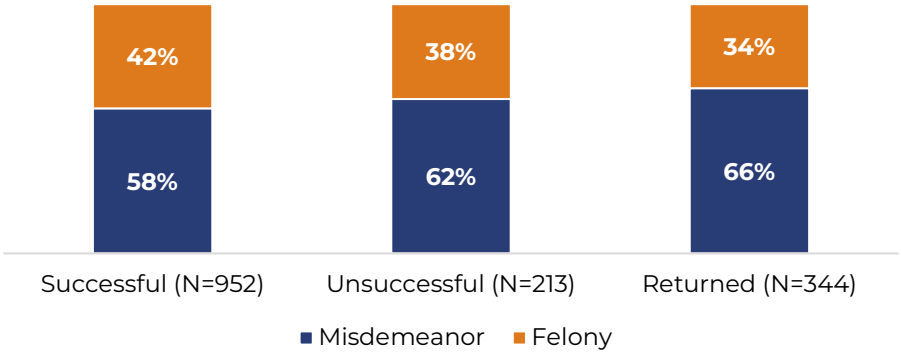
[12] Results from Chi-square tests of demographic factors such as race/ethnicity, gender, school status, with JDI exit status (i.e., successful/unsuccessful/returned).
[13] A more detailed discussion about this relationship and practical implications is discussed later in the Youth Assessment Need and Recidivism Outcomes sections of the report.

Note: Cases with missing information not included. Percentages may not equal 100% due to rounding. Grade information not available for returned youth.
Sources: SANDAG; NCRC

Offense Level and Type

Of all referrals, 39% were referred for a felony-level offense. Of the 952 youth who were successful in JDI services, 554 (58%) were referred for a misdemeanor-level offense and 398 (42%) were referred for a felony-level offense. These results were generally consistent when compared to unsuccessful youth. (Figure 7).

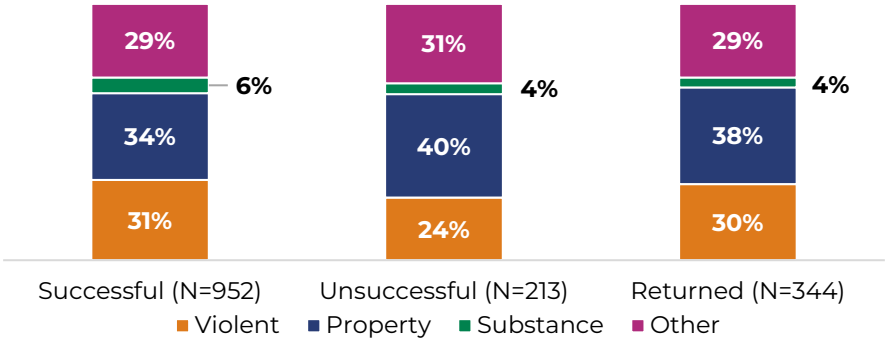
Figure 7: Offense Level for JDI and Returned Youth



Note: Cases with missing information not included.
Sources: SANDAG; NCRC

The most common offense type for which successful youth were referred to JDI were property (34%), followed closely by violent (31%), "other" (29%), and substance offenses (6%). Unsuccessful and returned youth, again, showed similar results (Figure 8).

Figure 8: Primary Offenses for JDI and Returned Youth



Note: A primary offense could be a felony or a misdemeanor. Cases with missing information not included. Percentages may not equal 100% due to rounding.
Sources: SANDAG; NCRC

Overall, the primary offenses across groups are similar but with minor differences. Looking at specific primary offenses, the most common among youth who were successful in the JDI program were: battery (22%), weapons (14%), larceny/shoplifting/theft (13%), and vandalism (13%). For unsuccessful youth: battery (18%), larceny/shoplifting/theft (17%), and vandalism (15%); and for the youth that did not accept JDI: battery (24%), larceny/shoplifting/theft (19%), and vandalism (12%) (Table 2).[14] Battery was consistently the most common offense, and both larceny/shoplifting/theft and vandalism offenses were among the most frequent across all groups, suggesting that referrals to JDI are largely concentrated among a consistent set of lower-level property and interpersonal offenses.

Table 2: JDI Youth Participation Status By Offense Category

	Successful (N=952)	Unsuccessful (N=213)	Returned (N= 344)
Violent			
Assault	6%	4%	3%
Battery	22%	18%	24%
Robbery	3%	3%	2%
Sexual Battery	1%	0%	2%
Property			
Burglary	3%	2%	3%
Larceny/Shoplifting/Theft	13%	17%	19%
Vandalism	13%	15%	12%
Vehicle Theft	4%	7%	4%
Substance			
Drunk in Public	<1%	1%	1%
DUI	5%	2%	2%
Possession of a Controlled Substance	1%	2%	3%
Selling Drugs	<1%	0%	0%
Other			
Animal Abuse	<1%	0%	0%
Arson	<1%	1%	1%
Carry a Concealed Dirk or Dagger	0%	1%	<1%
Child Abuse	<1%	0%	0%
Criminal Threat	1%	1%	1%
Discharge a Laser at Occupied Aircraft	<1%	0%	0%
Distribution of Child Porn	1%	0%	1%
Domestic Violence	<1%	0%	0%
Elder Abuse	<1%	1%	<1%
Evading	2%	1%	1%
Extortion	<1%	0%	<1%

[14] Weapons offenses included carrying a concealed dirk or dagger, carrying a switchblade knife on person, or being in possession of weapons on school grounds. This category excludes guns and other firearm-related offenses because they are not eligible for the JDI program.

False Info to Peace Officer	0%	1%	2%
False Imprisonment	<1%	0%	0%
False Police Report	<1%	0%	0%
Harassment	<1%	0%	<1%
Hit & Run	2%	2%	2%
Invading Privacy with a Camera	<1%	0%	0%
Lewd Act in Public	<1%	0%	0%
Possession of Ammunition	<1%	0%	0%
Possession of Fireworks	<1%	0%	<1%
Possession of Fraudulent Check	0%	1%	0%
Possession of Personal Identifying Information	0%	<1%	0%
Possession of Tear Gas	<1%	0%	1%
Reckless Driving	2%	<1%	1%
Resisting or Delaying a Peace Officer	5%	11%	8%
Terrorist Threat	<1%	0%	0%
Trespass	0%	1%	0%
Weapons	14%	12%	11%

Note: Cases with missing information not included. Percentages may not equal 100% due to rounding.
Sources: SANDAG; NCRC

Offense link to exit status

Similar to the analysis with the demographics, when examining the offense level and primary offense and its possible effect on exit status, results showed no significant links. This is to say that offense level (felony/misdemeanor) did not significantly impact the youth's outcome as successful or unsuccessful. Similarly, the primary offense (i.e., the crime they were referred to JDI for) did not show any significant impact on the exit status of the participant.

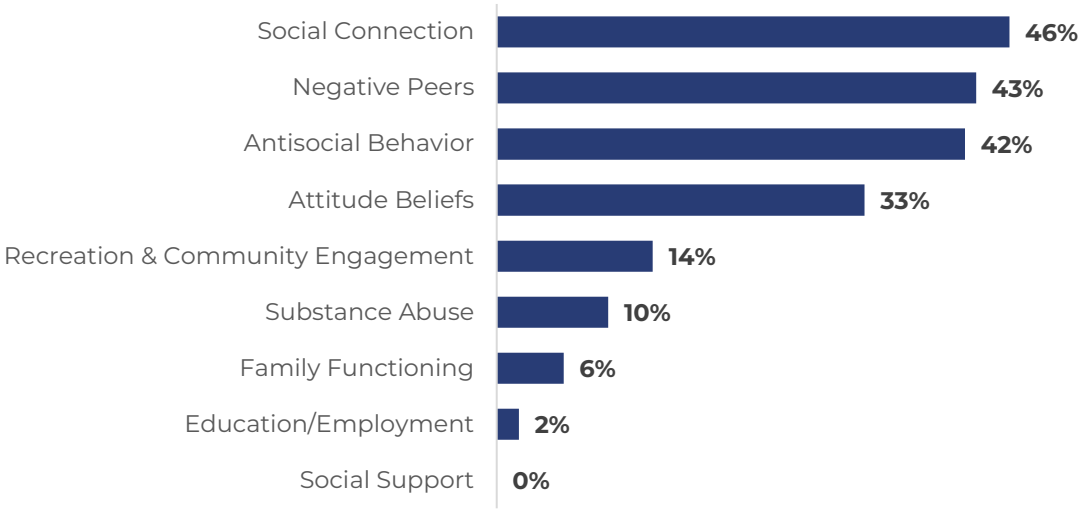
Youth Risk Factor and Needs Assessment[15]

As previously mentioned, once NCRC receives and processes the referred youth's information, a case manager is assigned. The case managers use the San Diego Risk and Resiliency Checkup-II (SDRRC-II) juvenile assessment tool to evaluate the youth's risk to recidivate, in addition to their resiliency factors. There is an initial evaluation (pre-assessment) following JDI acceptance/enrollment and a post-assessment when a youth successfully completes the program. The pre-assessment, referral offense, and information shared during intake help identify support needs for the youth, which subsequently help create sub-goals (also known as items), within their JDI plan.

[15] The unsuccessful youth were not included in this analysis since most exited the program before they had an assessment.

Among youth who accepted JDI services and exited the program, the most frequently identified risk factors were limited social connection (46%), association with negative peers (43%), and a history of antisocial behavior (42%), based on assessment results (Figure 9).[16]

Figure 9: Top Assessment Needs of JDI Youth that Exited the Program



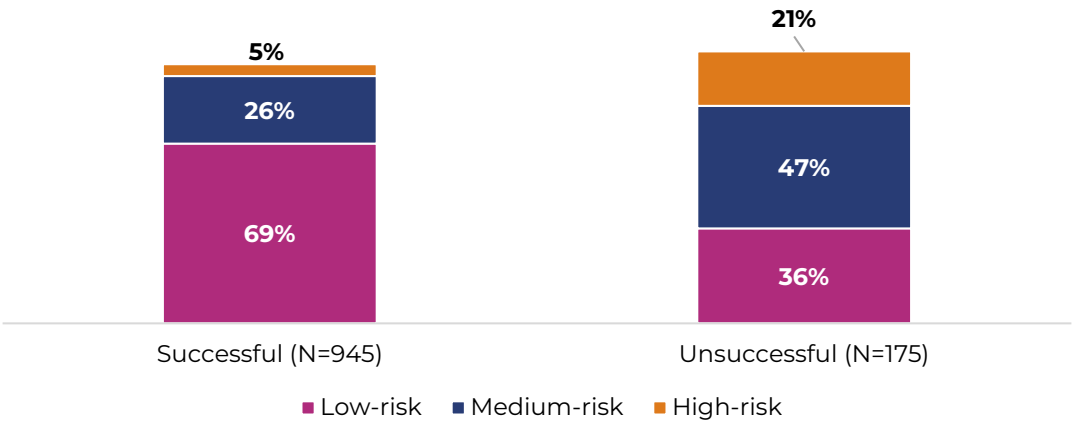
Total = 1,219

Note: Cases with missing information not included. Percentages do not equal 100% as youth can have multiple needs.
Sources: SANDAG; NCRC

The SDRRC-II scores revealed that most of the youth that successfully completed JDI were initially identified as having a low-risk of recidivism (69%). Conversely, among the youth that did not complete JDI (unsuccessful) there was a greater proportion that were initially identified as having medium (47%) or high-risk (21%) of recidivating (Figure 10).[17]

[16] For this analysis, social connection generally means the youth may have difficulty connecting or caring about other people, trusting others, and/or difficulty communicating well. History of antisocial behavior generally means the youth may have an established pattern of getting into trouble.
[17] Appendix Table 5 includes a year-by-year breakdown of risk assessment score and completion status.

Figure 10: SDRRC-II Risk Pre-Assessment for JDI Youth Exit Status



Note: Cases with missing information not included. Percentages may not equal 100% due to rounding.
Sources: SANDAG; NCRC

Risk link to exit status

Statistical analyses revealed a significant association between recidivism risk level and exit status (Appendix Table 4). This indicates that risk level is an important factor to consider when attempting to improve successful completion rates.

As noted earlier, both race/ethnicity and risk level were linked to how youth exited the program. Further analysis showed a strong connection between these two factors: Hispanic and Black youth were more likely to be initially identified as medium or high risk, which may help explain differences in program outcomes and why race appeared linked to them (Appendix Table 6). However, when controlling for both race/ethnicity and initial risk level, only risk level remained a significant predictor of program exit. This suggests that the apparent link between race and program outcomes is largely due to the higher proportion of minority youth entering the program with higher risk levels. These results emphasize the importance of focused support for higher-risk youth and continued efforts to help them complete the program.

Program Treatment & Outcomes

Since a central goal of the JDI program is to address the needs that underlie the behavior that led to the youth's referral offense(s), individualized JDI plans with detailed sub-goals are created to ensure the youth are receiving beneficial services and programs. Once a youth's JDI plan is developed with their case manager, the youth is connected to organizations within the community (either subcontractors or linked organizations with NCRC) to receive services and fulfill their JDI plan objectives and sub-goals.

At the end of the reporting period, there were 50 organizations that provided JDI services (Appendix Table 7). Of the 1,261 unique youth that agreed to participate, 1,254 (99%) developed a JDI plan by the end of the reporting period (i.e., October 31st, 2024) (not shown).

A youth could have multiple JDI goals, but on average, most participants completed at least two sub-goals. In the case of unsuccessful youth, there is limited information available given that the youth could have exited the program prior to completing any goals.

As previously mentioned, JDI plans focus on three sub-goal categories: Wellness, Pro-Social, and Educational Advocacy. To fulfill the Wellness sub-goal(s), each youth has to complete at least one of the Wellness related services/programs.

Decision-making courses

Either two online or six in-person courses with a problem-specific, goal-oriented approach using Cognitive Behavioral Therapy, designed to help youth find new ways to behave by focusing on their present-day challenges, thoughts, and behaviors.

Individual- or family-based therapy

Individual therapy includes group counseling and crisis intervention that use trauma-informed approaches and insights from adolescent brain development. Family therapy uses models such as Multisystemic Therapy and Functional Family Therapy.

Substance abuse treatment

Outpatient classes (8-hour self-paced course) or in-person weekly group sessions (6-12 weeks long), depending on insurance coverage or Medi-Cal eligibility.

To fulfill the Pro-Social sub-goals, each youth had to complete at least two related services/programs.

Mentoring programs

Between the youth and a culturally appropriate caring adult(s), who serve as positive and supportive role model(s) for the participant.

Skill-building programs

Programs on positive youth development, anger management, parenting, financial literacy, healthy relationships, job readiness, truancy prevention, and other life skills.

Restorative Justice programming

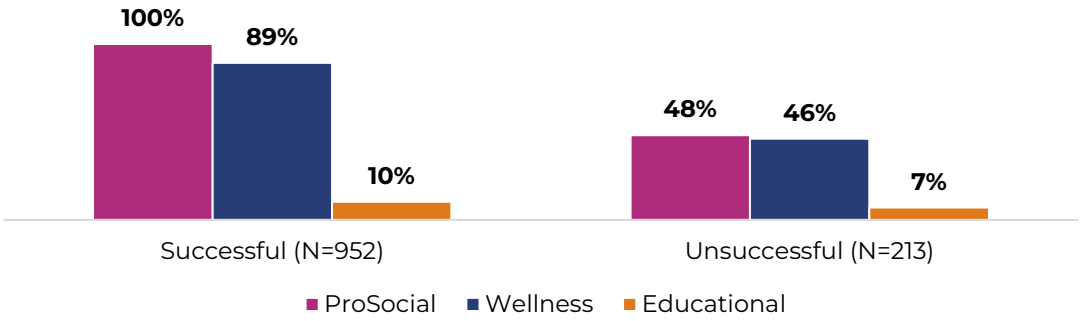
Includes victim mediation, family conferences, and reintegration through either a Restorative Community Conference (RCC) (which brings together the youth, caregivers, case manager, the person harmed, and other supporters), or a JDI plan update.

Not every JDI participant requires educational support. As a result, case managers address any school engagement or attendance issues or barriers with the participant and their family to determine if a referral to an educational advocate is necessary.

Regarding the types of services JDI youth participated in, all 952 successful youth participated in a Pro-Social service, 847 (89%) in a Wellness service, and 97 (10%) in an Educational service. While all successful youth were required to have at least one Wellness goal, the proportion of youth that completed a Wellness service may slightly vary from 100% due to some youth having the goal requirement waived based on past participation in an activity that satisfied the requirement(s).

While many unsuccessful youth exited the program before participating in any services, some had their individualized plan developed and enrolled in different services. Of these youth, 95 (46%) participated in a Pro-Social service, 91 (44%) participated in a Wellness service, and 14 (7%) participated in the Educational service (Figure 11).

Figure 11: Summary of Service Types JDI Youth Participated In



Note: Cases with missing information not included.
Sources: SANDAG; NCRC

Across all services, the racial/ethnic distribution of participating youth—both successful and unsuccessful—was consistent, and no major gender or age disparities were found (Table 3). Although more males participated in educational services, the difference was not statistically significant. However, wellness services were the one exception, showing a small but significant gender imbalance ($p<0.05$), with fewer females enrolling than expected.

Table 3: Youth Demographics by Service Type

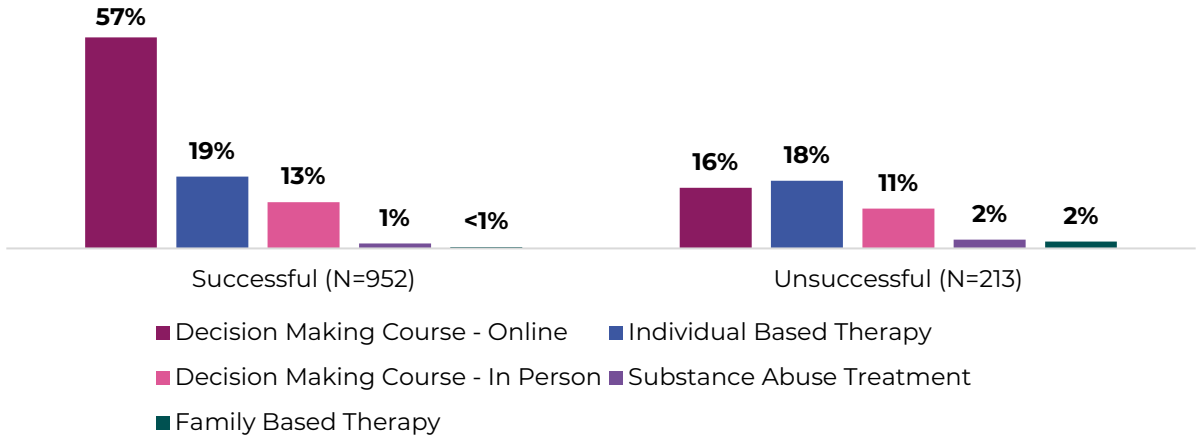
Demographic	Pro-Social (N=1,074)	Wellness (N=971)	Educational (N=110)
Race/Ethnicity			
White	25%	24%	27%
Hispanic	58%	58%	56%
Black	13%	13%	11%
Other	5%	5%	6%
Gender			
Male	69%	70%	79%
Female	30%	30%	20%
Other	1%	<1%	1%
Age (Mean)	15.4	15.5	14.9

Note: Cases with missing information not included. Percentages may not equal 100% due to rounding.
Sources: SANDAG; NCRC

Wellness

To fulfill their Wellness sub-goals, most of the successful youth participated in a decision-making course, either online (57%) or in-person (13%) and in individualized based therapy (19%). Other services less commonly utilized by the successful JDI youth were substance abuse treatment (1%) and family based therapy (<1%) (Figure 12).

Figure 12: Wellness Services JDI Youth Participated In

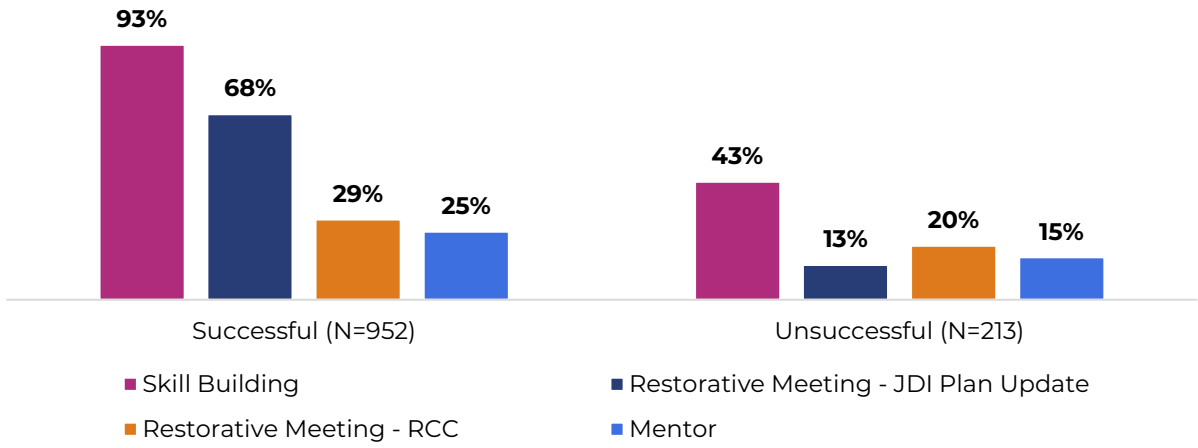


Note: Cases with missing information not included. Percentages based on multiple responses.
Sources: SANDAG; NCRC

Pro-Social

The majority of successful youth participated in skill-building activities (93%). Following program protocol, if a referral did not involve a person harmed or if the person harmed chose not to participate, then the youth went through a JDI plan update rather than a RCC meeting. Overall, more successful youth participated in a JDI plan update (68%) than a RCC meeting (29%). Additionally, one-fourth (25%) of successful youth had an assigned mentor (Figure 13).

Figure 13: Pro-Social Services JDI Youth Participated In



Note: Cases with missing information not included.
Sources: SANDAG; NCRC

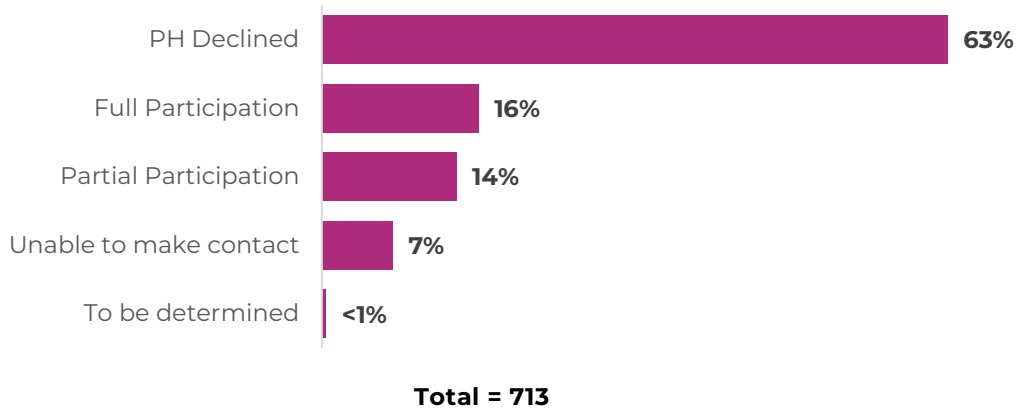
Person Harmed (PH) Participation

The RCC is a critical component of the restorative process as it provides everyone involved an opportunity to address the harm done. It allows the youth to move toward accountability, and gives the person harmed an opportunity to voice how the incident impacted them.

While the RCC supports JDI's overall goal of repairing harm to the community, it is not always the type of restorative meeting used to fulfill a youth's restorative meeting sub-goal. The type of meeting depends largely on whether the person harmed chooses to participate. If the person does not respond or NCRC is unable to locate the person harmed or the person harmed declines involvement, the case manager holds a JDI plan update meeting instead. If the person harmed is included and agrees to take part, the case manager facilitates the RCC. Most restorative meetings occur near the end of the JDI plan, once the youth has completed most sub-goals. In cases involving financial loss, the restorative process may also include efforts to identify and address restitution or recovery, such as confirming whether stolen property was returned, damaged property was repaired, or the value of the loss was repaid. When appropriate, JDI case managers work with the youth and their family to address these losses as part of the youth's accountability and efforts to repair harm.

Of those youth that accepted JDI services and exited the program, 868 (75%) of JDI youth referrals involved a person harmed (not shown). For successful youth with referrals that involved a person harmed, the type of person harmed varied: 438 (62%) individuals, 116 (16%) large businesses, 63 (9%) schools, 44 (6%) small businesses, 40 (6%) government agencies, and 10 (1%) family members (not shown). Most persons harmed decided not to participate (451, 63%) (Figure 14). The decline rate also varied by person harmed type. Government agencies declined to participate twenty-nine (73%) times, followed by 84 (72%) large businesses, 289 (63%) individuals, 24 (53%) small businesses, 21 (33%) schools, and 2 (20%) family members (not shown).

Figure 14: Person Harmed Participation Level for Successful JDI Youth

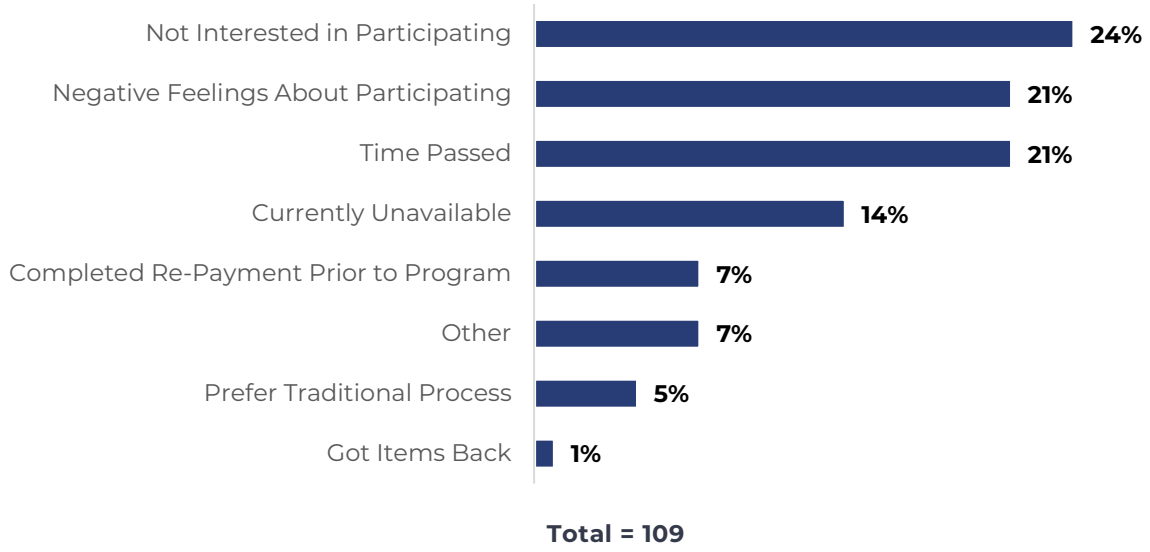


Note: Cases with missing information not included. Percentages do not equal 100% due to rounding.
Sources: SANDAG; NCRC

A large proportion of persons harmed declined to take part in the meeting simply because they were not interested in participating (24%) (Figure 15). Low person-harmed participation rates continue to raise important questions, particularly in understanding the role of participant type and how engagement differs between responding individuals, small businesses, and larger institutions.[18]

[18] Among the person harmed types for successful youth, 48% of individuals, 26% of large businesses, 15% of schools, 7% of small businesses, and 4% of government agencies were not interested in participating.

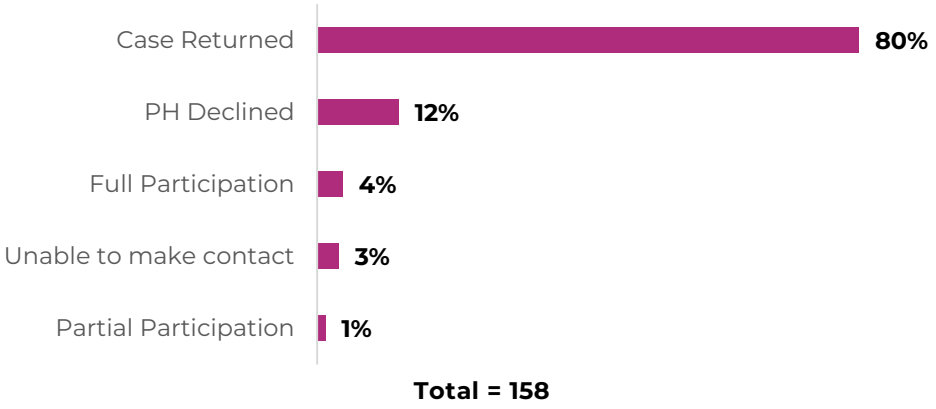
Figure 15: Reasons Person Harmed Did Not Participate for Successful JDI Youth



Note: Cases with missing information not included. Percentages do not equal 100% due to rounding.
Sources: SANDAG; NCRC

For JDI youth who did not successfully complete the program, 126 referrals (81%) were returned before participation of the persons harmed could be determined (Figure 16). Of the 27 persons harmed that JDI was able to contact, 19 (70%) declined to participate (not shown). In those instances, persons harmed expressed they were not interested in participating (seven, 37%), were unavailable (four, 21%), had negative feelings about participating (four, 21%), had their stolen items recovered, or value or loss of property was repaid prior to JDI referral (three, 16%), or noted that too much time had passed (one, 5%) (not shown).

Figure 16: Person Harmed Participation Level for Unsuccessful JDI Youth



Note: Cases with missing information not included.
Sources: SANDAG; NCRC

Restoration Fund

Persons harmed who participate in JDI may apply for relief through the Restoration fund. They must be identified by SDCDA as victims experiencing loss or damage from the offense for which the JDI youth was referred. Applicants must show that the loss was caused by the offense, document the amount, affirm they have no alternative insurance or similar resource, and demonstrate need. By the end of the reporting period, eight awards had been issued.

Persons harmed under the age of 18 were also eligible to receive and engage in skill building and mentorship services from the same subcontractors who work with youth. The JDI team found that many persons harmed were experiencing several of the same challenges that JDI youth were facing and believed they could also benefit from these supports.

The Restoration Fund was launched by NCRC in January 2023 as a feature of the JDI program. Both the SDCDA and NCRC recognized that in some cases, the victim experienced a loss due to the offense but traditional court-ordered restitution would not be possible since JDI is a pre-file diversion program and no court is involved. As such, the Restoration Fund aids in the restorative function of the program. NCRC works with public and private agencies, organizations—including philanthropic organizations—and other stakeholders to gather resources needed to support the financial sustainability of the fund.

Educational Support

If a need for school support is identified and the parent/guardian provides consent, JDI families are connected to an educational advocate, and formal support is incorporated into their service plan. Educational advocates play a crucial role in the Individualized Education Program (IEP) process by providing guidance and support to families navigating the special education system, helping them understand their child's rights, review assessments, and ensure that the proposed IEP aligns with the child's educational needs.[19] Advocates also attend IEP meetings, assisting in communication between families and school staff to secure appropriate services and accommodations. Their involvement is particularly valuable for families who may feel uncertain about the process or need additional support advocating for their child's best educational outcomes.

There were five organizations that provided educational support in the JDI program: Educational Advocacy Alliance, McGowan Advocacy Group, Open Heart Leaders, San Diego Mission Academy (Elev8 Online Schools), and Voz de Victoria (Appendix Table 7).

[19] An Individualized Education Program (IEP) is a legally mandated document under the Individuals with Disabilities Education Act (IDEA) that outlines a tailored educational plan for students with disabilities. The IEP is designed to meet a student's unique learning needs, ensuring they receive the appropriate accommodations, modifications, and services necessary to support their academic progress. It is developed collaboratively by a team that includes the student's parents or guardians, teachers, school administrators, and other relevant specialists. The plan specifies educational goals, the type of support services the student will receive, and how their progress will be measured.

These organizations help youth by initiating IEPs when needed and advocating for necessary services. They also play a critical role in mediating school discipline; for example, McGowan Advocacy Group successfully prevented 15 suspensions/expulsions and overturned the expulsions of 8 youth. Research has shown that suspensions and expulsions disproportionately impact marginalized youth, often serving as a pipeline into the criminal justice system.[20] By keeping youth engaged in school and ensuring they receive the necessary services, educational advocates help prevent future system involvement. Among the youth served by McGowan Advocacy Group, 38% were identified as having some form of autism, highlighting the level of specialized educational and behavioral support needed.

Youth who received an educational advocate had an 88% successful completion rate, slightly higher than the program's overall success rate of 83%. This gives some indication that tailored educational support may contribute to better program engagement and outcomes.

Educational Support at a Glance

- Educational advocates help families navigate IEPs and secure appropriate school services.
- 88% of youth receiving educational advocacy successfully completed the program (vs. 83% overall).
- Example impact: one provider prevented 15 suspensions/expulsions and overturned 8 expulsions, working to keep youth engaged in school.
- Integrating educational advocacy into programming invests in long-term, wraparound success.

For youth who require more intensive educational interventions, advocates may recommend alternative placements, such as non-public schools or residential programs. Their support extends beyond JDI, providing continuation services that include assistance with post-secondary education, vocational training, and job placement. These services are essential for justice-involved youth, who often experience educational disruptions and require ongoing support to navigate school transitions and achieve stability. By integrating educational advocacy into JDI, the program not only addresses immediate legal concerns but also invests in the long-term success of its participants, ensuring they have the resources needed to thrive.

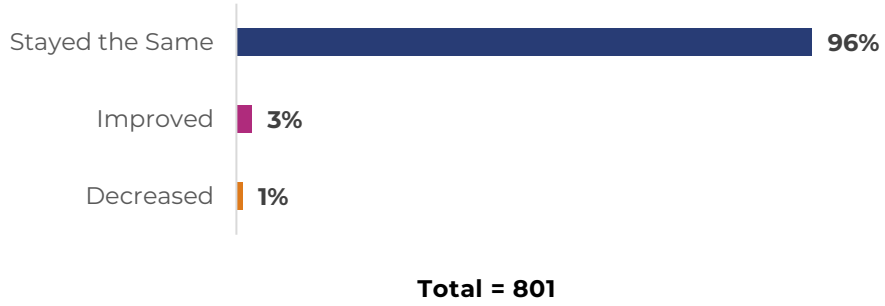
Post Program Risk Assessments

Youth take the SDRRC-II assessment before and after their program participation to determine if there were changes in their risk for recidivism. Results are calculated by finding the difference in the Pre/Post Risk to Recidivate Scores. When the difference is positive, there are fewer risk factors present at program completion. If the difference is negative, there are more risk factors present. As such, an increase in score acts as an indicator of increased resiliency for those that participated in and successfully completed JDI services.

[20] American Psychological Association Zero Tolerance Task Force. (2008). *Are zero tolerance policies effective in the schools? An evidentiary review and recommendations.* American Psychologist, 63(9), 852–862. https://doi.org/10.1037/0003-066X.63.9.852
Losen, D. J., & Martinez, T. E. (2013). *Out of school and off track: The overuse of suspensions in American middle and high schools.* The Center for Civil Rights Remedies at The Civil Rights Project. https://civilrightsproject.ucla.edu/resources/projects/center-for-civil-rights-remedies/school-to-prison-folder/federal-reports/out-of-school-and-off-track-the-overuse-of-suspensions-in-american-middle-and-high-schools

Of the 801 successful youth that took a pre- and post-SDRRC-II assessment, 767 (96%) exited the program with the same risk category they entered the program with (i.e., entering with a low risk score and exiting with a low risk score) (Figure 17), 20 (3%) youth scores improved (i.e., moved to a lower risk category upon exit, and 8 (1%) youth experienced a decrease (i.e., moved to a higher risk category upon exit). Given that only successful JDI youth are able to take the post-assessment, it is not possible to determine changes in risk scores among those that unsuccessfully exited the program.

Figure 17: Pre- and Post- Dynamic Risk Scores for Successful JDI Youth[21]



Note: Cases with missing information not included.
Sources: SANDAG; NCRC

Post Program Contact

NCRC developed a formal voluntary program, THRIVE, to help all successful participants stay connected after completing JDI. THRIVE links youth to community services that support their continued personal growth and prepares them to serve as peer mentors for current JDI youth. Participants may join events, activities, and RCCs (with compensation), while developing their existing relationships with their own mentors and case managers. A dedicated NCRC staff member oversees the program to ensure participation and success. Anecdotal information suggests that these efforts have been effective in maintaining engagement with JDI graduates.

[21] Several youth did not receive a post-assessment score. According to NCRC, one of the main reasons for this was the lack of training for case managers in how to complete the assessments. Additionally, NCRC found patterns of miscommunication regarding whether and when the youth should complete a post-assessment. After this challenge was identified at the beginning of the program, the completion rates of these assessments improved, increasing from 68% in year 1 to 87% in year 2 to 90% in year 3.

Recidivism Outcomes

One of the primary goals of the JDI program is to reduce participants' future contact with the criminal justice system. To assess whether JDI had such an effect, this evaluation examined criminal justice involvement during and after participation in JDI, providing an overview of recidivism, meaning how often youth who received services reoffend. For this analysis, recidivism was defined as the filing of a new petition for youth after a youth's initial referral to JDI for a new alleged offense within 6 or 12 months after program exit.[22] A new petition filed refers in the juvenile justice system to a formal charging with the court. For participants who reached age 18 during the analysis period, recidivism was measured by the filing of a new adult charge. [23]

To understand whether JDI participation contributed to reduced recidivism, these outcomes were examined across several comparison groups. First, the analysis compared outcomes between youth who successfully completed the program and those who enrolled but exited unsuccessfully.[24] While this comparison offers useful insight, it is important to acknowledge that youth who did not complete the program may differ in meaningful but unmeasured ways, such as facing greater personal challenges, having fewer resources, or experiencing lower motivation, among others. These factors could influence recidivism independently of program participation. In other words, youth who exited the program without completing requirements may have entered with a higher baseline risk or a lower likelihood of successful completion.

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[22] Recidivism outcomes are measured cumulatively. Youth who received a new petition within 6 months of program exit are also counted in the 12-month measure, provided they had sufficient follow-up time to be included in the 12-month analysis. The 12-month measure includes petitions occurring anytime within the first 12 months following program exit, not just between months 7 and 12.

[23] Preliminary analyses of the program used other recidivism indicators, such as arrests and bookings, because these events provide a faster signal of justice system involvement. For this evaluation, the primary recidivism measure is the filing of new charges, measured as a new juvenile petition or, for participants who reached 18 during the analysis period, a new adult charge. Because it can take time for an incident to move from arrest or referral to a filed charge, this outcome could not be fully observed within earlier evaluation windows. Once additional time had passed for cases to progress through the system, newly filed charged became a more reliable measure for assessing recidivism. Recidivism during program participation was excluded from the final analysis because a new filed charge during participation is directly related to program completion status. Under JDI protocol, youth with a subsequent filed case generally would not be considered successful program completers. Therefore, the final analysis focuses on recidivism within standardized 6- and 12-month periods following program exit.
https://www.sandag.org/-/media/SANDAG/Documents/PDF/data-and-research/criminal-justice-and-public-safety/evaluation-services/juveniles/jdi-annual-report-2023.pdf
https://www.sandag.org/-/media/SANDAG/Documents/PDF/data-and-research/criminal-justice-and-public-safety/evaluation-services/juveniles/jdi-annual-report-2022.pdf

[24] This analysis has excluded "returned" youth as the aim of the recidivism analysis is to evaluate the effectiveness of JDI services on participants, and because there may be unobserved differences between participants and those that did not receive services.

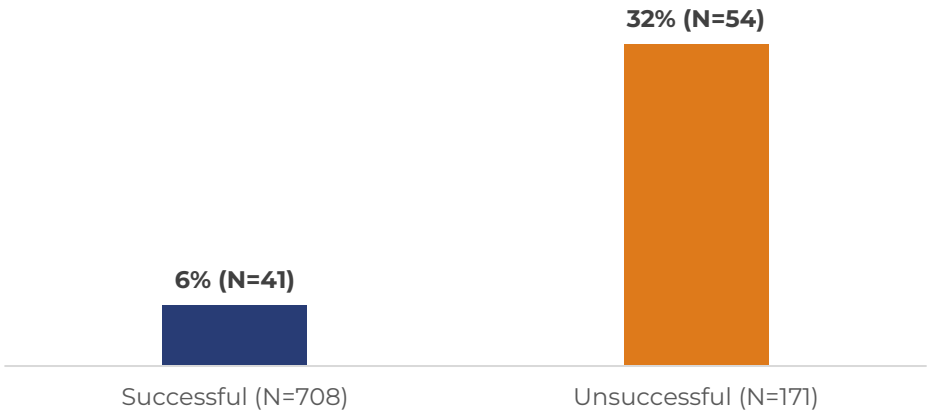
While this program comparison provides important context, it does not fully isolate the effect of JDI participation itself. To address this limitation, the study also examined outcomes by comparing youth who participated in JDI with a group of similar youth who did not receive services. This group included a retrospective sample of youth who would have been eligible for JDI if the program had existed when they were involved in the justice system. For this purpose, a comparison group was created by matching each JDI participant with another youth(s) with similar characteristics, using a statistical method designed to make the groups as comparable as possible.[25] By matching youth on key characteristics, this approach created more comparable groups and allowed for a clearer assessment of differences in recidivism outcomes.

Recidivism Outcomes 6 Months Post-Exit

Six months after program exit, nearly one in three youth who exited unsuccessfully (32%) received a new petition within six months, compared to only 6% of youth who successfully completed the program (Figure 18; Appendix Table 8). These statistically significant ($p<0.000$) results indicate that the months following program exit represent a heightened risk period for youth who disengage early. In contrast, the lower rates of new petitions among youth who completed JDI may reflect the benefits of sustained engagement or greater stability following JDI completion.

Looking at the youth who recidivated six months post-program exit, 34 of the 41 successful participants (83%) and 46 of the 54 unsuccessful participants (85%) received a felony-level petition (not shown).

Figure 18: Percentage of Petitions Filed 6 Months Post-Exit: Successful vs. Unsuccessful Participants



Note: Cases with missing information not included. Sample sizes vary across analyses due to differences in follow-up eligibility (e.g., 6- and 12-month post-exit periods) and data availability. Only youth with sufficient follow-up time were included in each analysis.
Sources: SANDAG; Probation Department

[25] Because an experimental design, such as a randomized controlled trial (RCT) was not possible, the evaluation relied on a quasi-experimental approach using propensity score matching to approximate the conditions of a randomized study. This method matches youth who participated in the program with similar youth who did not, based on observed baseline characteristics. By creating groups that are comparable on these observed characteristics, this approach reduces selection bias and improves confidence in the results.

Given the program's emphasis on reducing recidivism, it is important to examine some of the characteristics of youth who did recidivate to understand whether outcomes differed across groups. Among the 41 successful youth that had a new petition six months post-exit (6% of all successful participants), 88% were male, reflecting the gender distribution of overall JDI participants. However, females made up a larger share among successful youth who did not recidivate during this period (30%) compared to their share (10%) of overall JDI participants.

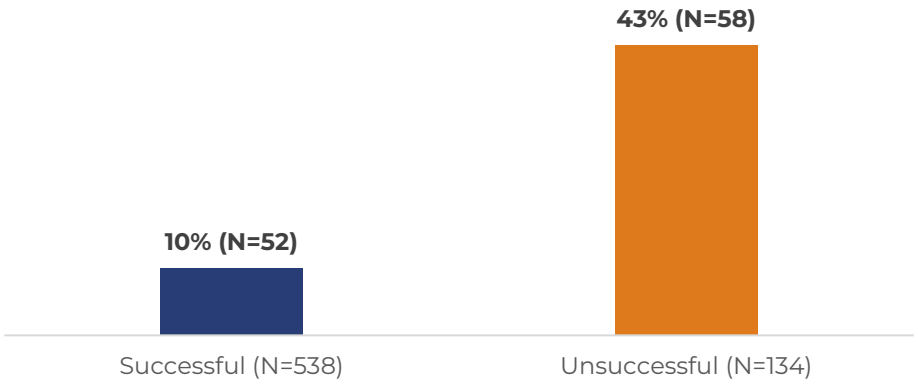
Hispanic youth made up a slightly larger share of those who recidivated within six months (63%) compared to their share of all participants (57%). White youth were underrepresented among those who recidivated (15%) but made up a bigger share of those who did not (27%). Black youth were represented at similar levels in both groups (12%).

Recidivism Outcomes 12 Months Post-Exit

By 12 months post-program exit, the gap in recidivism between the two groups widened even further. More than two in five youth who exited unsuccessfully (43%) received a new petition within one year after exiting, compared to only 10% of youth who completed the program successfully (Figure 19; Appendix Table 9). This continued gap, which speaks to long-term outcomes, suggests that youth who complete JDI may experience longer-term benefits.

Of those who did recidivate during this timeframe, a majority received felony-level petitions; specifically, 39 of the 52 successful participants (75%) and 45 of the 58 unsuccessful participants (78%) received a felony-level petition.

Figure 19: Percentage of Petitions Filed 12-Months Post-Exit: Successful vs. Unsuccessful Participants



Note: Cases with missing information not included. Sample sizes vary across analyses due to differences in follow-up eligibility (e.g., 6- and 12-month post-exit periods) and data availability. Only youth with sufficient follow-up time were included in each analysis.
Sources: SANDAG; Probation Department

Further analyses were conducted to examine characteristics of the 52 successful youth who received a new petition 12 months post-exit. Among these youth, most were male (85%) and Hispanic (65%). Compared to the overall program population (70% male; 58% Hispanic), Hispanic youth were overrepresented among those who recidivated. White youth were underrepresented among those who recidivated (17% vs. 24%), while Black/African American youth were similarly represented among both groups (14% vs. 13%).

Notably, risk scores were closely associated with recidivism outcomes, with higher-risk scores more common among youth who received a new petition within 12 months of exit. Among successful youth with a post-assessment score, those who recidivated were more likely to be rated high-risk at exit (8% vs. 3%) and less likely to be rated low-risk (40% vs. 61%) compared to those who did not recidivate.

Recidivism Outcomes by Pre-Assessment Risk Level and Program Completion Status

To further examine whether recidivism outcomes differed by participants' baseline risk level, petition outcomes were reviewed by pre-assessment risk level and program completion status. This analysis compared successful and unsuccessful JDI youth within the same risk level to determine whether completion status was associated with petition outcomes among low-, medium-, and high-risk youth.

Across all follow-up periods and risk levels, youth who exited unsuccessfully had higher petition rates than youth who successfully completed JDI (Table 4). At 6 months post-exit, petition rates increased for both groups, but successful youth continued to have lower petition rates than unsuccessful youth across all risk levels. Among low-risk youth, 4% of successful youth received a petition compared to 25% of unsuccessful youth; among medium-risk youth, the rates were 9% and 32%, respectively; and among high-risk youth, the rates were 18% and 44% (Table 4). Differences were statistically significant among low- and medium-risk youth, but not among high-risk youth.

At 12 months post-exit, the same overall pattern remained. Successful youth had lower petition rates than unsuccessful youth across all risk levels, including 6% compared to 39% among low-risk youth, 17% compared to 40% among medium-risk youth, and 24% compared to 50% among high-risk youth. Differences were statistically significant among low- and medium-risk youth, but not among high-risk youth. Overall, these findings suggest that program completion was associated with lower petition outcomes across risk levels, with the most consistent statistically significant differences observed among low- and medium-risk youth.

Table 4: Pre-Assessment Risk Level and Recidivism Outcomes by Follow-Up Period

Follow-Up Period	Pre-Assessment Risk Level	Successful with Petition	Unsuccessful with Petition	Significance Level
6 Months	Low	4% (20/488)	25% (11/44)	***
	Medium	9% (16/187)	32% (20/63)	***
	High	18% (5/28)	44% (14/32)	
12 Months	Low	6% (23/378)	39% (12/31)	***
	Medium	17% (23/134)	40% (20/50)	**
	High	24% (5/21)	50% (13/26)	

***p<0.01, ***p<0.001*
Note: Percentages represent the proportion of youth within each program status and pre-assessment risk level who received a filed petition during the specified follow-up period. Numbers in parentheses show the number of youth with a petition divided by the total number of youth in that group.
Sources: NCRC; SANDAG; Probation Department

Matched Comparison Group

Methodology

The design of this evaluation included an analysis to assess the effectiveness of JDI programming by examining its impact on recidivism outcomes and identifying any significant differences between youth who received JDI services and those who did not. As mentioned previously, given that a randomized controlled trial (RCT) was not possible for this study, the analysis applied a matched comparison group with propensity score matching using an additional retrospective comparison group of youth who would have been offered JDI services if the program was active when they were involved in the criminal justice system.[26] In other words, since the research team could not randomly assign youth to receive JDI services, they compared participants to a similar group of youth who would have qualified for the program if it had been available at the time. To establish a pool of potential comparison youth, upon SANDAG request, the SDCDA provided SANDAG with a list of cases from 2018 that met the program's eligibility criteria. However, the SDCDA did not determine which youth were ultimately included in the matched comparison group. Instead, SANDAG used propensity score matching to identify youth from the 2018 cohort who were most comparable to JDI participants based on observed characteristics, including age, gender, race/ethnicity, initial charge level, and offense category.

Earlier reports used a retrospective list from 2019. These analyses found that while JDI youth exhibited slightly higher recidivism outcomes relative to the comparison groups, the differences were not statistically significant. After careful consideration, the research team later determined that the 2019 comparison group may have been affected by the COVID-19 pandemic shutdown, during which courts and schools were closed for several months. The shutdown of schools is particularly relevant, as many JDI youth are typically referred for offenses that occur in school settings. As a result, the comparison youth could not have experienced the same rate of school referrals during the shutdown period. Accordingly, the research team concluded that a sample before the pandemic would provide a more accurate comparison.

[26] A randomized controlled trial (RCT) is ideal to evaluate the effect of program participation because it can establish a cause-and-effect relationship between the program and its outcomes. Randomly allocating the ”treatment” minimizes bias, making it more likely that any observed differences are because of the treatment itself and not another factor.

The research team thus explored an earlier group from 2018 with the assumption that their context might be more similar to contemporary JDI youth.

Thus, propensity score matching was used to pair the retrospective youth with JDI youth who had at least 6 months of post program eligibility (n=1,143). This means that for each youth who participated in the JDI program, a similar youth was identified from the retrospective group to allow for a fair comparison. Additionally, propensity score matching was used to pair JDI youth who had at least 12 months of post program eligibility (n=912).[27]

Key question behind this analysis

How do JDI participants' recidivism outcomes compare to what we would expect for similar youth who did not receive services?

In other words, does the program meaningfully change recidivism outcomes for the youth it serves?

This statistical tool allowed us to determine the average "treatment" effect on the population of interest (i.e., JDI youth eligible for the six- and 12-month post-exit check). The covariates used in the matching process included age, gender, race/ethnicity, primary offense, and charge level. Simply put, these are key characteristics that help ensure each JDI youth is compared to a similar youth in the retrospective group, so that the differences in outcomes are more likely to reflect the impact of the program rather than other factors.

The matching process used a "nearest neighbor" algorithm that identifies the closest match based on propensity scores between the treated (i.e., JDI youth) and control subjects (i.e., comparison group). This minimizes the distance between calculated propensity scores of the "treatment" and matched comparison entries. Due to the larger sample size of the treatment group, the "matching with replacement" tool was used to improve the quality of the matches, leading to a better balance between the two groups. Since there were more youth in the program, some comparison youth were matched more than once.

For recidivism analyses involving the retrospective comparison group, a comparable follow-up reference date was needed because these youth did not participate in JDI and therefore did not have a program-exit date. Although the comparison group consisted of cases issued by the SDCDA in 2018, not all youth followed the same case-processing pathway. Some may have participated in informal probation diversion or received supervision under Welfare and Institutions Code Section 654, while others may have been placed on formal probation. As a result, probation termination dates were not consistently available or comparable across youth.

[27] Sample sizes reflect youth eligible for the 6- and 12-month follow-up periods with complete data on all matching variables. Reductions from the full sample are due to follow-up eligibility requirements, missing data on the matching variables, and the exclusion of rare categories to ensure stable propensity score estimation.

Furthermore, using probation termination dates could introduce differences in the timing of recidivism measurement, as some youth may have remained on probation for over a year, while the average duration of JDI participation was considerably shorter. To establish more comparable follow-up periods, SANDAG used the average number of days JDI participants spent in the program to estimate a comparable exit date for youth in the retrospective comparison group. This approach provided a consistent benchmark for measuring recidivism at 6 and 12 months, rather than relying on probation termination dates that could reflect substantially different lengths of supervision. This estimated date was used solely for analytical purposes and did not represent an actual case closure or termination of supervision.

Recidivism Comparison Between JDI Participants and Matched Group

The first model examines recidivism outcomes for all matched program participants to provide an overall picture of how the population performed relative to similar youth who did not receive services.

By including all JDI youth regardless of whether they completed the program successfully or not, this initial analysis tried to measure the impact on recidivism of mere JDI participation.[28] This approach followed the intent-to-treat (ITT) framework, which evaluates the effect of program participation as a whole, regardless of individual success.[29] ITT analysis captures real-world program effectiveness since not all youth who enroll will fully engage or complete the program, minimizing bias and ensuring findings are more representative.

Results at 6 Months Post-Program Participation

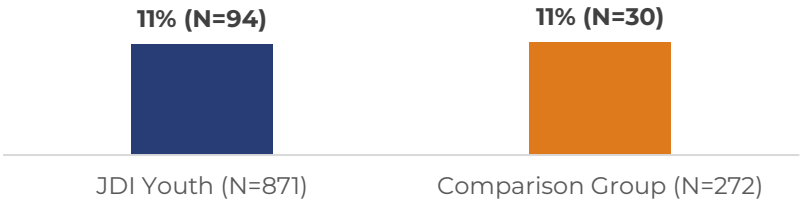
At six months, 11% of youth in the comparison group had a new petition filed, compared to 11% of JDI participants (Figure 20). This indicates that, in the short term, recidivism outcomes were similar between youth who participated in JDI and those in the matched comparison group. Analyses confirmed no statistical significance, and no significant effect of program participation itself on recidivism at the six-month mark.

While program participation was not a significant predictor, further analyses identified gender as a significant predictive factor, with male youth more likely to recidivate than female youth, suggesting that recidivism risk may vary across demographic groups regardless of program involvement.

These findings suggest that within six months of program exit, participation in JDI was not associated with a measurable reduction in recidivism relative to comparable youth. However, this time frame may be too short to fully capture the potential impact of the program, particularly for interventions aimed at addressing underlying behavioral or social factors that may influence longer-term outcomes.

[28] Additional analyses were conducted that examined the outcomes of successful youth to their matches in the retrospective group.
[29] Gupta, S. K. (2011). Intention-to-treat concept: a review. *Perspectives in clinical research*, *2*(3), 109-112.

Figure 20: Recidivism Rates Among JDI Participants and Matched Comparison Group at 6 Months



Sources: SANDAG; SDCA

Results at 12 Months Post-Program Participation

At 12 months, 16% of youth in the comparison group had a new petition filed, compared to 16% of JDI participants (Figure 21). Consistent with the six-month findings, recidivism outcomes were similar between youth who participated in JDI and those in the matched comparison group. Statistical analyses showed no significant difference between the groups, and no significant effect of program participation on recidivism at the 12-month mark.

While program participation was not a significant predictor, gender was identified as a statistically significant factor associated with recidivism. Male youth were more likely to recidivate than female youth overall.

These findings suggest that, even over a longer follow-up period, mere participation in JDI was not associated with a measurable reduction in recidivism relative to comparable youth. Some of the differences found in the analyses suggest that individual characteristics may play a larger role in recidivism outcomes than program participation when completion status is not considered.

Figure 21: Recidivism Rates Among JDI Participants and Matched Comparison Group at 12 Months



Sources: SANDAG; SDCA

As mentioned before, this initial model does not differentiate between JDI youth who successfully completed program requirements and those who did not. This approach used an intent-to-treat framework to evaluate program participation as a whole, regardless of individual completion. While this provides an overall estimate of program effectiveness, it may obscure differences in outcomes based on level of engagement. Because successful completion may reflect greater exposure to program components, it is important to gauge the effects of successful completion of the program. The following section examines recidivism outcomes among youth who successfully completed JDI compared to a match group of similar youth.

Recidivism Comparison Between Successful JDI Participants and Matched Group

As described before, findings indicated that youth who exited unsuccessfully experienced higher rates of recidivism and that completion of the program had a substantial influence on overall results.

To further examine program effectiveness among youth who fully engaged in services, a second model was conducted focusing on those who successfully completed JDI. This approach, often referred to as a "treatment-on-the-treated" analysis, evaluates outcomes among participants who received the intended level of intervention.[30]

This section focuses specifically on youth who successfully completed all program requirements and compares their recidivism outcomes to a matched group of non-participants. As a reminder, for recidivism analyses within the retrospective comparison group, the mean number of days of programming was used as the benchmark for the 6- and 12-month follow-ups, since these youth did not have a program exit date.

Results at 6 Months Post-Exit

At six months, 6% of youth who successfully completed the JDI program had a new petition filed, compared to 12% of youth in the matched comparison group (Figure 22). This represents a notably lower rate of recidivism among successful JDI participants. The statistical significance ($p<0.01$) found suggests that the observed difference is unlikely due to chance.

Additional analyses further supported this finding. After accounting for demographic and offense-related characteristics, successful JDI participants were significantly less likely to recidivate compared to youth in the matched comparison group ($p<0.001$).

[30] Angrist, J. D., & Pischke, J. S. (2009). *Mostly harmless econometrics: An empiricist's companion*. Princeton university press.
Imbens, G. W., & Rubin, D. B. (2015). *Causal inference in statistics, social, and biomedical sciences*. Cambridge university press.

Figure 22: Recidivism Rates Among Successful JDI Participants and Matched Comparison Group At 6 Months



***p<0.01*
Note: Cases with missing information not included.
Sources: SANDAG; Probation Department

In addition to program participation, gender was also identified as a statistically significant predictor of recidivism. Male youth were more likely to recidivate than female youth ($p<0.05$). No other variables, including age, race/ethnicity, offense type, or charge level, were significantly associated with recidivism.

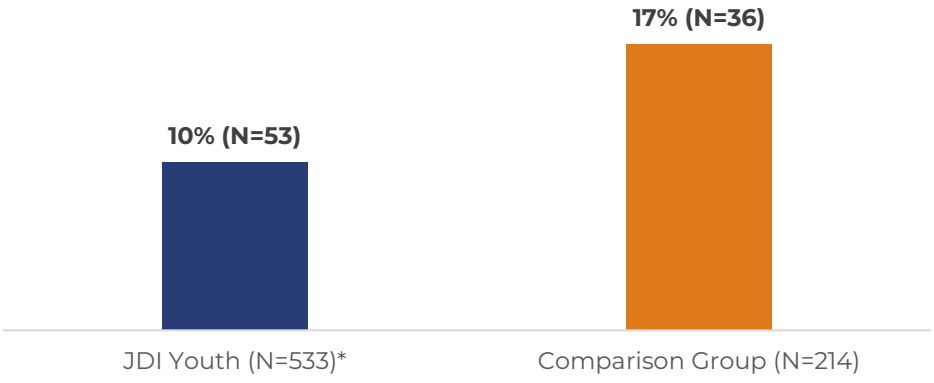
These findings suggest that, among youth who successfully completed JDI, participation in the program was associated with lower short-term recidivism relative to comparable youth who did not receive services.

Results at 12 Months Post-Exit

At 12 months, 10% of youth who successfully completed the JDI program had a new petition filed, compared to 14% of youth in the matched comparison group (Figure 23). The statistical significance ($p<0.05$) found suggests that the observed difference is unlikely due to chance.

Additional analyses further supported this finding. After accounting for demographic and offense-related characteristics, successful JDI participants were significantly less likely to recidivate compared to youth in the matched comparison group ($p<0.01$).

Figure 23: Recidivism Rates Among Successful JDI Participants and Matched Comparison Group At 12 Months



**p<0.05*
Note: Cases with missing information not included.
Sources: SANDAG; Probation Department

Consistent with earlier findings, gender remained a statistically significant predictor of recidivism. Male youth were more likely to recidivate than female youth ($p<0.05$). No other variables, including age, race/ethnicity, offense type or charge level, were significantly associated with recidivism.

These findings suggest that successful JDI participants experienced significantly lower recidivism rates compared to similar youth who did not receive services at both the 6- and 12-month follow-up periods. This indicates that the lower recidivism rates associated with successful program completion were not limited to short term but persisted through 12 months post-exit. While these findings are encouraging, they should be interpreted with caution, as youth who successfully completed the program may differ from comparison youth in ways not fully accounted for in the analysis.

Recidivism Comparison Between Successful JDI Participants and Matched Group with Initial Felony Charges

To further examine outcomes among youth referred for more serious alleged offenses, an additional analysis was conducted among successful JDI participants whose initial referral involved a felony-level charge. This subgroup analysis compared successful JDI participants with initial felony charges to similarly situated youth in the matched comparison group.

Focusing on felony-level referrals provides a more targeted assessment of JDI outcomes among youth who may have had more serious case circumstances at referral. This analysis helps determine whether the lower recidivism patterns observed among successful JDI participants overall were also present among youth referred for felony-level offenses.

As with the prior matched comparison analysis, the mean number of days of programming was used as the benchmark for the 6- and 12-month follow-ups for youth in the retrospective comparison group, since these youth did not have a program exit date.

Results at 6 Months Post-Exit

Among youth with an initial felony charge, those who successfully completed JDI had much lower 6-month petition rates than youth in the match comparison group (4% compared to 13%) (Figure 24). This difference was statistically significant, meaning it is unlikely to be due to chance ($p<0.01$). Additional analyses confirmed this finding: even after accounting for demographic and offense characteristics, successful JDI participants were significantly less likely to recidivate ($p<0.01$), and no other factors were strongly linked to recidivism.

Figure 24: Recidivism Rates Among Successful JDI Participants and Matched Comparison Group with Initial Felony Charge At 6 Months



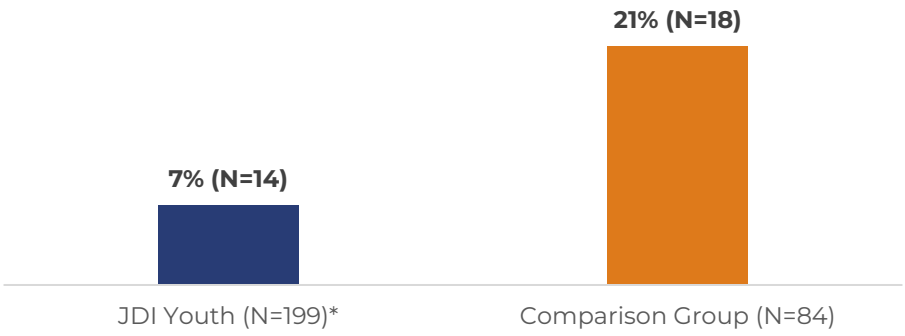
***p<0.01*
Note: Cases with missing information not included.
Sources: SANDAG; Probation Department

These findings suggest that, among youth with initial felonies, successful completion of JDI was associated with lower short-term recidivism relative to comparable youth who did not receive services.

Results at 12 Months Post-Exit

Among youth with an initial felony charge, successful JDI youth had lower 12-month petition rates than the youth in the matched comparison group. At 12 months, 7% of successful JDI youth received a petition within 12 months post-exit compared to 21% of the comparison group (Figure 25). Similar to previous trends, there were significantly lower rate of recidivism among successful JDI participants with initial felonies ($p<0.05$). This difference was also statistically significant making it unlikely due to chance. Additional analyses also confirmed the findings, with successful JDI participants were significantly less to recidivate even accounting for demographic and offense characteristics ($p<0.01$).[31]

Figure 25: Recidivism Rates Among Successful JDI Participants and Matched Comparison Group with Initial Felony Charge At 12 Months



**p<0.05*
Note: Cases with missing information not included.
Sources: SANDAG; Probation Department

Interpretation of Recidivism Outcomes

Together, these findings highlight important differences in recidivism outcomes based on program engagement, completion, and participant characteristics. Comparisons between youth who successfully completed the program and those who exited unsuccessfully reveal disparities in recidivism outcomes at both the 6- and 12-month follow-up periods. Youth who exited unsuccessfully were significantly more likely to receive a new petition than those who successfully completed the program, with this pattern persisting through 12 months post-exit. These findings suggest that successful program completion was associated with lower recidivism rates, although differences in baseline risk and other participant characteristics may also contribute to these outcomes.

[31] In addition, youth whose initial referral involved a weapons offense had significantly higher odds of receiving a petition within 12 months compared to youth whose initial referral involved a crime against person offense ($p<0.05$).

Additional analyses by pre-assessment risk level showed a similar pattern. Within the same risk levels, unsuccessful youth generally had higher petition rates than successful youth. Differences were statistically significant across low- and medium-risk youth at both the 6- and 12-month follow-up periods. Among high-risk youth, unsuccessful continued to have higher petition rates at follow-up, but these differences were not statistically significant. This suggests that program completion was most consistently associated with lower petition outcomes among low- and medium-risk youth, while outcomes among high-risk youth may be more variable and influenced by smaller sample sizes.

The overall pattern suggests that program engagement and completion are strongly associated with lower likelihood of recidivism. Youth who complete JDI may benefit from more consistent participation and greater exposure to services. However, it is important to note that youth who complete the program may differ in unmeasured but important ways from those who exit without completing the program.

To better assess whether JDI participation itself is associated with changes in recidivism, outcomes were also compared to the matched group of similar youth who did not receive JDI services. When examining all program participants as a whole, recidivism rates at both 6 and 12 months were similar to those observed in the comparison group, and no statistically significant differences were detected. These findings suggest that, on average, program participation alone was not associated with measurable reductions in recidivism when completion status is not considered.

However, a more focused analysis of youth who successfully completed the program reveals a different pattern. At the 6-month follow-up, successful participants recidivated at approximately half the rate of their matched counterparts, and this difference was statistically significant. This suggests that full program participation may be associated with meaningful reductions in recidivism during the critical period immediately following program exit. By 12 months, recidivism rates remained significantly lower among successful participants compared to the matched comparison group. These findings suggest that successful program completion may be associated with meaningful reductions in recidivism that extend beyond the initial months following program exit, with statistically significant differences persisting through the 12-month follow-up period.

A supplemental analysis focused specifically on youth whose initial referral involved a felony-level charge. Among this subgroup, successful JDI participants had significantly lower petition rates than youth in the matched comparison group at both the 6- and 12-month follow-up periods. These findings show that the lower recidivism observed among all successful JDI youth still applies to those referred for more serious offenses.

Overall, these findings suggest that program completion may play an important role in achieving positive outcomes, with significantly lower recidivism rates among successful participants persisting through the 12-month follow-up period. While program participation overall was not associated with significant reductions in recidivism, the results for successful participants indicate deeper engagement and full exposure to program components may be key drivers of impact. Findings, however, should be interpreted with caution, as youth who complete the program may differ systematically from those who do not in ways that are not fully captured in the matching process.

Study Limitations

Although using propensity score matching to create a matched comparison group is considered a rigorous design, it cannot provide full evidence of causation or account for all confounding variables that could affect outcomes in the same manner as a randomized controlled trial with random assignment.[32] In addition, the propensity score matching for this study was limited to variables available in the local criminal justice database systems and did not have more detailed information to account for all observational variables (i.e., socioeconomics, family relationships, etc.) and non-observational variables (e.g., internal motivations). Further, because the comparison group was retrospective in nature, it is difficult to control for factors that may have been relevant in 2018, but not in current day. Finally, it was unknown if the comparison group participated in other juvenile intervention programs, which also could have influenced the outcomes.

Program Satisfaction

Following the successful completion of a youth's predetermined plan requirements (i.e., fulfillment of individual goals and programs), surveys were administered to assess satisfaction among participants, their parent or guardians, persons harmed, and supporting community members. Although optional, surveys were strongly encouraged.[33]

To assess the program's impact and effectiveness, everyone involved in a youth's experience completed a satisfaction survey. While each survey measured overall satisfaction with JDI, they addressed different aspects of the program. Youth and their parent or guardians completed general satisfaction surveys, while persons harmed and supporting community members (e.g., teachers or coaches) completed surveys on the impact and effectiveness of RCC.[34] Service providers, also provided feedback during regular meetings and programming.

Survey Groups
Youth Participant
Parent/Guardian
Person Harmed
Community Member
Service Provider

Youth Participant Program Satisfaction

Youth were asked whether various aspects of their lives had been impacted in a positive or negative way after participating in JDI. The survey included questions on conflict resolution skills, self-respect, relationship with their family and peers at school, and school performance. Youth reported a positive impact in all areas, but felt that participating in JDI helped them deal with conflicts (86%) and with their self-respect (84%) the most. While nearly two-thirds

[32] Coalition for Evidence-Based Policy (2014). Which study design are capable of producing valid evidence about a program's effectiveness? A Brief Overview. *Coalition for Evidence-Based Policy*. Retrieved from http://coalition4evidence.org/wp-content/uploads/2014/10/Which-Study-Designs-are-Capable-of-Producing-Valid-Evidence-of-Effectiveness.pdf; Michalopoulos, C., Bloom, H. S., & Hill, C. J. (2004). Can propensity-score methods match the findings from a random assignment evaluation of mandatory welfare-to-work programs?. Review of Economics and Statistics, 86(1), 156-179.

[33] Due to limited resources and staffing during the program startup period, NCRC faced challenges with survey administration and completion. This logistical limitation may explain why there is a wide range in the number of survey responses in terms of what items are filled out or skipped altogether.

[34] Thus, there may be at least four surveys associated with a youth regarding their participation in the JDI program.

felt that participating in JDI helped with both their school relationships and performance, the remaining third felt it had no impact. A rather small proportion (1%-2%) felt that JDI had a negative impact on aspects of their lives (Table 5).

Table 5: Perceived Impact of the JDI Program on Youth Participant Outcomes

	Positive Impact	No Impact	Negative Impact
My ability to deal with conflicts	86%	14%	<1%
My self-respect	84%	16%	<1%
My relationship with my family	77%	22%	1%
My relationships in school	63%	36%	2%
My performance in school	62%	36%	2%
Total range		**908-913**	

Note: Percentages may not equal to 100% due to rounding. Sample sizes vary across service types due to differences in youth participation. The reported range reflects the minimum and maximum number of youth included in each analysis.
Sources: SANDAG; NCRC

Youth were asked to indicate how helpful they believed various aspects of the JDI program were to them and their goals. Overall, all listed activities were viewed as helpful or very helpful toward achieving the youth's goals, with the top three most helpful being case management (99%), mentoring (99%), educational support (98%), and mental health services (98%). Activities and programs rated as "unhelpful" shared a much lower proportion, ranging from less than 1% to 2% (Table 6).

Table 6: Perceived Helpfulness of JDI Program Components[35]

	Very Helpful	Helpful	Not Helpful	Not Very Helpful
Case Management	73%	26%	1%	<1%
Mentoring	60%	39%	1%	<1%
Educational Support	60%	38%	1%	<1%
Mental Health Services (individual, group, family counseling)	60%	38%	2%	<1%
Pro-social Activities	59%	40%	1%	<1%
Skill Building	58%	41%	<1%	<1%
Restorative Justice	58%	40%	2%	<1%
Substance Use Treatment	58%	40%	2%	<1%
Cognitive Behavior Therapy (CBT)	57%	41%	1%	1%
Total range		**452-864**		

Note: Percentages may not equal to 100% due to rounding.

[35] Responses were collected on a four-point scale with options ranging from "Very Helpful" to "Not at all Helpful." In the instance that the youth did not participate in certain activities or program aspects, they were

Sources: SANDAG; NCRC

The general satisfaction survey focused on youth's feelings about programmatic staff, the program's impact, and the knowledge gained from the program.

Overall, youth reported having a positive experience with services, with one of the highlights being the program staff. Participants felt the program staff respected their cultural/ethnic background (99%), felt that they understood their needs (99%), and felt there was someone to talk to when they needed (99%). Additionally, the majority of participants would recommend JDI to a friend in a similar situation (98%) and said they knew where services are if needed in the future (98%) (Table 7).

able to select that the question was not applicable to their experience; however, some individuals responded "Not Helpful" to items they did not participate in. As such, several (1% to 2%) of these "Not Helpful" responses might not be accurate depictions of the service itself.

Table 7: Youth Participant Satisfaction with JDI Program Experience[36]

Statement	Strongly Agree	Agree	Disagree	Strongly Disagree
Program staff respected my cultural/ethnic background	67%	32%	<1%	0%
I would recommend JDI to a friend who was in a similar situation	66%	32%	<1%	1%
I felt that the program staff understood my needs	63%	36%	1%	0%
There was someone I could talk to when I needed to	60%	39%	<1%	<1%
I know where to go in my community if I need services in the future	58%	40%	1%	<1%
The services were at a time that made it easy for me to attend	56%	41%	2%	1%
I felt more connected to services in my community after participating in JDI	54%	42%	2%	1%
The location(s) of the services were convenient	48%	46%	4%	2%
I helped create my own action plan	47%	51%	1%	<1%
Total range		**755-880**		

Note: Percentages may not equal to 100% due to rounding.
Sources: SANDAG; NCRC

> One participant with a significant substance use history entered JDI with a case goal of getting away from heavy drugs. While progress was non-linear, he demonstrated notable self-awareness and accountability, ultimately "making a decision on his own to pursue total sobriety." At graduation, he reflected, "This piece of paper means more than what brought me here."
>
> *- Service provider*

Parent/Guardian Program Satisfaction

Parents/guardians felt that case management (100%), educational support (100%) and mentoring (99%), were the most helpful services, with almost none having negative opinions (Table 8).

[36] These questions used a four-point scale ranging from "Strongly Agree" to "Strongly Disagree." As with the previous set of questions, this section acknowledged that each youth's experience may differ and included a "Not Applicable" option for questions that didn't apply. Responses marked "Not Applicable" were excluded from the analysis, though in some cases participants may have chosen "Not Helpful" when "Not Applicable" would have been more appropriate.

Table 8: Parent/Guardian Satisfaction with Helpfulness of JDI Program

Program Component	Very Helpful	Helpful	Not Helpful	Not Very Helpful
Case Management	85%	15%	0%	<1%
Mentoring	80%	19%	<1%	<1%
Educational Support	77%	23%	<1%	<1%
Mental Health Services (individual, group, family counseling)	76%	24%	<1%	<1%
Pro-social Activities	76%	24%	<1%	<1%
Cognitive Behavior Therapy (CBT)	75%	25%	<1%	<1%
Substance Use Treatment	75%	22%	2%	1%
Restorative Justice	74%	25%	1%	<1%
Skill Building	72%	28%	<1%	<1%
Total range		**310-735**		

Note: Percentages may not equal to 100% due to rounding. Cases with missing information not included.
Sources: SANDAG; NCRC

Parents/guardians were also asked if their child's behavior and performance improved in several relational and educational areas. At least 97% or more of parents/guardians either agreed or strongly agreed that they felt more connected to and knowledgeable about services, that their child had better familial and social relationships, and better coping skills—both in daily life and in more challenging situations. Nearly 9 in 10 (89%) parents/guardians agreed that their youth's school attendance improved. Finally, two thirds (66%) of parents/guardians felt additional services would have been beneficial to their child (Table 9).

Table 9: Parent/Guardian Satisfaction with Family and/or Child's Participation in the JDI Program[37]

Statement	Strongly Agree	Agree	Disagree	Strongly Disagree
I know where to go in my community if my child or family need(s) services in the future	59%	40%	1%	<1%
I felt more connected to services available in my community	58%	40%	1%	1%
My child is doing better in their schoolwork	55%	38%	5%	2%
My child gets along better with family members	54%	43%	2%	1%
My child has missed less classes at school	53%	36%	9%	2%
My child gets along better with friends and other people	52%	46%	1%	1%
My child is better at handling daily activities of life	51%	46%	2%	1%
My child is better at coping in situations when things go wrong	49%	47%	2%	1%
I would have liked my child to have had other services	38%	28%	24%	9%
Total range		**483-728**		

Note: Percentages may not equal to 100% due to rounding. Cases with missing data not included.
Sources: SANDAG; NCRC

Persons Harmed Program Satisfaction

To get a better picture of how the person harmed was impacted by JDI services, they were asked to complete a survey. Of the 151 that fully participated, 114 (75%) completed a survey. For them, the most important aspects of JDI included being able to tell the offender (responsible youth) how they were affected by the youth's actions (80%), seeing the responsible youth receive counseling (73%), and receiving answers to their own questions (67%). Nearly half of the persons harmed (46%) reported it was not important to have the responsible youth punished (Table 10).

[37] These questions were asked on a four-point scale with responses ranging from "Strongly Agree" to "Strongly Disagree."

Table 10: Opinions of Persons Harmed on JDI Restorative Process and RCC

	Very Important	Somewhat Important	Not Important
Telling the responsible youth how I was affected	80%	16%	4%
To see the responsible youth receive counseling	73%	26%	1%
To receive answers to my questions	67%	25%	8%
To receive an apology	59%	27%	14%
Establishing restitution (re-payment plan)	50%	17%	33%
To have the responsible youth punished	31%	23%	46%
Total range		**96-100**	

Note: Percentages may not equal to 100% due to rounding.
Sources: SANDAG; NCRC

Asked about whether various aspects of their lives were positively or negatively impacted, most frequently persons harmed reported that the RCC had a positive impact on their life, with the top three categories being communication with others (77%), dealing with conflict (72%), and respect for others (67%) (Table 11).

Although the majority of persons harmed (over 50%) indicated seeing positive effects, responses varied, as noticeable portions of persons harmed viewed the conference as having no impact or even a negative impact. Across the different categories, 20% to 59% indicated the RCC had no impact. Most commonly, respondents saw no impact in their relationships and performance in school (52% and 59%, respectively). While fewer respondents reported a negative impact—ranging from 1% to 7% across categories—the highest negative responses were related to coping with emotions (7%), relationships in school (7%), and their connection with the community (6%) (Table 11). This wide variation in responses make these findings useful when planning future program revisions.

Table 11: Persons Harmed Perception of RCC Impact on Their Lives

Area of Impact	Positive Impact	No Impact	Negative Impact
Communication with others	77%	20%	2%
Dealing with conflict	72%	27%	1%
Respect for others	67%	32%	1%
Self-respect	58%	37%	4%
Relationship with community	55%	38%	6%
Relationship with family	54%	40%	5%
Coping with emotions	52%	41%	7%
Relationships in school	41%	52%	7%
Performance in school	36%	59%	4%
Total range		**90-94**	

Note: Percentages may not equal to 100% due to rounding.
Sources: SANDAG; NCRC

When asked what they felt the most important steps of the conference were for establishing justice, over nine in ten reported the youth accepting responsibility (95%), having a voice in the process (93%), and the youth acknowledging harm (91%) were very important for establishing justice. Seven (9%) persons harmed reported that it was not important to their view of justice that the youth avoided the judicial process (Table 12).

Table 12: Perceived Importance of Restorative Justice Steps by Persons Harmed

Restorative Justice Components	Very Important	Somewhat Important	Not Important
Youth accepting responsibility	95%	2%	2%
Having a voice	93%	6%	1%
Acknowledgement of harm	91%	7%	1%
Receiving support	83%	13%	5%
Youth avoiding judicial process	76%	15%	9%
Developing the action plan	69%	26%	5%
Total range		**77-82**	

Note: Percentages may not equal to 100% due to rounding.
Sources: SANDAG; NCRC

Overall, persons harmed had positive experiences with services, with a unanimous response that the JDI program allowed them to tell their story (100%). Nearly all (99%) agreed that hearing stories about other persons harmed was impactful, that having a voice in the development of the JDI plan outcome was important (95%), and that avoiding the formal court process mattered (93%). A smaller portion of persons harmed did not feel the youth should have participated in additional services (16%) and did not feel their communication improved as a result of their participation (11%) (Table 13).

Table 13: Persons Harmed Opinions of Overall JDI Participation Outcomes

Outcome Statement	Strongly Agree	Agree	Disagree	Strongly Disagree
Having a voice in the development of the youth JDI plan outcome	72%	23%	3%	2%
Telling my story as a person harmed	71%	29%	0%	0%
Avoiding court or the formal judicial process	68%	25%	6%	0%
Hearing stories about how other persons were harmed	67%	32%	2%	0%
I communicate better after participation in JDI	66%	23%	9%	2%
I deal with conflict better after participation in JDI	65%	31%	4%	0%
I have a better understanding of youth offenders	58%	35%	5%	2%
I would have liked the youth to have participation in additional services	56%	27%	11%	5%
I felt more connected to the community after participation in JDI	52%	42%	7%	0%
Total range		**47-73**		

Note: Percentages may not equal to 100% due to rounding.
Sources: SANDAG; NCRC

The persons harmed that participated in the RCC were generally not looking for the youth to be punished, but rather to be given an opportunity to voice how they were affected by the youth's actions. Additionally, they were receptive to the restorative concepts enveloped in the RCC process. Taken altogether, the RCC process and its restorative concepts were well received by participants. However, there is still the limiting factor of low participation rates of persons harmed. As the program progresses, JDI will need to continuously review and refine its strategies to increase participation, especially since more than a third of the harmed parties in this study were institutions—and these groups, particularly government agencies and large businesses, were the most likely to decline involvement.

Community Member Program Satisfaction

After their participation in the RCC, community members, like teachers and coaches, were also asked about their level of satisfaction in the process and towards the JDI plan. The 181 respondents unanimously agreed that the process and JDI plan were fair (not shown). Nearly all respondents, except for two, found the RCC meaningful, while one respondent felt the RCC did not address the impact of the offense (not shown).

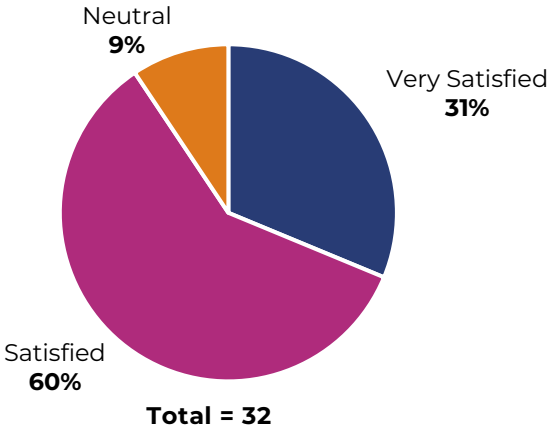
Community members were generally satisfied with the staff, citing that they felt prepared for the RCC, had their questions answered, and their concerns addressed. When rating their overall satisfaction with programming staff, all community members except one agreed they were satisfied. Only one participant noted they did not feel adequately prepared for the RCC by the staff (not shown).

Service Provider Feedback

A survey was developed for service providers to provide commentary on how to improve the JDI program to better meet the needs of the youth served. Of the 100 surveys sent, a total of 40 responses were collected (40%). Twenty-four (60%) of respondents had been involved with the program between one to three years. Fifteen percent had participated for more than three years, 15% for six months to less than one year, and 10% for less than six months. Of the respondents that voluntarily disclosed the type of services they provided, the most commonly reported were either pro-social (49%) or wellness (37%) related.[38] Additionally, 13% of responses were for educational support.

The majority were satisfied (91%) with the overall support they received to accomplish their work (Figure 26). Among those who were neutrally satisfied, one respondent cited funding and participation challenges as key concerns, while another noted that their organization had not received any clients for an extended period of time.

Figure 26: Service Provider Satisfaction with Overall Support Received

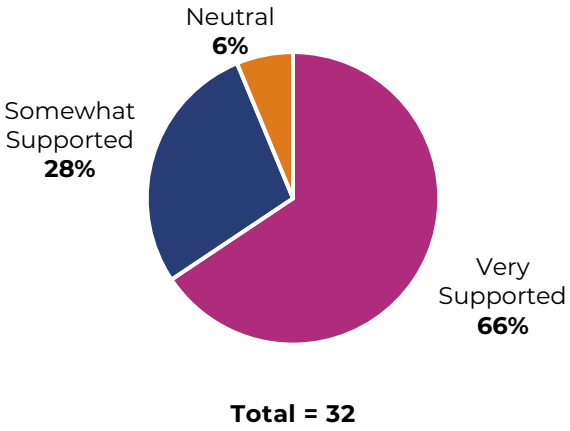


Note: Cases with missing information not included.
Sources: SANDAG; NCRC

When asked how supported they felt in their role to assist JDI youth participants, the majority of providers reported feeling either very supported (66%) or somewhat supported (28%). Two (6%) indicated a neutral response (Figure 27). These findings indicate that most providers felt adequately supported in their roles.

[38] Respondents could select more than one option.

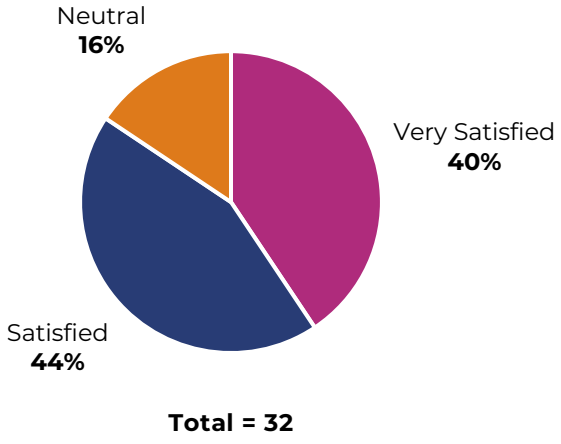
Figure 27: Service Provider Perceptions of Support in Their Role



Note: Cases with missing information not included.
Sources: SANDAG; NCRC

The majority of providers (84%) reported satisfaction with the level of engagement amongst JDI participants (Figure 28). Among those that were neutrally satisfied, some respondents expressed concerns about the accessibility of JDI meetings, noting they are often scheduled during standard work hours, making it difficult for participants with jobs to attend. To improve accessibility, they suggested offering meetings on weekends or in the evening to better accommodate participants' schedules. Additionally, one respondent observed that many youth participants seem primarily focused on completing their required hours rather than fully engaging in the program. They emphasized that mentoring is more beneficial when it extends beyond four to six weeks, suggesting that longer-term mentorship could lead to more meaningful outcomes. Overall, while most providers were satisfied with engagement levels, the feedback highlights potential areas for improvement in accessibility and program structure to enhance participant involvement and long-term impact.

Figure 28: Service Provider Feedback
Level of Satisfaction with Level of Engagement with JDI Participants



Note: Cases with missing information not included.
Sources: SANDAG; NCRC

Lessons Learned

Although much can be said about the successes of the JDI program in terms of program outcomes and client satisfaction, there are a few lessons that were learned throughout the evaluation period.

- Address caregiver declines and consent withdrawal

The findings highlight the importance of understanding factors that influence program engagement, particularly caregiver declines and withdrawal of consent (i.e., believing they would be successful in court, believing the charge would not be filed, the youth not having the capacity to meaningfully participate, and preferring the youth to receive more supervision or punishment), which affect both initial enrollment and successful program completion. When examining the reasons why youth exited JDI unsuccessfully, caregiver withdrawal of consent represented 15% of unsuccessful exits among Black youth (6 youth), compared to 7% among White youth (2 youth) and 7% among Hispanic youth (9 youth). While this suggests proportional differences by race/ethnicity, the small number of cases should be considered when interpreting the finding. To improve engagement and completion rates, this may require stronger caregiver engagement strategies to address misconceptions and encourage participation.

- Enhancing support for high-risk youth

Findings show that youth with higher pre-assessment risk levels were less likely to complete the program successfully. This highlights the need to keep developing targeted interventions to better support high-risk youth and ensure they have the resources and guidance needed to finish the program successfully.

- Increased success rates among Hispanic and Black youth

Over the course of the program, there has been a steady increase in the proportion of Hispanic and Black youth successfully completing JDI services. While White youth have consistently had the most enrollments with the highest success rates, the year-over-year increase in Hispanic and Black participants suggests that efforts to improve engagement and support may be working. This trend shows the program's ability to adapt and help reduce differences in successful and unsuccessful outcomes.

- Consistency in primary offenses leading to referral

Across all groups, battery, larceny/shoplifting/theft, weapons, and vandalism offenses were the most common reasons for youth referrals to JDI. This consistency suggests that the program is engaging youth involved in similar types of offenses, which may allow for tailored intervention strategies that specifically address these behaviors. The high proportion of battery offenses also highlights the importance of addressing underlying conflict resolution and anger management skills among participants. Expanding programming focused on de-escalation techniques, social-emotional learning, and restorative justice practices could strengthen the program's impact and reduce recidivism among participants.

- Challenges in participation of persons harmed

A continuing challenge for the JDI program is the participation of persons harmed in the restorative justice process. Among youth who accepted JDI services and exited the program, 75% of referrals involved a person harmed. However, for persons harmed in successful youth cases, 63% declined to participate. Decline rates varied by type, with government agencies and large businesses most likely to opt out, followed by individuals and small businesses, while schools and family members were more likely to engage. A common reason for declining was a lack of interest in participating. These findings highlight ongoing challenges in engaging persons harmed, particularly larger institutional entities, and suggest a need for targeted outreach, education on the restorative process, and continued cross-sector efforts to support and encourage participation.

- Recidivism outcomes and the role of risk assessment scores

A key takeaway from this analysis is the role of SDRRC-II pre-assessment scores in understanding recidivism outcomes. Youth who successfully completed JDI were more likely to be classified as low-risk at intake, while youth who did not complete the program had a higher proportion classified as medium- or high-risk. When recidivism outcomes were examined within the same pre-assessment risk levels, youth who exited unsuccessfully generally had higher petition rates than youth who completed the program successfully. These differences were most consistent among low- and medium-risk youth, while differences among high-risk youth at follow-up were not statistically significant. This suggests that differences in baseline risk may help explain variation in both program completion and recidivism outcomes. These findings highlight the importance of tailoring interventions to better support higher-risk youth, particularly those who may be more likely to disengage from services. Continuing to incorporate qualitative approaches could help identify barriers to program completion and inform strategies to improve engagement and outcomes.

- Insights from the matched comparison group

The study compared recidivism outcomes between JDI participants and a group of similar youth who did not receive services. Overall, recidivism rates were similar between the two groups when considering all participants, and no statistically significant differences were observed. However, among youth who successfully completed the program, recidivism rates were significantly lower compared to the comparison group. Additional analyses focused on youth with initial felony charges found that successful JDI youth had significantly lower recidivism rates than matched comparison youth at both the 6- and 12-month follow-up periods. This suggests that successful completion may be associated with positive outcomes even among youth referred for more serious offenses. While the observed differences attenuate over time, these findings highlight the importance of supporting participant engagement and completion, as well as the need for continued program refinement and ongoing evaluation to better understand longer-term impacts.

- Positive program satisfaction across JDI program participants and service providers

Surveys revealed positive reception of the JDI program across all groups. Youth reported high satisfaction with case management (99%), mentoring (99%), and mental health services (98%), with 86% feeling better at handling conflicts. Parents and guardians saw improvements in their child's relationships (97%) and overall behavior, while persons harmed valued having a voice in the process (93%) and youth accountability (95%). These results highlight JDI's positive impact and reinforce the need to expand mentorship and mental health support. With strong community trust and positive outcomes, JDI is well-positioned to grow and strengthen partnerships to enhance its services.

Appendices

Appendix Table 1: Unsuccessful Completion Reason by Race/Ethnicity

	Total	Failed to Attend Scheduled Diversion Appointments	New Filed Petition/ Complaint	Lost Contact	Caregiver Withdrew Consent	Other	Youth Withdrew Consent
Race							
White	28	29%	29%	14%	7%	21%	0%
Hispanic	139	35%	32%	11%	6%	9%	7%
Black	41	37%	20%	10%	15%	12%	7%
Other	4	25%	75%	0%	0%	0%	0%

Note: Percentages may not equal 100% due to rounding.
Sources: SANDAG; NCRC

Appendix Table 2: Race/Ethnicity Breakdown by Completion Status

	Overall***			
	Total	Successful	Unsuccessful	Returned
Race				
White	340	73%	8%	19%
Hispanic	855	63%	17%	21%
Black	233	46%	18%	36%
Other	57	81%	7%	12%

****Significant at p<0.000*
Note: Percentages may not equal 100% due to rounding.
Sources: SANDAG; NCRC

Appendix Table 3: Race/Ethnicity Breakdown by Completion Status by Year

	Year 1**				Year 2***				Year 3***			
	Y1 Total	Successful	Unsuccessful	Returned	Y2 Total	Successful	Unsuccessful	Returned	Y3 Total	Successful	Unsuccessful	Returned
Race												
White	98	60%	9%	31%	114	82%	6%	12%	126	75%	10%	16%
Hispanic	195	53%	17%	29%	325	60%	16%	23%	326	72%	15%	13%
Black	56	34%	23%	43%	86	48%	19%	34%	91	53%	13%	34%
Other	11	100%	0%	0%	19	68%	5%	26%	26	81%	12%	8%

***Significant at p<0.01, ***Significant at p<0.000*
Note: Percentages may not equal 100% due to rounding.
Sources: SANDAG; NCRC

Appendix Table 4: SDRRC-II Risk Pre-Assessment Score Completion Status

	Overall***	
	Successful (N=945)	Unsuccessful (N=175)
Score Category		
Low	69%	36%
Medium	26%	47%
High	5%	21%

****Significant at p<0.000*
Note: Cases with missing information not included. Percentages may not equal to 100% due to rounding.
Sources: SANDAG; NCRC

Appendix Table 5: SDRRC-II Risk Pre-Assessment Score by Year and Completion Status

	Year 1***		Year 2***		Year 3***	
	Successful (N=191)	Unsuccessful (N=44)	Successful (N=344)	Unsuccessful (N=62)	Successful (N=402)	Unsuccessful (N=67)
Score Category						
Low	76%	32%	68%	27%	67%	45%
Medium	22%	41%	27%	50%	27%	42%
High	2%	27%	5%	23%	6%	13%

****Significant at p<0.000*
Note: Cases with missing information not included. Percentages may not equal to 100% due to rounding.
Sources: SANDAG; NCRC

Appendix Table 6: SDRRC-II Risk Pre-Assessment Score by Race/Ethnicity

	White (N=270)	Hispanic (N=649)	Black (N=141)	Other (N=49)
Score Category* **				
Low	74%	61%	53%	71%
Medium	21%	30%	39%	29%
High	4%	9%	8%	0%

****Significant at p<0.000*
Note: Cases with missing information not included. Percentages may not equal to 100% due to rounding.
Sources: SANDAG; NCRC

Appendix Table 7: Program Providers and Hours and Types of Services Provided

Organization Name	Total Service Cases	Total Hours	Average Number of Hours per Service	Type of Services Provided
(ARTS) A Reason to Survive	64	220	3.4	Skill-Building
AJ Novick Group, Inc.	164	1,058	6.5	Skill-Building
Any Body Can Youth Foundation	365	3,132	8.6	Skill-Building
Art Soul and Horses, Inc.	23	94	4.1	Skill-Building
Boys to Men Mentoring	94	668	7.1	Mentor, Skill-Building
COMPACT	767	3,459	4.5	Decision Making Course - In Person, Decision Making Course - Online, Family Based Therapy, Individual Based Therapy, Substance Abuse Treatment
Casa Familiar	5	45	9	Mentor, Skill-Building
Cobert Safety Professionals LLC	60	430	7.2	Skill-Building
Community Wraparound	52	436.5	8.4	Decision Making Course - In Person, Mentor, Skill-Building
Council for Supplier Diversity	40	115.5	2.9	Skill-Building
D'Andre Brooks	6	94.5	15.8	Mentor
Educational Advocacy Alliance	20	272.5	13.6	Educational Support
Epiphany In Focus	40	226	5.7	Mentor, Restorative Meeting - RCC, Skill-Building
Explore Counseling Group	22	121.5	5.5	Individual Based Therapy
Fresh Soil Mentoring and Transitional Center	7	23.5	3.4	Mentor
Goodwill Industries of San Diego County	132	190.5	1.4	Mentor, Skill-Building
Heartsoldiers LLC	21	230	11.0	Mentor, Skill-Building
Institute for Counseling, CIFC	4	29	7.3	Skill-Building
Institute on Violence, Abuse and Trauma	24	143.5	6.0	Decision Making Course - In Person, Decision Making Course - Online, Individual Based Therapy
Joining You on Your Journey Therapy	1	6	6.0	Individual Based Therapy
Lived Experiences	36	410	11.4	Mentor, Skill-Building
McGowan Advocacy Group	78	1,202.1	15.4	Educational Support

Mental Health America of San Diego County	48	227	4.7	Family Based Therapy, Individual Based Therapy, Skill-Building
Mental Health Systems	11	75.6	6.9	Substance Abuse Treatment
Mind Treasures	14	21	1.5	Skill-Building
Mission Edge / OG Yoga	42	49	1.2	Skill-Building
Movement BE	2	13	6.5	Skill-Building
National Conflict Resolution Center	998	1,119.2	1.1	Restorative Meeting - Case Plan Update, Restorative Meeting - RCC
North County Lifeline	22	148	6.7	Decision Making Course - In Person, Individual Based Therapy, Skill-Building, Substance Abuse Treatment
Open Heart Leaders	145	1,008.5	7.0	Decision Making Course - In Person, Educational Support, Family Based Therapy, Individual Based Therapy, Mentor
Outdoor Outreach	355	1763	5.0	Skill-Building
Outside the Lens	198	470	2.4	Mentor, Skill-Building
Palomar Family Counseling Service, Inc	1	8	8.0	Individual Based Therapy
Power	10	27	2.7	Skill-Building
Project A.W.A.R.E.	32	170	5.3	Mentor, Skill-Building
Rady Children's Hospital	36	187.5	5.2	Decision Making Course - In Person
Rebecca Kuritz Photography	18	55.5	3.1	Skill-Building
Rhino's Boxing Gym	10	280	3.8	Skill-Building
STAR/PAL	3	36	12.0	Mentor
San Diego Mission Academy	7	0	0	Educational Support
Shaphat Outreach A Ministry of Charity Apostolic Church	13	150	11.5	Mentor, Skill-Building
SoCal Pre Apprenticeship	20	34	1.7	Skill-Building
Studio Ace	26	87	3.3	Skill-Building
Sunset Coast Family Therapy	10	62	6.2	Individual Based Therapy
Talon Stover Certified Tae Kwon Do Instructor	34	186	5.5	Skill-Building
Teralta Art	189	646.5	3.4	Skill-Building
UPAC: Union of Pan Asian Communities	2	0	0	Substance Abuse Treatment

Urban Surf 4 kids	6	18	3	Skill-Building
Vista Hill	8	24	3	Skill-Building, Substance Abuse Treatment
Voz de Victoria	6	69.4	11.6	Educational Support

Note: Cases where the sub-goal was blank or cancelled were not included. Organizations could have joined the JDI program at different times throughout the program which could affect the number of services they provided and presented here.
Sources: SANDAG; NCRC

Appendix Table 8: Recidivism Outcomes for JDI Youth 6 Months Post Exit

Recidivism Outcomes	Program Outcome	
	Unsuccessful	Successful
Petitions Filed	54 (32%)	41 (6%)
Total for Recidivism Outcomes	**171**	**708**

Note: Totals include youth who have entered and exited the program up to two times. Not all youth that exited year 3 of the program were eligible for the 6 months recidivism check as not enough time had passed between the discharge date and the end of the reporting period.
Sources: SANDAG; Probation Department; Sheriff HUB

Appendix Table 9: Recidivism Outcomes for JDI Youth 12 Months Post Exit

Recidivism Outcome	Program Outcome	
	Unsuccessful	Successful
Petitions Filed	58 (43%)	52 (10%)
Total for Recidivism Outcomes	**134**	**538**

Note: Totals include youth who have entered and exited the program up to two times. Recidivism outcomes listed in this table are not mutually exclusive of recidivism events occurring in the six months recidivism check. If a youth recidivated in the six-month check, that recidivism event will also appear in this table. No youth from year 3 were eligible for the 12-month check.
Sources: SANDAG; Probation Department; Sheriff HUB