

Reentry Program Targets Highest Risk Youth to Help Them Remain Crime-Free

As with the adult offender population, interventions have been created targeting youthful offenders to assist in their return home after incarceration in the juvenile justice system. One population of particular concern and at risk of entering the adult detention system are youth who have a lengthy history in the juvenile justice system and, despite prior incarceration, continue to reoffend. The reasons contributing to these youths' delinquency are complex, with many struggling with substance use and mental health problems.

In 2004, Phoenix House of San Diego, Inc., through its success in obtaining a SAMHSA Young Offender Reentry Program grant, implemented the ACCESS (Assertive Continuing Care Ensuring Sobriety and Success) program based on the best practice Assertive Continuing Care model. Targeting young male offenders reentering local communities from two of San Diego County Probation Department's detention facilities, the ACCESS program served 282 high-risk youth from 2004 to 2008. Program services began during incarceration and continued for an average of six months post-release. The model incorporated assessment-based case management, structured substance abuse treatment, and weekly intervention meetings. Intake assessment data revealed a clientele that by the time they entered adolescence, was already deeply entrenched in a delinquent and substance abusing lifestyle and also dealing with a multitude of other serious issues. As Table 1 shows, on average, youth were 12 years old when they started using alcohol or drugs and had ever used an average of four different types of substances. Almost half of the youth reported ever being a member of a gang and nearly three-quarters had a prior sustained petition. A finding that may not be surprising, but is still alarming, is that the majority of the young males had previously been a victim of violence at some point in their life, such as being attacked by someone with a gun, knife, or other weapon, and/or struck or beaten to the point of injury. Equally concerning is that over half said their life had been significantly disturbed by "nerve, mental, or psychological problems" or felt they "could not go on" at some point in their life.

Table 1

ACCESS PARTICIPANTS ENTER PROGRAM WITH MULTIPLE ISSUES AND NEEDS

Average age of first substance use	12.0 (SD = 1.99)
Average number substances used	4.0 (SD = 2.41)
Ever a member of a gang	49%
Had a prior sustained petition	72%
Had a prior institutional commitment	38%
Ever had his life significantly disturbed by "nerve, mental, or psychological problems," or felt "he could not go on"	52%
Ever been attacked by someone with a gun, knife, or other weapon, and/or struck or beaten to the point of injury	79%
TOTAL	279 - 282

SOURCE: SANDAG; ACCESS Assertive Continuing Care Ensuring Sobriety and Success Final Report (March 2009).

NOTE: Cases with missing information not included.



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What is clear from this information is that the youth leaving the detention camps are in need of support in the community to help sustain any positive gains made while detained. The evaluation results from the ACCESS program showed that those youth who completed the program (i.e., received the full dosage of treatment) were less likely to reoffend and were assessed as having fewer risk and more protective factors than those who did not. The final report of SANDAG's evaluation of ACCESS can be accessed on the SANDAG Web site at www.sandag.org/cj.