

Community Corrections

Allen County, Indiana



Allen County Community Corrections
201 W. Superior Street
Fort Wayne, IN 46802
Telephone: 260.449.7252
<http://allencountycorrections.org>

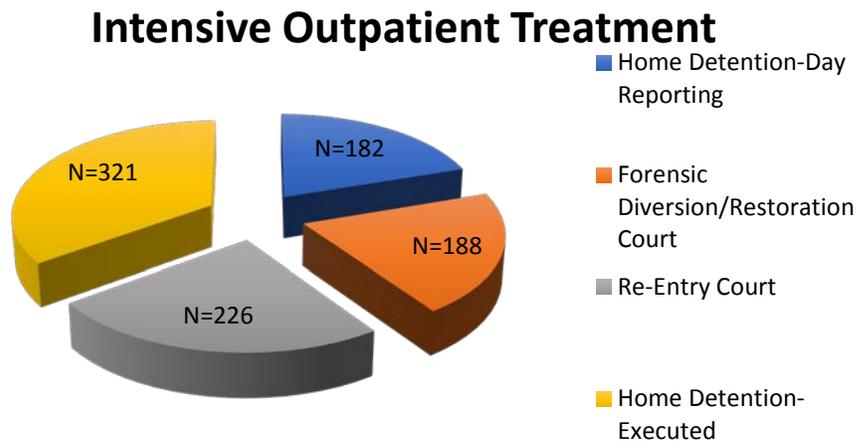
Program Effect Analysis

Report for Calendar Years
2014 – 2016

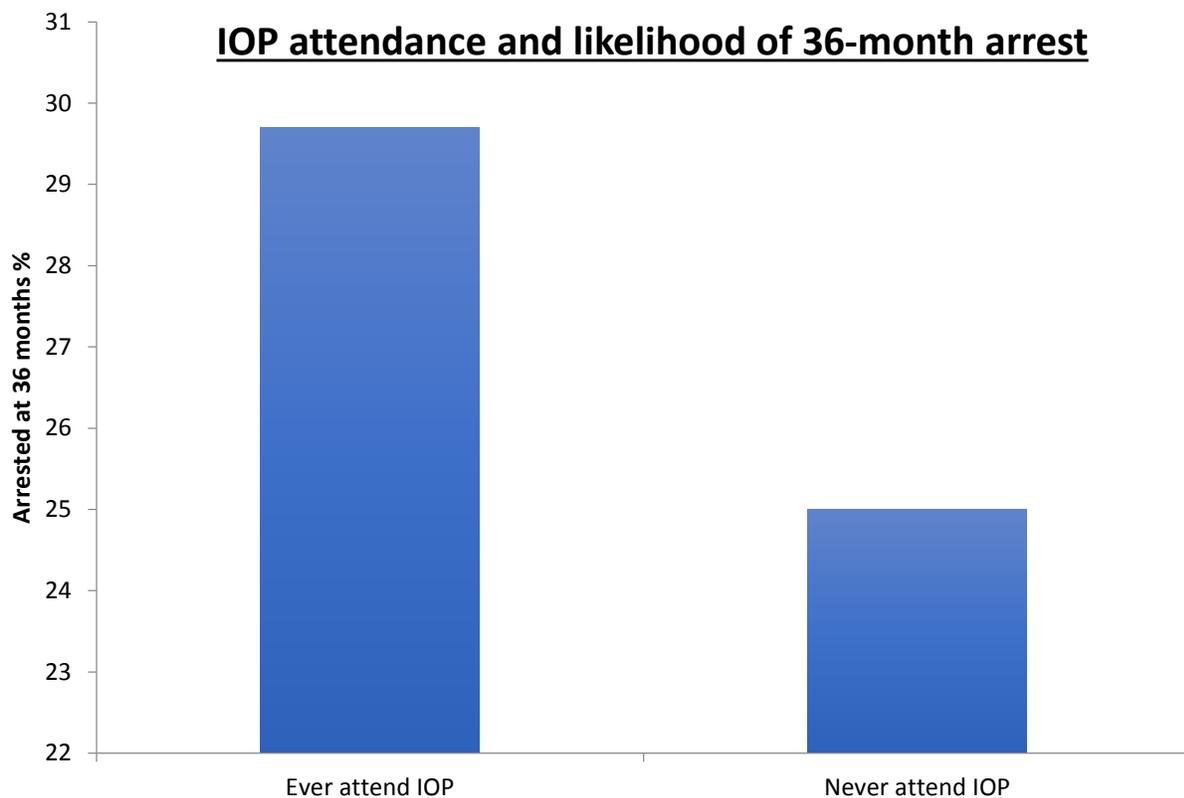
External program evaluation completed by:
Jacqueline Wall, Ph.D., Aaron Kivisto, Ph.D., & Joseph Hansel, Ph.D.

Intensive Outpatient Treatment

A total of 917 offenders were assigned to Intensive Outpatient Treatment (IOP) and attended at least one session. IOP participants came from several ACCC programs, including Home Detention – Day Reporting (N = 182), Forensic Diversion/Restoration Court (N = 188), Re-Entry Court (N = 226), and Home Detention – Executed (N =321).



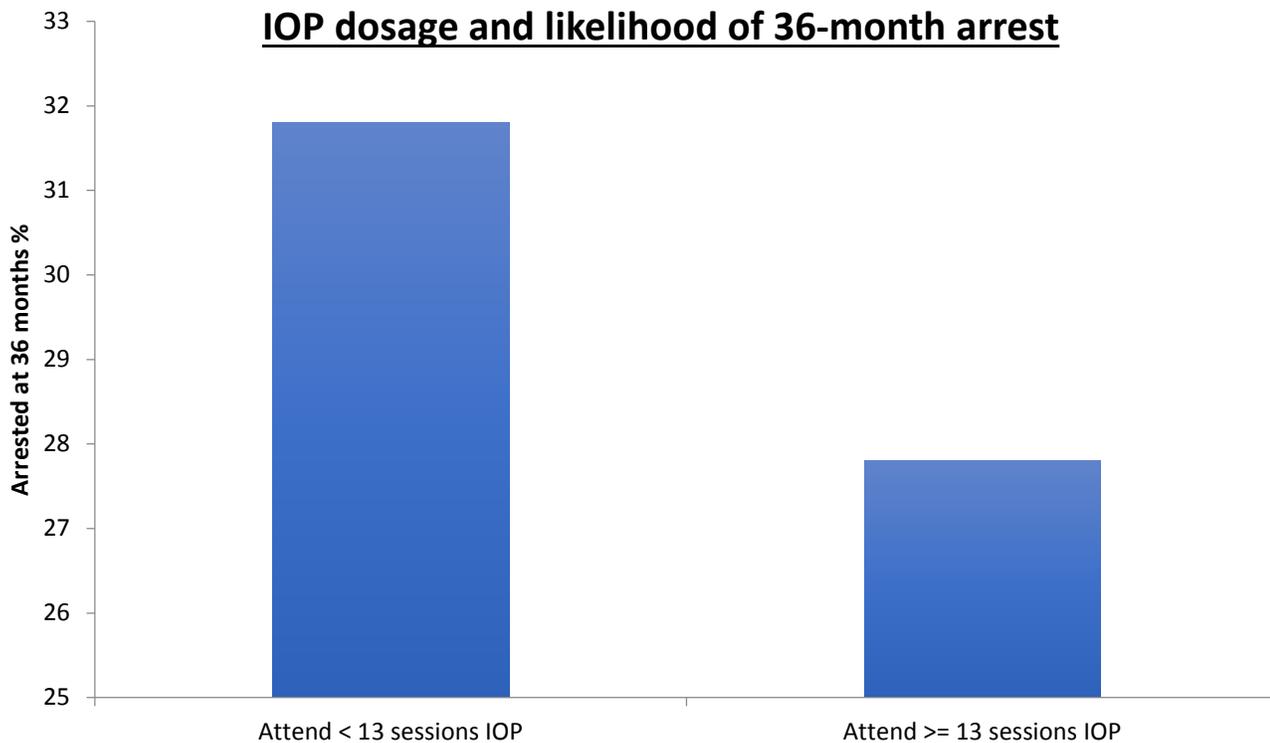
Across all programs, relative to those either not assigned to IOP or who were assigned but never attended, those who attended at least one session of IOP had a 49.7% ($p < .001$) greater odds of arrest within 12 months of program completion and a 26.2% ($p < .01$) greater odds of arrest within 36 months. While this finding appears contradictory to expectations, it should be considered within the context of the Risk-Need-Responsivity (RNR) model, which promotes delivery of services specifically to individuals at moderate to high risk. Thus, it is likely that adherence to the RNR model systematically and appropriately excludes individuals at lower risk of recidivism while assigning relatively higher risk participants to interventions such as IOP. It is also worth noting that substance abuse is a well-documented risk factor for criminal recidivism, and thus individuals assigned to IOP, as a group, possess at least one particularly robust risk factor for recidivism. As such, these overarching results are likely an artifact of this and highlight the need to statistically control for offenders' baseline risk levels in evaluating the effectiveness of programming.



When controlling for offenders' baseline level of risk, as measured by the IRAS, IOP participants no longer showed a significantly greater odds of arrest at 12 (odds ratio = 1.15, $p = .31$) or 36 months (odds ratio = 0.96, $p = .74$) after program completion. As such, the initially detected increased risk of recidivism linked to IOP participation appears due to adherence to the RNR model and the role of substance use as a general risk factor for recidivism rather than any deleterious effects of IOP participation.

Because there was considerable variability in the number of IOP sessions attended among those assigned to this intervention, it is important to consider the effectiveness of this programming among those receiving an adequate dose of intervention. Among offenders assigned to IOP, the median number of sessions attended was 13 (range = 0-93). Of those assigned to IOP, those who attended 13 or more sessions showed a non-significant decrease in risk of rearrest within 3 years relative to those attending 12 or fewer sessions (odds ratio = 0.83, $p = .18$). Interestingly, each individual session attended was associated with a small (1.4%) but significant reduction in risk of rearrest at 3 years (odds ratio = 0.98, $p = .02$). This suggests that IOP participation, particularly in adequately high doses, is linked to decreased risk of recidivism.

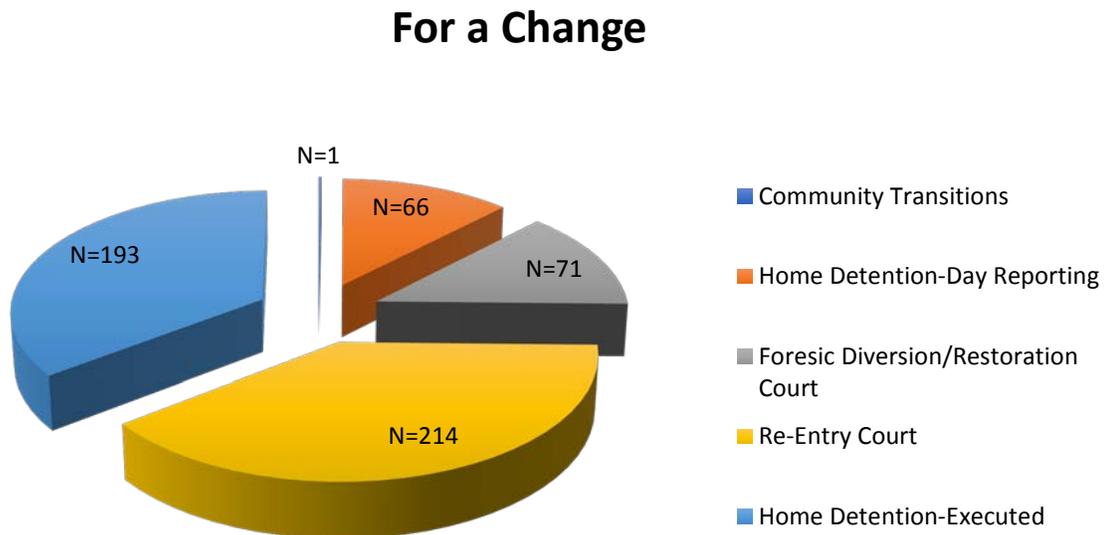
IOP dosage and likelihood of 36-month arrest



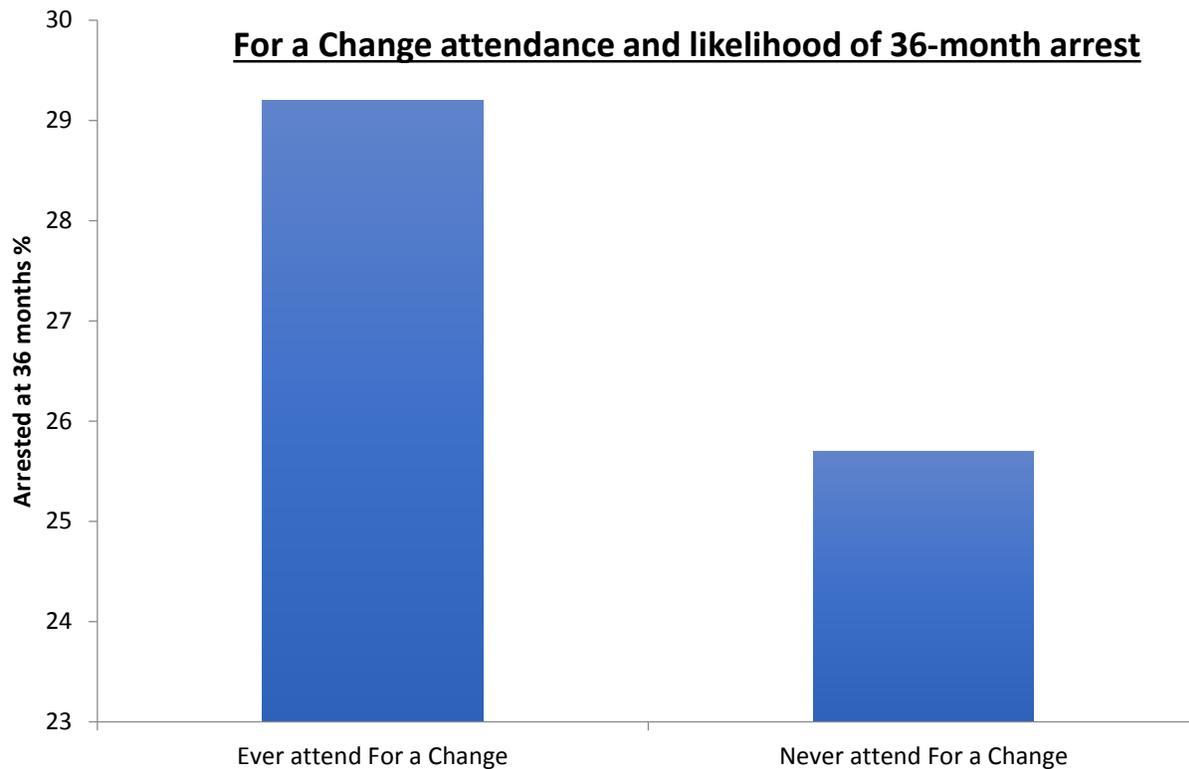
Additional analyses examined the effect of IOP participation on successful program completion. Overall, not taking into account potential covariates, individuals who participated in IOP had slightly lower odds of successful program completion (odds ratio = 0.87, $p = .09$), although this difference was not significant. When accounting for offenders' general risk of recidivism as measured by the IRAS, IOP participation was found to be positively associated with successful program completion. Specifically, controlling for IRAS risk level, offenders who participated in IOP had a 36.5% ($p < .001$) greater odds of successful program completion. Further, among those assigned to IOP, those who completed 13 or more sessions had a 39% ($p < .05$) greater odds of successful program completion relative to those completing 12 or fewer sessions.

For a Change

A total of 545 offenders were assigned to For a Change and attended at least one session. For a Change participants came from several ACCC programs, including Community Transitions (N = 1), Home Detention – Day Reporting (N = 66), Forensic Diversion/Restoration Court (N = 71), Re-Entry Court (N = 214), and Home Detention – Executed (N = 193).

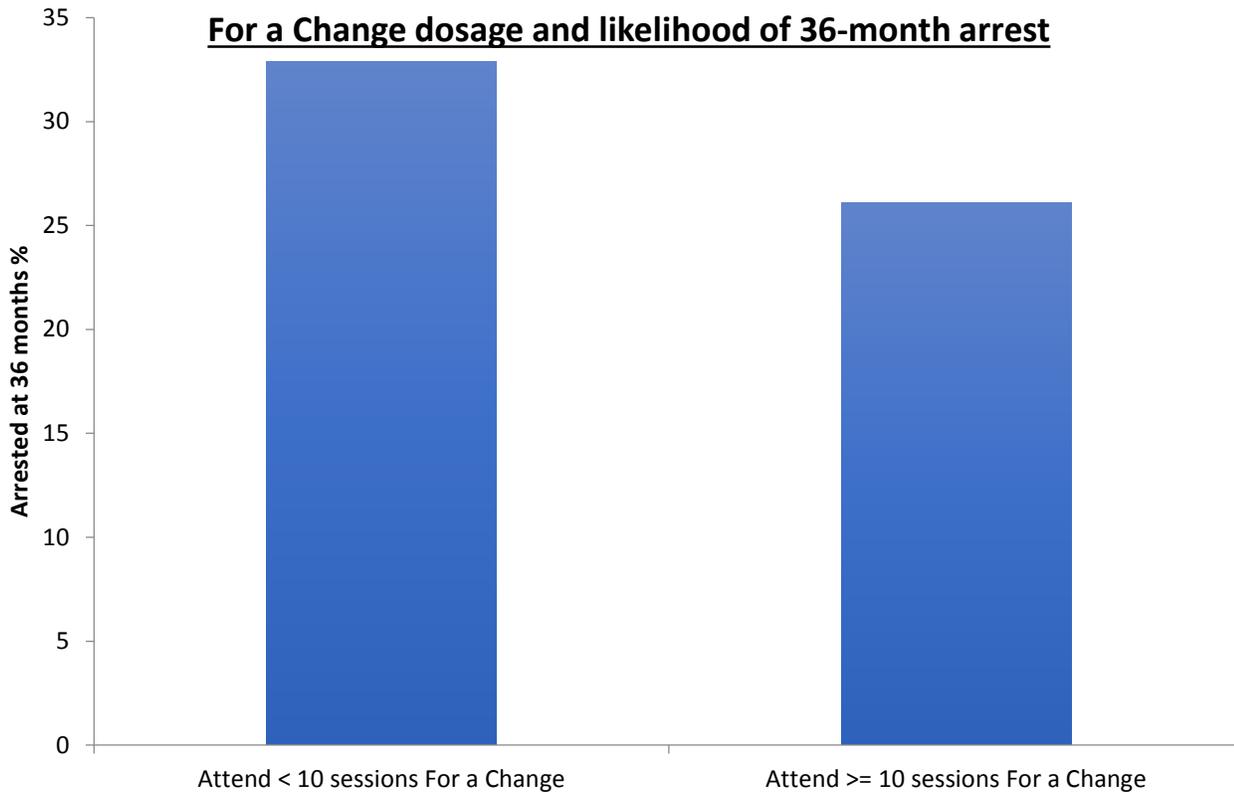


Across all programs, relative to those either not assigned to For a Change or who were assigned but never attended, those who attended at least one session had a 33.1% ($p < .05$) greater odds of arrest within 12 months of program completion and a 18.9% ($p = .09$) greater odds of arrest within 36 months. While this finding appears contradictory to expectations, it should be considered within the context of the Risk-Need-Responsivity (RNR) model, which promotes delivery of services specifically to individuals at moderate to high risk. Thus, it is likely that adherence to the RNR model systematically and appropriately excludes individuals at lower risk of recidivism while assigning relatively higher risk participants to interventions such as For a Change. As such, these overarching results are likely an artifact of this and highlight the need to statistically control for offenders' baseline risk levels in evaluating the effectiveness of programming.



When controlling for offenders' baseline level of risk, as measured by the IRAS, For a Change participants no longer showed a significantly greater odds of arrest at 12 (odds ratio = 1.14, $p = .40$) or 36 months (odds ratio = 0.87, $p = .28$) after program completion. As such, the initially detected increased risk of recidivism linked to For a Change participation appears due to adherence to the RNR model rather than any deleterious effects of For a Change participation.

Because there was considerable variability in the number of For a Change sessions attended among those assigned to this intervention, it is important to consider the effectiveness of this intervention among those receiving an adequate dose of intervention. Among offenders assigned to For a Change, the median number of sessions attended was 10 (range = 0-18). Of those assigned to For a Change, those who attended 10 or more sessions showed a trend indicating a decreased risk of arrest within 36 months relative to those attending 9 or fewer sessions (odds ratio = 0.72, $p = .07$). This suggests that adherence to For A Change, defined as attending at least 10 sessions, is associated with a trend of decreased recidivism within 3 years of program completion.

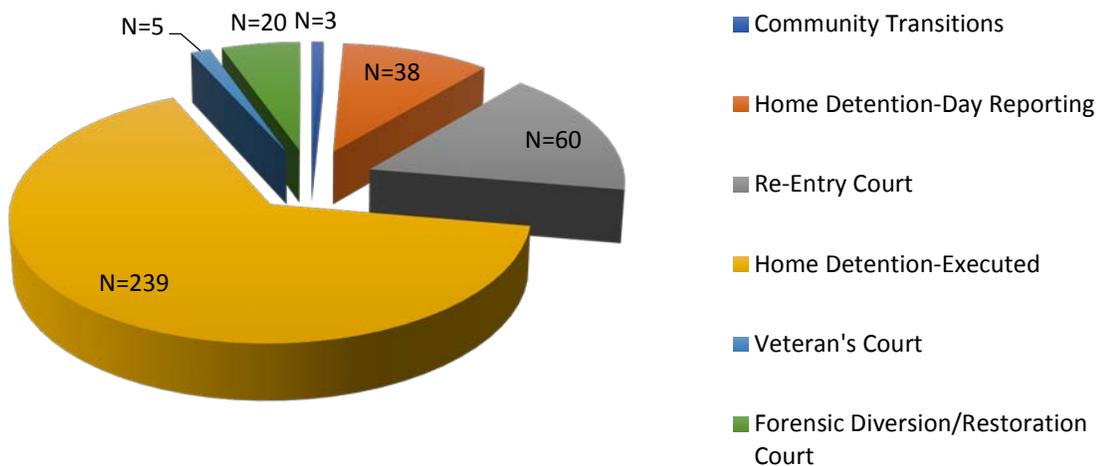


Additional analyses examined the effect of For a Change participation on successful program completion. Overall, not taking into account potential covariates, individuals who participated in For a Change had similar odds of successful program completion to those who did not participate (odds ratio = 1.05, $p = .63$). When accounting for offenders' general risk of recidivism as measured by the IRAS, For a Change participation was found to be positively associated with successful program completion. Specifically, controlling for IRAS risk level, offenders who participated in For a Change had a 61.1% ($p < .001$) greater odds of successful program completion. Strikingly, among For a Change participants, those who completed 10 or more sessions evidenced a 406% ($p < .001$) increased odds of successful program completion relative to those assigned and who completed 9 or fewer sessions.

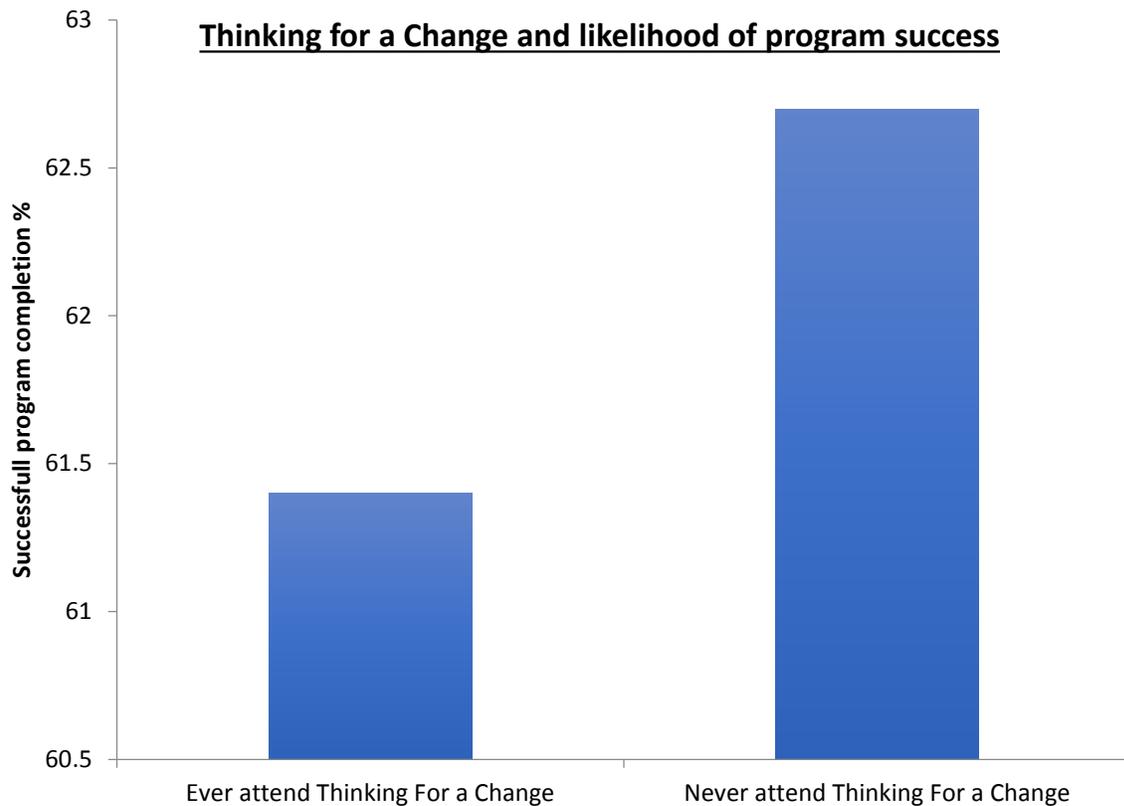
Thinking for a Change

A total of 365 offenders were assigned to Thinking for a Change. Of this group, 224 were classified as having completed the curriculum, 138 as having not completed the curriculum, and 3 were still active at the time of file closeout. Offenders were assigned to Thinking for a Change from several ACCC program components, including Community Transitions (N=3), Home Detention-Day Reporting (N=38), Re-Entry Court (N=60), Home Detention-Executed (N=239), Veteran's Court (N=5), and Forensic Diversion/Restoration Court (N=20). Of the sample of 365 offenders assigned to Thinking for a Change, 328 attended at least one session. Because three-year recidivism data was not available for Thinking for a Change participants, analyses focus on the association between Thinking for a Change participation and successful program completion.

Thinking for a Change



Across all programs, relative to those either not assigned to Thinking For a Change or who were assigned but never attended, those who attended at least one session had similar odds of successful program completion (odds ratio = 1.05, $p = .69$). Similar findings emerged when accounting for offenders' baseline level of risk measured by the IRAS (odds ratio = 1.09, $p = .55$).



Because there was considerable variability in the number of Thinking For a Change sessions attended among those assigned to this intervention, it is important to consider the effectiveness of this intervention among those receiving an adequate dose of intervention. The median number of sessions attended by those assigned to Thinking for a Change was 18 (range = 0-28). Thus, offenders assigned to Thinking for a Change and who completed 18 or more sessions were compared to those assigned but who completed 17 or fewer sessions. Considered from this perspective, Thinking for a Change was associated with a large and significant increased odds of successful program completion – those completing 18 or more sessions of Thinking for a Change evidenced a 478% ($p < .001$) increased odds of successful program completion relative to those assigned to this intervention and who completed 17 or fewer sessions. This suggests that adherence to Thinking For A Change, defined as attending at least 18 sessions, is associated with significantly greater likelihood of successful program completion.

