

BRIEF

JULY 2015

Demonstrating Effectiveness of the Wraparound Model with Juvenile Justice Youth through Measuring and Achieving Lower Recidivism

Background for Wraparound Milwaukee and Working with the Juvenile Justice System

Wraparound Milwaukee is recognized as a national model and exemplary system of care for children and youth with serious emotional and mental health needs and their families. Wraparound Milwaukee serves over 1,600 families annually in Milwaukee County and has an average daily enrollment of 1,050 youth and their families. Created in 1995, Wraparound Milwaukee has particularly focused on serving youth involved in the juvenile justice and child welfare systems who present with:

- A DSM-V diagnosis;
- A psychiatric condition or functional impairment at home, school, or in the community;
- Involvement in at least two child serving systems including: mental health, child welfare, special education, or juvenile justice; and
- Risk of psychiatric hospitalization, residential treatment, or juvenile correctional placement.

In 2014, the single largest group of youth served was from juvenile justice, with the program serving over 750 children who were adjudicated delinquent and present with serious emotional and mental health needs. Wraparound Milwaukee currently serves an average of 425 delinquent youth each day accounting for nearly 40% of all Milwaukee county youth on probation. Wraparound Milwaukee embraces the Wraparound philosophy and values, incorporating a highly individualized, strength-based, family and youth-directed, and community-based focus to its service delivery model.

Wraparound Milwaukee has worked with the Milwaukee County Delinquency Division since 1997. Youth are identified for participation in Wraparound Milwaukee through a screening process conducted initially by the Delinquency Division's Human Service Workers and then referred to Wraparound Milwaukee for determination of program eligibility. This review includes an assessment of her/his behavioral health treatment, a psychological evaluation if needed, and interviews with the youth and her or his family. The Wraparound Milwaukee Assessment Worker and the Human Service Worker (probation) present their written recommendations in court and, if appropriate, the children's court judge will issue a unique "flex order" placing the youth under the supervision of the Probation Department and further providing that care and treatment services in the community including placement in a residential treatment center (if necessary) will be determined by Wraparound Milwaukee.

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This document was prepared for the Technical Assistance Network for Children's Behavioral Health under contract with the U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration, Contract #HHSS280201300002C. However, these contents do not necessarily represent the policy of the U.S. Department of Health and Human Services, and you should not assume endorsement by the Federal Government.

Once enrolled in Wraparound Milwaukee, a Care Coordinator is assigned to facilitate and begin the Child and Family Team planning process. The probation worker joins as a member of the planning team to ensure cross-system collaboration. The strengths, needs, and supports required for that youth are identified and put into place by the Child and Family Team. Families have access to family advocates and families have a choice of the services they need and which providers, formal and informal, will provide those services.

Strong Values and Operation Belief System as a Basis for Recidivism Research

Wraparound Milwaukee has a record of success in designing a system of care for youth with serious mental health needs that is recognized throughout the Milwaukee community, Wisconsin, and the nation. The outcome goals of Wraparound Milwaukee are measured through specific success indicators. Outcome measures established by the program stakeholders (family, child welfare, mental health, juvenile justice, and education) include increases in family satisfaction, child permanency, better school attendance, improved clinical functioning, and decreased recidivism. The outcome for the juvenile justice population that has the greatest impact for the community at large is the low recidivism rate that has been consistently achieved from year to year. Wraparound Milwaukee's achievement of a low recidivism rate, first and foremost, emanates from a strong operational belief system. Success is contingent upon:

- Incorporating Wraparound values and principles into the foundation and culture of the program;
- Aligning Wraparound values with the structure and processes from which the program is designed and operates;
- Maintaining a scientific mindfulness including use of data to evaluate and make programmatic changes as needed;
- Maintaining a high level of fidelity to the values of Wraparound through training, coaching, and supervision of staff and creating relevant policies and procedures; and
- Performing on-going evaluations to continually fine-tune the program, as success and sustainability depend on the ability to measure and publicize real data.

Elements of Wraparound Milwaukee's Approach to Recidivism Research

Recidivism data are considered a fundamental concept to measuring the success of any intervention related to juvenile justice. According to the Office of Juvenile Justice and Delinquency Prevention (OJJDP), it is difficult, however, to establish a national recidivism rate for juveniles.^{1 2} Every state, county, and local system defines the parameters of recidivism in different ways besetting this research with design and methodological challenges. In a 2009 white paper, the Council of Juvenile Correctional Administration (CJCA) reported that when using the average of a sample of state juvenile recidivism rates as a window to the national juvenile recidivism rate, the rate varies between 25% and 55% depending on what measure of recidivism is used.³ Thus, there is no clear comparative national benchmark. CJCA is taking a lead in standardizing definitions and measures to address this issue.

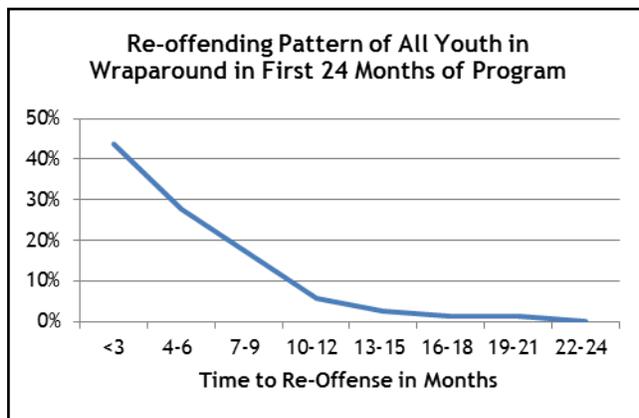
It is vital to carefully define all aspects of the research design in order to establish an understanding of what and how recidivism is measured at a particular institution. Wraparound Milwaukee designed their local recidivism research to meet the needs for internal program assessment to assure fidelity to evidence-based practice and support continuous quality improvement of the program, as well as report to external stakeholders, policy-makers, funders, and the community-at-large.

Wraparound Milwaukee has chosen to use arrest data (i.e., filing charges) rather than adjudication data as it captures a greater number of re-offenses. The decision was also made to include only the arrest data associated with criminal charges (assault, property, weapons, drugs, disorderly conduct, and sexual offenses), not those considered status offenses. The data includes arrests for both misdemeanors and felonies.

Wraparound Milwaukee tracks recidivism data using its total delinquency population over a two-year time increment. This way recidivism levels can be tracked with changes in program and shifts in characteristics of the population. Wraparound Milwaukee collects data on an ongoing basis through Synthesis, a management information system which the Juvenile Court updates with weekly arrest data on youth enrolled in Wraparound.

The Outcomes: What Has Been Learned About Youth Enrolled in Wraparound Milwaukee

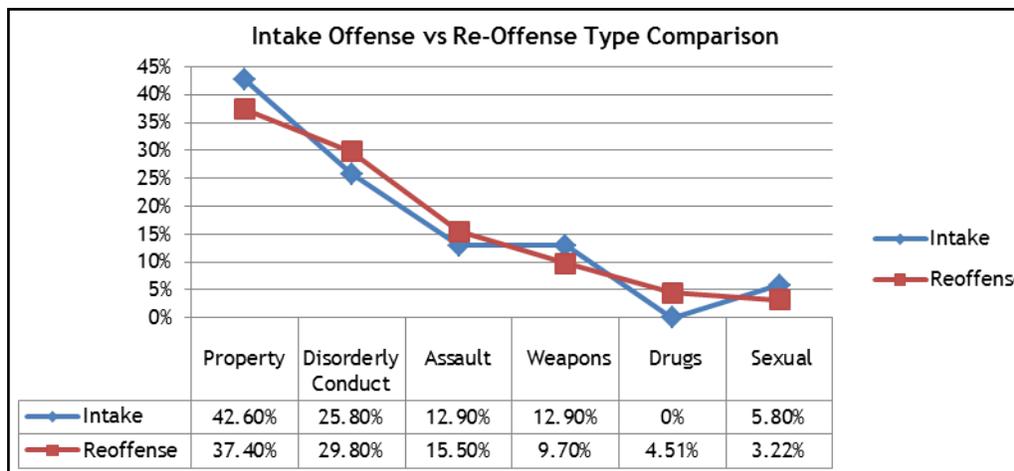
The recidivism rate for youth enrolled in Wraparound Milwaukee remains relatively constant and low. The overall recidivism rate for the current two-year time period between June 1, 2012 and June 30, 2014 is 14.11% (n=155/1091). The range of recidivism since Wraparound Milwaukee began this methodological approach in October 2009 is from 11.9% to 21%. The mean recidivism rate over this same period is 16.6%.



The data reveal recidivism rates for females proportionally are not significantly lower than for males. Although not statistically significant ($p > .2$), the likelihood of re-offending multiple times is greater for males (27% v. 40%).

The data also reveal that youth are most vulnerable for re-offending during the first three months in the program. Within a period of twenty-four months, a general trend of decreased recidivism is actualized between the first and fifteenth month of participation in Wraparound. This data suggests that youth

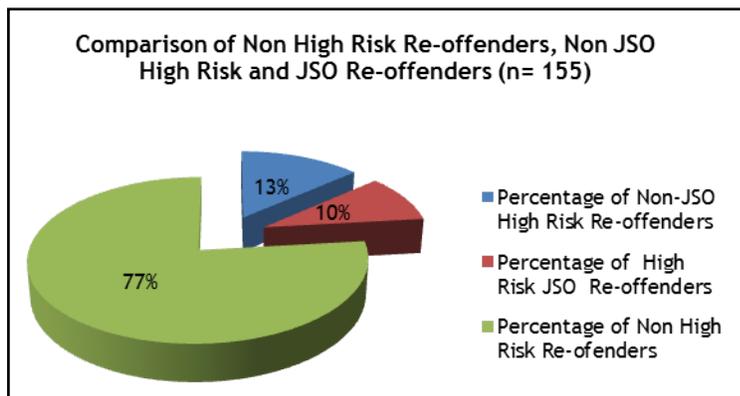
engagement with the program early on is important, as is immediately ameliorating risk factors related to re-offending. This re-offending pattern has been consistent in all five studies of recidivism conducted in the last five years.



Considering the array of offenses (assault, property, weapons, drugs, disorderly conduct, and sexual offenses), the data show that within this population, the highest

percentages of offenses are for property crimes and disorderly conduct (combined 67.2%) and the lowest occurring are sexual and drug related offenses. Those offenses that are intended to physically harm others (assault and weapons) represent 25.2% of the Wraparound population. Although there are some percentage shifts in categories of crime, there are no statistically significant differences in any of the categories between the percentage of intake offenses and corresponding re-offenses.

Of all the Wraparound youth who re-offend (155 or 14.11% of the total Wraparound population of 1,091), 23% (3.3% of the total Wraparound population) or 36 youth have been identified as high risk. The high risk offender group includes: juvenile sex offenders, fire-setters, and certain youth committing other serious felonies. The youth in the high risk group are targeted for special review by Wraparound Milwaukee's Clinical Psychologist and the development of very structured Crisis/Safety Plans. Juvenile sex offenders make up 44% of the high risk group (15 out of 36) and 15% of the total Wraparound population.



The data over the past five recidivism reports reveals the high risk groups, particularly juvenile sex offenders, recidivate significantly less than the non-high risk youth ($p < 0.0001$). A reasonable explanation appears related to the added intervention programming applied to the high risk group. Although the essential principles of Wraparound are delivered to all groups, the high risk group receives more specialized clinical and administrative oversight aimed at

ensuring consistent application of best practices and clinical risk management. It also may speak to this group of youth, particularly the juvenile sex offenders, being more amenable to community-based treatment approaches.

Other Studies of Recidivism in Milwaukee County

In July 2012, the Public Policy Forum of Milwaukee released its own study of recidivism also based on arrest data and looked at a cohort of youth that had turned 17 years of age and aged out of the system between 2006 and 2010. This sample did not include Wraparound Milwaukee enrolled youth. For this “look back” study the overall recidivism rate was roughly 41%. This report reinforces that in using similar arrest data, Wraparound Milwaukee youth are re-offending at a lower rate than other juvenile offenders.⁴ The Public Policy Forum has acknowledged the evaluation work done by Wraparound Milwaukee in tracking recidivism as well as the outcomes achieved from a more comprehensive service array.

Recidivism: What Have We Learned

Recidivism is an important measure of the effectiveness of wraparound approaches and programs with juvenile justice populations. Along with improvement in school attendance, it is an outcome important to the judicial system, probation, and policy-makers.

After conducting five recidivism studies since 2009, the overall rates of recidivism for Wraparound enrolled youth appear low and stable. While national norms for recidivism are lacking, local studies such as that done by the Public Policy Forum demonstrate that youth in the Wraparound Milwaukee program are not re-offending at as high a rate as the general delinquency population as a whole.

General perceptions that youth with higher risk behaviors, such as juvenile sex offenders, have a high propensity to re-offend are simply not supported by recidivism data. They re-offend at much lower rates.

Wraparound Milwaukee's future recidivism studies will focus on the smaller group of youth that have multiple offenses to look at their patterns of offenses. Analysis of these patterns will help Wraparound Milwaukee refine and refocus the program to better address this subpopulation. Using data meaningfully allows for an ongoing, dynamic program that is continually responsive to the ever-changing characteristics of juvenile justice populations and the external environmental conditions that reverberate across time.

References

¹ *Juvenile Offenders and Victims*; 2006 National Report Research Brief, OJJDP. Volume 100, Number 3.

² Walsh, N. & Weber, J. (2014) *Measuring and Using Juvenile Recidivism Data To Inform Policy, Practice, and Resource Allocation.*, Office of Juvenile Justice and Delinquency Prevention, Council of State Governments Justice Center.

³ Harris, P.W., Lockwood, B., & Mengers, L. (2009). *A CJCA white paper: Defining and measuring recidivism* [White paper]. Retrieved from <http://www.cjca.net>

⁴ Public Policy Forum, *Research Brief*, Volume 100, Number 3; July 2012

Suggested Citation:

Kamradt, B. & Goldfarb, P. (2015). *Demonstrating effectiveness of the wraparound model with juvenile justice youth through measuring and achieving lower recidivism*. Baltimore, MD: The Technical Assistance Network for Children's Behavioral Health.

ABOUT THE NATIONAL TECHNICAL ASSISTANCE NETWORK FOR CHILDREN'S BEHAVIORAL HEALTH

The National Technical Assistance Network for Children's Behavioral Health (TA Network) operates the National Training and Technical Assistance Center for Child, Youth, and Family Mental Health (NTTAC), funded by the Substance Abuse and Mental Health Services Administration, Child, Adolescent and Family Branch. The TA Network partners with states, tribes, territories, and communities to develop the most effective and sustainable systems of care possible with and for the benefit of children and youth with behavioral health needs and their families. The TA Network provides technical assistance and support across the country to state and local agencies, including youth and family leadership organizations.

ABOUT WRAPAROUND MILWAUKEE

This resource was produced by Wraparound Milwaukee in its role as a partner in the national [Technical Assistance Network for Children's Behavioral Health](#). Wraparound Milwaukee is one of the largest Systems of Care in the United States annually serving over 1,700 children with complex emotional and mental health needs and their families. At the core of this program, now in its 20th year, is its fundamental approach to provide care and support to families in the community that is family driven, culturally competent, highly individualized, strengths-based, and outcome driven.