Evidence-Based Crime Prevention in VA: Programs That Work (and How)

An Achievable Dream Middle and High School
Newport News, VA

June 5, 2014

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Evidence-based Associates (EBA)
• In 2012, VA incarcerated 1,860 youth in DJJ facilities
  • Rate 224 per 100,000
• 70% of youth locked up were minority
• $103,493.93 per youth for correctional expenditures
• Total spent on facilities: $78,448,395 out of $190,000,000 (about 41%)
• Recidivism rate for youth released from confinement: 67%

“Virginia could spend less, more effectively, by diverting many of these youth into evidence-based community alternatives.” – JPI

- Justice Policy Institute (2014)
1) Support communities in support of families

2) Increase use of evidence-based practices

3) Decrease unnecessary detention/incarceration of kids
1) Advocate for a sensible legislation (e.g., Youth PROMISE Act)

2) Promote a ‘portfolio’ of Blueprints® programs:
   • FFT - Functional-Family Therapy
   • MST - Multisystemic Therapy
   • MTFC - Multidimensional Treatment Foster Care
   • NFP - Nurse-Family Partnership

3) Keep youth at home, in school, and out-of-trouble

See www.evidencebasedassociates.com for more details
Who is “EBA?”

Our Team of Experts assist with:

- Large Scale, Blueprints Model Program Implementation
- Securing Sustainable Funding for EBPs
- Quality Assurance and Program Evaluation
What Can EBP’s DO?

- 9,500 youth served in nine years
- 31% less likely to be arrested for felonies and a 35% lower recommitment rate
- 18% less likely to serve an adult prison sentence
- $174 million cost-savings
- Winner of the 2008 SAMHSA Science to Service Award
How EBPs Achieve Cost Savings

Eliminating 1 year-long residential placement funds 4-6 youth in an evidence-based program (EBP)

Systems save an average of $25-90K per youth per year when evidence-based programs are used as an alternative to placement

Youth served in evidence-based programs commit fewer crimes when compared to similar youth who are placed in residential programs
Florida’s Experience: Reduced Costs thru 2009

3,000 Served, $85 million in savings

2008 Department of Juvenile Justice Program Accountability Measures Report – Residential costs $39,471 per youth completion; Redirection costs $10,854 per youth completion; Savings equals $28,617 per youth completion.
“The Catch”

BUT: EBPs must be implemented with **fidelity** in order to achieve these results.

*Poor implementation = disappointing results*

*Strong implementation = outstanding results*
Functional Family Therapy (www.fftinc.com)

- high-risk gang-involved youth ages 11-18 and their families
- Focuses on family relations and builds on family strengths
- Cost: $4,000-$4,500 per youth
- Length of treatment: average 12-20 sessions
- Reductions in recidivism: 25-55% across studies v. control group
- Currently in over 35 states and five countries
Multisystemic Therapy (www.mstservices.com):
• Targets serious delinquency (gang involvement) ages 12-18
• Intensive, focuses on entire ecology of youth including family, school, peer and community relations (and Probation)
• Cost: $8,000-$9,500 per youth depending on local costs
• Length of treatment: average 4 months (60 hours)
• Reductions in recidivism: 30-70% (with lifetime results)
• Currently in over 38 states and eight countries
Multidimensional Therapeutic Foster Care (www.mtfc.com):

- Targets juveniles needing out-of-home placement age 12-17
- Recruits/supports foster families with goal of returning youth to permanency placement (e.g., biological family)
- Cost: Approx. $5,000 per youth per month
  - Some costs covered by Federal funding Title IV-E
- Length of treatment: average 10-12 months
- Results include long-term reductions arrests, incarceration, and substance abuse
Nurse-Family Partnership (NFP):

- Targets low-income, first time pregnant women
- Trained Nurses partner with clients to provide support, counseling and education from pre-natal through infancy
- Cost: $5,000-$6000 per client family
- Length of treatment: up to 2.5 years (pre-natal support and care up through child’s 2nd birthday)
- Long-term reductions for youth in arrests, incarceration, and substance abuse; improved outcomes for mothers
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