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**Document Title: Cross-Site Evaluation of the Bureau of Justice Assistance FY 2011 Second Chance Act Adult Offender Reentry Demonstration Projects: Final Report**

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**Document Number: 251703**

**Date Received: May 2018**

**Award Number: 2012-RY-BX-0001**

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RTI Project Number  
0213494.000.001

# **Cross-Site Evaluation of the Bureau of Justice Assistance FY 2011 Second Chance Act Adult Offender Reentry Demonstration Projects: Final Report**

**June 2018**

Prepared for

**National Institute of Justice**  
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# Acknowledgments

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We would like to express our gratitude to the survey participants who generously shared their experiences with us; staff at the Second Chance Act-funded grantee organizations; and staff from local and state agencies involved in providing administrative data to support the evaluation.

We thank our project officers, Marie Garcia and Brett Chapman of the National Institute of Justice for thoughtful leadership of this study. We acknowledge the important contributions that staff from the Bureau of Justice Assistance and the Council of State Governments have made in bringing this project to completion. Finally, we thank Loretta Bohn and RTI's document preparation specialists for editorial and formatting assistance.

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## Disclaimer

The Cross-Site Evaluation of the FY 2011 Bureau of Justice Assistance Second Chance Act Adult Offender Reentry Demonstration Projects is supported by Award Number 2012-RY-BX-0001, awarded by the National Institute of Justice, Office of Justice Programs, U.S. Department of Justice. The opinions, findings, and conclusions or recommendations expressed in this publication are those of the authors and do not necessarily reflect those of the Department of Justice.

# Contents

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Chapter	Page
Executive Summary.....	ES-1
Chapter 1. Introduction .....	1-1
1.1 Incarceration and Reentry .....	1-2
1.2 Needs of Returning Prisoners and Jail Inmates .....	1-3
1.2.1 Low Education and Limited Employment Histories .....	1-3
1.2.2 Unstable Housing .....	1-4
1.2.3 Substance Abuse .....	1-4
1.2.4 Mental Health.....	1-5
1.2.5 Chronic Health Conditions.....	1-6
1.2.6 Social Support and Family .....	1-6
1.3 Approaches to Facilitating Successful Reentry .....	1-7
1.3.1 Evidence-Based Elements in the SCA Logic Model .....	1-8
1.3.2 Employment .....	1-9
1.3.3 Educational and Vocational Training.....	1-10
1.3.4 Substance Abuse Treatment .....	1-11
1.3.5 Mental Health Care .....	1-11
1.3.6 Cognitive Behavioral Programs .....	1-12
1.3.7 Housing Support.....	1-12
Chapter 2. Evaluation Methodology.....	2-1
2.1 Evaluability Assessment.....	2-1
2.2 Participating Sites .....	2-3
2.3 Process Evaluation Methodology .....	2-4
2.3.1 Objectives .....	2-4
2.3.2 Data Sources.....	2-5
2.3.3 Analysis.....	2-6
2.4 Cost Analysis Methodology.....	2-7
2.4.1 Data Sources.....	2-7
2.4.2 Analytic Approach .....	2-8
2.4.3 Considerations and Limitations.....	2-9
2.4.4 Calculations .....	2-10
2.5 Outcome Evaluation Methodology.....	2-11
2.5.1 Prospective Study .....	2-12
2.5.2 Recidivism Study.....	2-26
Chapter 3. Findings From the Process Evaluation .....	3-1
3.1 Description of Grantees.....	3-1

3.2	Early Implementation Experiences .....	3-3
3.3	Use of Evidence-Based Practices .....	3-5
3.3.1	Screening and Assessment .....	3-5
3.3.2	Case Management.....	3-7
3.3.3	Other Evidence-Based Practices.....	3-11
3.4	Lessons Learned for Working With Clients .....	3-12
3.5	Prospects for Sustainability .....	3-15
3.6	Systems-Level Outcomes .....	3-17
3.7	Chapter Summary .....	3-19
Chapter 4. Findings From the Cost Analysis .....		4-1
4.1	Overview .....	4-1
4.2	Second Chance Act Reentry Funding .....	4-1
4.3	Total Cost of Providing AORDP Reentry Services .....	4-2
4.3.1	AORDP SCA Awards .....	4-3
4.3.2	In-Kind and Cash Match Requirements.....	4-4
4.4	Funding Priorities of the AORDP Grantees .....	4-4
4.5	Cost Per AORDP Participant.....	4-11
4.6	Cost of Reentry Programs .....	4-12
4.7	Chapter Summary .....	4-14
Chapter 5. Prospective Study Findings .....		5-1
5.1	Prospective Sample Member Characteristics .....	5-1
5.2	Impact on Service Receipt.....	5-2
5.3	Impact on Reentry Outcomes .....	5-10
5.3.1	Comparison of Weighted Means.....	5-10
5.3.2	Comparison of Trajectories Over Time .....	5-13
5.3.3	Rearrest Models .....	5-20
5.4	Conclusions .....	5-21
Chapter 6. Recidivism Study Findings .....		6-1
6.1	Recidivism Study Sample Characteristics.....	6-1
6.2	Rearrest Outcomes .....	6-5
6.2.1	Bivariate Findings .....	6-5
6.2.2	Multivariate Models .....	6-6
6.3	Incarceration Outcomes .....	6-13
6.3.1	Bivariate Findings .....	6-13
6.3.2	Multivariate Models .....	6-14
6.4	Supervision Outcomes .....	6-15
6.5	Chapter Summary .....	6-15

Chapter 7. Conclusions .....	7-1
7.1 Summary of Findings.....	7-1
7.1.1 Process Evaluation.....	7-1
7.1.2 Cost Study.....	7-1
7.1.3 Prospective Outcome Study .....	7-2
7.1.4 Site-Specific Recidivism Analyses .....	7-3
7.2 Design Limitations and Considerations.....	7-3
7.2.1 Limitations .....	7-3
7.2.2 Considering the Treatment Differential .....	7-5
7.2.3 Considering Local Evaluation Findings .....	7-6
7.3 Implications for Policy and Program Development.....	7-7
7.3.1 Expand Conceptualization of Reentry Success.....	7-7
7.3.2 Incorporate Cognitive Behavioral Interventions as Core Reentry Components .....	7-8
7.3.3 Identify Opportunities to Provide Long-term, Post-release Supports .....	7-8
7.3.4 Prioritize Training and Technical Assistance .....	7-9
7.3.5 Institute Quality Assurance .....	7-9
7.3.6 Track Service Utilization .....	7-10
7.3.7 Streamline Program Design.....	7-10
7.4 Implications for Future Research.....	7-10
7.4.1 Measure Dosage.....	7-10
7.4.2 Incorporate Longer Follow-up Periods.....	7-11
References .....	R-1

## Appendices

	Page
A. Logic Model for the Second Chance Act .....	A-1
B. Survey Instruments* .....	B-1
C. Propensity Model Balance Checks .....	C-1
D. Outcome Variable Descriptions.....	D-1
E. Site-Specific Cost Profiles .....	E-1
F. Differences in Weighted Means Results for Service Receipt .....	F-1
G. Differences in Weighted Means Results for Reentry Outcomes .....	G-1
H. Detailed Recidivism Study Findings.....	H-1

\*Because of their length, survey instruments are at the back of this report.

# Exhibits

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Number	Page
2-1.	Evaluation Framework ..... 2-2
2-2.	Sites Included in the AORDP Evaluation..... 2-4
2-3.	Eligibility Criteria and Site-Specific Study Designs for Prospective Study..... 2-13
2-4.	Completed Interviews and Response Rates for Prospective Study ..... 2-18
2-5.	Description of Service Groupings ..... 2-21
2-6.	Description of Outcome Variables ..... 2-22
2-7.	Example of Random Intercepts and Random Slopes ..... 2-24
2-8.	Eligibility Criteria and Site-Specific Study Designs for Retrospective Sample..... 2-28
2-9.	Mean Number of Days in Rearrest and Reincarceration Follow-up Periods, by Site and Group..... 2-31
3-1.	Summary of Grantees’ Program Models..... 3-1
3-2.	Risk and Needs Assessment Tools Used in AORDP Sites..... 3-6
3-3.	Principles of Effective Case Management in the AORDP Sites ..... 3-9
3-4.	Prospects for Sustainability in AORDP Sites ..... 3-16
4-1.	Total Site AORDP Resources by Source ..... 4-3
4-2.	AORDP Spending Priorities (Total Cost: \$37,660,000) ..... 4-6
4-3.	AORDP Site-Specific Spending Priorities ..... 4-7
4-4.	AORDP Grantees' Total Resource Allocations (SCA Funds and In-Kind/Cash) ..... 4-8
4-5.	Average AORDP Participant Cost ..... 4-12
5-1.	Baseline Characteristics of Prospective Sample..... 5-2
5-2.	Reentry Planning Services Received During Focal Incarceration ..... 5-4
5-3.	Service Coordination (Proportion of Treatment and Comparison Group Members Receiving Any Services) ..... 5-5
5-4.	Public Benefits and Resources Services (Proportion of Treatment and Comparison Group Members Receiving Any Services) ..... 5-5
5-5.	Life Skills and Money Management (Proportion of Treatment and Comparison Group Members Receiving Any Services) ..... 5-6
5-6.	Cognitive Behavioral Services (Proportion of Treatment and Comparison Group Members Receiving Any Services) ..... 5-6
5-7.	Educational Services (Proportion of Treatment and Comparison Group Members Receiving Any Services) ..... 5-7
5-8.	Employment Services (Proportion of Treatment and Comparison Group Members Receiving Any Services) ..... 5-7
5-9.	Mentoring and Faith-Based Services (Proportion of Treatment and Comparison Group Members Receiving Any Services) ..... 5-8

5-10.	Child and Family Services (Proportion of Treatment and Comparison Group Members Receiving Any Services) .....	5-8
5-11.	Physical Health Services (Proportion of Treatment and Comparison Group Members Receiving Any Services) .....	5-9
5-12.	Mental Health Services (Proportion of Treatment and Comparison Group Members Receiving Any Services) .....	5-9
5-13.	Substance Use Services (Proportion of Treatment and Comparison Group Members Receiving Any Services) .....	5-10
5-14.	Differences in Weighted Means Results for Employment, Housing, and Illicit Drug Use .....	5-11
5-15.	Differences in Weighted Means Results for Self-Reported Criminal Behavior and Reincarceration .....	5-12
5-16.	Latent Growth Curve Model Results for Core Outcomes (Base Models) .....	5-13
5-17.	Growth Curves for Treatment and Comparison Group Members (Base Models) ....	5-14
5-18.	Results for Fully Specified Latent Growth Curve Model: Employment.....	5-15
5-19.	Results for Fully Specified Latent Growth Curve Model: Housing Independence ....	5-16
5-20.	Results for Fully Specified Latent Growth Curve Model: Illicit Drug Use.....	5-17
5-21.	Results for Fully Specified Latent Growth Curve Model: Criminal Behavior .....	5-18
5-22.	Results for Fully Specified Latent Growth Curve Model: Reincarceration.....	5-19
5-23.	Descriptive Rearrest Data for Prospective Sample, by Group .....	5-20
5-24.	Summary Results for Binary Logistic, Negative Binomial, and Parametric Survival Models .....	5-21
6-1.	Characteristics of California Sample (All Female) .....	6-2
6-2.	Characteristics of Connecticut Sample.....	6-2
6-3.	Characteristics of Florida Sample (All Male) .....	6-3
6-4.	Characteristics of Massachusetts Sample (All Male) .....	6-3
6-5.	Characteristics of Minnesota Sample (All Male) .....	6-4
6-6.	Characteristics of New Jersey Sample.....	6-4
6-7.	Characteristics of Pennsylvania Sample.....	6-5
6-8.	Descriptive Rearrest Data, by Site.....	6-6
6-9.	Summary Results for Binary Logistic, Negative Binomial, and Parametric Survival Models .....	6-8
6-10.	Cumulative Failure Curve for Days Until First Arrest, California .....	6-9
6-11.	Cumulative Failure Curve for Days Until First Arrest, Connecticut .....	6-9
6-12.	Cumulative Failure Curve for Days Until First Arrest, Florida .....	6-10
6-13.	Cumulative Failure Curve for Days Until First Arrest, Massachusetts .....	6-10
6-14.	Cumulative Failure Curve for Days Until First Arrest, Minnesota .....	6-11
6-15.	Cumulative Failure Curve for Days Until First Arrest, New Jersey .....	6-11
6-16.	Cumulative Failure Curve for Days Until First Arrest, Pennsylvania .....	6-12
6-17.	Summary Results for Competing Hazard Models (Parameter Estimates and Standard Errors) .....	6-13
6-18.	Descriptive Reincarceration Data, by Site .....	6-14

6-19. Summary Results for Parametric Survival Models (Parameter Estimates and Standard Errors) ..... 6-14

# Executive Summary

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## REPORT HIGHLIGHTS

The cross-site evaluation of the Adult Offender Reentry Demonstration Projects (AORDP) was a seven-site designed to 1) describe the implementation and sustainability of each AORDP project through a **process evaluation**, 2) determine the per capita program costs of each AORDP project through a **cost study**, and 3) determine the effectiveness of the programs through a multicomponent **outcome study** assessing the extent to which recidivism reductions were achieved in each site and program participation was associated with increased access to services and improvements in self-reported outcomes in several reentry domains across sites.

- The **process evaluation** found that grantees selected program interventions and services matched to the unique needs of their respective target populations, delivering a comprehensive mix of services. Numerous systems-level improvements were attributed to SCA funding, and prospects for sustaining at least some portions of the AORDP projects were promising in most sites.
- The **cost study** documented that the seven AORDP sites accessed a total of \$37.7 million in federal and local resources and that case management comprised the sites' main spending priority (44% of program expenditures). Across the sites, the average per participant cost was \$6,778.
- The **prospective outcome study** found that AORDP enrollment clearly increased access to services, with the greatest impact found for pre- as opposed to post-release services. However, the treatment group did not appear to have better rearrest or other reentry outcomes than the comparison group, although they had more positive trajectories over time for housing independence and employment.
- The **site-specific recidivism analyses** generally found null treatment effects for rearrest and reincarceration, with some scattered effects found—both positive and negative. No clear pattern of consistent positive effects were found in any site. Similarly, no site had consistently negative effects.

The findings suggest that program developers should look for opportunities to provide long-term, post-release supports that are informed by reassessment results, as most grantees had relatively short post-release service periods and few participants received post-release services. In addition, policymakers must promote realistic expectations for incremental improvements among individuals reentering from jail and prison. Finally, researchers should examine multiple outcomes (beyond recidivism) consistent with reentry success, and explore service dosage (i.e., intensity of services delivered) in addition to service profiles (i.e., whether individuals received a particular type of service) to arrive at a better understanding of how the duration, intensity, sequencing and combination of services and programming contributes to reentry outcomes.

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## ES-1. Introduction

In FY 2011, the Bureau of Justice Assistance (BJA) funded 22 Adult Offender Reentry Demonstration Project (AORDP) sites under the Second Chance Act (SCA). Following an evaluability assessment, 7 grantees were selected to participate in the cross-site evaluation:

- California: Women’s Reentry Achievement Program (WRAP), Solano County Health & Social Services Department
- Connecticut: New Haven Reentry Initiative (NHRI), Connecticut Department of Correction
- Florida: Regional and State Transitional Ex-Offender Reentry (RESTORE) Initiative, Palm Beach County Criminal Justice Commission
- Massachusetts: Boston Reentry Initiative (BRI), Boston Police Department
- Minnesota: High Risk Recidivism Reduction Project, Minnesota Department of Corrections
- New Jersey: Community Reintegration Program (CRP), Hudson County Department of Corrections
- Pennsylvania: ChancesR, Beaver County Behavioral Health and Developmental Services

The primary goals of the evaluation were to

1. describe the implementation and sustainability of each AORDP project through a **process evaluation**,
2. determine the per capita program costs of each AORDP project through a **cost study**, and
3. determine the effectiveness of the programs through a multicomponent **outcome study** assessing the extent to which (1) recidivism reductions were achieved in each site and (2) program participation was associated with increased access to services and improvements in self-reported outcomes in several reentry domains across sites.

## ES-2. Methodology

*Process Evaluation.* The objectives of the process evaluation were to document in detail program operations and practices in each site and to identify cross-site themes about implementation experiences, the use of evidence-based practices (EBPs), collaboration and communication, systems change, and sustainability. Primary data sources included open-ended stakeholder interviews conducted during two rounds of site visits and two rounds of web-based stakeholder surveys.

*Cost Study.* The primary objective of the AORDP cost analysis was to calculate the costs associated with implementing and operating each of the seven AORDP projects, to facilitate replication of the reentry approaches used by the seven AORDP study sites to other jurisdictions. Data sources included proposal budgets and narratives, financial reports,

teleconferences with key stakeholders, and site-level billing data and invoices. These data were used to construct comprehensive budget matrixes depicting program allocations and actual expenditures for each of the seven AORDP projects.

**Outcome Evaluation.** The objectives of the outcome evaluation were to determine the effects of program participation on recidivism and other outcomes and assess whether program participation increased engagement in services, including substance abuse treatment and mental health services. The outcome evaluation consisted of two components.

1. The **cross-site prospective study** entailed longitudinal, in-person interviews and oral swab drug tests administered to a sample of program participants and appropriate comparison or control subjects (n=516). Propensity score modeling was used to develop weights to adjust for selection bias, and the impact of AORDP enrollment on self-reported service receipt, self-reported outcomes, and rearrest was assessed using various multivariate statistical techniques (described in detail in Chapter 2).
2. The **site-specific recidivism analyses** used administrative data to assess the impact of AORDP program participation on recidivism outcomes for all individuals enrolled in the AORDP programs and a matched comparison group in each site (n=3,500). A series of multivariate models (see Chapter 2 for details) were run to examine rearrest and reincarceration outcomes in each site.

### ES-3. Process Evaluation Findings

- **Program Models and Target Populations.** Each AORDP grantee provided a comprehensive mix of services to justice-involved adults under state or local custody who were about to return to the community. Grantees selected program interventions and services matched to the unique needs of their respective target populations. All programs provided an array of pre- and post-release services, including education and literacy programs, job placement, housing services, and mental health and substance abuse treatment. Risk and needs assessments, transition case planning, and case management were key elements in each grantees' AORDP program. However, sites differed on target populations, settings, and structure. Therefore, despite some common elements, the programs should be considered as seven distinct models for reentry programming.
- **Implementation Challenges.** The most common implementation challenges related to staff turnover; program administration; organizational partnerships; enrollment, recruitment, and retention of participants; and service delivery.
- **Use of Evidence-Based Practices.** Approaches to risk and needs screening practices varied across the sites (with many using widely recognized, validated tools, such as the Level of Service Inventory-Revised, and others developing and validating local tools specific to their target population). Grantees generally used the principles of effective

case management conducive to program success (although the structure and level of case management services provided to AORDP participants differed by site). Cognitive-based interventions were not a core component of many sites' reentry AORDP programming.

- **Sustainability.** Prospects for sustaining at least some portions of the AORDP projects were promising in most sites, with the AORDP model developed in several sites described as a model for expansion or replication.

#### ES-4. Cost Analysis Findings

- **Costs Accessed.** The seven AORDP sites accessed a total of \$37.7 million in federal and local resources to plan and implement their respective reentry programs. Federal SCA funding to the seven AORDP grantees totaled approximately \$20 million, with an average award of approximately \$2.9 million per site. The seven AORDP grantees also contributed approximately \$22.1 million in local resources (required in-kind and cash match with addition occasional, site-specific contributions) toward program implementation and operations.
- **Cost Allocations.** Case management comprised the sites' main spending priority at approximately 44% of program expenditures. This was followed by mental and behavioral health services (20%) and administrative costs (17%). Housing supports was the smallest spending category, comprising just 4% of the sites' expenditures.
- **Average Per Participant Costs.** Average program costs, based on the sites' self-reported numbers of participants served and site-verified budget data, ranged from \$3,509 (Florida) to \$19,354 (Massachusetts) with an overall average per participant cost of \$6,778.

#### ES-5. Prospective Study Findings

- **Service Receipt.** AORDP enrollment clearly increased access to services, with a greater impact found for services delivered during the focal incarceration. AORDP participants were significantly more likely than comparison group members to receive the following services either during the focal incarceration or, less commonly, within the first 6 months of release: service coordination, employment services, substance use, mental health, life skills/money management, cognitive behavioral services, mentoring/faith-based services, and child/family services. No treatment differential was observed for any services at 6-12 months post-release and decreasing proportions of both treatment and comparison group members received nearly every service type after release.
- **Reentry Outcomes.** AORDP enrollment did not generally affect reentry outcomes across a large set of domains. The treatment and comparison groups were generally similar in

these outcomes at 6 and 12 months post-release. However, when examining sample members' overall trajectories on five core outcomes, the treatment group had more positive trajectories over time with respect to living in their own home or apartment (or contributing financially to the cost of their housing) and getting a job.

- **Rearrest.** No treatment effects were found for rearrest outcomes using administrative data. The treatment and comparison groups were equally likely to be rearrested within 6 and 12 months of release, had a comparable number of rearrests, and a comparable time period until their first rearrest overall and for specific offense types.

## ES-6. Site-Specific Recidivism Analyses

The site-specific recidivism analyses generally found null treatment effects, with some scattered effects found—both positive and negative. No clear pattern of consistent positive effects were found in any site. Similarly, no site had consistently negative effects.

- **Arrest Outcomes.** AORDP participation did not generally affect the likelihood of getting rearrested after release from the focal incarceration. However, positive treatment effects were found in two sites: Florida, where AORDP participants were less likely than comparison group members to be rearrested within 12 months, and New Jersey, where AORDP participants were less likely than comparison group members to be rearrested within 6 months. No positive treatment effects were found for the total number of rearrests or the time until first rearrest (and a few negative effects were found). Results of survival models estimating time until first rearrest for specific offenses were largely null. However, a scattering of positive effects were found, including time until first person rearrest in Connecticut, time until first property rearrest in Connecticut, and time until first public order or other rearrest in New Jersey and Pennsylvania. Some negative effects were also found, including time until first property rearrest in California, and time until first drug arrest in Connecticut and Minnesota.
- **Jail Reincarceration.** In both of the sites in which jail reincarceration data could be obtained, positive treatment effects were found. Specifically, AORDP participants in California and Pennsylvania had a longer time until their first jail reincarceration than comparison group members in these sites.
- **Prison Reincarceration.** In the five sites in which data on prison reincarceration were obtained, treatment effects on this outcome were largely null. However, a negative treatment effect was observed in Connecticut, where treatment group members had a shorter time until their first prison reincarceration.

## ES-7. Conclusions

*Design Limitations and Other Considerations.* The prospective study had fairly limited power for detecting small treatment effects; given sample attrition, the analytic sample size for examining 6- and 12-month outcomes was around 300. Other design limitations include selection bias (given the nonexperimental design in most sites) and the exclusive focus on criminal justice outcomes in the site-specific recidivism analyses. The modest treatment differential observed in the prospective study, the fact that many comparison group members had access to reentry services as well, the lack of emphasis on post-release service delivery, and the intent to treat approach employed in the evaluation are important considerations for understanding the general lack of program impacts on reentry outcomes.

*Implications for Policy and Program Development.* Policymakers must promote realistic expectations for incremental improvements among individuals reentering from jail and prison. Relatedly, researchers should examine multiple outcomes (beyond recidivism) consistent with reentry success, and explore service dosage (i.e., intensity of services delivered) in addition to service profiles (i.e., whether individuals received a particular type of service) to arrive at a better understanding of how the duration, intensity, sequencing and combination of services and programming contributes to reentry outcomes. Program developers should look for opportunities to provide long-term, post-release supports that are informed by reassessment results. Most AORDP grantees had relatively short post-release service periods and many staff expressed the need for longer periods of client support; findings from the prospective study suggest that longer community-based service periods are warranted. Finally, reentry programs should ensure evidence-based programming is delivered with fidelity, routinely train staff to support this goal, and record service and program delivery, specifically client's actual service receipt. Together, these steps will strengthen program approaches and facilitate necessary evaluation.

*Future Research Directions.* Future reentry evaluations would benefit from larger sample sizes (necessary for statistical power) and longer follow-up periods to address long-term program impacts. Longer observational periods, however, also mean longer wait times for results, delaying the dissemination of findings and limiting the utility of those findings to impact program decisions in real time. More varied measures of success, including indicators of incremental progress and multiple outcomes, may provide actionable information in the short-term while allowing longer observation periods for end outcomes like recidivism reduction.

# Chapter 1. Introduction

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In recognition of the extensive needs faced by individuals returning from an incarceration and building on the accumulating knowledge base on effective strategies for working with reentry populations, the Second Chance Act (SCA) of 2007: Community Safety through Recidivism Prevention was signed into law in 2008. The SCA was intended to increase evidence-based reentry programming for individuals released from state prisons and local jails and ultimately to improve public safety by reducing recidivism.

Since 2009, the Bureau of Justice Assistance (BJA) has made more than 600 awards to grantees across 49 states to improve reentry outcomes. The SCA logic model (see **Appendix A**) spelled out the following five, evidence-based elements that each grantee was required to implement:

- Targeting high-risk individuals for intervention (i.e., those at the highest risk for reoffending, based on the results of objective risk or needs assessments).
- Administering validated assessment tools to assess the risk factors and needs of returning individuals.
- Establishing pre-release planning services.
- Providing coordinated supervision and comprehensive services post-release.
- Offering an array of social and human services tailored to the individual’s assessed needs.

Grantees also had to create reentry task forces—comprising relevant agencies, service providers, nonprofit organizations, and community members—to use existing resources, collect data, and determine best practices for addressing the needs of the target population.

In FY 2011, BJA funded 22 SCA Adult Offender Reentry Demonstration Project (AORDP) sites under the SCA. The AORDP grantees were charged with using evidence-based practices (EBPs) to reduce recidivism, increase public safety, and promote successful reintegration. Grantees were funded to provide comprehensive, coordinated services—initiated before release and continuing into the community—with emphasis placed on the early community-based months when formerly incarcerated individuals are at highest risk to recidivate. Intended to proactively address the multiple challenges faced at reentry, services included education and literacy, job placement, housing, and mental health and substance abuse treatment. Risk and needs assessments, transition case planning, case management, and family involvement were key requirements. The goals of the AORDP were to measurably (1) increase reentry programming for formerly incarcerated individuals and their families, (2) reduce recidivism and criminal involvement among program participants by 50% over 5 years, (3) reduce violations among program participants, and (4) improve reintegration outcomes, including reducing substance abuse and increasing employment and housing stability.

Beginning in 2014, the National Institute of Justice (NIJ), in collaboration with BJA, funded an evaluability assessment and cross-site evaluation of this set of grantees. From the 22 AORDP grantees, 10 were included in an evaluability assessment conducted by the Urban Institute and RTI International, with 7 grantees ultimately selected to participate in the cross-site evaluation. This report presents the findings from that evaluation. Following a brief description of the context for the SCA and this evaluation, the report provides the methodology used to evaluate the effectiveness of the AORDP programs (Chapter 2), and the findings of the process evaluation (Chapter 3), cost study (Chapter 4), and outcome evaluation (Chapters 5 and 6), with policy recommendations in the final chapter (Chapter 7).

## 1.1 Incarceration and Reentry

After growing exponentially for several decades, the U.S. incarceration rate began to slow in 2008. Yet, the United States continues to have the highest incarceration rate in the world (Walsh & Wagner, 2016). In 2014, 6.8 million individuals were under correctional supervision including 4,708,100 on probation or parole, 744,600 in jail, and 1,561,500 in state or federal prison (Carson, 2014). Incarceration is expensive: Correction expenditures were approximately \$9 billion for the federal government, \$49 billion for state governments, and \$26 billion for local governments in 2012 (Kyckelhahn, 2011). The massive scope and cost of the justice system has kept correctional reform at the forefront of national and local policy agendas (Lattimore, Visher, & Steffey, 2010).

Almost all incarcerated individuals reenter the community, creating a high need for services to assist their transition: In 2014, 636,346 adults (approximately 12,000 a week) were released from prison into the community (Hughes & Wilson, 2002). Another 10.9 million cycle through the nation's jails annually (Minton & Zheng, 2016). Most incarcerated persons have severe deficits in the competencies needed for successful reintegration. Ultimately, about two-thirds end up back in the justice system (James, 2015). As such, criminal justice practitioners and policy-makers have been searching for better ways to help reintegrate formerly incarcerated persons and reduce reoffending (Visher, Lattimore, Barrick, & Tueller, 2017).

### **Racial and Ethnic Disparities in Incarceration:**

Incarceration disproportionately affects economically disadvantaged African-Americans and Latinos. African Americans are five times more likely to be arrested than whites, and Latinos are two times more likely to be arrested than whites. Combined, the proportion of justice-involved individuals that are African American and Latino is 58%, although these subgroups comprise only 25% of the population. Contributing factors to these racial disparities include poverty; isolation; discrimination; and sentencing policies such as the war on drugs, mandatory minimum sentencing, and three strikes laws. These disparities have implications for reentry, especially because the formerly incarcerated return to a small number of concentrated communities struggling with chronic stress and poor resources (Sakala, 2014).

## 1.2 Needs of Returning Prisoners and Jail Inmates

The needs of reentering individuals are profound and wide-ranging. Most formerly incarcerated individuals have limited education; few marketable job skills; uncertain housing situations; substance abuse, physical and mental health problems; and fragile social support networks (McDonald, Dyou, & Carlson, 2008; Petersilia, 2004; Solomon, Gouvis, & Waul, 2001; Travis, Solomon, & Waul, 2001). Additionally, the communities that absorb reentry populations tend to be impoverished, with limited social capital and few resources to support the complex needs of the formerly incarcerated. Left unaddressed, these deficits create serious barriers to reintegration and increase recidivism risk. A description of reentering individuals' most acute needs is briefly summarized below.

### 1.2.1 Low Education and Limited Employment Histories

Self-sufficiency after imprisonment requires a stable income, yet few individuals with a history of incarceration have the education or training to secure employment and earn a decent living. In a Bureau of Justice Statistics (BJS) special study on education and the correctional system, Harlow (2003) found that 41% of those involved in the correctional system had less than a high school education. Individuals in jails had the lowest education level (47% of those in jail vs. 27% of those in federal prison did not have a high school diploma). Data collected for federal reentry initiatives have found similar deficits. In the *Safer Return Reentry Study*, a multiyear research demonstration project in Chicago, 42% of men had less than a high school education, and 64% were unemployed in the 4 months before prison (Fontaine, Taxy, Peterson, Breau, & Rossman, 2015). Data collected for the *Multi-Site Evaluation of the Serious and Violent Offender Reentry Initiative (SVORI)* found that almost all participants worked prior to incarceration (90%), but the majority worked low-wage, low-skilled jobs and many supplemented their incomes with money from illegal activities. The most frequently cited needs reported by men in the *SVORI* sample upon release from prison were education (94%), job training (82%), and employment (80%) (Lattimore & Visher, 2009).

**Jail Reentry:** There are 3,365 local jails in the United States, processing 11 million admissions each year (Minton & Zheng, 2016) and releasing 34,000 individuals each day. Reentry from jail is particularly challenging, given the very short window of opportunity to intervene. Individuals leaving jail struggle with addiction, job and housing instability, mental illness, and physical health problems, and most are repeat offenders. Most of those in jail have not been convicted, and more than 80% are in jail for less than 1 month. Given time and resource constraints, the directives of jails have been care, custody, and control. Recognizing the urgent issues surrounding jail and reentry, BJA Mental Health funding and the SCA have supported the creation of multiservice reentry models in jails. These programs prioritize needs assessment (through screening and assessment to identify risks and needs), centralization of service referrals via case managers, and facilitation of in-reach, so community providers can begin service provision in jail to ensure a continuum of care upon release. Research supports the efficacy of these comprehensive programs (Miller & Miller, 2015; Solomon, Osborne, Stefan, Mellow, & Mukamal, 2008).

### 1.2.2 Unstable Housing

Prior to incarceration, many justice-involved individuals lived in substandard or unreliable housing situations. In the *Safer Return Study* (Fontaine et al., 2015), 31% of reentering individuals had been homeless or unstably housed prior to incarceration. Additionally, in a longitudinal study focused on fathers incarcerated in (returning from) prison in five states (the *Multi-Site Family Study of Incarceration, Parenting, and Partnering* [MFS-IP]), men reported varied housing situations prior to incarceration: 49% lived in their own home, 46% lived in someone else's home, and 5% were homeless or in residential treatment (Lindquist, McKay, Bir, & Steffey, 2015). Housing instability post-release is a major concern. Of 300 people tracked after release in the longitudinal *Returning Home Study* in Ohio, only 18% returned to their own home immediately after release. One year out, 25% lived in their own home, and 46% lived in situations they considered temporary. Many reentering individuals are highly transient, which makes community-based service provision challenging. Sixty-three percent of the Ohio *Returning Home* participants lived in more than one place during the year after release.

Other studies assessing the challenges faced by fragile families in urban environments have found that men who had been incarcerated were twice as likely to experience housing instability and four times more likely to experience homelessness than those with no incarceration history (Geller & Curtis, 2011). Periods of homelessness significantly increase recidivism (Lutze, Rosky, & Hamilton, 2014). Multiple factors play into housing difficulties beyond limited economic resources: Most communities lack affordable housing, and many partners or families of incarcerated individuals do not want the incarcerated individual to return to the household, due to prior abuse, conflict, or stigma. Compounding these difficulties, numerous states have policies that preclude individuals with a criminal record from accessing government-supported public housing. Permanent, stable housing is critical for successful reentry: Without a stable home base it is almost impossible maintain health and fulfill adult roles (Fontaine, 2013).

### 1.2.3 Substance Abuse

One of the most challenging barriers to successful reentry is addiction. An overwhelming proportion of those involved with the criminal justice system have substance abuse problems. In a comprehensive review of 11 federal correctional reports and more than 650 articles, the National Center on Addiction and Substance Abuse (CASA) at Columbia University reported in their *Behind Bars Study II* that almost two-thirds (65%) of incarcerated individuals have a diagnosable alcohol or other drug use disorder (CASA, 2010). Adults in prison or jail are seven times likelier than individuals in the general population to have a substance use disorder (SUD) (Karberg & James, 2005). A quarter (24%) have co-occurring substance use and mental health disorders that are more complex to treat (CASA, 2010).

These data are consistent with findings from several large-scale reentry studies. Most participants in the *Returning Home Study* reported drug use (78%) or alcohol use (61%) prior to incarceration, with cocaine and heroin being the most commonly used substances, and two-

thirds endorsed symptoms severe enough to indicate addiction (Visher, LaVigne, & Travis, 2004). In the *SVORI* study, two-thirds of men who reported lifetime illicit drug use had used illicit drugs in the 30 days before incarceration. The most commonly used illicit drugs in the month prior to arrest were marijuana (52%) and cocaine (24%). Findings were similar with women in the *SVORI* sample: 68% reported use of one or more illicit drugs in the 30 days before incarceration (Lattimore & Visher, 2009). Comparably, 85% of *MFS-IP* participants reported binge drinking and illegal drug use prior to incarceration, and many endorsed screening items indicative of substance abuse or dependence disorders (Lindquist et al., 2015b).

**Substance Abuse and Jails.** Many individuals are in jail due to alcohol or drug-related infractions or behaviors. In a special report on substance abuse in jails, The Bureau of Justice Statistics found that 68% of adults in jail had a substance use disorder (compared to 9% of the general population). Men and women were equally affected by addiction. Three-fourths of those convicted of a property or drug offense met criteria for a substance use disorder and half of those convicted were under the influence at the time of their offense. Individuals with a substance use disorder were more likely than others in jail to have a prior criminal record, be homeless, or have a parent or guardian who abused alcohol or drugs. Providing treatment and community-based referral are critical for reducing recidivism among those struggling with addiction (Karberg & James, 2005).

Unfortunately, analysis of data from the National Center for Addiction and Substance Abuse (CASA) indicates that 16% of those in federal prisons, 14% of those in state prisons, and only 5% of those in jails receive professional addiction services. Back in their communities, facing a multitude of stressors and surrounded by social networks where drugs are easily accessible, many reentering individuals relapse into prior substance-using behaviors. Indeed, the *Returning Home Study* found that approximately 25% of prisoners relapsed to alcohol and drug use within a year post-release. Left untreated, alcohol and drug abuse are linked with more probation and parole failures, increased contacts with the justice system, and higher rates of recidivism (Visher, Yahner, & La Vigne, 2010).

#### 1.2.4 Mental Health

Most individuals in prisons or jails suffer severe and untreated mental health problems. Given the inadequacies of the current mental health treatment system, many persons with mental illness who cannot access psychiatric services end up incarcerated (Steinberg, Mills, & Romano, 2015). In a special study of mental illness in correctional institutions, BJS, using information from in-person interviews, found that 49% of persons in state prison reported symptoms of a major depressive, manic, or psychotic disorder in the past year, as did 40% in federal prison and 61% of those in jail (James & Glaze, 2006). Incarcerated females were particularly affected: 75% had a diagnosable psychiatric disorder, and many experienced both mental health and substance abuse problems. These high rates of psychiatric disorders in justice-involved women have been attributed to the preponderance of sexual and physical abuse reported by females (James & Glaze, 2006). Requests for mental health assistance at reentry are common: In follow-up interviews with *Returning Home* participants, approximately half reported a need for general counseling and 30% specifically reported a need for mental health services (Visher et

al., 2004). Similarly, during pre-release interviews with men and women participating in *SVORI*, approximately 56% reported a need for mental health services at release, and two-thirds reported a need for substance abuse treatment (Lattimore & Visher, 2009).

**Mental Illness and Jails:** The proportion of individuals in jail who suffer from mental health problems has reached epic proportions. Sixty percent of jailed adults report symptoms of major depression, mania, or psychotic disorders in the past year. To assess the impact of mental illness on jail administration, 230 staff from sheriff's departments in 39 states were surveyed. Almost every jail administrator reported struggling to address mental illness and stated that the problem has escalated dramatically in the past 10 years as community-based mental health services have dwindled. Challenges related to the increasing number of jailed persons with severe mental illness include the increased suicide risk, disruptive behaviors, need for segregation, and high rates of recidivism associated with individuals not getting needed mental health care. Administrators reported that resources to address mental health issues were limited and few staff were provided with appropriate training (AbuDagga, Wolfe, Carome, Phatdouang, & Torrey, 2016).

### 1.2.5 Chronic Health Conditions

Many persons in prison or jail have poor health largely due to poverty, substance abuse, and mental health struggles, which compound risk for unhealthy lifestyles. Exploring data from the *Survey of Inmates in State and Federal Correctional Facilities* and the *Survey of Inmates in Local Jails*, Wilper and colleagues (2009) found that justice-involved individuals were more likely to have diabetes, cirrhosis of the liver, and hepatitis than the general population. Additionally, the rate of HIV/AIDS was three times higher among individuals in jail or state prison than the national average. In the *Returning Home Study*, nearly all respondents (80% women, 90% men) had chronic health conditions requiring long-term treatment or management. Although two-thirds of men and three-quarters of women with physical health conditions in this study received treatment during prison, the proportion receiving care fell dramatically after reentry. This decline is likely due to access, as 68% of men and 58% of women did not have health insurance 8–10 months after release (Mallik-Kane & Visher, 2008).

### 1.2.6 Social Support and Family

Most individuals leaving jail or prison will rely on their family to rebuild their lives. However, many incarcerated men and women report chaotic families, with those back home struggling with serious issues including alcohol or drug abuse (72%), justice-system involvement (58% of men and 65% of women), and domestic or familial abuse (12%) (Visher et al., 2004). In the *MFS-IP* sample, most incarcerated men planned to reunite with their partner after release, yet not all relationships were healthy or stable: 40% of women partners reported physical abuse, and 36% reported emotional abuse by their incarcerated partner prior to incarceration (Lindquist, McKay, et al., 2015). Furthermore, 19% of incarcerated men had been under a restraining order at some point (James, 2004).

Some studies have found declining rates of cohabitation with an intimate partner after release relative to the pre-incarceration period. In the *MFS-IP* study (Lindquist, Landwehr, et al., 2016),

64% of returning men lived with their intimate or co-parenting partner after release, compared with 70% who were living with this partner prior to incarceration. Similarly, Visher and Courtney (2007) found that fewer men in the Returning Home study lived with their partner, and more lived with their family after release, as compared with before release. In addition to relationship strain, many of the female partners of the MFS-IP sample had tenuous lives with few resources to support their reentering partner: 39% were unemployed, 32% lived in someone else's house, about 27% reported poor or fair physical or mental health, and 26% reported illicit drug use (mainly marijuana or nonmedical use of prescription drugs) (Lindquist, McKay, et al., 2015). Looking beyond intimate partner relationships, research suggests that reentering individuals rely strongly on family and friends for employment opportunities, financial assistance, and housing (Berg & Huebner, 2011). Additionally, family in-prison visitation, peer mentoring, and support through faith-based programs can be beneficial (Bauldry, Korom-Djakovic, McClanahan, McMaken, & Kotloff, 2009; Warner-Robbins & Parsons, 2010).

Another challenge at reentry is reunification with children. Most men and women in prison are parents: 52% of adults in state prison and 63% of adults in federal prison report having children under the age of 18 (Glaze & Maruschak, 2008). Among the *MFS-IP* sample, 70% of partnered men resided in a household with at least one of their children prior to incarceration; this dropped to 50% at about 6 months after release. The main barrier to resumption of parenting was having a negative relationship with the child's mother. This same study found that the proportion of fathers providing financially for their children also dropped after reentry: Prior to incarceration, 87% of fathers reported providing financial support to at least one of their children, whereas after release, 75% provided financial report (Lindquist, Landwehr, et al., 2016). Child support debt and other financial responsibilities for children after incarceration place even more importance on obtaining and maintaining employment after reentry.

### 1.3 Approaches to Facilitating Successful Reentry

Research conducted over the past 3 decades illuminates numerous evidence-based strategies that can improve reentry and protect public safety (Lipsey & Cullen, 2007). Hundreds of studies have been conducted including both community-based and residential correctional programs for juveniles and adults. These studies then have been re-examined in multiple, meta-analytic studies using diverse methodological techniques. Taken together, results conclude that rehabilitation can be effective with mean effect sizes for reducing recidivism ranging from 20% to 40%. However, there does not appear to be a simplistic answer for what works. Many different types of services have shown efficacy in some studies, but in other studies, the impact of these same services appears to be moderated by characteristics of the person or the implementation. Furthermore, it is difficult to discern precisely what interventions lead to change in large-scale studies that combine diverse programming and integrate correctional and community-based services. Finally, the interpretation of many evaluation findings is limited by research designs that do not meet acceptable standards of rigor (Lipsey & Cullen, 2007; Przybylaski, 2008). In the next section, we briefly discuss the key evidence-based elements that

underlie the SCA logic model, followed by a summary of the most common types of services provided to promote successful reentry and what is known about their efficacy based on cumulative research evidence.

### *1.3.1 Evidence-Based Elements in the SCA Logic Model*

The SCA model is predicated on the belief that evidence-based approaches will optimize the likelihood of successful reentry and expend tax payers' dollars most judiciously. The SCA allows for local control over the selection and implementation of interventions that best meet the needs of individuals, given the context and resources of the community. However, these approaches to service provision must adhere to core tenets of EBPs in reentry including the following:

- **Using validated risk and needs assessments to target high-risk individuals.** Validated risk and needs assessments are beneficial in determining reentry planning. The evidence suggests that justice-involved individuals, who are assessed at medium to high risk to reoffend, are more likely than those assessed at low risk to benefit from correctional interventions. Risk and needs assessment instruments assess factors associated with recidivism that are malleable through intervention, such as antisocial patterns and peers, relationship difficulties, low involvement in noncriminal activities, and substance abuse. Following the Risk-Needs-Responsivity (RNR) model, those at high-risk for reoffending need intensive treatment and services, although those at low-risk should receive minimal or even no intervention. Interventions should target the criminogenic needs that lead to criminal behavior and be responsive to the learning style and ability of the client (Domurad & Carey, 2010; James, 2015).
- **Establishing pre-release planning services.** To increase the likelihood of reentry success, comprehensive reentry planning is crucial. The plan should span the actual moments of release through the high-risk months following return to the community. Release planning draws upon the risk and needs assessments and should, at a minimum, cover seven fundamental needs including transportation; clothes, food and amenities; financial resources; documentation; housing, employment, and education; health care (including substance abuse and mental health needs); and the social support network (La Vigne, Davies, Palmer, & Halberstadt, 2008).
- **Provide coordinated pre- and post-release service provision.** Reentry research suggests that individuals will be more likely to use community-based services if they have received in-reach care from a consistent therapeutic provider that they know and trust. Optimal care also includes coordination and oversight by a case manager to facilitate continuity of services from prison or jail to the community and ensure the provision of services matches those identified in the risk and needs assessment (Warwick, Dodd, & Neusteter, 2012).
- **Support a Comprehensive Range of Services.** As noted throughout this chapter, most reentering individuals have considerable challenges in multiple life domains. The most

effective reentry approaches offer a thorough array of programs and a process to match the intensity of service dosage to individual need. Commonly needed services among those reentering the community following incarceration include employment, education, substance abuse treatment, mental health care, cognitive-behavioral therapies, and housing support (Lattimore et al., 2010).

#### Principles of Effective Reentry

- Effective interventions are behavioral in nature.
- Level of service should be matched to the risk level of the individual.
- Individuals should be referred to services designed to address their specific, assessed criminogenic needs (e.g., antisocial attitudes, substance abuse, and family communication).
- Treatment approaches should be matched to the learning style or personality of the clients.
- High-risk individuals receive intensive services, occupying 40% to 70% of the individuals' time for a 3- to 9-month period.
- Effective interventions are highly structured, and contingencies are enforced in a firm, but fair manner.
- Staff relate to clients in interpersonally sensitive and constructive ways, and are trained and supervised appropriately.
- Staff members monitor client change on intermediate targets of treatment.
- Relapse prevention and aftercare services are employed in the community to monitor and anticipate problem situations, and to train clients to rehearse alternative behaviors.
- Family members or significant others are trained regarding how to assist clients during problem situations.
- High levels of advocacy and brokerage occur if community services are appropriate (Matthews, Hubbard, & Latessa, 2001).

### 1.3.2 Employment

Research suggests that unemployment and crime are interrelated and that supporting reentering individuals in the job market can help reduce the likelihood of rearrest (Przybylaski, 2008). A 2005 meta-analysis of random-assignment employment programs—including occupational training, basic skills education, job shadowing, job placement services, and short-term income support—indicated that, overall, these programs had no significant impact on recidivism (Visher, Winterfield, & Coggeshall, 2005). However, the authors noted that many of the studies reviewed were hampered by design flaws, and the meta-analysis did not cover newer reentry initiatives that included an employment component. More recent studies have shown some promising results, as well as some mixed findings.

Of the rigorous, employment-focused studies included in the Justice Center's What Works Reentry Clearinghouse (<https://whatworks.csgjusticecenter.org/>), 9 of the 12 studies (75%) that focused on recidivism outcomes showed fewer arrests and lower rates of recidivism. Of the 12 studies with an experimental design, only 8 collected data on employment outcomes. Five of these eight studies (63%) indicated gains in employment. The remainder showed no statistically

significant impact, and one study found that the comparison group had slightly better employment outcomes than the treatment group. The *SVORI* evaluation, which showed positive treatment effects for participation in SVORI-funded reentry programming overall on long-term recidivism outcomes, found a negative effect when examining the receipt of employment services; individuals who received employment services got rearrested sooner than those who did not (Visher et al., 2017). In another study not included in the Clearinghouse, results of *Ready4Work (R4W)*, a reentry initiative supported by the Department of Labor, showed moderate success in employment outcomes: 56% of those who participated in the initiative held a job for at least 1 month, 62% of those remained employed for at least 3 months, and 36% remained employed for at least 6 months following reentry. Employment in the *R4W* program was associated with decreases in rearrest relative to national rearrest rates among reentering individuals reported by BJS (Bauldry & McClanahan, 2008).

### 1.3.3 Educational and Vocational Training

Prisons frequently offer educational training as part of rehabilitation. Educational programming includes adult basic education classes to improve basic reading language and math skills; secondary, General Educational Development (GED) to obtain a high school diploma; and postsecondary educational classes offered through community or four-year colleges. Also common is vocational training—aimed at increasing knowledge about career options and providing skills and experiences in trade or industry, including how to apply for a job, interview effectively, and exhibit professionalism on the job. Recent research suggests positive results from prison education programs. A meta-analysis of 58 studies that met scientific eligibility standards indicated that the odds of employment post-release increased by 13% among individuals who participated in correctional education. Recidivism reduced by 13% as well (Davis et al., 2014). Additionally, a large-scale evaluation of individuals incarcerated in Ohio prisons from 2008 to 2012, found that individuals who completed vocational training,

#### Multiservice Jail Reentry Programs

Providing reentry services from jail is particularly challenging given the severe needs of the jailed population and the short time they are restricted. Thus, jail reentry calls for a new model as described in *Transition from Jail to Community (TJC) Initiative*. TJC integrates corrections and the community through a common vision, collaborative structure, shared data, continuous service delivery structure, and sustainability plan (Buck Willison et al., 2016). One example of a multiservice jail reentry program is the Auglaize County Transition (ACT) Program. The aim of ACT is to decrease recidivism and substance use and improve employment outcomes among reentering individuals. The returning individual is assigned a case manager who coordinates an array of indicated services including employment assistance, substance abuse treatment, mental health counseling, cognitive-behavioral therapy, and wraparound care. Reentry planning begins at jail intake and is revised as appropriate during reintegration into the community. Research suggests that relative to a comparison group, those who participated in ACT had a 70% lower rate of recidivism and only 12% of those in ACT were rearrested within one year post-release compared with 82% of the control group (Miller & Miller, 2010).

apprenticeships, GEDs or college courses at any time during incarceration were less likely than those who did not participate in correctional education to return to prison within three years post-release. And, those who completed GEDs or college courses were less likely than those who did not, to engage in violence during incarceration (Pompoco, Wooldredge, Lugo, Sullivan, & Latessa, 2017).

### 1.3.4 Substance Abuse Treatment

Evaluations of prison-based drug and alcohol treatment services suggest that well-designed programs of sufficient length with linkages to aftercare reduce post-release criminal activity, relapse, and recidivism (CASA, 2010). A meta-analysis of 66 evaluations of incarceration-based drug treatment programs showed that therapeutic communities, residential substance abuse treatment programs, and group counseling services reduced re-offending (Mitchell, Wilson, & MacKenzie, 2007). The most effective programs incorporate behavioral contracts and counseling, role playing and modeling, and vocational and social skills training (Marlowe, 2003). Unfortunately, very few individuals in prison or jail with substance use disorders receive adequate treatment (CASA, 2010).

### 1.3.5 Mental Health Care

Research suggests that a multidisciplinary approach is needed to meet the needs of mentally ill persons who frequently need extensive support during the transition home. Several approaches, including case management and behavioral and cognitive therapies, appear potentially effective in supporting individuals with mental illness during reentry, thereby reducing recidivism rates and the associated societal and economic costs (Przybylaski, 2008).

The What Works clearinghouse found that prison-to-community programs that offered a continuity of mental health care were effective (James, 2015). Another evidence-based approach to reduce recidivism among those experiencing serious mental illness at reentry is Assertive Community Treatment (ACT). ACT provides mental health treatment and support using a multidisciplinary, self-contained team. Evaluations of ACT programs in Rochester and

#### Professional Standards for Addressing Addictions in Prison or Jail

Professional associations including the American Corrections Association, National Commission on Correctional Health Care, the National Institute of Corrections, the Substance Abuse and Mental Health Services Administration, and the National Institute of Drug Abuse have developed guidelines for providing addiction treatment in prisons and jails. These guidelines recognize that a substance use disorder is a chronic disease, requiring long-term monitoring and management. Essential elements of correctional treatment include comprehensive assessment and an individualized treatment plan with appropriate behavioral and psychopharmacological therapies; adjunct services for co-occurring mental and physical health conditions; education and training; housing; social and family supports; patient education on disease management; and reentry services to include community supervision, integrated health treatments, case management, and graduated sanctions (CASA, 2010). Reentry planning should follow these accepted guidelines to increase efficacy.

Chicago show significant reductions in arrests and days spent in jail. Many incarcerated individuals struggle with co-occurring disorders and need integrated mental health and substance abuse treatment services to reduce chances of recidivating (Przybylaski, 2008). However, research suggests that it is not mental illness per se, (except for a few disorders such as antisocial personality and psychopathy), but the general risk/needs that are associated with reincarceration (Bonta, Blais, & Wilson, 2014; Peterson, Skeem, Kennealy, Bray, & Zvonkovic, 2014; Skeem, Winter, Kennealy, Louden, & Tatar II, 2014).

### 1.3.6 Cognitive Behavioral Programs

Cognitive behavioral therapies (CBTs) appear effective with justice-involved adults and juveniles, in various criminal justice settings or in the community while on probation or parole. CBT with correctional populations uses a mix of approaches to increase individuals' awareness of themselves in relation to others. Skills include cognitive restructuring, coping, social competency, and problem-solving. Individuals learn to identify their own thoughts, feelings, beliefs, and attitudes and are taught positive interaction skills to replace antisocial behaviors (Milkman & Wanberg, 2007). CBTs have shown efficacy in altering social and problem-solving skills, critical and moral reasoning, pro-criminal thinking, impulse control, and self-efficacy. Lipsey (2009) analyzed the results of 548 studies examining treatment effectiveness in corrections and found that therapeutic approaches such as counseling and skill building were most likely to reduce future criminal behavior. CBT-based programs significantly reduced recidivism by 25% (Chadwick, DeWolf, & Serin, 2015; Landenberger & Lipsey, 2005). Six cognitive-behavioral programs are widely used in the criminal justice system: Aggression Replacement Training® (ART®), Criminal Conduct and Substance Abuse Treatment: Strategies for Self-Improvement and Change (SSC), Moral Reconciliation Therapy® (MRT®), Reasoning and Rehabilitation (R&R and R&R2), Relapse Prevention Therapy (RPT), and Thinking for a Change (T4C).

### 1.3.7 Housing Support

There is less empirical evidence on the impact of housing assistance on recidivism. The What Works Clearinghouse only identified one study on this topic that met criteria for rigor. This study (*Returning Home Ohio Pilot Study*) showed positive results. Those who received supportive housing services—including assistance with housing placement and referrals to supplemental services such as education, mental health, and substance abuse treatment—were 40% less likely to be rearrested within 1 year after release and went a longer period without rearrest than the comparison group. However, those in the housing program who did get rearrested were more likely to have repeat arrests, and the program was not found to be cost beneficial (Fontaine, Gilchrist-Scott, Roman, Taxy, & Roman, 2012; Fontaine, Nadeau, Roman, & Roman, 2009). However, housing assistance has been effective in reducing homelessness and increasing employment among those with mental illness and likely holds promise for reentering incarcerated populations who commonly face unstable housing and mental illness at reentry (Rog et al., 2014).

The SCA was intended to draw upon the accumulating knowledge base about ‘what works’ in reentry to support to local initiatives to effectively address the substantial challenges facing reentering individuals and improve public safety. To maximize what could be learned from the experiences of the AORDP grantees, a multicomponent evaluation was funded. The following section describes the evaluation goals and methodology.



# Chapter 2. Evaluation Methodology

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The National Institute of Justice selected RTI and the Urban Institute to conduct a comprehensive process and outcome evaluation of AORDP. The primary goals of the evaluation were to

- describe the implementation and sustainability of each AORDP project through a **process evaluation**,
- determine the per capita program costs of each AORDP project through a **cost study**, and
- determine the effectiveness of the programs through a multicomponent **outcome study** assessing the extent to which (1) recidivism reductions were achieved in each site and (2) program participation was associated with increased access to services and improvements in self-reported outcomes in several reentry domains across sites.

The evaluation framework in **Exhibit 2-1** shows the program logic model embedded within a social-ecological framework in which program participants and the AORDP project are located within the community. The evaluation components address the program operations and outcomes, with the process evaluation providing context for the outcome evaluation, and the process and outcome evaluations contributing to the cost study.

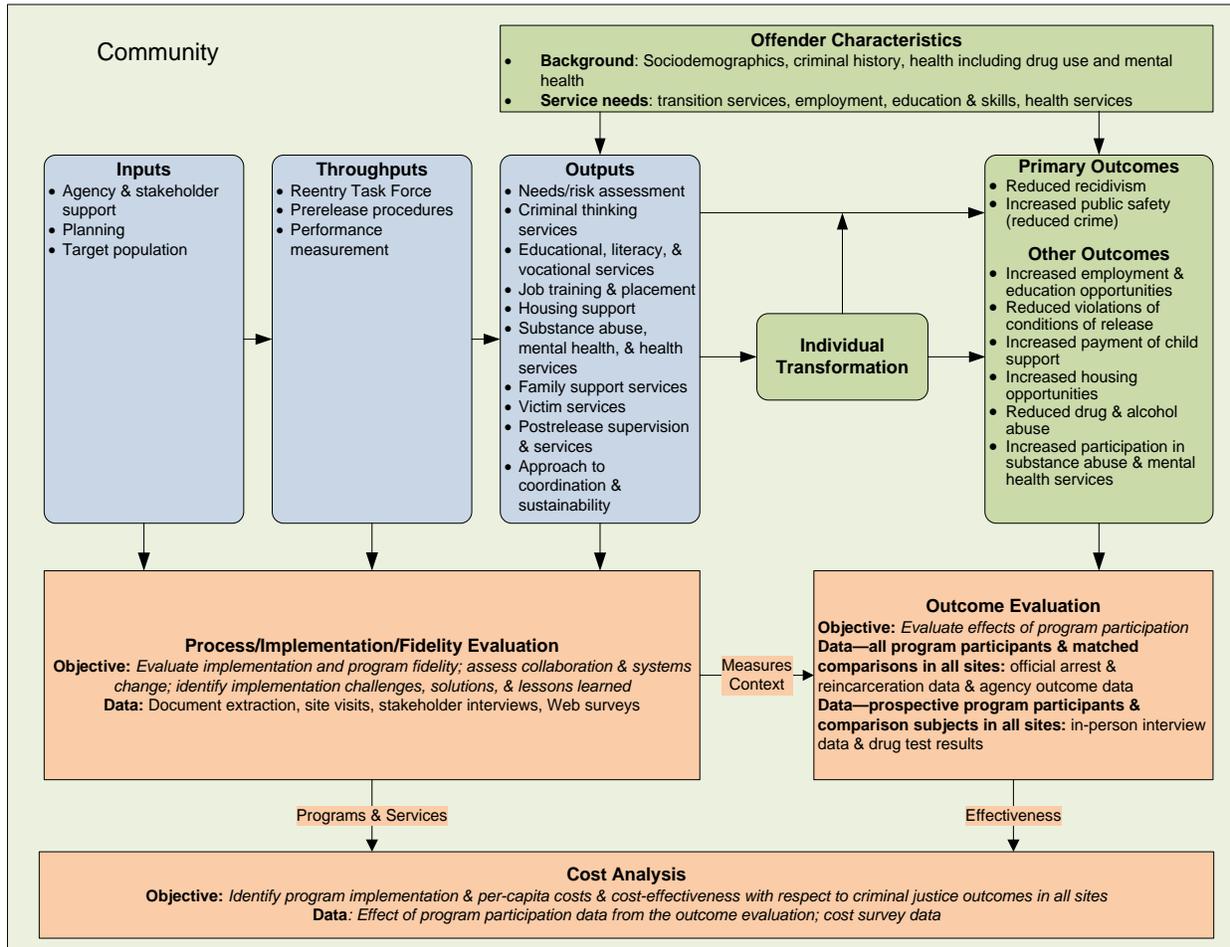
## 2.1 Evaluability Assessment

The first step in the AORDP evaluation was an evaluability assessment (EA) of 10 AORDP sites identified by BJA.<sup>1</sup> The EA was conducted over 6 months spanning fall 2012 and spring 2013. Given NIJ's interest in some level of evaluation in *all 10* of the selected AORDP sites, the EA data collection was designed to support more nuanced evaluation recommendations than "Evaluate: Yes or No." Specifically, the EA aimed to answer two questions: Is the program evaluable and if so, how, and at what level of effort. Design options addressed the recommended level and type of evaluation, including the suggested mix of process, outcome, impact, and cost analyses.

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<sup>1</sup> One site declined further participation in the grant program after the EA study began. For this reason, the EA study conducted site visits to nine projects and compiled nine site-specific EA reports. A brief memorandum describing the discontinued program was also compiled and submitted to NIJ.

**Exhibit 2-1. Evaluation Framework**



The EA drew on several data sources, including

- program materials (handbooks, manuals, etc.);
- program case file and administrative records review to determine data quality and generate sample size estimates;
- direct observation of program operations to determine logistics that could inform subject recruitment and enrollment procedures for the full evaluation;
- analysis of BJA progress reports and aggregate performance data;
- semi-structured interviews (conducted during in-person site visits) with policy-level stakeholders and program staff to assess capacity and readiness for evaluation across multiple EA domains and collect supplemental information on training and technical assistance (TTA) needs; and

- pre-visit teleconferences conducted to review EA objectives and obtain updated project information.

The EA team used the information generated from the above activities to

- document and describe program operations and implementation issues,
- assess program stability and maturity,
- gauge compliance with the SCA model (discussed in Chapter 1),
- document program logic and case flow,
- determine the extent to which viable comparison groups could be established,
- identify extant data sources to support evaluation, and
- develop evaluation recommendations.

In formulating evaluation recommendations, EA researchers considered not only program maturity, stability, and capacity, but also those dimensions of the program likely to be of interest to the broader field and to yield actionable information.

Site-specific evaluability assessment reports were compiled, drawing on data collected from the above activities; see Buck Willison and Hardison Walters (2013) for the executive summary.<sup>2</sup> Seven sites were ultimately selected for the evaluation in consultation with BJA and NIJ.

## 2.2 Participating Sites

**Exhibit 2-2** lists the seven selected AORDP evaluation sites; Section 3.1 provides more information about each grantees' target population and program model. From FY 2011 through FY 2016, the AORDP grantees provided comprehensive reentry services to criminal justice system-involved adults who were under state or local custody and about to return to the community. The programs focused on addressing the multiple challenges facing reentering individuals upon their return to the community by providing an array of pre- and post-release services, including education and literacy programs, job placement, housing services, and mental health and substance abuse treatment. Risk and needs assessments, transition case planning, and case management were key elements of grantees' AORDP projects.

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<sup>2</sup> The individual site reports can be found on <https://www.ncjrs.gov/index.html>.

**Exhibit 2-2. Sites Included in the AORDP Evaluation**

	California	Women’s Reentry Achievement Program (WRAP), Solano County Health & Social Services Department
	Connecticut	New Haven Reentry Initiative (NHRI), Connecticut Department of Correction
	Florida	Regional and State Transitional Ex-Offender Reentry (RESTORE) Initiative, Palm Beach County Criminal Justice Commission
	Massachusetts	Boston Reentry Initiative (BRI), Boston Police Department
	Minnesota	High Risk Recidivism Reduction Project, Minnesota Department of Corrections
	New Jersey	Community Reintegration Program (CRP), Hudson County Department of Corrections
	Pennsylvania	ChancesR, Beaver County Behavioral Health and Developmental Services

Despite some common elements, substantial variability was evident across the sites in grantee characteristics, the specific populations targeted for services, and the service delivery approaches used by the sites. Four sites served individuals releasing from county jail (California, Massachusetts, New Jersey, and Pennsylvania), and the remaining three (Connecticut, Florida, and Minnesota) targeted those releasing from state prison. Several programs targeted populations with specific programming needs, such as women (California), parole violators (Minnesota), and individuals with co-occurring disorders (New Jersey and Pennsylvania).

In addition, the services that were provided and the models for service delivery (e.g., case management approach, extent of in-reach from post-release service providers during incarceration, program duration and intensity), which are discussed in Section 3.1, varied substantially across sites. The heterogeneity in target population and service delivery approach had several implications for the outcome evaluation design (as discussed in Section 2.5).

**2.3 Process Evaluation Methodology**

*2.3.1 Objectives*

The objectives of the process evaluation were to document in detail program operations and practices in each site over the course of the evaluation (including fidelity to the site’s logic

model, as documented during the EA), and to identify cross-site themes about implementation experiences (including challenges and solutions), the use of EBPs, collaboration and communication, systems change, and sustainability. A focus of the process evaluation was to identify lessons learned to enhance future reentry program implementation.

### 2.3.2 Data Sources

Several data sources were used for the process evaluation. First, two rounds of site visits were conducted. Two-person site liaison research teams (one senior and one junior research staff from the Urban Institute and RTI) conducted 2–3-day site visits in early 2014 (roughly 3 years after sites received initial funds) and midyear 2015 (roughly 4.5 years after initial funding) to each grantee. The first site visit focused on program implementation, and the second focused on sustainability planning and lessons learned. During the site visits, the research team conducted semistructured interviews and observations of program activities (e.g., program orientations or group intake sessions, employment readiness training). Stakeholder interviews were conducted with grantee and partner staff, as well as AORDP coordinators, reentry task force members, corrections administrators, key parole and probation staff, facility- and community-based program staff, relevant service providers, mentors, other volunteers). Interview topics included the following:

- Implementation plans, policies, and procedures
- Changes to plans, policies and procedures
- Contextual factors affecting program implementation
- Staff and resources
- Services delivered to participants
- Implementation challenges and solutions
- Interagency collaborations
- Use of EBPs
- Sustainability strategies
- Perceived impact on systems changes
- Recommendations for the field

Second, two rounds of web-based stakeholder surveys were administered. These surveys were administered in spring 2014 and 2015, spanning 6 weeks. The multiple wave approach was intended to identify changes in communication, collaboration, and coordination among key agencies identified as partners and stakeholders and constituency support for reentry and EBPs and to obtain staff and stakeholder perceptions of program operations and the extent to which local objectives had been achieved. Although the Wave 1 surveys did not provide a true baseline, because the grantee programs were already operational, they captured respondents' perceptions of current practices.

The survey was designed to be completed in approximately 20 minutes, covering a variety of topics including the following:

- Use of EBPs
- Reentry case planning
- Screening and assessment practices
- Stakeholder communication and collaboration
- Support for reentry within the jurisdiction

The sampling frame for the stakeholder surveys was identified in consultation with the program administrators in each site. The evaluation team obtained a list of 20–40 potential stakeholder respondents who had the greatest knowledge of the reentry services system involved in the AORDP demonstration program and invited them to complete the online survey. Respondents included a mix of criminal justice and human services stakeholders (e.g., agency leadership—probation chiefs, jail administrators, and executive directors—and a variety of frontline correctional facility staff, probation officers, case managers, counselors) in each AORDP site.

Potential participants received a recruitment email explaining the purpose of the survey, its voluntary and confidential nature, steps to access the survey and seek help if technical or other assistance is required, and the timeline for completion. Additionally, the recruitment email and weekly reminder emails, included details about eligibility to participate in a random drawing to win one of three electronic gift certificates valued at between \$50 and \$125. Prize drawings were held at strategic intervals to encourage completion of the survey and maximize response rates (respondents who completed the survey early in data collection were eligible for each subsequent drawing). A total of 214 stakeholders completed the survey in Wave 1 (a 70% response rate), and 151 completed the survey in Wave 2 (a 58% response rate).

Third, interim telephone interviews were conducted with key program staff before and between the site visits, with the final round of telephone interviews conducted in late 2015 and early 2016 as the grantees' funding period ended. The interim telephone interviews documented programmatic updates (e.g., changes to the target population and program components delivered) and sustainability strategies.

Finally, the evaluation team reviewed existing documents and materials for each site as an additional source of process data. These materials included grantee proposals, progress reports, budgets, policies and procedures, and manuals.

### 2.3.3 Analysis

Key analytic activities for the process evaluation included (1) detailing each site's AORDP model (conducted as part of the EA) and factors influencing its design; (2) documenting program implementation and operations with respect to core activities (recruitment and retention of targeted populations; use of risk and needs assessments, case planning, and case management to deliver services; and roles, responsibilities, and interactions among organizations and stakeholders); (3) assessing the extent to which EBPs were used; and (4) synthesizing lessons learned.

The interview data were organized by specific dimensions and themes (e.g., project context, key partners, program operations, targeted and served population, implementation of planned program features). Site-specific narrative descriptions were developed from the interview notes. Comparative analyses identifying cross-grantee similarities and differences on key sources of variation (e.g., types of grantee organizations, partnership arrangements, target populations, and program service strategies) were conducted.

In addition to analyzing sites' responses to individual survey items and by relevant stakeholder group, researchers created seven indices or scales using confirmatory factor analysis. Each scale included multiple but different survey questions, and consequently, represented complex constructs more efficiently—collaboration and coordination, cooperation and trust, operational support for reentry, support for reentry among community and criminal justice stakeholders, barriers to reentry services, and barriers to information-sharing— than individual survey items. Analysis of variance (known as ANOVA) tests were performed on each scale to identify statistical significance ( $p < .05$ ) between the average scores; analysis explored overall change on the scales between Wave 1 and Wave 2, as well as differences in scale scores by site, criminal justice stakeholder group, and AORDP structure (jail-based or prison-based project).

Across all sites, there were no significant differences between waves. Within sites, there were very few significant differences on key constructs. Regression models found that levels of operational support for reentry and support for the use of EBPs varied by AORDP program structure, proximity of stakeholders to AORDP operations, and membership on the site's reentry taskforce.

## 2.4 Cost Analysis Methodology

The primary objective of the AORDP cost analysis was to generate reliable and actionable information on the costs associated with implementing and operating each of the seven AORDP projects, which could be used by policymakers and decision-makers in other communities interested in replicating any of the reentry approaches used by the seven AORDP study sites. Therefore, this cost analysis qualitatively and quantitatively describes the type and amount of resources applied to program operations and how the resources were spent.<sup>3</sup>

### 2.4.1 Data Sources

To identify the costs associated with program implementation and operation, researchers (1) reviewed the site's Second Chance Act AORDP proposal budgets and budget narratives for FY 2010, FY 2011 and FY 2013; (2) obtained any final financial reports filed with BJA under the SCA grant program, including quarterly and final financial reports submitted at the conclusion

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<sup>3</sup> The cost analysis was originally designed to also examine how the resources related to criminal justice outcomes (notably, rearrests) in each AORDP site. However, the results of the site-specific recidivism analyses did not reveal significant reductions in rearrests in any site, which precluded our ability to estimate the cost per arrest avoided.

of each award; (3) conducted a series of initial and follow-up teleconferences with key stakeholders (project directors, coordinators, training staff, and fiscal or financial administrators responsible for grant management) to verify budgeted allocations and actual expenditures, and the reason for any divergence between the two; and (4) collected, where available, site-level billing data or invoices indicative of actual service receipt. These data were used to construct comprehensive budget matrixes depicting program allocations and actual expenditures for each of the seven AORDP projects, as well as detailed site-specific cost profiles. Each site reviewed their respective program cost profile for accuracy.

### 2.4.2 Analytic Approach

The AORDP cost analysis employed a rudimentary approach focused on calculating *average cost per participant served* in each study site. The average cost per participant served constitutes a straightforward proportion: the *numerator* is the amount of resources—including SCA grant funds, in-kind contributions, and other funding accessed by sites in order to provide the full complement of their AORDP reentry strategy—expended over the grant, generally a 60-month period spanning approximately October 2010 to September 2015;<sup>4</sup> the *denominator* is the number of AORDP clients served.

This analysis allows reentry stakeholders to compare the *actual* costs of AORDP implementation to initial budget projections, examine different types of reentry costs, and see how the seven sites used their resources in similar (or dissimilar) ways to support their reentry projects. While this analysis cannot determine whether AORDP is cost effective *compared to other reentry interventions*, it will provide valuable information to sites that are interested in SCA-like programming.

Key research questions driving the cost analysis are the following:

1. What resources were spent?
2. How were resources spent?

To address the first question, project researchers accessed 5 years of program budgets covering October 1, 2010, to September 30, 2015, or approximately 5 program years for each of the seven sites. These budgets were reviewed considering the Phase 1 Evaluability Assessment, subsequent process evaluation notes, and any other documentation of expenditures (such as line-item expenditures). Discrepancies and areas of confusion were noted and explored with site stakeholders via semistructured phone interviews with key personnel from each site to verify indirect costs or other expenditures that may not be accurately reflected in the budget (i.e., site budgets represent proposed allocations as opposed to actual expenditures). Researchers revised program budget allocations based on these interviews to construct “adjusted budgets,” which more accurately accounted for actual site expenditures; the adjusted

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<sup>4</sup> In reality, all but two sites continued to serve participants well into 2016, with all but one site closing their respective AORDP grants by September 2016.

budgets represent the baseline expenditures as used in the cost analyses. This analysis will allow other jurisdictions contemplating similar programming to be fully informed about the actual costs of implementation.

With respect to the second research question, although the nominal main award was largely similar across sites, there was variation in the number of people served and what the funding actually covered. These were, in turn, a function of the local context(s)—the kind of capacity already available, the risk and need level of the target population, and the number of clients. Using the budget information provided by each site, we developed two estimates to answer how resources were spent: (1) Cost of program per person enrolled (average), and (2) cost of program per person enrolled, disaggregated by type of cost (average). These analyses were then supplemented by qualitative and quantitative discussions of the differences in clients and programming goals between the sites. We also highlighted differences in cost of living, where appropriate.

### 2.4.3 Considerations and Limitations

This cost analysis approach was selected for several reasons. First, there was considerable variation among the seven AORDP projects with respect to target population, interventions offered, and the structure and duration of reentry services (see the process evaluation findings in Chapter 3). Although each site implemented the core components of the SCA model, they did so differently in response to the unique needs of their designated target populations. Given the heterogeneity in program designs and target populations, comparing different programs is an “apples to oranges” comparison. Second, the extant data were insufficient to support either a formal cost-benefit or cost-effectiveness analyses. Such analyses typically require understanding the cost structures of multiple interventions as compared to business as usual, but here there are no other interventions for which the evaluation had cost and effectiveness data to compare to the AORDP programs.<sup>5</sup>

Two key limitations to this approach should be acknowledged:

- **The analysis relies heavily on the sites’ AORDP budgets and additional data provided by the sites.** Although researchers consulted the process evaluation notes and followed up with each site repeatedly, capturing indirect costs using this methodology can be very difficult. The possibility exists that we did not ask the right question or that the staff we conversed with did not accurately remember or report staff time, expenditures, and savings.
- **No outcomes were monetized.** While never envisioned as a formal cost-benefit or cost-effectiveness study, the cost study intended to examine how the program resources spent related to criminal justice outcomes (notably, rearrests) achieved in each AORDP

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<sup>5</sup> The data available were insufficient to determine, with adequate reliability, the marginal costs of AORDP services and programming available to participants beyond business as usual (i.e., what was available to the comparison group). While these costs are largely not captured here, they could affect overall AORDP impact.

site. However, because site-specific rearrest models did not reveal significant treatment effects for arrests averted (see Chapter 6), it did not make sense to monetize arrest outcomes.

The cost findings presented in Chapter 4 are contextualized within all other aspects of the AORDP evaluation<sup>6</sup> wherever possible, drawing on lessons learned from the Phase 1 Evaluability Assessment, process evaluation, and the prospective evaluation's survey findings.

#### 2.4.4 Calculations

Total program costs for each AORDP project are calculated based on sites' SCA budgets and financial reports, and account for local contributions (in-kind and required cash match<sup>7</sup>) less any obligated funds reported in the sites' BJA final financial reports.

To understand site-specific allocations and the extent to which programs differed in their respective cost structures, we disaggregated each site's spending into the following 10 categories:

- **Case Management:** General case management positions and associated costs, including forensic case management (e.g., case manager positions, case management systems)
- **Administrative:** Costs not directly related to service provision (e.g., project directors, office expenses, clerical assistance, copiers) but which supported project functioning
- **Employment or Vocational Supports:** Positions and programs that support client education or address client employment needs (e.g., job developers, employment coaches, GED registration, GED teachers)
- **Housing supports:** Housing subsidies and transitional housing, among others

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<sup>6</sup> For each site, researchers created a site-specific semistructured interview protocol to SCA-funded services, as well as those received outside the auspices of the SCA program but identified by site stakeholders as central to the reentry strategy. Other cost analyses have found that these costs can be a substantial hidden cost of program implementation (Rossman, Roman, Zweig, Rempel, & Lindquist, 2011).

<sup>7</sup> The FY 2010 BJA solicitation to which the AORDP evaluation sites responded included a match requirement: "As required by the Second Chance Act, a grant made under this program may not cover more than 50 percent of the total costs of the project being funded. The applicant must identify the source of the 50 percent non-federal portion of the budget and how match funds will be used. The recipient of a grant must provide 25 percent of the total project cost in cash match, and 25 percent of the total project cost may be matched by making in-kind contributions of goods or services that are directly related to the purpose for which the grant was awarded. Federal funds received and cash match provided by the grantee shall be used to supplement, not supplant, non-federal funds that would otherwise be available for the activities funded under this section. The applicant must identify the source of the 25 percent non-federal cash portion of the budget and how both cash and in-kind match funds will be used. The Attorney General may waive the match requirement upon a determination of fiscal hardship."

- **Mental and Behavioral Health:** Mental and behavioral services, including substance abuse treatment (e.g., clinical therapists, costs for contractors that provide mental and behavioral health services, substance abuse treatment)
- **Mentoring or Peer Supports:** Peer mentors and peer support services (e.g., peer mentors, group mentoring)
- **Research or Evaluation:** Local research or evaluation partnerships that informed program development (e.g., lead evaluator, data analyst, research assistant) and refinements
- **Risk Assessment:** Positions and materials related to conducting risk assessments (e.g., licensing fees, risk assessment training, positions solely responsible for administering risk assessments)
- **Basic Needs:** Supports that covered general client needs (e.g., bus passes, clothing, driver’s licenses)
- **Miscellaneous:** Any other costs not included in the above categories

Seven of these categories—Case Management, Employment or Vocational Supports, Housing Supports, Mental and Behavioral Health, Mentoring or Peer Supports, Risk Assessment, and Basic Needs—represent core aspects of the SCA model on which the seven AORDP projects were based, while two categories—Administrative and Research or Evaluation—represent key operational elements and budget allocations across sites. A tenth category, Miscellaneous, captures other site expenditures that do not fall into the first nine categories. To classify expenditures, project researchers coded site costs line by line, working from the definitions above and confirmed these allocations and actual expenditures with each site.

Per participant costs were calculated for the total number of clients served as reported by each AORDP project. According to site figures, the seven AORDP projects cumulatively served 5,556 individuals.

## 2.5 Outcome Evaluation Methodology

The objectives of the outcome evaluation were to determine the effects of program participation on recidivism and other outcomes and assess whether program participation increased engagement in services, including substance abuse treatment and mental health services. The outcome evaluation consisted of the following two components:

1. **Cross-site prospective study** designed to collect longitudinal survey data with a sample of program participants and appropriate comparison or control subjects to assess the impact of the SCA funding on access to services and reentry outcomes, such as substance use, employment, housing, and health

2. **Site-specific recidivism analyses** using administrative data to assess the impact of AORDP program participation on recidivism outcomes for all individuals enrolled in the AORDP programs and a matched comparison group in each site

### 2.5.1 *Prospective Study*

The prospective study was designed to assess the overall impact of the AORDP funding on service receipt and several reentry outcomes. Six grantees were included in the prospective study. The seventh grantee, Massachusetts, was originally included, but data collection was discontinued due to lower-than-expected program enrollment and difficulty identifying a viable comparison group; the detailed selection criteria implemented in Suffolk County could not be replicated in any other counties because of lack of sufficient data.

This study component entailed identifying a sample of reentering individuals from each site—individuals who enrolled in the AORDP programs, as well as a matched comparison group (approximately 40 per group in each site)—and pooling data to generalize impact findings to the SCA AORDP population. The premise for this sampling plan was that the target populations for these six sites comprised the SCA AORDP population of interest and results from the interviews would be generalizable to the SCA AORDP population. The data could be pooled across sites to draw inferences to the composite of the six AORDP projects.

The prospective study involved in-person interview data conducted at three points in time (1 month prior to release and 6 and 12 months' post-release), along with oral swab drug test results. In addition, administrative criminal justice data were obtained.

#### 2.5.1.1 **Site-Specific Study Designs**

The prospective study focused on the cohort of individuals released from incarceration between June 1, 2014, through December 31, 2014—a period that allowed sufficient numbers of eligible prospective study sample members to be enrolled in the study and followed up for 12 months. Taking a “snapshot” of cases within a particular release window allowed us to focus data collection resources (which are substantial, given the in-person, longitudinal approach) on a cohort of individuals released while the grants were fully operational. In each site, all individuals who were enrolled in the AORDP programs and released during this period were eligible for the study. An intent to treat approach was implemented, such that all eligible individuals were classified as treatment group members, regardless of the intensity of services they ended up receiving.

Given the heterogeneity in the population targeted for programming across the sites, strategies for identifying comparison group members were customized at each site, based on the site's eligibility criteria, screening and recruitment procedures, and available administrative data.<sup>8</sup>

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<sup>8</sup> Site visits were conducted by the evaluation principal investigator and co-principal investigator during July-September 2013 to identify appropriate local designs for the prospective and recidivism studies.

**Exhibit 2-3** summarizes the site-specific designs that were developed for the prospective study. Sample characteristics for treatment and comparison group members are shown in Chapter 5.

**Exhibit 2-3. Eligibility Criteria and Site-Specific Study Designs for Prospective Study**

Site	SCA Program Eligibility Criteria	Prospective Study Design (T=Treatment, C=Comparison)
<b>California: Solano County</b> Women’s Reentry Achievement Program (WRAP)	<ul style="list-style-type: none"> <li>• Women</li> <li>• Currently or recently incarcerated in the Solano County jail</li> <li>• Medium-high risk on Women’s Risk and Needs Assessment (WRNA) or Level of Service-Case Management Inventory (LS-CMI)</li> <li>• Returning to or living in Solano County</li> </ul>	<p><b>T:</b> 35 women enrolled in WRAP and released from Solano County jail during the prospective study enrollment window</p> <p><b>C:</b> 55 medium-high risk women released from an adjacent county jail during the prospective study enrollment period, screened using a proxy indicator of risk (age, age at first arrest, number of prior arrests)</p>
<b>Connecticut: CT Department of Correction (CTDOC)</b> New Haven Reentry Initiative (NHRI)	<ul style="list-style-type: none"> <li>• Men and women</li> <li>• Incarcerated in one of 4 prisons (out of 13 CTDOC prisons)</li> <li>• Medium-high risk on Treatment &amp; Program Assessment Instrument (TPAI)</li> <li>• Returning to New Haven, West Haven, or Hamden</li> <li>• 3 months to release or 6 months for halfway house</li> <li>• Probation or parole or “End of Sentence” (EOS)</li> </ul>	<p><b>T:</b> 37 men and 7 women enrolled in NHRI and released during prospective study enrollment window</p> <p><b>C:</b> 27 men, not housed in participating prisons, who were expected to release to New Haven, West Haven, or Hamden during prospective study window and were assessed by the NHRI program director to meet criteria for program participation; 20 women released from the same women’s prison as the treatment women and released to Hartford or Bridgeport</p>
<b>Florida: FL Department of Corrections (FLDC), Palm Beach County (PBC)</b> RESTORE Reentry Program	<ul style="list-style-type: none"> <li>• Men*</li> <li>• Incarcerated in Sago Palm Reentry Center</li> <li>• Moderate-high risk on LSI-R</li> <li>• Returning to Palm Beach County, with or without supervision</li> </ul> <p>*A very small number of women were served early in the grant period, but the closing of a women’s facility and other implementation issues led to an exclusive focus on men.</p>	<p><b>T:</b> 42 men enrolled in RESTORE and released from Sago Palm Reentry Center during prospective study enrollment window</p> <p><b>C:</b> 48 men matching RESTORE eligibility criteria released from other FLDC facilities (i.e., were not transferred to Sago Palm Reentry Center, because they were enrolled in programming or were assigned to work assignments at other FLDC prisons) to Palm Beach County during prospective study enrollment window</p>

(continued)

**Exhibit 2-3. Eligibility Criteria and Site-Specific Study Designs for Prospective Study (continued)**

Site	SCA Program Eligibility Criteria	Prospective Study Design (T=Treatment, C=Comparison)
<p><b>Minnesota: MN Department of Corrections (MNDOC)</b> MNDOC High Risk Recidivism Reduction Project</p>	<ul style="list-style-type: none"> <li>• Men</li> <li>• Committed to Lino Lakes correctional facility</li> <li>• Release violators without a new sentence</li> <li>• Returning to Hennepin, Anoka, Dakota, and Ramsey counties</li> <li>• At least 150 days of supervised release in community</li> <li>• Exclusions: Detainer; early release resulting from appeal or resentencing; unavailable to work with Reentry Coordinator during pre-release (e.g., administrative segregation or facility transfer)</li> </ul>	<p><b>T:</b> 44 men randomly assigned to the program and who were released from Lino Lakes facility during the prospective study enrollment period  <b>C:</b> 54 men randomly assigned to the control condition (treatment as usual) and who were released from a MNDOC facility during the prospective study enrollment period</p>
<p><b>New Jersey: Hudson County Department of Correction (HCDOC)</b> Community Reintegration Program (CRP)</p>	<ul style="list-style-type: none"> <li>• Men and women</li> <li>• Currently in Hudson County jail</li> <li>• History of prior arrests, incarcerations, and sentencing to Hudson County jail</li> <li>• Diagnosed mental health and/or substance use disorder</li> <li>• Pre-jail residence in and release to Hudson County, NJ</li> <li>• Exclusions: Axis 1, sex offenses, arson, significant violence, serious medical conditions</li> </ul>	<p><b>T:</b> 42 men randomly assigned to the therapeutic community and released from the Hudson County jail during the prospective study enrollment period  <b>C:</b> 48 men randomly assigned to wait list (“treatment as usual”) and released from the Hudson County jail during the prospective study enrollment period</p>
<p><b>Pennsylvania: Beaver County Jail</b> ChancesR</p>	<ul style="list-style-type: none"> <li>• Men and women</li> <li>• Sentenced to the Beaver County Jail</li> <li>• Medium-high need for substance abuse, mental health or co-occurring services based on the Global Appraisal of Individual Need Short Screener (GAIN SS)</li> <li>• Returning to Aliquippa, Ambridge, Beaver Falls, New Brighton, and Rochester</li> </ul>	<p><b>T:</b> 18 men and 19 women enrolled in ChancesR and released from the Beaver County jail during the prospective study enrollment period  <b>C:</b> 18 men and 13 women released from a comparison county jail and screened as having a co-occurring behavioral health disorder during the prospective study enrollment period</p>

The comparison group identification strategy was different at each site. A random assignment design—already in place by the Minnesota Department of Corrections (MNDOC) for internal evaluation purposes—was used in Minnesota. Individuals screened as eligible for the program (male release violators projected to release to specific counties) were randomly assigned (using a 2:1 ratio) to the treatment or control conditions. Both treatment and control group members returned to the same counties, but they were not necessarily released from the same facilities. In Hudson County, NJ, a random assignment design was put into place for men specifically for

the prospective study enrollment period. In this site, eligible men (those with diagnosed mental health and or substance use disorders) were randomly assigned to a therapeutic community (one of the core program components) or a wait list for the therapeutic community in the host facility. Women were excluded from the prospective study in New Jersey due to lack of comparison group selection options.

Matched comparison groups were identified in the remaining sites (California, Connecticut, Florida, and Pennsylvania). A key consideration in comparison group selection was whether sufficient numbers of eligible individuals who were not offered the program could be identified from the same facility of release as the treatment group. In two of the jail-based sites (California and Pennsylvania), insufficient numbers of eligible individuals who were not offered the program within the target jail (Solano County, CA, and Beaver County, PA) resulted in the need to select comparable jails in proximal counties. Therefore, a comparison county (of similar size, demographic composition, and resources) was selected for both treatment counties, and individuals from the comparison jail were identified for the retrospective and prospective comparison cohorts. In Florida, where the treatment group members were transferred to and released from, a DOC reentry center in Palm Beach County (after serving the first part of their sentence in a regular prison), the comparison group members had to be released from facilities other than the reentry center. Therefore, DOC data were used to identify individuals who met basic eligibility criteria (including plans to release to Palm Beach County) but who were not transferred to the reentry center (and were therefore released from regular prisons instead). Finally, in Connecticut, which served individuals releasing from four CTDOC prisons, comparison women were released from the same women’s prison as the treatment women; the comparison women were returning to different post-release communities than treatment women, because the small number of women precluded limiting selection to those returning to the targeted post-release communities. However, comparison men were released from different prisons than the treatment facilities and were returning to the same counties as the treatment men.

The procedures for selecting comparison group members were customized to each site. Generally, the procedures involved DOC or jail staff using available administrative data to apply predetermined, objective selection criteria, which were established in consultation with the evaluation team and based on the eligibility criteria for the treatment group, to the pool of individuals projected to be released each month. The established criteria were applied in a standardized manner and did not involve staff discretion in the selection of comparison cases. In Connecticut and Florida, the DOCs maintained fairly extensive administrative data and applied the eligibility criteria for the treatment group to potential comparison group members. In Pennsylvania and California—the two jail sites in which comparison group members were those releasing from a different jail than the treatment jail—staff members at the comparison jails used available jail data to select individuals with characteristics predetermined to attempt to mimic treatment group eligibility as closely as possible. Finally, in Minnesota and New Jersey, where random assignment was implemented, program staff simply provided the evaluation team with monthly lists of treatment and control group members projected to be released that month.

The comparison group selection procedures were designed to identify individuals who were as comparable as possible to the treatment group. However, some degree of selection bias undoubtedly remained. To attempt to address this bias, post-hoc statistical techniques (i.e., propensity score modeling) were used to weight the data to minimize selection bias (described in Section 2.5.1.5).

### **2.5.1.2 Instrument Development**

Survey instruments for the baseline, 6- and 12-month interviews were developed (see **Appendix B**). Individual interview questions and scales were adapted from previous reentry evaluations, including the *Multi-Site Evaluation of SVORI, MFS-IP*, and the *Returning Home* study.

The baseline interview, which was administered to sample members prior to release from incarceration, included detailed questions on background characteristics (e.g., demographics, criminal history), pre-incarceration experiences (e.g., employment, housing, family relationships, substance use), family contact during incarceration, service receipt, attitudes (e.g., criminal thinking, self-identity), and expectations for release.

The 6- and 12-month instruments focused on community-based experiences since the individual's release (6 month) or previous interview (12 month). These interviews included questions about service receipt, housing, employment, substance use, mental and physical health, supervision experiences, criminal behavior, and attitudes.

Many items were included at all three waves, with skip and fill patterns based on the respondent's incarceration status (at the follow-up interviews) built into the instrument.

### **2.5.1.3 Data Collection Methodology**

The study designs described earlier were implemented in each site from June 1, 2014, through December 31, 2014, the baseline enrollment period for the prospective study. RTI's Institutional Review Board (IRB) reviewed and approved all data collection procedures. Data Use Agreements were established with the grantee agency in each site, as well as other agencies involved in providing contact information for sample members for the prospective study. In addition, the DOCs granted research approval in the three sites in which baseline interviews were conducted in state prison (Minnesota, Connecticut, and Florida), and in the county jails (Palm Beach County, FL; Solano County, CA; Suffolk County, MA; Hudson County, NJ; Beaver County, PA; and the two comparison counties identified for the CA and PA designs).

Baseline interviews were conducted approximately 1 month prior to sample members' release. Follow-up interviews were conducted at 6 and 12 months' post-release; actual release dates were obtained for sample members from relevant correctional agencies and used to schedule a respondents' follow-up interview. The total data collection period was June 2014 through December 2015.

RTI field interviewers, who were extensively trained on confidentiality procedures and human subjects' protection issues for vulnerable populations, conducted the interviews in person. The interviewers obtained clearance from the local correctional facilities in which interviews were conducted. Informed consent for study participation was obtained from respondents before each interview. Respondents were informed that study participation included the interview and the release of administrative criminal justice data to the evaluation team. See Section 2.5.2.3 for details about the acquisition of administrative data for prospective sample.

The interviews were conducted using computer-assisted personal interviewing. For particularly sensitive topics (e.g., criminal behavior, attitudes, and substance abuse), audio computer-assisted self-interviewing was used. This technique reduces social desirability bias (i.e., the tendency to give an answer that will be approved) by providing greater confidentiality to respondents. Baseline interviews were conducted in private rooms in the correctional facility, with correctional staff out of earshot. Six- and 12-month follow-up interviews were conducted in private locations in the community. However, sample members who were reincarcerated at the time of their follow-up interview were interviewed in the correctional facility. After the interview, all respondents in the community were asked to provide an oral swab sample, which was sent to an independent laboratory for drug testing analysis. Separate, informed consent was obtained for the oral swab drug tests administered at the follow-up interviews.

The interviews lasted about 1 hour. For the 6- and 12-month follow-up interviews, respondents in the community received \$35 to thank them for their participation; respondents interviewed in a correctional facility did not receive compensation. Respondents in the community received an additional \$10 for providing an oral swab sample.<sup>9</sup>

#### **2.5.1.4 Sample Sizes and Response Rates**

The total numbers of interviews completed for the prospective study, as well as response rates, are shown by wave in *Exhibit 2-4*. Response rates reflect the number of completed interviews divided by the number of eligible cases fielded. Eligibility criteria for the baseline interview were discussed in Section 2.5.1.1. A small number of cases classified as eligible for baseline were reclassified as ineligible for one or more follow-up interviews, because respondents died, became physically or mentally incapable of participating in the follow-up interview, or moved outside the study area. Most attrition in the prospective study was due to difficulty locating respondents for a follow-up interview; however, in some cases, the interviewers had difficulty accessing respondents in a treatment or a (new) correctional facility. A few individuals were located at follow-up but declined the interview. As evident from the 6- and 12-month sample sizes shown in the exhibit, the analytic sample size for outcome analyses based on the prospective sample was around 300.

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<sup>9</sup> Respondents could also earn an additional \$5 for calling the 1-800 number upon receiving the lead letter announcing their upcoming 6- or 12-month interview.

**Exhibit 2-4. Completed Interviews and Response Rates for Prospective Study**

Site	Baseline		6-Month Follow-up		12-Month Follow-up	
	Number	Response Rate, %	Number	Response Rate, %	Number	Response Rate, %
<b>California</b>						
Treatment	35	100	20	58.8	24	70.6
Comparison	54	96	27	52.9	30	56.9
TOTAL	89	98	47	55.3	54	62.4
<b>Connecticut</b>						
Treatment	44	75	27	62.8	29	67.4
Comparison	47	59	31	66.0	27	57.4
TOTAL	91	65	58	63.3	56	62.2
<b>Florida</b>						
Treatment	42	75	21	50.0	21	50.0
Comparison	48	77	23	47.9	19	39.6
TOTAL	90	76	44	48.9	40	44.4
<b>Minnesota</b>						
Treatment	44	91	33	76.2	31	73.8
Comparison	54	79	36	67.9	38	71.7
TOTAL	98	84	69	71.6	69	72.6
<b>New Jersey</b>						
Treatment	42	93	15	44.1	26	73.5
Comparison	48	92	27	61.4	32	65.9
TOTAL	90	93	42	53.8	58	69.2
<b>Pennsylvania</b>						
Treatment	27	88	16	68.2	12	54.5
Comparison	31	94	23	76.7	20	66.7
TOTAL	58	82	39	73.1	32	61.5
<b>TOTAL</b>	516	82	299	60.4	309	62.0

### 2.5.1.5 Adjustments for Selection and Attrition Bias

*Addressing Selection Bias.* Given the nonexperimental designs implemented in five of the six sites, it was necessary to adjust for **selection bias**—the likelihood that *a priori* differences between treatment and comparison group members may influence outcomes independently from any programming received. We used propensity score modeling to adjust for selection bias, which balances the treatment and comparison groups on all observed, pretreatment attributes. The approach entails modeling the likelihood that an individual with those characteristics was selected for the intervention.

Specifically, we ran a logistic regression model in which the outcome was a dichotomous indicator of intervention participation (i.e., treatment group status) as the dependent variable and a series of preintervention characteristics (measured in the baseline interview) as the

independent variables.<sup>10</sup> Standard propensity modeling approaches included selecting independent variables that might possibly be associated with differential sample membership and the outcomes of interest (in the absence of the program). Because the intention of the prospective study was to pool data across sites (to generalize findings to the SCA AORDP target population), we conducted the propensity modeling for the full prospective sample.

The propensity scores generated from this model represent the summary effect that the baseline characteristics had on treatment group membership (e.g., the extent to which they explain why some sample members were statistically more likely than others to be selected for the intervention, as opposed to being in the comparison group). Coefficients from the logistic regression model then were applied to the data to produce estimates of individuals' probability of assignment to the treatment group. In other words, each individual was assigned a propensity score ranging from 0 to 1 that reflects the predicted probability that the individual was selected for the treatment group based on his or her pretreatment characteristics. These probabilities ( $p$ -hats or  $p^{\wedge}$ ) then were used to create weights that, when applied to the data, provide a means of estimating the unbiased population average treatment effect (PATE). Quasi-experimental evaluation research often uses post-hoc statistical controls, such as propensity score weighting or propensity score stratification, to balance treatment and comparison groups (see Joffe & Rosenbaum, 1999; Hirano, Imbens, & Ridder, 2003; Imbens, 2004). The success of the propensity score model estimation is judged by the effectiveness of the strata or weights to reduce differences between the treatment and comparison groups on observed characteristics (i.e., to achieve acceptable balance between the two groups; D'Agostino, Jr., 1998). Diagnostics to assess the effectiveness of our approach—i.e., how well the PATE weights balanced the treatment and comparison groups on observed preintervention characteristics—are presented in **Appendix C**. As evident from the balance checks, the propensity models achieved good balance between treatment and comparison groups on all preintervention characteristics included in the propensity model. In other words, no differences in means were significant and no standardized differences were greater than 0.2 for any of the model covariates. However, as noted above, the models were limited to observable characteristics and cannot control for unobservable, “hidden” bias.

After the selection weights were developed, we explored the extent of **attrition bias**—the likelihood that having follow-up data for a respondent may be associated with factors that influence outcomes independently from any AORDP programming received. This involved (1) comparing responders to nonresponders on several baseline characteristics to determine whether individuals who completed a follow-up wave were different from those who did not and (2) comparing treatment and comparison groups on all observed preintervention

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<sup>10</sup> Even though the baseline interviews were not conducted before the receipt of AORDP programming, only variables that could not have been affected by programming (e.g., demographics, preincarceration characteristics) were selected for inclusion in the propensity models. Variables included site, age, race or ethnicity, marital status, parental status, educational attainment, instant offense, criminal history, family criminal involvement, preincarceration employment, preincarceration mental health and substance use treatment, and preincarceration problematic alcohol and drug use.

characteristics to determine whether the balance achieved at baseline was maintained at each follow up. The results of the attrition bias checks and the wave 2 and wave 3 balance checks revealed no significant differences between responders and nonresponders and between treatment and comparison groups at either 6 or 12 months after applying the selection bias weights. No differences in means were significant and no standardized differences were greater than 0.2 for any variables when comparing responders and nonresponders at 6 and 12 months and when comparing treatment and comparison groups at the two follow-up waves. . Therefore, no further adjustments for attrition bias were necessary.

### 2.5.1.6 Outcome Variables

*Service Receipt.* The first set of outcome variables pertain to service receipt. At each interview, respondents were asked whether they had received a number of services (approximately 30–40) during the reference period for the interview.<sup>11</sup> Responses were binary (yes/no). For analysis purposes, the services were grouped into similar types of services. Eleven groupings that applied to the three main time periods of interest (during the focal incarceration, within 6 months of release, and between 6-12 months of release) were developed along with a 12<sup>th</sup> grouping that only applied to reentry planning taking place during the focal incarceration (see *Exhibit 2-5*). Grantees were not required to offer all of these services, but the evaluation was designed to provide a comprehensive documentation of the breadth of services received.

For each service grouping, dichotomous indicators reflecting whether the respondent had received *any* of the services in the grouping and count indicators reflecting the *number* of services received were developed. (Service dosage was not measured.) These indicators were developed for each service grouping for each time period of interest (during the focal incarceration, within 6 months of release, and between 6-12 months of release).

*Reentry-Related Outcome Variables.* The second set of outcome variables pertains to key dimensions of successful reentry, including criminal behavior, compliance with supervision, substance use, employment, housing, mental and physical health, family stability. Again, the sites were not required to offer interventions explicitly designed to target all of the reentry outcomes and domains on which they were ultimately assessed in the outcome evaluation.

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<sup>11</sup> The reference period for the baseline interview was “at any point during the current incarceration.” At the 6-month post-release interview, the reference period was “since your release from incarceration” and at the 12-month post-release interview, the reference period was “since your 6-month interview.”

**Exhibit 2-5. Description of Service Groupings**

Grouping	Services Included	
Service coordination	<ul style="list-style-type: none"> <li>• Needs assessment</li> <li>• Case management</li> </ul>	<ul style="list-style-type: none"> <li>• Follow-up on referrals made</li> </ul>
Assistance with public benefits and resources	<ul style="list-style-type: none"> <li>• Public healthcare assistance</li> <li>• Public financial assistance</li> <li>• Legal assistance</li> <li>• Housing assistance</li> </ul>	<ul style="list-style-type: none"> <li>• Identification assistance</li> <li>• Transportation assistance</li> <li>• Assistance getting a driver’s license</li> <li>• Clothing banks or food pantries</li> </ul>
Life skills/money management	<ul style="list-style-type: none"> <li>• Money management</li> </ul>	<ul style="list-style-type: none"> <li>• Other life skills</li> </ul>
Cognitive behavioral services	<ul style="list-style-type: none"> <li>• Cognitive-based programming (e.g., changing criminal thinking)</li> </ul>	<ul style="list-style-type: none"> <li>• Anger management</li> </ul>
Educational services	<ul style="list-style-type: none"> <li>• Educational services</li> </ul>	
Employment services	<ul style="list-style-type: none"> <li>• Employment services or job assistance</li> <li>• Employment preparation</li> <li>• Trade or job training programs</li> </ul>	<ul style="list-style-type: none"> <li>• Vocational or technical certifications</li> <li>• Transitional job placement or subsidized employment (asked at 6- and 12-month interviews only)</li> </ul>
Mentoring/faith-based services	<ul style="list-style-type: none"> <li>• Spiritual services</li> <li>• Mentor from faith-based community</li> </ul>	<ul style="list-style-type: none"> <li>• Other faith-based services</li> <li>• Mentoring (other than faith-based)</li> </ul>
Child/family services	<ul style="list-style-type: none"> <li>• Child support modification</li> <li>• Child custody modification</li> </ul>	<ul style="list-style-type: none"> <li>• Personal relationships</li> <li>• Parenting</li> </ul>
Physical health services	<ul style="list-style-type: none"> <li>• Physical health care</li> <li>• Dental services</li> </ul>	<ul style="list-style-type: none"> <li>• Prescription medicine for a physical health problem</li> </ul>
Mental health services	<ul style="list-style-type: none"> <li>• Mental health care</li> <li>• Prescription medicine for a mental health problem</li> </ul>	<ul style="list-style-type: none"> <li>• Survivor’s groups (sexual or physical abuse)</li> </ul>
Substance abuse services	<ul style="list-style-type: none"> <li>• Professional substance abuse treatment</li> </ul>	<ul style="list-style-type: none"> <li>• Alcoholics Anonymous (AA), Narcotics Anonymous (NA), or drug education</li> </ul>
Pre-release reentry planning* *Applies only to services received during the focal incarceration	<ul style="list-style-type: none"> <li>• Reentry planning and case management</li> <li>• Participation in any reentry programs</li> <li>• Development of reentry plan</li> <li>• Pre-release contact from supervision officer</li> </ul>	<ul style="list-style-type: none"> <li>• Pre-release reentry planning from staff from outside the facility</li> <li>• Pre-release reentry planning from anyone else (e.g., facility-based staff)</li> <li>• Family involvement in reentry planning</li> </ul>

Each outcome was measured at 6 and 12 months. Core outcome variables are shown in **Exhibit 2-6**. A number of additional outcome variables were also explored; these variables are listed in **Appendix D**. Each outcome variable was coded such that higher values indicate positive outcomes. Behaviorally specific outcomes (e.g., criminal behavior) generally reflect experiences within the reference period, whereas attitudinal outcomes (e.g., criminal thinking) generally reflect “current” feelings or attitudes at the time of the 6- or 12-month interview. All outcomes explored for the prospective study were based on self-reported data except the “no illicit drug use” outcome, which included both self-reported data and the results of the oral swab drug test results.

**Exhibit 2-6. Description of Outcome Variables**

Outcome	Variable Description
Any employment	Respondent reported being employed at any point during the reference period.
Housing independence	Respondent reported that he/she was either 1) mostly living in his/her own place or 2) was contributing financially to his/her housing costs.
No illicit drug use (excluding marijuana)	Respondent did not report using any of the following drugs during the reference period: powder cocaine, crack cocaine, heroin, methamphetamine, other amphetamines, hallucinogens or designer drugs, prescription medications, or methadone. In addition, the respondent did not test positive to any drugs in the oral swab drug test.
No rearrest	The respondent did not report any arrests during the reference period.
No reincarceration in jail or prison	The respondent did not report being incarcerated in a jail or prison during the reference period.

**2.5.1.7 Analytic Approach**

Outcome analyses for the prospective data were intended to address three key research questions:

1. Did those who enrolled in AORDP programming receive more services than the comparison group?
2. Did those who enrolled in AORDP programming have better reentry outcomes than the comparison group?
3. What were the independent effects of group membership and service receipt?

Several analytic approaches were used to answer the research questions.

*Point-in-Time Comparison of Weighted Means.* As a first look at research questions 1 and 2, we simply compared the PATE-weighted mean values of each outcome variable at each interview wave between treatment and comparison group members across the six sites. To determine whether each outcome differed significantly for treatment and comparison group members, we estimated weighted logistic regression models for the binary outcomes and weighted linear regression models for the non-binary outcomes. We used the selection bias weights in the models. The estimated impact was calculated by subtracting the weighted mean for the comparison group from the weighted mean for the treatment group. We also calculated effect sizes for each outcome. For binary outcomes, the reported effect size is the logged odds ratio from the weighted logistic regression. For other outcomes, the reported effect size is a standardized mean difference calculated by dividing the estimated impact by the standard deviation for the comparison group. These comparisons were made at all three time points for service receipt indicators and at 6 and 12 months for reentry outcomes.

These models provide a preliminary answer regarding (1) whether individuals who enrolled in AORDP programs across the six sites were more likely than the comparison group to receive

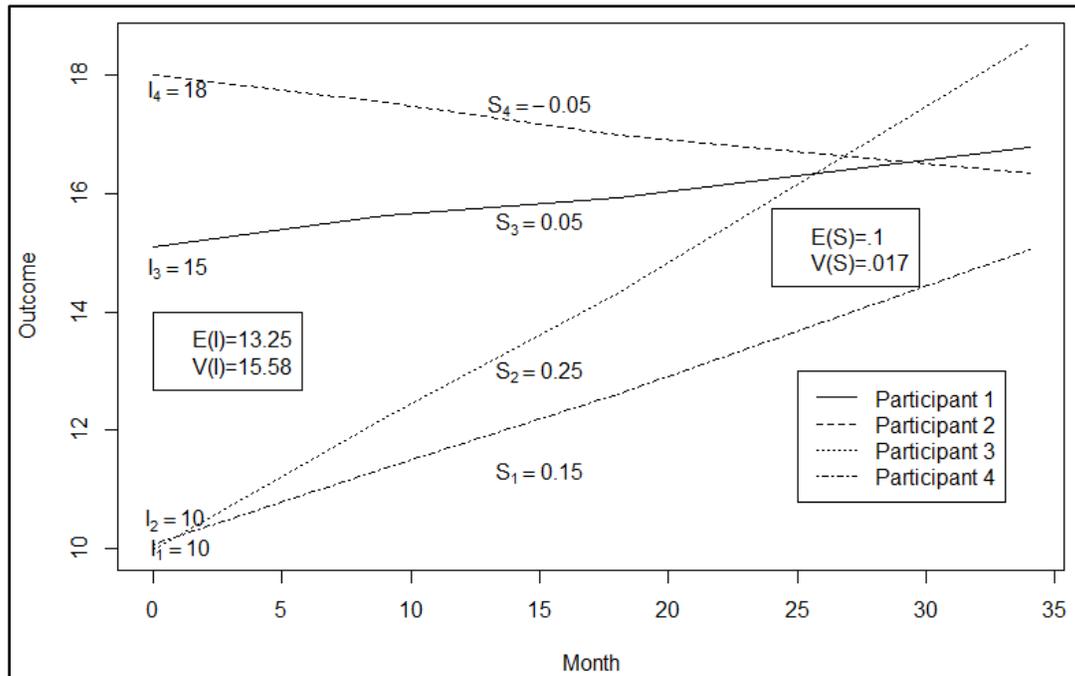
services and programming at various points in time (prior to release, at 6 months post-release, and at 12 months post-release) and (2) whether AORDP participants had better reentry outcomes than the comparison group at 6 and 12 months post-release.

*Latent Growth Curve Models.* The second set of models used latent growth curve modeling to examine the impact of AORDP enrollment on the core reentry outcomes (Exhibit 2-6). This approach models change over time among sample members in a multilevel framework. It is a mixed-effects model (one that has both fixed and random effects, described below) that is estimated under a structural equation modeling framework. While the first analytic approach (comparison of weighted means between treatment and comparison group members) examines whether the treatment group has better outcomes than the comparison group at each follow-up wave, latent growth curve models explore the *trajectories* experienced by sample members over the entire follow-up period (e.g., gradual improvement over time, deterioration over time, intermittent patterns of improvement and deterioration, no change) and determines whether treatment group members, on average, had more positive trajectories over time than comparison group members. Because one advantage of latent growth curve modeling is that it accommodates missing data, our approach was to include in the models all individuals for whom at least one follow-up interview was completed. In contrast, sample members who were missing a follow-up interview could not be included in the comparison of weighted means analyses for that time point. The variation in the samples included in the two sets of analyses—with the latent growth curve models based on a larger sample—can affect the findings that are evident with each approach.

**Exhibit 2-7** provides an illustration of random and fixed effects for four individuals on a hypothetical outcome. Conceptually, each person has a random intercept  $I$ , which is the value on the outcome at baseline, and a random slope  $S$ , which is the rate of change during the study follow-up period. The intercepts and slopes represent unobserved (or latent) random variables, in that we do not observe each person's rate of change directly but can estimate it from their data. The variance of the random effects estimates how much inter-individual variability there is (i.e., how different the values are among the four individuals) in the outcome at baseline,  $V(I)$ , and how much variability there is in rates of change over time,  $V(S)$ . The fixed effects are the average of the random effects, where  $E(I)$  indicates the average baseline value and  $E(S)$  is the average rate of change in the sample. The latent growth curve model estimates the parameters  $E(I)$ ,  $E(S)$ ,  $V(I)$ , and  $V(S)$ .<sup>12</sup>

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<sup>12</sup> The model also estimates the covariance between the intercepts and slope  $Cov(I,S)$

**Exhibit 2-7. Example of Random Intercepts and Random Slopes**

The random intercepts and slopes are specified for each sample member. The fixed effect,  $E(s)$ , summarizes how much change there was on average in the sample during the study. A positive average indicates that the sample improved on average for the outcome, while a negative value indicates deterioration. We can estimate the average separately in the treatment and comparison groups. Then, we can test whether these two averages are different from one another to determine whether the average rate of change in the treatment group is significantly different from that of the comparison group. This constitutes the estimate of the treatment effect in the latent growth curve modeling framework. For example, if housing quality deteriorated over time for both groups, but deteriorated faster in the comparison group than the treatment group—the average slope in the treatment group was negative but smaller than the negative average slope in the comparison group—these results would suggest that the treatment protected against deterioration in housing quality over time.

In conducting the latent growth curve modeling, we estimated the average intercept and slope for the treatment and comparison group members and compared the average slopes between the two groups over the 12-month follow-up. The weights developed to adjust for selection bias were applied to the data. We ran two sets of models. The “base” models simply compared change in the core reentry outcomes between treatment and comparison group members over time (with covariates including treatment group membership, time, and the treatment by time interaction effect), thereby addressing research question 2. The only control variables that were included were preincarceration housing independence (included as a control variable in the housing independence model), preincarceration employment (included as a control variable in the employment model), and preincarceration illicit drug (included as a control variable in

the illicit drug use model), as measured during the baseline interview. This approach allows us to examine respondents' post-release progress while controlling for their preincarceration status. The second set of models examined the independent effects of AORDP enrollment and service receipt (research question 3). These models included the same covariates specified in the base models, as well as the service grouping variables described in Exhibit 2-5. Dichotomous indicators of whether the respondent reported receiving any service in each grouping at the following two time periods were included: 1) during the focal incarceration, and 2) within 6 months of release.<sup>13</sup> These models allow us to determine whether AORDP program participants had more positive trajectories than comparison group members while controlling for the services they received. In addition, they allow us to determine whether receipt of specific types of services at particular time periods is associated with more positive reentry outcomes regardless of whether sample members were enrolled in the AORDP programs.

*Recidivism Models.* The final set of models represented another approach to addressing research question 2 (Did those who enrolled in AORDP programming have better reentry outcomes than the comparison group?) while focusing exclusively on rearrest indicators based on administrative data. To address this question, several sets of models were run for the entire prospective sample, using the propensity weights to adjust for selection bias.

First, **binary logistic regression** models were run to compare the likelihood of rearrest between treatment and comparison group members after their release from the focal incarceration, and at specific time periods (e.g., within 6 and 12 months of release). Binary logistic regression is used when the outcome measure of interest is dichotomous. This regression approach predicts the probability of specific outcomes, so categories in the outcome measure will be represented by "0" (i.e., the event did not occur) or "1" (i.e., the event did occur). Consequently, the functional form of binary logistic regression will be non-linear (Allison, 1999). The PROC LOGISTIC command in SAS was used to obtain parameter estimates for binary arrest outcomes.

Next, **negative binomial regression** models were run to compare the *number* of rearrests between the treatment and comparison group members after their release from the focal incarceration. Several intercept-only models were fit and compared using Akaike's Information Criterion (Akaike, 1974). The model with the smallest AIC was taken as the best fitting model and was used for all further multiple regression modeling. Models tested included Poisson, zero-inflated Poisson, negative binomial, and zero-inflated negative binomial. The negative binomial model fit best. All models were estimated using *proc multilog* in SAS-callable SUDAAN, which accommodates weighted data and the fact that individuals are nested within sites. The number of days in the follow-up period for each individual was included as an offset.

The time to first arrest was then modeled using **survival modeling**. The outcome was examined visually using histograms and Kaplan-Meier plots. The latter were stratified by group (treatment vs. comparison) overall. SAS SURVEYPHREG was used to estimate semi-parametric Cox

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<sup>13</sup> The 12-month service indicators were not included in the models because the service indicators were treated as independent variables and must therefore precede the 12-month interview (the final follow-up period at which dependent variables were measured).

proportional hazards models of time until first rearrest. SURVEYPHREG can perform regression analysis based on the Cox proportional hazards model for weighted survival data to estimate hazard rates, so it was used for the PATE-weighted prospective sample data.

Finally, **competing hazard Cox models** were estimated to examine the effects of AORDP treatment participation on first new arrest by offense type (person, drug, property, and public order/other). The combined cause-specific Cox competing risk survival model was used (Gerds & Scheike, 2015). Individuals who received treatment versus those in the comparison group were compared in the competing risk models.

### 2.5.2 *Recidivism Study*

The recidivism study was designed to determine whether individuals who enrolled in each site's AORDP program had better recidivism outcomes than comparable individuals who received standard reentry programming. The recidivism study relied exclusively on administrative data and entailed the use of survival models to examine time to rearrest, reincarceration, and, in sites where supervision data could be obtained, supervision violations and revocations.

#### 2.5.2.1 **Treatment Group Identification**

To maximize statistical power and support site-level analyses, the treatment group for the recidivism study included all individuals who were ever enrolled in each AORDP program and who were released from incarceration between January 1, 2012, and December 31, 2014. This period essentially covers grantees' full, initial funding period.<sup>14</sup> As with the prospective study, an intent-to-treat approach was implemented in the recidivism analyses, such that all individuals who enrolled in the AORDP programs were classified as treatment group members, regardless of the intensity of services they ended up receiving.

Given the release window for the retrospective study, the treatment group includes individuals who were enrolled in the prospective study (i.e., those who were released between June 1, 2014, through December 31, 2014), as well as a **retrospective** cohort of individuals who were enrolled in the programs before then. Because the recidivism analyses combine both retrospective and prospective cohort members within each site, this classification is largely irrelevant. However, more detailed data are available for the prospective sample members, including self-reported interview data and oral swab drug test results, in addition to the administrative recidivism data.<sup>15</sup> Prospective cohort members had shorter follow-up periods for the recidivism analyses, however, because they were released more recently.

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<sup>14</sup> Some grantees received additional funding and continued to serve individuals who were released after December 31, 2014.

<sup>15</sup> For the retrospective sample, a waiver of consent for the release of administrative data was obtained from RTI's IRB. For the prospective sample, individuals were asked to provide consent for participating in the interviews and having their administrative data released to RTI (with separate consent obtained for the oral swab tests). Therefore, administrative data could not be obtained for individuals who were eligible for the prospective study but declined to participate.

### 2.5.2.2 Comparison Group Identification

The recidivism study was designed to compare the likelihood of recidivism between individuals who enrolled in the AORDP programs and individuals who were (1) as similar as possible to AORDP participants, (2) were released during the same period, and (3) were not offered AORDP programming and instead had access to standard, available, reentry programming and services in their correctional facilities and communities of return.

Site-specific strategies for selecting the comparison group for the prospective cohort were described in Section 2.5.1.1 and included random assignment in Minnesota and New Jersey and matched comparison group designs in the remaining sites (see Exhibit 2-3). **Exhibit 2-8** summarizes the designs that were developed to identify the retrospective comparison group in each site. As with the prospective study, a viable comparison group strategy for the retrospective cohort could not be identified in Massachusetts, because the extremely detailed selection criteria implemented in Suffolk County could not be replicated in any other counties due to lack of sufficient data. Because comparison group selection for the prospective cohort members was conducted in real time during baseline study enrollment, whereas selection for the retrospective cohort members was done *post hoc*, using as many available administrative data elements as possible, the strategies for identifying the retrospective and prospective cohort members within a site were slightly different. Sample characteristics for the final treatment and comparison group members in each site are presented in Chapter 6.

A random assignment design was used in Minnesota, which was possible for the retrospective cohort because the MN DOC had put the design in place immediately upon program inception for its own evaluation purposes. Individuals screened as eligible for the program (male release violators projected to release to specific counties) were randomly assigned (initially using a 2:1 ratio but then switching to 1:1 as the site approached enrollment targets) to the treatment or control conditions.

In the remaining sites (California, Connecticut, Florida, New Jersey, and Pennsylvania), matched comparison groups were identified. As with the prospective study, in some sites the comparison group had to be selected from different facilities of release than those of the treatment group. In California and Pennsylvania, the retrospective comparison groups were identified from the same comparison jails that were used for the prospective study. Similarly, in Florida, individuals released from FL DOC facilities other than the reentry center to which the treatment group was transferred, were identified for the retrospective comparison group. In Connecticut and New Jersey, the comparison groups were released from the same facility as the treatment groups.

**Exhibit 2-8. Eligibility Criteria and Site-Specific Study Designs for Retrospective Sample**

Site	SCA Program Eligibility Criteria	Study Design (T=Treatment, C=Comparison)
<p><b>California: Solano County</b> Women’s Reentry Achievement Program (WRAP)</p>	<ul style="list-style-type: none"> <li>• Women</li> <li>• Currently or recently incarcerated in the Solano County jail</li> <li>• Medium-high risk on Women’s Risk and Needs Assessment (WRNA) or Level of Service-Case Management Inventory (LS-CMI)</li> <li>• Returning to or living in Solano County</li> </ul>	<p><b>Treatment (T):</b> 174 women enrolled in WRAP and released from the Solano County jail during retrospective study window (excluding probation referrals)</p> <p><b>Comparison (C):</b> 195 M/H risk women released from an adjacent county jail, with propensity score modeling (using county jail data and state arrest data) used to identify best comparison matches to treatment group (1:1 matching) from among a large pool of women released during retrospective study window</p>
<p><b>Connecticut: CT Department of Correction (CTDOC)</b> New Haven Reentry Initiative (NHRI)</p>	<ul style="list-style-type: none"> <li>• Men and women</li> <li>• Incarcerated in one of 4 prisons (out of 13 CTDOC prisons)</li> <li>• Medium-high risk on Treatment &amp; Program Assessment Instrument (TPAI)</li> <li>• Returning to New Haven, West Haven, or Hamden</li> <li>• 3 months to release or 6 months for halfway house</li> <li>• Probation/parole or “End of Sentence” (EOS)</li> </ul>	<p><b>T:</b> 376 men and women enrolled in NHRI and released during retrospective study window</p> <p><b>C:</b> 379 men and women released to same geographic area who did not participate in the NHRI, with propensity score modeling (using CT DOC and judicial branch data) used to identify the best comparison matches to the treatment group (1:1 matching) from among a large pool of men and women released during retrospective study window</p>
<p><b>Florida: FL Department of Corrections (FLDC)/Palm Beach County (PBC)</b> Regional and State Transitional Ex-Offender Reentry (RESTORE) Reentry Program</p>	<ul style="list-style-type: none"> <li>• Men*</li> <li>• Incarcerated in Sago Palm Reentry Center</li> <li>• Moderate to high risk on LSI-R</li> <li>• Returning to Palm Beach County, with or without supervision</li> </ul> <p>*A very small number of women were served early in the grant period, but the closing of a women’s facility and other implementation issues led to an exclusive focus on men.</p>	<p><b>T:</b> 287 men enrolled in RESTORE and released during retrospective study window</p> <p><b>C:</b> 294 men released to PBC from other FLDC prisons, with propensity score modeling used to identify the best comparison matches to the treatment group (1:1 matching) from among a large pool of men and women released during retrospective study window</p>
<p><b>Massachusetts: Boston Police Department (BPD)</b> Boston Reentry Initiative (BRI)</p>	<ul style="list-style-type: none"> <li>• Men</li> <li>• Sentenced to Suffolk County House of Corrections (SCHOC)</li> <li>• Extensive, serious criminal histories (including violent and firearm offenses and gang associations)</li> <li>• Returning to city of Boston</li> <li>• Eligibility based on offense history</li> </ul>	<p><b>T:</b> 162 men enrolled in BRI and released from SCHOC during retrospective study window</p> <p><b>C:</b> n/a (No viable options for a rigorous comparison group were identified.)</p>

(continued)

**Exhibit 2-8. Eligibility Criteria and Site-Specific Study Designs for Retrospective Sample (continued)**

Site	SCA Program Eligibility Criteria	Study Design (T=Treatment, C=Comparison)
<b>Minnesota: MN Department of Corrections (MNDOC)</b> MNDOC High Risk Recidivism Reduction Project	<ul style="list-style-type: none"> <li>• Men</li> <li>• Committed to Lino Lakes correctional facility</li> <li>• Release violators without a new sentence</li> <li>• Returning to Hennepin, Anoka, Dakota, and Ramsey counties</li> <li>• At least 150 days of supervised release in community</li> <li>• Exclusions: Detainer; early release resulting from appeal or resentencing; unavailable to work with Reentry Coordinator during pre-release (e.g., administrative segregation or facility transfer)</li> </ul>	<p><b>T</b> : 194 men randomly assigned to participate in the MNDOC program released during retrospective study window</p> <p><b>C</b> : 178 men randomly assigned to the control condition (treatment as usual) released during retrospective study window. Assignment to T-C conditions done on a 2:1 basis.</p>
<b>New Jersey: Hudson County Department of Correction (HCDOC)</b> Community Reintegration Program (CRP)	<ul style="list-style-type: none"> <li>• Men and women</li> <li>• Currently in Hudson County Jail</li> <li>• History of prior arrests, incarcerations, and sentencing to Hudson County Jail</li> <li>• Diagnosed mental health and/or substance use disorder</li> <li>• Pre-jail residence in and release to Hudson County, NJ</li> <li>• Exclusions: Axis 1, sex offenses, arson, significant violence, serious medical conditions</li> </ul>	<p><b>T</b>: 344 men and women released from the Hudson County jail during the retrospective study window who participated in the CRP (male and those from the TCs only)</p> <p><b>C</b>: 339 men released during the retrospective study window who were identified by program staff to have met eligibility criteria but were not offered the CRP</p>
<b>Pennsylvania: Beaver County Jail</b> ChancesR	<ul style="list-style-type: none"> <li>• Men and women</li> <li>• Sentenced to the Beaver County Jail.</li> <li>• Medium-high need for substance abuse, mental health, or co-occurring services based on the Global Appraisal of Individual Need Short Screener (GAIN SS)</li> <li>• Returning to Aliquippa, Ambridge, Beaver Falls, New Brighton, and Rochester</li> </ul>	<p><b>T</b>: 452 men and women enrolled in ChancesR and released from the Beaver County jail during retrospective study window</p> <p><b>C</b>: 139 men and women released from the comparison county jail during the retrospective study window and who were identified by jail staff to have been screened as having a co-occurring behavioral health disorder</p>

In most of the sites, the evaluation team could use propensity score modeling to select the best comparison matches to the treatment group from among a large pool of potential comparison group members for whom detailed administrative data were available. In both Florida and Connecticut, the evaluation team processed and analyzed available administrative data (provided by the DOCs) to rigorously match retrospective comparison group members to retrospective treatment group members. Based on several available variables (e.g., arrest history, focal incarceration offense type, demographic characteristics, risk and needs assessment results) obtained for the (known) retrospective treatment group and a large pool of

potential comparison group members, the likelihood of treatment group assignment was modeled using propensity score modeling. Using nearest neighbor matching without replacement, the closest comparison match to each treatment group member was selected (1:1) based on the results of the models. A similar approach was used in California; however, despite obtaining data from the state arrest agency and both the treatment and comparison jails, fewer administrative data elements were available for matching.

In the remaining sites (New Jersey, and Pennsylvania), comparison group selection was handled by jail data specialists. In these sites, a staff member used available jail data to extract a dataset listing individuals with specific characteristics (predetermined to attempt to mimic treatment group eligibility as closely as possible). Propensity score modeling was not used in these sites.

As with the prospective study designs, the comparison group selection procedures for the retrospective cohorts were designed to identify individuals who were as comparable as possible to the treatment group. However, some degree of selection bias undoubtedly remained. To attempt to address this bias, all outcome models for the recidivism study included standard control variables related to likelihood of recidivism (see Section 2.5.2.4).

### **2.5.2.3 Data Sources and Outcomes**

Administrative data were obtained from 19 agencies across the sites, including the state correctional agency, the state arrest agency, and, in jail-based sites, the county jail. The datasets were used both to construct the comparison group (as described above) and as a source of outcome data for the final set of treatment and comparison group members in each site. Data Use Agreements were established with all agencies that provided administrative data for the recidivism analysis. Formal research approval was obtained from the department of corrections in all states providing DOC data (California, Connecticut, Florida, Minnesota, Pennsylvania), and other agencies in which a formal process was in place. All data acquisition procedures were reviewed and approved by RTI's IRB, including several amendments necessary to accommodate agencies for which the standard IRB-approved data acquisition protocols could not be followed.

The primary outcomes for the recidivism study were rearrest and reincarceration in state prison, although where data were available, rearrest in county jail and supervision outcomes (e.g., violations, revocations) were also examined. A standard set of derived variables was created from the raw data in each site. Arrest data, which included dates and offense type for each arrest, were coded as "days until arrest," reflecting the number of days from each sample member's release from their focal incarceration until their arrest for particular crimes.<sup>16</sup> We used the BJS National Corrections Reporting Program (NCRP) offense codes and categorized each arrest as being for a person, property, drug, public order, or other offense. From the reincarceration data a variable reflecting the number of days until first reincarceration was

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<sup>16</sup> Arrests that took place during the focal incarceration were coded with negative values and were not included in the survival analyses modeling time until first arrest.

created. From the supervision data, variables reflecting the number of days until first violation and first revocation were created.

Each sample member’s follow-up period was calculated by subtracting the focal incarceration release date from the date that the dataset was obtained. The average follow-up periods for rearrest and reincarceration are shown for treatment and comparison group members in each site in *Exhibit 2-9*.

**Exhibit 2-9. Mean Number of Days in Rearrest and Reincarceration Follow-up Periods, by Site and Group**

	Rearrest Follow-up Period		Reincarceration (state prison) Follow-up Period		Reincarceration (county jail) Follow-up Period	
	Treatment	Comparison	Treatment	Comparison	Treatment	Comparison
CA	1082*	1105	1248*	1180	1012*	1035
CT	1175	1194	1123	1142	n/a	n/a
FL	1340	1326	1186	1172	n/a	n/a
MA	1356	n/a	n/a	n/a	n/a	n/a
MN	1083***	915	991***	823	n/a	n/a
NJ	1115***	980	n/a	n/a	n/a	n/a
PA	1060*	1010	1053*	1003	1053*	1003

Notes: State prison reincarceration data could not be obtained in MA or NJ. Jail reincarceration data could not be obtained in CT, FL, MA, MN, or NJ.

\*p for difference between treatment and comparison groups <.05; \*\*\*p for difference between treatment and comparison groups <.001

In a few sites, the duration of the follow-up period differed significantly between the treatment and comparison group members. The negative binomial model included the number of days in the follow-up period as an offset in the models. Other variables (e.g., age at first arrest, number of previous arrests, risk score, demographic characteristics) were included as control variables in the recidivism models, as described below.

#### 2.5.2.4 Analytic Approach

The primary research question for the recidivism study component was “Did AORDP program participants have better recidivism outcomes than comparable individuals receiving treatment as usual?” To address this question, several sets of models were run separately for each site. To control for confounding characteristics that could influence the outcome of interest independently from group assignment, we attempted to control for the following variables in each site: age, race, ethnicity, gender, current offense, prior criminal record (e.g., age at first arrest, number of prior arrests or commitments), risk scores, length of stay, number of dependents, and marital status. However, the specific independent variables included in each model varied by site based on relevance and availability of data (**Appendix H**, which contains full model results in each site, specifies which independent variables were included in each site’s models).

First, **binary logistic regression** models were run to compare the likelihood of various recidivism events (e.g., any rearrest, any rearrest within 6 months of release, any rearrest within 12 months of release, any reincarceration in prison) after sample members' release from their focal incarceration between the treatment and comparison group members in each site. As described previously, binary logistic regression is used when the outcome measure of interest is dichotomous. This regression approach predicts the probability of specific outcomes, so categories in the outcome measure will be represented by "0" (i.e., the event did not occur) or "1" (i.e., the event did occur). Consequently, the functional form of binary logistic regression will be non-linear (Alison, 1999). The *logit* command in Stata and PROC LOGISTIC in SAS were used to obtain parameter estimates for binary arrest outcomes.

Next, **negative binomial regression** models were run to compare the number of rearrests between the treatment and comparison group members after their release from the focal incarceration. For each site's arrest count outcome, several intercept-only models were fit and compared using Akaike's Information Criterion (Akaike, 1974). The model with the smallest AIC was taken as the best fitting model for that outcome and was used for all further multiple regression modeling of that outcome. Models tested included Poisson, zero inflated Poisson, negative binomial, and zero inflated negative binomial. The negative binomial model fit best. All models were estimated using *nbreg* in Stata. The number of days in the follow-up period for each individual was included as an offset.

The time to specific recidivism events was then modeled using **parametric survival modeling**<sup>17</sup>. The primary outcomes were the time to first arrest and time to first jail and/or prison incarceration. Each outcome was examined visually using histograms and Kaplan-Meier plots. The latter were stratified by group (treatment vs. comparison) overall and within each site. To determine which distribution fit best, we fit intercept-only models using lognormal, exponential, Weibull, and log-logistic parametric survival models. The model with the smallest Akaike's Information Criterion (Akaike, 1974) was selected as the best fitting model. Separate types of distributions fit the data best depending on the model within each site and is documented accordingly below each parametric survival model results table in Chapter 6. All models were fit with these distributions using Stata and SAS.

Finally, **competing hazard Cox models** were estimated to examine the effects of AORDP treatment participation on first new arrest by offense type (person, drug, property, and public order/other). The combined cause-specific Cox competing risk survival model was used (Gerds & Scheike, 2015). Individuals who received treatment versus those in the comparison group were compared in the competing risk models.

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<sup>17</sup> As described previously, for the prospective analyses, we used semi-parametric Cox Proportional Hazard models to model time until first re-arrest, rather than parametric survival models. This was because we weighted the prospective data to control for selection bias, but there is no SAS Survey Procedure for weighted parametric survival models. However, we also ran site-specific semi-parametric models as a check, and the findings were consistent.

# Chapter 3. Findings From the Process Evaluation

## 3.1 Description of Grantees

The purpose of the process evaluation was to describe program implementation, document lessons learned, and assess prospects for sustainability. Information gleaned from the process evaluation is helpful for identifying best practices as well as challenges and facilitators useful for replication. Seven AORDP grantees were included in the cross-site process evaluation. Each provided a comprehensive mix of services to justice-involved adults under state or local custody who were about to return to the community. Grantees selected program interventions and services matched to the unique needs of their respective target populations. **Exhibit 3-1** summarizes the target populations and core components of each AORDP site’s reentry program, with bolding used to illustrate key features.

**Exhibit 3-1. Summary of Grantees’ Program Models**

Grantee	Target Population	Basic Program Components
California: Solano County	Medium- or high-risk women currently or recently incarcerated in the Solano County jail	Intensive pre- and post-release case management, <b>gender-specific, cognitive-based therapies, peer mentoring</b> , transitional housing, employment assistance, parenting, and assistance with basic needs
Connecticut: Department of Corrections	Medium- or high-risk men and women sentenced to four Connecticut Department of Corrections (DOC) facilities and who were returning to the target area	A “reentry workbook” program; referrals to the facilities’ job centers; pre-release reentry planning with community case managers; a <b>furlough component</b> for male offenders; <b>dual supervision</b> with parole officer or case manager and community advocate; and <b>120 days post-release services</b>
Florida: Palm Beach County	Moderate- to high-risk men and women soon to be released from incarceration and who were returning to Palm Beach County from one Florida DOC correctional facility	<b>Pre-release services at the reentry center provided by counselors, followed by post-release continued support and services provided by community case managers.</b> Services include education; employment assistance; transitional housing; parenting, life skills, cognitive behavioral change, victim impact; substance abuse and mental health; family reunification; and assistance with basic needs
Massachusetts: Boston	Males in the Suffolk County House of Correction, aged 18–30 with histories of violent or firearm offenses and gang associations, who were returning to one of Boston’s high-crime hotspot areas	<b>Panel meeting</b> to introduce the program to and invite eligible offenders; <b>case management support and advocacy</b> (throughout incarceration, transition to the community, and after release); a 2-week <b>job skills</b> course (before release); assistance with employment, education, basic needs, and health care; and referrals to community services

(continued)

**Exhibit 3-1. Summary of Grantees’ Program Models (continued)**

Grantee	Target Population	Basic Program Components
Minnesota: Department of Corrections	Male release violators who were returning to the Minneapolis-St. Paul metro area, and had at least 150 days of supervised release in the community	Individualized transition planning and pre-release case management from a <b>reentry coordinator</b> , handoff from pre- to post-release case management through a <b>reentry team meeting</b> ; post-release case management and services <b>offered at a community hub</b>
New Jersey: Hudson County	Men and women incarcerated in the Hudson County House of Corrections who had diagnosed mental health, substance use, or co-occurring disorders	90-day, in-jail substance abuse treatment in a gender-specific <b>therapeutic community</b> with focus on <b>cognitive behavioral programming</b> ; pre-release case management and transition planning; post-release case management, linkage to public benefits, and services delivered by <b>intensive outpatient or day treatment and supported housing providers</b>
Pennsylvania: Beaver County	Men and women sentenced to the Beaver County Jail who had medium or high need for mental health or co-occurring services	Cognitive-based treatment groups, <b>highly structured vocational or educational services, transition planning, and case management and reentry sponsorship (mentoring) that begin in jail</b> and continue in the community

There were similarities and differences across grantees. All programs provided an array of pre- and post-release services, including education and literacy programs, job placement, housing services, and mental health and substance abuse treatment. Risk and needs assessments, transition case planning, and case management were key elements in each grantees’ AORDP program. However, sites differed on target populations, settings, and structure. Three sites (Connecticut, Florida, and Minnesota) targeted individuals returning from state departments of corrections (DOCs); the remaining four sites addressed local jail transition (Beaver County, PA; Boston, MA; Hudson County, NJ; and Solano County, CA). Sites also differed in priority populations: Some focused on women (Solano County, CA); others targeted individuals reincarcerated for supervision violations (Minnesota); and others served individuals with substance abuse, mental health, or co-occurring conditions (Beaver County, PA, and Hudson County, NJ).

The design of pre- and post-release services differed across sites. Two sites (Connecticut and Florida) moved returning individuals to facilities closer to their home communities, increasing access to community-based resources before release and strengthening relationships with critical supports. Some programs frontloaded case management services during incarceration, whereas others emphasized community and family supports post-release. The composition and structure of the AORDP grantees also varied by jurisdiction, with agencies outside the criminal justice system leading three of the projects (Beaver County, PA; Palm Beach County, FL; and Solano County, CA). Therefore, while the programs had some common elements, they should be considered as seven distinct models for reentry programming. Further, each program was implemented in a unique contextual environment and some grantees had more established infrastructures for reentry program than others.

In the following sections, we discuss implementation experiences, the use of evidence-based approaches, lessons learned, and prospects for sustainability. More details about AORDP sites can be found within the topical reports produce by the evaluation (Lindquist, Buck Willison, Rossman, Hardison Walters, & Lattimore, 2015a; Rossman, Willison, Lindquist, Walters, & Lattimore, 2016a, 2016b).

## 3.2 Early Implementation Experiences

At the first process evaluation site visits in 2014, all AORDP programs were fully operational and largely stable. However, all struggled with unexpected changes that called for modifications to the implementation plans. The most common challenges related to staff turnover; program administration; organizational partnerships; enrollment, recruitment, and retention of participants; and service delivery.

*Staff Turnover.* Stakeholders in several sites reported that staff turnover posed challenges to their AORDP sites. Staff turnover interrupted service delivery as critical positions were sometimes vacant, existing staff had to take on larger caseloads to compensate for unfilled positions, and new personnel needed time for training and networking. Staff turnover also affected partner interactions as collaborative relationships and trust needed to be rebuilt. Staff turnover occurred throughout the life of the grant as individuals left for various reasons; turnover was particularly challenging in the final grant year, as staff moved on knowing that the grant was coming to an end. Leadership changes were especially problematic, occasionally threatening the efficiency and coordination of service delivery and creating program instability.

*Program Administration.* Administering such extensive programs that crossed multiple systems, involved myriad partners, and bridged institutional and community settings was difficult. Stakeholders reported the following managerial struggles: (1) difficulty managing multiple grant components within the highly structured correctional system, (2) cumbersome organizational hierarchies with a lack of clarity in roles and responsibilities, (3) lack of standardized case-management practices across partnering agencies, and (4) communications missteps while coordinating with multiple partners.

*Organizational Partnerships.* Although most stakeholders perceived interagency collaboration to increase over the course of their programs, they identified several barriers to working with organizational partners. Stakeholders mentioned partnership challenges between correctional agencies and community-based organizations, including time to learn to work with correctional populations, divergent perspectives between correctional partners and service providers (e.g., punitive vs. helping), lack of communication between supervision agents and community service providers, and turf issues among service providers that impeded collaboration. Lack of collaboration among systems that serve formerly incarcerated individuals also was cited as an implementation barrier, along with difficulty gaining buy-in from the DOC or probation or parole department.

**Enrollment and Recruitment.** Some grantees had difficulty meeting enrollment targets due to unexpected decreases in the facility’s population and lack of buy-in from potential participants. Stakeholders perceived that many participants were hesitant to take part in the AORDP projects due to a lack of trust in providers, unwillingness to engage with corrections staff, desire to avoid close monitoring, poor prior experiences with other programs, and perceptions that the program would not help the participant’s court case. Logistical barriers included lack of time to complete services before release and conflicts with pre-lease work schedules.

**Retention of Participants.** Keeping participants engaged in programming over the long term also was challenging for some sites. Transience during reintegration made clients difficult to track, and many clients wanted to avoid affiliation with the criminal justice system after they returned to the community. Furthermore, participants had many demands on their time after release, and program involvement became less of a priority. To address post-release challenges, sites attempted to build strong relationships between clients and community providers before release and provided incentives, such as housing stipends, to remain involved. Stakeholders reported that participants were more likely to stay involved post-release if mandated and if programming adapted to meet participants’ changing needs during reintegration.

**Service Provision.** Community-based partnerships were affected by the dynamic, local service landscape where leadership, staff, programming, and other resources changed unpredictably. Additionally, the characteristics of the participants who enrolled in the AORDP programs differed in meaningful ways from the profile anticipated when the programs were designed. For example, one site found that program participants were more likely to have mental health problems and less likely to have substance abuse problems than anticipated; others overestimated the need for housing. Miscalculations in service needs translated into some services being needed in greater numbers than planned, whereas other resources were underused.

**Service Gaps.** Grantees identified several service gaps across sites, which challenged the construction of the envisioned, comprehensive wrap-around model. Common gaps included the following:

- **Affordable housing.** Transitional housing; housing options for sex offenders; and housing for clients with drug distribution charges, former gang affiliations, or those with special needs due to disabilities or health issues
- **Employment opportunities.** For participants with limited academic or educational proficiencies, little work experience, and criminal histories; opportunities needed in fields for which participants had been trained

**Additional Service Gaps**

- Transportation
- Assistance with fees and fines
- Cognitive behavioral programming
- Victim impact components
- Culturally specific interventions
- Self-sufficiency programming
- Longer-term follow-up services
- Supportive services for those ineligible for public assistance
- Providers using EBPs

- **Behavioral health services.** Mental health assessments, individual counseling services (to address past trauma), family counseling, staff training in mental health, substance abuse treatment and aftercare services, and services that addressed family addiction and mental health issues
- **Assistance obtaining identification.** Birth certificates, driver's licenses, and social security cards; addressing differences in state procedures for requesting identification information
- **Health care.** Lack of medical insurance, which prevented clients from accessing needed health services, and difficulty getting medications for participants who are released from the facility with only a 1-week supply
- **Family services.** Programming that engaged participants' significant others and services that helped participants deal with family members or relationship issues that impeded their ability to make behavioral changes and comply with program recommendations

For additional information, please refer to Lindquist, Buck Willison, and colleagues (2015a).

### 3.3 Use of Evidence-Based Practices

Researchers, practitioners, and policymakers have made great strides in determining what works in reentry and in disseminating information about these EBPs, so they can be replicated with success (Gendreau, French, & Gionet, 2004; Gendreau, Goggin, & Little, 1996; Matthews et al., 2001). Although the term *evidence-based practices* is widely used, it is not always clearly defined. For this report, EBPs refers to practices that have been evaluated and found to reduce reoffending, regardless of how reoffending is defined.

#### 3.3.1 Screening and Assessment

Under the SCA model, all AORDP grantees were required to use an objective risk and needs assessment, specifically the use of actuarial risk assessment. Research on evidence-based approaches suggest that justice-involved individuals assessed at high risk to reoffend are more likely to benefit from correctional interventions than those assessed at low or medium risk (Andrews & Bonta, 2007; Andrews, Bonta, & Wormith, 2006; Andrews & Dowden, 2007; Bonta, 2007; Carey, 2010; Modley & Giguere, 2010). Risk assessments are used to guide individualized case plans that correspond to the complexity of an individual's needs. **Exhibit 3-2** lists the AORDP sites' criminogenic risk/needs assessment tools, as well as specialized assessment instruments used to identify issues such as drug abuse, mental health diagnoses, and trauma.

**Exhibit 3-2. Risk and Needs Assessment Tools Used in AORDP Sites**

Site	Risk and Needs Assessment(s)
California: Solano County	<ul style="list-style-type: none"> <li>• Women’s Risk and Needs Assessment (WRNA)</li> <li>• Level of Service-Case Management Inventory (LS-CMI)</li> </ul>
Connecticut: Department of Correction (DOC)	<ul style="list-style-type: none"> <li>• Treatment &amp; Program Assessment Instrument (TPAI), pre-release</li> <li>• WRNA</li> <li>• Level of Service Inventory–Revised (LSI-R), post-release</li> <li>• Addiction Severity Index (ASI) and Adult Substance Use Survey (ASUS)</li> </ul>
Florida: Palm Beach County	<ul style="list-style-type: none"> <li>• Correctional Integrated Needs Assessment System (CINAS)</li> <li>• LSI-R</li> </ul>
Massachusetts: Boston	<ul style="list-style-type: none"> <li>• LSI-R: Screening Version</li> <li>• ASUS</li> <li>• MH Evaluation Tools assessment (developed for the Suffolk County House of Corrections by Prison Health Services)</li> <li>• Ohio Risk Assessment System</li> </ul>
Minnesota: Department of Corrections	<ul style="list-style-type: none"> <li>• Minnesota Screening Tool Assessing Recidivism Risk, an internally validated and normed screening instrument developed by MN DOC to determine the risk level of individuals at intake*</li> <li>• LS-CMI</li> </ul>
New Jersey: Hudson County	<ul style="list-style-type: none"> <li>• Correctional Offender Management Profiling for Alternative Sanctioning (COMPAS)</li> </ul>
Pennsylvania: Beaver County	<ul style="list-style-type: none"> <li>• Global Appraisal of Individual Need Short Screener (GAIN SS)</li> <li>• In-depth clinical diagnostic assessment for co-occurring disorders (CODs) evaluation</li> <li>• Wisconsin Risk and Needs Scales (often referred to as the Wisconsin risk assessment)</li> </ul>

All sites used an objective tool to make decisions about whom to serve and the types of services to provide. Five of the seven AORDP sites had criminogenic risk and needs assessment practices in place before receiving SCA funding, suggesting a commitment to and foundation for reentry planning. Approaches to risk and needs screening practices varied across the sites. Many sites used widely recognized, validated tools, such as the Level of Service Inventory-Revised, although some sites developed and validated local tools specific to their target populations. Jail-based reentry sites, for example, were more likely to use “name brand” tools, whereas prison-based reentry sites used system-specific tools, such as the department of correction’s Treatment and Programs Assessment Inventory screener in Connecticut and the Minnesota Screening Tool Assessing Recidivism Risk. Prison-based AORDPs were more likely to use a two-stage process featuring risk screening followed by in-depth assessment, whereas only one of the jail-based AORDP sites (Beaver County, PA) used a risk screener. Additionally, several AORDP sites incorporated specialized assessments into their standard assessment procedures to address issues like substance abuse or trauma.

Stakeholder support for the use of risk and needs assessment practices was strong. Respondents reported high levels of support for risk and needs assessment practices in the web-based survey, including reassessment, with upward of 80% of stakeholders indicating that risk and needs assessment was a priority for their respective agency, and 90% responding that

it should be a priority for their agency. One area of weakness was the lack of routine reassessments to update or modify service plans or track client progress, despite high level of support for this process.

For additional details about the use of screening and assessment in AORDP sites please refer to Rossman and colleagues (2016b).

### 3.3.2 Case Management

Case management is another EBP considered fundamental to successful reentry. Case management under the SCA model refers to the collaborative processes of assessing risk and need, planning service delivery based on risk assessment, facilitating partners in care coordination at pre- and post-release, and advocacy for services to meet an individual's comprehensive needs to prevent recidivism (Carey, 2010). As shown in **Exhibit 3-3**, case management figured prominently in all seven grantees' reentry strategy.

The structure and level of case management services provided to AORDP participants differed by site. Three sites (California, Pennsylvania, and Massachusetts) used the same case managers to work with clients before and after release, although the intensity of those services varied. Minnesota's AORDP participants worked with a designated reentry coordinator pre-release and then received coordinated services post-release through a one-stop hub. The remaining three sites used a team-based case management model that featured community-based case managers supplying "light touch" pre-release case management (i.e., coordinating with various institutional staff and conducting in-reach to establish rapport and initiate reentry planning) that intensified upon the participant's release. Risk and needs assessment figured prominently in the sites and informed the development of reentry/transition case plans and service delivery across the seven projects. Additionally, several sites worked to integrate clients as active partners in the case planning process, but few used case conferencing (i.e., more formal, planned contact involving multiple team members to advance holistic planning) to do so.

Overall, the findings indicate that all AORDP sites used evidence-based case management processes to serve and assist individuals returning to the community. Generally, grantees used the principles of effective case management conducive to program success. Although some form of case management existed in most sites before SCA funding, stakeholders in at least one AORDP site credited the grant with the opportunity to implement pre-release case management and transition planning—critical components previously missing from their local reentry strategy. For a more detailed description of case management approaches, please see Rossman and colleagues (2016a).

### **RESTORE Case Management**

Community case managers (CCMs) in Florida, assigned by geographic location, conducted in-reach to work with participants at least 3 months' pre-release. Participants worked on goals before release, so they knew what to expect at reentry. Stakeholders reported that pre-release engagement with CCMs led to higher levels of comfort and trust among clients; they knew they would have support and advocacy prior to release.

RESTORE case managers' approach was nontraditional. Case managers told clients, "This is not a program, rather a partnership." They built rapport with clients by talking to them during the initial visit, instead of interviewing them and taking notes. Additionally, the case managers developed better insight into the clients' needs, because they were embedded in the client's community: CCMs went to the client's home, transported clients to various appointments, and offered other types of support. This level of engagement also increased CCM's insight into clients' progress and needs. They could make referrals to address individual's risk level for recidivism and refer clients to additional services to support reentry, including mental health and substance abuse treatment, vocational training, family counseling, stable housing, and medical care.

**Exhibit 3-3. Principles of Effective Case Management in the AORDP Sites**

Site	Dynamic, Assessment-Driven Case Planning	Stability Factors Addressed	Clients and/or Family Engaged	Team-Based Approach	Case Plan Serves as Behavioral Contract	Supported by Automation
<b>California: Solano County</b>	<ul style="list-style-type: none"> <li>✓ YES, Women’s Risk and Needs Assessment,</li> <li>✓ Level of Service Inventory-Revised (LSI-R) inform case plan</li> <li>✓ Single case plan used pre- &amp; post-release</li> <li>✓ Case management begins pre-release, continues in community w/ same case managers (CMs)</li> </ul>	YES, multiple needs addressed	YES, weekly progress meetings with clients	YES, but mostly ad hoc; occurs mostly with Women’s Reentry Achievement Program CMs, housing, and drug treatment partners	YES, case plans serve as roadmap	NO, but efforts to automate case plans were planned
<b>Connecticut: Department of Correction</b>	<ul style="list-style-type: none"> <li>✓ YES, Offender Accountability Plans based on Treatment and Program Assessment Inventory and other assessments</li> <li>✓ Reentry Workbook Program (RWP) documents reentry goals</li> <li>✓ Intensive case management post-release</li> </ul>	YES, multiple needs addressed	YES, regular case review with client; effort is made to engage family post-release	YES, regular post-release dual supervision and reporting between New Haven Reentry Initiative probation officer (PO), Easter Seals Goodwill Industries, CM, and client	<ul style="list-style-type: none"> <li>✓ YES, case plans serve as roadmap</li> <li>✓ Client signs service agreement</li> </ul>	<ul style="list-style-type: none"> <li>✓ YES, RWPs are shared electronically with POs pre-release</li> <li>✓ Post-release service plans, goals, referrals, and utilization tracked in the Efforts to Outcomes database</li> </ul>
<b>Florida: Palm Beach County</b>	<ul style="list-style-type: none"> <li>✓ YES, transition plan based on LSI-R, updated post-release</li> <li>✓ Pre-release counselors offer initial case management; in-reach and post-release case management by Regional and State Transitional Ex-Offender Reentry community CMs</li> </ul>	YES, multiple needs addressed	<ul style="list-style-type: none"> <li>✓ YES, regular client-CM meetings pre-release</li> <li>✓ Regular post-release meetings guided by LSI-R</li> <li>✓ Effort is made to engage family</li> </ul>	YES, although client-CM meetings generally do not involve partners, the overall approach to CM is coordinated with and includes input from partners	YES, case plans serve as roadmap	YES, post-release service plans, goals, referrals, and utilization recorded in the project database
<b>Massachusetts: Boston</b>	<ul style="list-style-type: none"> <li>✓ YES, LSI-R informs individual service plan</li> <li>✓ Case management begins pre-release, continues in community w/ same BRI CMs</li> </ul>	YES, multiple needs addressed	<ul style="list-style-type: none"> <li>✓ YES, regular client-CM meetings pre- and post-release</li> <li>✓ CMs work to engage family</li> </ul>	NO, client-CM meetings generally do not involve partners	YES, case plans serve as roadmap	YES, BRI CMs record client progress in a central database

(continued)

**Exhibit 3-3. Principles of Effective Case Management in the AORDP Sites (continued)**

Site	Dynamic, Assessment-Driven Case Planning	Stability Factors Addressed	Clients and/or Family Engaged	Team-Based Approach	Case Plan Serves as Behavioral Contract	Supported by Automation
<b>Minnesota: Department of Corrections</b>	<ul style="list-style-type: none"> <li>✓ YES, Specific, Measurable, Attainable, Realistic, Timely goals and transition accountability plan informed by LSI-R and CM results</li> <li>✓ Reentry coordinator offers case management pre-release; Hub CM provides post-release case management</li> </ul>	YES, multiple needs addressed	<ul style="list-style-type: none"> <li>✓ YES, regular client-CM contact</li> <li>✓ Clients participate in reentry team case conference shortly after release and as needed</li> </ul>	<ul style="list-style-type: none"> <li>✓ YES, multi-partner reentry team meeting held with client within 48–72 hours of release and as issues arise</li> <li>✓ Twice monthly multi-partner core team meetings review the progress of all reentry cases</li> </ul>	YES, case plans serve as roadmap	YES, service histories recorded in Client Track, a database developed for the project
<b>New Jersey: Hudson County</b>	<ul style="list-style-type: none"> <li>✓ YES, pre-release services and transition plans informed by Correctional Offender Management Profiling for Alternative Sentencing, other assessments</li> <li>✓ Social rehabilitation therapists offer pre-release case management, community service workers provide post-release case mgmt.</li> </ul>	YES, multiple needs addressed	<ul style="list-style-type: none"> <li>✓ YES, regular client-CM meetings pre- and post-release</li> <li>✓ CMs work to engage family in transition planning</li> </ul>	NO, client-CM meetings generally do not involve partners	YES, case plans serve as roadmap	YES, client assessment and service data are recorded in a case mgmt. database used for discharge planning and performance measurement
<b>Pennsylvania: Beaver County</b>	<ul style="list-style-type: none"> <li>✓ YES, transition plans informed by co-occurring disorder assessment</li> <li>✓ Reentry liaisons serve as pre-release case management</li> </ul>	YES, but strong mental health and vocational focus	YES, regular client-reentry liaison meetings pre-release; behavioral health case management post-release	NO, pre-release client-CM meetings generally do not involve multiple partners; post-release meetings may depend on level of case management	YES, case plans serve as roadmap	NO, post-jail service use is tracked in electronic health records database; no automated database for case plans or assessments

### 3.3.3 Other Evidence-Based Practices

Research (Bonta, Rugge, Scott, Bourgon, & Yessine, 2008; Chadwick et al., 2015; Latessa, Smith, Schweitzer, & Labrecque, 2013; Schweitzer Smith & Knopp, 2014) indicates that criminal justice and social service professionals—probation officers, case managers, and clinicians—can play a key role in facilitating and reinforcing clients’ prosocial behavior change when they use EBPs that align with the RNR principle. These professionals also hone their client-focused interactions to apply (1) effective use of authority; (2) prosocial modeling; (3) effective problem-solving strategies; (4) appropriate use of community resources; and (5) interpersonal skills, such as active listening, offering appropriate feedback, reinforcing clients’ positive behaviors, and challenging “pro-criminal” thinking (Chadwick et al., 2015).

Motivational Interviewing (MI) and motivational enhancements, such as rewards and responses, address the “responsivity” component of the RNR principle by helping to establish a collaborative relationship, address emotional and psychological barriers to treatment, and reinforce prosocial behavior while admonishing antisocial behaviors (Schweitzer Smith & Knopp, 2014). In turn, cognitive behavioral interventions (CBIs) and cognitive-based therapies challenge clients’ criminogenic decision-making and teach critical problem-solving skills and prosocial coping skills. At the same time, mentoring and peer-based support services can further reinforce a client’s change goals by affording opportunities for the client to engage with and observe prosocial role models, including individuals with lived experience.

The process evaluation explored the sites’ use of such techniques as part of their respective reentry strategies. Overall, Motivational Interviewing was used across the seven sites. Program and partner staff in all seven sites reported receiving some training on MI and most grantees had at least some program staff or partners who reported using MI in their regular interactions with participants. However, there was significant variation among the grantees regarding (1) the extent to which MI training had been systematically introduced; (2) the amount of training offered; (3) whether MI training was provided by a credentialed or certified trainer; and (4) the quality assurance procedures that were in place to support the appropriate use of MI.

In contrast to the reported prevalence of MI in the sites, few AORDP grantees reported having formal frameworks to guide staff-client interaction or the use of sanctions and incentives. Three grantees marked program completion either with recognition ceremonies or certificates of completion, but few of the sites had a formal incentive structure. Stakeholders indicated that they would like to offer incentives, such as gas or grocery gift cards, but were not able to because of perceived strictures on providing incentives. Similarly, most of the grantees had not developed specific sanctioning guidelines for the AORDP programs. Many of the service-providing staff indicated a reluctance to address nonparticipation or other noncompliance with punitive measures, although violations of supervision requirements are likely to be met with criminal justice sanctions.

Cognitive-based interventions were not a core component of many sites’ reentry AORDP programming, although many sites relied on manualized, evidence-based curricula in some

form. Four grantees offered a cognitive behavioral change program, either pre- or post-release or both, and worked to deliver the full curriculum; the remaining three grantees created their own CBI approach, based on manualized materials or by combining manualized materials with other resources. Across the sites that provided their own program, implementation varied considerably in response to real-world demands, including the size of cohort enrollment or constraints on space or time. One AORDP grantee operated a highly structured, jail-based therapeutic community treatment program—a cornerstone of that site’s EBP.

Four sites provided peer support and mentoring to their AORDP clients; only one site, however, incorporated formerly incarcerated individuals in a formal advocacy role. These individuals also functioned as a core members of the site case-management model, working collaboratively with community-based case managers and the program’s designated community supervision officer to engage and assist clients.

### 3.4 Lessons Learned for Working With Clients

Information gathered from site visits during the process evaluation was analyzed to identify common factors underlying success, as well as lessons learned to help replication. Themes clustered around the domains of pre-release engagement and continuity, collaboration and communication, training, staffing, case management, tailored approaches, and addressing ancillary needs. For more detailed information about lessons learned see Lindquist, Buck Willison, Hardison Walters, and Lattimore (2016).

*In-Reach and Post-Release Support.* Perhaps the most universal lesson learned among the AORDP grantees was the critical importance of pre-release work. Grantees reported that the timing of their work with clients was crucial and that assessment, programming, and contact with community-based service providers (and community supervision officers) needed to start as early in clients’ sentences as possible.

Some stakeholders noted that clients can focus on addressing needs while incarcerated easier than they can after release, where they may be more apprehensive and have many competing demands on their time. Therefore, maximizing the extent of pre-release programming (while having community-based services lined up to begin immediately after release) was recommended. In-reach must be followed by immediate post-release support, because it promoted continuity and led to higher levels of comfort and trust between participants and service providers.

**Improvements.** At the partnership level, stakeholders in many sites reported that the size of their partnership network had increased, allowing for a more comprehensive approach to addressing participants’ needs. They also improved collaboration and had more clarity on roles. Systemically, some noted that attitudes and policies on the part of correctional agencies had improved, staff were better trained, and community partners had increased their capacity for working with ex-offenders. Other improvements attributed to the SCA programs included an increased focus on the specific target population, the provision of a sample model for reentry that could be used statewide, additional programming in the correctional facility, and more connections for post-release services.

*Collaboration and Communication.* Grantees consistently identified strong collaboration and open, regular communication among partners as critical factors in successful program implementation. Stakeholders highlighted the importance of strong leadership, the inclusion of varied stakeholders relevant to client needs, routine partner meetings, equal treatment of all partners, and openness to one another's ideas and approaches. One stakeholder from the corrections system noted that corrections cannot survive without support from the other branches of the criminal justice system and other stakeholders; and that treatment is more successful when corrections, probation, and service providers are all involved. Stakeholders in nearly all sites discussed the need for smooth coordination to ensure that efforts are combined and services are unified. In one site, stakeholders spoke of the importance of coordination and noted that reentry programming need not take a large investment of new capital, but instead can be accomplished using existing resources, if coordination is handled effectively.

Good communication across partners was vital. Both formal and informal information-sharing about client needs and progress appeared to be key to successful collaborations and program implementation. Communication also sent a strong message to participants that providers were aware of their behavior and that participants would be held accountable. For example, in New Jersey, housing and other service providers maintained daily telephone contact with one another about participant status (e.g., any housing infractions, positive drug tests, individual service-specific progress, and client-driven requests for assistance). Providers stated that this level of communication enabled them to work effectively as a unified team in monitoring and supporting participants.

*Training.* Stakeholders emphasized the value of training corrections staff on reentry and cross-training non-corrections staff on corrections-related issues. For example, in Connecticut, the lead community-based agency secured training for its staff on reentry issues and developed policies and procedures to guide staff in working with a reentry population. The Pennsylvania site offered an array of staff cross-trainings for its partner agencies: motivational interviewing, co-occurring disorders, sex offender training, and reentry job training. Similarly, the California grantee cross-trained partner agencies on its core curriculum, Helping Women Recover, during early implementation of the program.

*Staffing.* Staffing considerations were important for implementation success. Hiring experienced, seasoned staff who understood the corrections context was perceived to be instrumental to success. Strong interpersonal skills also were identified as necessary for effectively working with clients, including coping skills, passion, desire to help people, and ability to demonstrate respect. Recommended strategies for preventing turnover included hiring people with a passion for this work, ensuring that boundaries with clients were respected, managing staff stress by addressing secondary trauma, and ensuring fair salaries. Stakeholders in several sites noted the challenge of hiring for grant-funded positions, because of the uncertainty about job security near the grant's end. Other important staffing strategies included avoiding high caseloads, providing extensive training early in the implementation process, having program staff co-located (to facilitate continuous communication and collaboration), and using a strong referral process to identify reliable staff.

*Case Management.* When reflecting on factors that were most instrumental in client success, stakeholders in nearly every site recognized the importance of the case management component. Given the overwhelming level of need among reentry populations and difficulty navigating existing service delivery systems, having a one-on-one relationship with a staff member responsible for assessing needs, developing a service plan, making referrals to services, and following up to ensure that clients were receiving needed services was perceived to be critical for client success.

Rapport between clients and case managers was also thought to increase the likelihood that participants would remain involved with the program even when they had completed it, which was perceived to be a critical factor in success. Stakeholders consistently emphasized the ability of case managers to develop close, trusting relationships with their clients as one of the main reasons for the effectiveness of the case management component. Hiring case managers who were culturally competent and could relate to their clients—because they had personal experience with incarceration or addiction, were of the same ethnicities, and lived in the same neighborhoods—was cited as critical to building strong relationships and, indeed, brought an element of credibility with clients, thereby helping improve client buy-in of the overall program.

*Tailored Service Delivery Approach.* Stakeholders reported the importance of tailoring service delivery to individual participant characteristics based on objective assessments of client need. Stakeholders recommended conducting needs assessments as early in the process as possible, so that service provision could begin during incarceration. The accuracy of assessments was also emphasized as an important factor in client success. Stakeholders noted that getting an accurate assessment and not relying only on the score were important, because two clients could have the same score on an assessment tool but have entirely different needs. Consistent with EBPs and the SCA logic model, stakeholders almost universally emphasized that every client's needs are different and that customizing services based on this consideration was much more effective than giving all participants every service offered by the program. Stakeholders noted that some individuals need a longer time in the program, group-based services should be tailored to fit the population characteristics (e.g., race, age) and needs (e.g., trauma, stress management), and administrators should consider program location to increase participants' access to community-based services.

*Meeting Key Service Needs: Housing, Employment, and Behavioral Health.* Among the myriad needs of reentering individuals, the service areas that typically received the most attention from reentry programs were housing, employment, substance abuse treatment, and mental health care. Across the AORDP sites, stakeholders felt that addressing these needs was critical for clients to be successful after returning to the community, and the grantees that made progress in meeting these needs counted this among their major achievements.

*Housing.* In almost every site, grantees felt that housing options for their clients were extremely limited due to the high cost of housing, limited housing inventory, and restrictions on individuals with a history of criminal convictions. Simply allocating money to cover housing costs did not appear to be sufficient: Stakeholders believed that policy changes were needed.

Building personal connections with landlords and housing partners was emphasized as an effective—though time-consuming—strategy. Developing partnerships with nonprofit organizations that serve the homeless was another strategy that was helpful in some sites.

**Employment.** Finding a job immediately after release is one of the biggest priorities for many reentering individuals. In nearly every site, stakeholders noted that job opportunities were scarce and many clients lacked formal work experience or skills. The AORDP programs used several strategies to attempt to overcome these challenges. Several programs connected clients with vocational training and job readiness programming. Many grantees partnered with vocational centers or employment specialists to help place clients in jobs. Some grantees exerted substantial effort to identify employers and get businesses on-board. Such “job developer” positions were perceived to be very effective at getting individual companies to hire formerly incarcerated individuals. Some grantees focused on continued training opportunities, so clients could advance to better paying jobs. The New Jersey site partnered with Columbia University to determine the level of training that was most promising in reducing recidivism and creating a model where individuals can be self-sustaining, while concurrently getting more education and training for future career advancement.

**Addressing Behavioral Health Issues.** Given the high prevalence of mental health and substance abuse issues among justice-involved populations, providing behavioral health treatment to reentering individuals was a key priority for several sites. One grantee offered a therapeutic community within the correction institution for individuals with a chemical dependency. Therapeutic communities were perceived to be beneficial if followed by intensive outpatient treatment; however, many stakeholders reported a severe lack of community-based outpatient and residential services and long waits to get into the few available treatment centers. To help address such gaps, stakeholders recommended strong partnerships with funded agencies whose sole focus was mental health and chemical dependency treatment. Stakeholders also highlighted the important role of the reentry coordinator in helping clients navigate the behavioral health system. Stakeholders also noted that case managers could benefit from more training on behavioral health including trauma, which was perceived to be very prevalent among the formerly incarcerated.

### 3.5 Prospects for Sustainability

Prospects for sustaining at least some portions of the AORDP programs were promising in most sites, with the AORDP model developed in several sites described as a model for expansion or replication. **Exhibit 3-4** presents components of the programs that were likely to be sustained as the grants were winding down. The sites used various strategies for sustainability including pursuing additional state, federal, and foundation funding; leveraging partnerships to facilitate sustainability; and maximizing Medicaid reimbursement for services. For jail-based sites, additional sustainability strategies included pursuing county funding and incorporating programming into the jail’s operating budget.

**Exhibit 3-4. Prospects for Sustainability in AORDP Sites**

Site	Prospects for Sustainability
California: Solano County	<ul style="list-style-type: none"> <li>• Except for peer mentorship, most program components were expected to continue; the housing provider was not expected to receive funding, and fewer county cars were expected to be available for transport.</li> <li>• Continued services were anticipated to be largely funded from the jail’s budget, based on strong support from the sheriff and county administrator.</li> <li>• The focus on women was expected to continue, but some eligibility criteria may be broadened. An additional grant will serve women with persistent mental illness.</li> </ul>
Connecticut: Department of Correction (DOC)	<ul style="list-style-type: none"> <li>• The program was expected to continue, and a few key components (furloughs, community advocates, dual supervision) were expected to be replicated among partner organizations.</li> <li>• Continued services were expected to be funded by 3 sources: (1) an appropriation from the state (to the DOC) to support continuation for 2 years, (2) a new federal SCA grant awarded to the City of New Haven to fund specific pieces and expand the community-based organizations providing reintegration services, and (3) a Department of Labor grant to establish a pre-release job center within the New Haven Correctional Center.</li> </ul>
Florida: Palm Beach County	<ul style="list-style-type: none"> <li>• Stakeholders hoped to continue the program with additional funding.</li> <li>• Some money was received from both the county and the state in FY 2016 to sustain the program, but the available funding for post-release service dollars was anticipated to be much lower than the federal SCA funding.</li> <li>• Stakeholders anticipated a greater emphasis on employment.</li> </ul>
Massachusetts: Boston	<ul style="list-style-type: none"> <li>• Although stakeholders expressed a strong commitment to continuation of the program, whether the program will continue is unclear.</li> <li>• No specific funding sources have been identified.</li> </ul>
Minnesota: Department of Corrections	<ul style="list-style-type: none"> <li>• The DOC did not expect to sustain most program components. The reentry unit within the DOC was anticipated to have some staff working with the target population (release violators), but these staff were not expected to provide intensive transition coordination.</li> <li>• The services that the community-based providers offered were expected to continue to be available to the target population.</li> </ul>
New Jersey: Hudson County	<ul style="list-style-type: none"> <li>• The program was expected to continue in Hudson County and be replicated in other counties.</li> <li>• Continued funding from the jail’s operational budget was secured (a dedicated reentry budget was allocated), and the replication was anticipated to be funded by a state appropriation.</li> <li>• An emphasis on housing and case management was anticipated.</li> </ul>
Pennsylvania: Beaver County	<ul style="list-style-type: none"> <li>• Several program components were expected to be sustained through other sources of funding</li> <li>• The jail-based behavioral health assessment and treatment was expected to be sustained through a continuation award and state base dollars, the medical support and medications were expected to be sustained from jail operating budget, and community treatment (including reentry case management, peer support, and vocational services) was expected to be sustained through Medicaid and state base dollars.</li> </ul>

Many elements of the AORDP grants that are sustainable reflect a change in the organizational culture and systems that interact to support formerly incarcerated individuals and their families. These systemic changes influenced by the SCA grants are discussed in the following sections.

### 3.6 Systems-Level Outcomes

Grantees reported numerous systems-level improvements that occurred because of the SCA mandates to create comprehensive and coordinated service networks to support individuals at reentry and use EBPs. Analysis of the stakeholder responses revealed numerous areas where the AORDP grants have had a lasting impact. For more detailed information, please see Lindquist and colleagues (2017).

*Increased Support for Reentry Work and Reentry Populations.* Stakeholders in all seven sites reported that increased recognition of their reentry work, and broader support for reentry in general, resulted from their AORDP work. Many sites stated that increased attention to the reentry population was an important outcome. Grantees cited not only increased word of mouth about their programs (from clients as well as criminal justice stakeholders), but also more formal recognition and support for their work in their communities. This increased recognition led to concrete successes, such as enabling Florida to work with local housing authorities to discuss policies that exclude individuals with felonies. A tangible change in New Jersey that reflects a cultural shift in the importance of reentry is the county administrator’s efforts to add the phrase “and Rehabilitation” to the official departmental title of the Hudson County Department of Corrections. The increased exposure also led to judges in California referring individuals to the AORDP program.

*AORDP Program Serving as a Model for Expansion and Replication.* In several sites, stakeholders noted that the AORDP grant provided a foundation for reentry work that now serves as a model for how other grants and programs are being developed. For example, the city of New Haven plans to replicate three of the AORDP program components, with the city’s reentry unit serving as a clearinghouse to coordinate reentry services across three community-based integration centers. Additionally, in Minnesota, the AORDP grant informed a state initiative around integrative case management, and the DOC expanded additional release coordinators in two facilities.

*Improved Collaboration, Communication, and Information Sharing.* All grantees reported that the AORDP led to increased coordination between key stakeholders including community supervision agencies, corrections facilities, and service providers. Service networks also grew as partnerships expanded to local housing authorities, employers, judges and law enforcement agencies, and mental health and substance abuse treatment providers. Stakeholders reported that participating organizations learned from each other and improved their skill sets, allowing services to be maximized to better serve clients. Organizations also improved information sharing around risk assessments and reentry plans, and the individuals’ needs for wrap-around services. More seamless interactions between pre- and post-release providers reportedly helped clients stabilize and move forward immediately after release.

*Improved Reentry Culture within Corrections.* The new partnerships and processes seemed to improve the overall culture of reentry within corrections. Allowing community-based service providers access to work with clients while incarcerated was considered one of the program’s most significant achievements. In some sites, counselors could go into previously restricted

areas in jails and prisons; as correctional facilities began to see the value of pre-release services, they became increasingly supportive and flexible with in-reach activities. Likewise, as community-providers became more proficient in corrections culture, mutual respect increased. The positive experiences appeared to have shifted correctional culture at some sites.

*Expanded Use of Evidence-Based Practices.* The use of EBPs has been a major emphasis of grantees in the provision of their local training and technical assistance. Stakeholders in several sites indicated that an expanded use of EBPs within their agency (or system-wide) was one of the legacies of the AORDP programs. In particular, the risk and needs assessment process was perceived to have improved and expanded in several sites because of practices implemented under the AORDP programs. These sites indicated that using better tools and sharing assessment information have become standard practice in their systems. In addition to assessment practices, one site indicated that the agency now places more emphasis on case planning. Additional EBPs that have become more widespread include motivational interviewing and trauma-informed services.

*Increased Capacity of Staff and Community Partners.* In several sites, grantees highlighted the success of the training opportunities offered to staff as part of the AORDP programs, noting that these efforts increased staff knowledge and capacity about reentry best practices and service delivery. In sites where such efforts involved staff across partner agencies, such as Beaver County, PA, stakeholders noted the lasting benefits of such trainings. For example, in this site, jail employees were given mental health training and are now certified as Certified Co-Occurring Disorders Professionals.

In addition to expanding the skill set of agency staff, stakeholders in several sites highlighted the increased capacity of community partners—particularly those that had not previously worked with reentry populations—as one of the key successes of the AORDP programs. The partners reportedly increased their experience, knowledge, and skill in working with criminal justice populations. For some community partners, being an AORDP partner not only provided the opportunity to reach a new population and collaborate with new partners, but also to build additional capacity and expertise.

In sum, participation in the AORDP programs increased the visibility of community partners within the local criminal justice system and allowed them to build relationships with corrections and other criminal justice partners that will enable them to pursue new opportunities in reentry work. According to stakeholders, services already existed but were disjointed, so clients “bounced around” without getting unified services. The collaboration and increased service provider network has allowed clients to get the services they need.

*Expansion of Service Provider Networks.* A related legacy of the AORDP programs is an expansion of resource networks among the partnering organizations. In most sites, grantees reported an increased awareness of the resources available for reentering individuals and stronger connections to link clients to these services. Grantees noted that service gaps in mental health services had been addressed or narrowed as a result of the AORDP programs, including more access to mental health counseling, provision of better services for those with

co-occurring disorders, and more partnerships with long-term care at mental health facilities. Other addressed gaps included mentoring, better connections with training programs, and working with partners who identified more employment opportunities.

*Increased Accountability and Standardization.* Finally, stakeholders in several sites identified greater accountability and standardization in the way their agencies do business as a lasting benefit of their AORDP funding. The sites credited grant requirements with forcing their agencies to use EBPs and making everyone accountable to policies and procedures that were tracked over time. One respondent noted that the monitoring of federally-funded contracts provided a higher level of accountability than state grants.

Increased standardization of procedures was related to the sense of greater accountability. Stakeholders noted that developing protocols and standard operating procedures allowed practices to be “systematized” as opposed to every situation being ad hoc. Standardized procedures allow all partners to understand what is to be done, how, and when and, when formalized in a written document, facilitates continuity despite changes in staff and leadership.

### 3.7 Chapter Summary

Despite unexpected challenges, all AORDP sites developed a comprehensive array of in-reach and post-release services to meet the complex needs of individuals being released from prison or jail. Grantees reported that the use of EBPs strengthened their programming, especially case management and risk-based assessment.

Likewise, case managers that sought to build rapport with clients, particularly through consistent contact pre- and post-release, were more likely to report that clients remained involved and accountable over time. Stakeholders also perceived risk-based assessment as an important feature that maximized resources by guiding reentry planning to better address individual needs. Finally, the partnership networks developed by grantees were believed to have greatly enhanced the correctional system’s ability

#### Promising System-Level Outcomes

- Increased support for reentry work and reentry populations
- Model for expansion and replication
- Improved collaboration, communication and information sharing,
- Improved reentry culture within corrections
- Expanded use of EBPs
- Increased capacity of staff and community partners
- Expansion of service provider networks
- Increased accountability and standardization

to link formerly incarcerated individuals to critical services known to reduce recidivism, such as job readiness, vocational training, substance abuse and mental health treatment, and housing assistance. Numerous systemic changes appear to have resulted from SCA funding; many program components implemented by AORDP sites have been sustained, with some elements currently being replicated or used as models by other jurisdictions.



# Chapter 4. Findings From the Cost Analysis

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## 4.1 Overview

The primary objective of the AORDP cost analysis was to generate reliable and actionable information on the costs associated with implementing and operating each of the seven AORDP projects. This information can be used by policymakers and decision-makers in other communities interested in replicating any of the reentry approaches used by the sites. Therefore, this cost analysis qualitatively and quantitatively describes the type and amount of resources applied to program operations and how these resources were spent in each AORDP site. The cost analysis methodology, including the study's data sources, analytic approach, and limitations, was discussed in Chapter 2 and is not revisited here.

## 4.2 Second Chance Act Reentry Funding

Since 2009, the Bureau of Justice Assistance (BJA) has made more than 700 awards to grantees in 49 states to improve reentry outcomes; these awards represent an investment of approximately \$300 million (Bethea & Sultan, 2016) in reentry nationwide. Under the SCA, grantees must create strategic, sustainable plans to facilitate successful reentry; ensure collaboration among state and local criminal justice and social service systems (e.g., health, housing, child services, education, substance abuse and mental health treatment, victim services, and employment services); and collect data to measure performance outcomes related to recidivism and service provision. Importantly, grantees are funded to provide comprehensive, coordinated services—initiated before release and continuing into the community—with emphasis on the early community-based months when formerly incarcerated individuals are at highest risk to recidivate. Intended to proactively address the multiple challenges faced at reentry, service priorities include education and literacy, job placement, housing, and mental health and substance abuse treatment. Risk and needs assessments, transition case planning, case management, and family involvement were key requirements. The goals of the SCA projects are to measurably (1) increase reentry programming for formerly incarcerated individuals and their families; (2) reduce recidivism and criminal involvement among program participants by 50% over five years; (3) reduce violations among program participants; and (4) improve reintegration outcomes, including reducing substance abuse and increasing employment and housing stability.

### 4.3 Total Cost of Providing AORDP Reentry Services

According to BJA fiscal reports and site financial documents, the seven AORDP sites accessed a total of \$37.7 million<sup>18</sup> in federal and local resources to plan and implement their respective reentry programs. Federal SCA funding<sup>19</sup> to the seven AORDP grantees totaled approximately \$20 million, an average award of approximately \$2.9 million per site; sites' total AORDP awards ranged from \$1.7 million (California) to \$4.3 million (Massachusetts). The seven AORDP grantees also contributed approximately \$22.2 million in local resources (required in-kind and cash match with addition occasional, site-specific contributions)<sup>20</sup> toward program implementation and operations with local resource allocations ranging from \$1.4 million (Minnesota) to \$5.7 million (New Jersey) for an average contribution of \$3.2 million per site. These figures were derived from review of sites' proposal budgets and verification of budgeted allocations to actual expenditures, and documentation of any divergence between the two. Calculations of total AORDP costs were based on sites' total AORDP grant awards plus any budgeted in-kind or cash match (as discussed in the next section) or other resources (used to serve AORDP clients) less any unobligated funds, travel dollars to attend required BJA SCA grantee meetings, and any costs not specific to actual program operations.<sup>21</sup> **Exhibit 4-1** displays these calculations by site.

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<sup>18</sup> Amounts are rounded to the nearest \$0.1 million.

<sup>19</sup> It is important to note that the seven AORDP evaluation sites may have received other SCA awards; this cost analysis counts only those SCA awards that directly supported the AORDP reentry programs described in this report.

<sup>20</sup> As noted previously, the FY2010 BJA solicitation to which the AORDP evaluation sites responded included a match requirement: "As required by the Second Chance Act, a grant made under this program may not cover more than 50 percent of the total costs of the project being funded. The applicant must identify the source of the 50 percent non-federal portion of the budget and how match funds will be used. The recipient of a grant must provide 25 percent of the total project cost in cash match, and 25 percent of the total project cost may be matched by making in-kind contributions of goods or services that are directly related to the purpose for which the grant was awarded. Federal funds received and cash match provided by the grantee shall be used to supplement, not supplant, non-federal funds that would otherwise be available for the activities funded under this section. The applicant must identify the source of the 25 percent non-federal cash portion of the budget and how both cash and in-kind match funds will be used. The Attorney General may waive the match requirement upon a determination of fiscal hardship..." (2010: 7; as accessed June 2012 - <http://www.ojjdp.gov/grants/solicitations/FY2010/Secondchancementoring.pdf>)

<sup>21</sup> More detailed information on costs exclusions is provided in the site-specific cost profiles in Appendix E. Generally, however, costs for travel to SCA grantee conferences, and research staff and security operations not directly linked to SCA program operations were excluded; the costs of the Overcoming the Odds (OTO) program in Massachusetts were also excluded.

**Exhibit 4-1. Total Site AORDP Resources by Source**

	Total SCA Awards	Local Resources Designated	Total Resources Applied to AORDP (less exclusions)
California	\$1,683,000	\$1,731,000	\$2,912,000
Connecticut	\$2,250,000	\$1,818,000	\$3,738,000
Florida	\$3,000,000	\$3,708,000	\$4,774,000
Massachusetts	\$4,257,000	\$4,514,000	\$7,529,000
Minnesota	\$2,131,000	\$1,364,000	\$2,999,000
New Jersey	\$3,480,000	\$5,720,000	\$9,137,000
Pennsylvania	\$3,200,000	\$3,384,000	\$6,571,000
Total	\$20,001,000	\$22,239,000	\$37,660,000

NOTE: Rounded to the nearest thousand

On average, grantees spent \$5.4 million on their AORDP programs. The Massachusetts and New Jersey sites were outliers spending approximately \$7.5 million and \$9.1 million respectively throughout the grant period. In contrast, the California and Minnesota sites spent the least on their programs: \$2.9 and \$3.0 million. Across the sites, federal SCA dollars accounted for approximately one-half (50%) of program operations while the other half came from match contributions.

#### 4.3.1 AORDP SCA Awards

SCA funding to the seven AORDP evaluation sites spanned a 5-year period with each site receiving an initial 12-month planning award of \$750,000 in Fiscal Year (FY) 2010, an implementation award in FY2011, and a supplemental award in FY2013 to facilitate service delivery through September 2015 (to ensure sites remained viable for the cross-site evaluation). Although the length of project start-up varied by site, all the AORDP sites began serving clients by mid-2011 and concluded enrollment by mid-2015; service provision, however, continued into September 2016 in more than half the sites (two sites concluded operations by December 2015 and one remained operational under the grant through September 2017). During this grant period, the seven AORDP grantees reported serving approximately 5,556 individuals.

Some of the AORDP sites' reentry strategies built on or expanded existing structures while others established totally new programs. The AORDP programs operated by the California, Florida, Minnesota, and Pennsylvania grantees represented new efforts, while the Connecticut, New Jersey, and Massachusetts AORDP grantees built on existing reentry structures. The fact that some AORDP programs were built on existing reentry service structures made it difficult to accurately calculate the costs of existing "business as usual" reentry from SCA-funded reentry services.

### 4.3.2 *In-Kind and Cash Match Requirements*

Stakeholders in the seven AORDP grantee sites leveraged local resources, primarily the contribution of staff, to satisfy the award's 50 percent match requirement. Examples of how the AORDP grantees met the match requirement include:

- California: Match requirement was met through in-kind contribution of staff time (staff analyst, Substance Abuse Administrator, Assistant/Deputy Director Health and Human Services); the cash match was satisfied through housing provider Mission Solano.
- Connecticut: In-kind match requirement was met through existing DOC mental health and employment services and project staff contributions (e.g., counselors, parole manager, co-project directors); the site received a total of \$100,000 from the Annie E. Casey Foundation (funds were used to cover participants' basic needs) that was applied to satisfy the AORDP grant's cash match.
- Florida: In-kind match requirement was met through staff (GED teachers).
- Massachusetts: Match requirement was met mostly through in-kind staff positions (Suffolk County House of Correction (jail) reentry coordinator, employment caseworkers, the Boston Police Department Project coordinator, and a Research Consultant).
- Minnesota: Match requirement was met primarily through in-kind staff contribution such as the researchers, reentry staff, and the project administrator; the cash match covered the Community Reentry Hub, Housing Services/Subsidies, and Transitional Employment, and some of the Reentry Coordinator and Project Analyst's time. Minnesota received a cash match waiver under its FY2011 grant.
- New Jersey: The Hudson County Correctional Center provided approximately \$1 million in in-kind resources in the form of three Social Rehabilitation Therapists who provided case management services.
- Pennsylvania: Match requirement was met through the in-kind contribution of jail-based health medical staff who provided behavioral health services, offset of Forensic Assertive Community Treatment/ACT services through county dollars.

## 4.4 **Funding Priorities of the AORDP Grantees**

As discussed in previous sections of this report, there was considerable variation among the seven AORDP projects with respect to target population, the mix of interventions offered, and the structure and duration of reentry services—all factors that influenced program spending priorities. For example, three programs served jail-based populations (pretrial in New Jersey and Pennsylvania and both pretrial and sentenced in California) while the other four grantees focused on individuals returning from state prison. Two sites (Connecticut and Florida) used

step-down facilities to bring returning citizens closer to home communities and community resources prior to release. Some programs frontloaded case management services, while others emphasized community and family supports. The Pennsylvania site focused on individuals with behavioral health needs including those with co-occurring disorders. Please refer again to Exhibit 3-1 for a summary of the grantees' program models.

To understand site-specific allocations and the extent to which programs differed in their respective cost structures, the sites' spending was disaggregated into the following ten categories:

- **Case Management:** General case management positions and associated costs, including forensic case management (e.g., case manager positions, case management systems).
- **Administrative:** Costs not directly related to service provision (e.g., project directors, office expenses, clerical assistance, copiers) but which supported project functioning including leadership-level personnel involved with the sites' required task force. This category is not synonymous with over-head or other administrative costs.
- **Employment/Vocational Supports:** Positions and programs that support client education or address client employment needs (e.g., job developers, employment coaches, GED registration, GED teachers).
- **Housing supports:** Including housing subsidies and transitional housing.
- **Mental and Behavioral Health:** Mental and behavioral services, including substance abuse treatment (e.g., clinical therapists, costs for contractors that provide mental and behavioral health services, substance abuse treatment).
- **Mentoring/Peer Supports:** Peer mentors and/peer support services (e.g., peer mentors, group mentoring).
- **Research/Evaluation:** Local research or evaluation partnerships that informed program development (e.g., lead evaluator, data analyst, research assistant) and refinements.
- **Risk Assessment:** Positions and materials related to conducting risk assessments (e.g., licensing fees, risk assessment training, positions solely responsible for administering risk assessments).
- **Basic Needs:** A variety of supports that covered general client needs (e.g., bus passes, clothing, driver's licenses).
- **Miscellaneous:** Any other costs not included in the above categories.<sup>22</sup>

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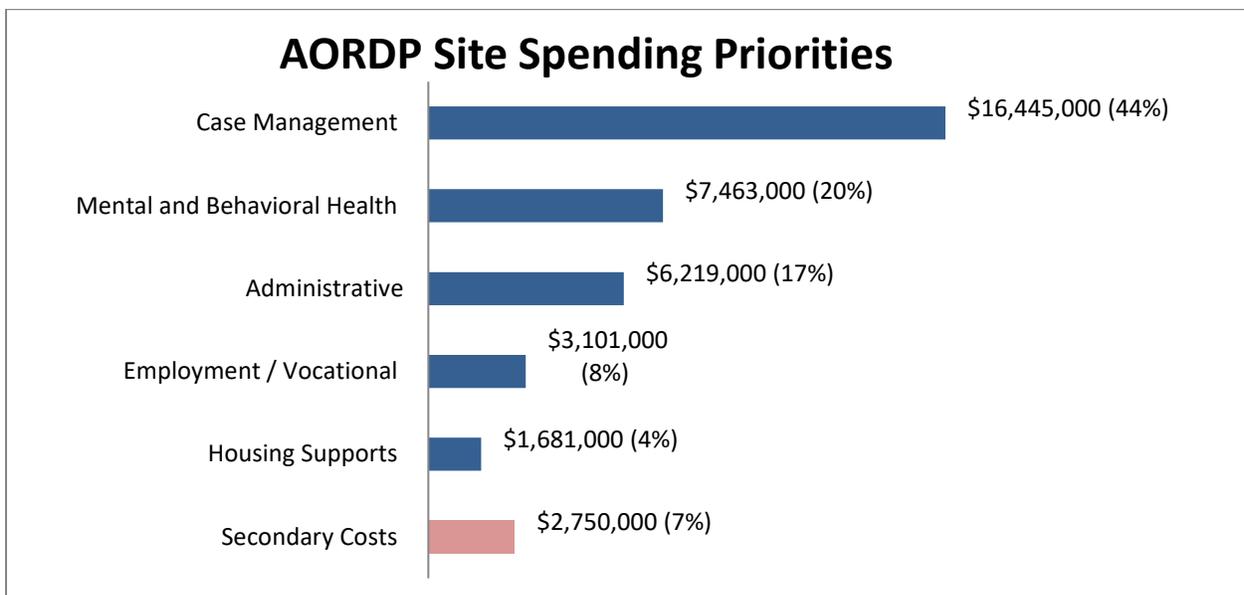
<sup>22</sup> As discussed in the site-specific program cost summary profiles (Appendix E), the "Miscellaneous" category captures program costs that could not be reliably attributed to a specific category due to a lack of detailed information.

Seven of the above categories—Case Management, Employment/Vocational Supports, Housing Supports, Mental and Behavioral Health, Mentoring/Peer Supports, Risk Assessment, and Basic Needs—represent core elements of the SCA model on which the AORDP projects were based, while two categories—Administrative and Research/Evaluation— represent key operational elements and budget allocations across sites. A tenth category “Miscellaneous” captures other site expenditures that do not fall into the first nine categories. To classify expenditures, project researchers coded site costs line-by-line, working off the definitions above and confirmed these allocations and actual expenditures with each site.

Classification of costs into these ten categories allowed researchers to identify substantive areas of larger and smaller program expenditures, and any variation between the sites. The five categories (administrative costs, case management services, employment/vocational supports, housing supports, and mental and behavioral health services) comprising the largest share of program expenditures across the seven sites are referred to as Primary Costs. Secondary Costs consist of the lesser utilized/resourced categories, namely basic needs, mentoring/peer supports, research and evaluation, risk assessment, and other miscellaneous expenditures.

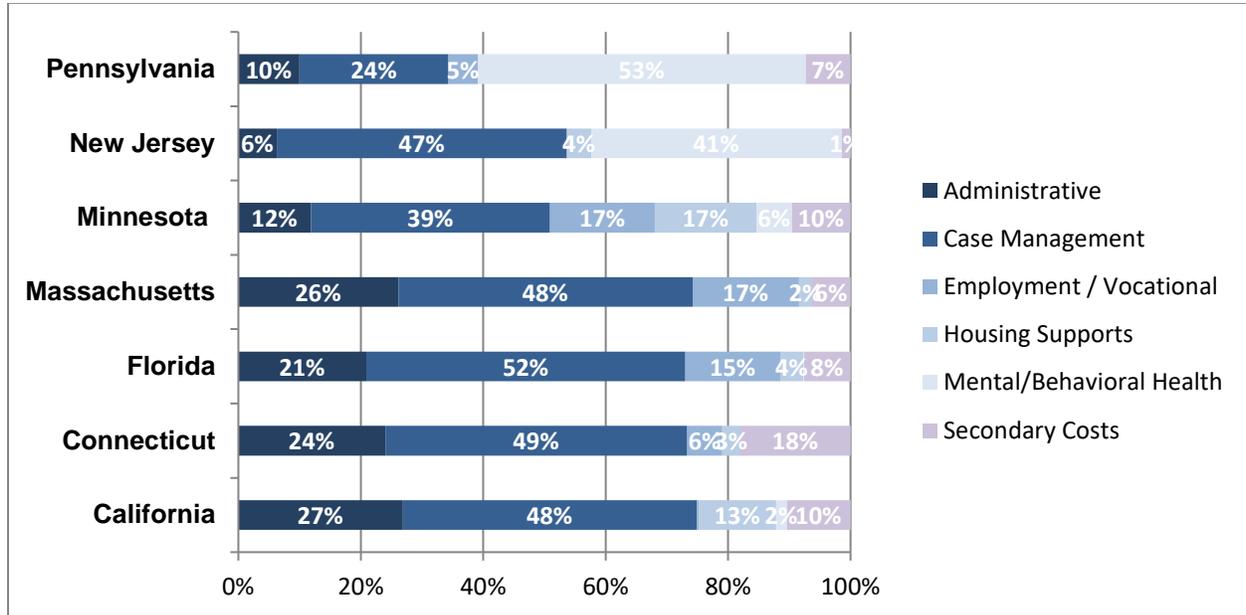
**Exhibit 4-2** depicts the sites’ overall spending priorities by Primary Costs. Primary Cost categories account for 93% of the sites’ program expenditures. Case Management comprises the sites’ main spending priority at approximately 41% of program expenditures; this is consistent with the emphasis of the Second Chance Act on holistic service provision that begins during incarceration and continues in the community after release for a period. This was followed by Administrative Costs (20%) and Mental and Behavioral Health services (20%). Housing Supports was the smallest spending category, comprising just 7% of the sites’ expenditures. Note: dollar amounts in the figures below are rounded to the nearest thousand.

**Exhibit 4-2. AORDP Spending Priorities (Total Cost: \$37,660,000)**



**Exhibit 4-3** shows the sites’ spending within the same six categories, allowing for quick comparison, and **Exhibit 4-4** presents detailed site-specific AORDP cost data.

**Exhibit 4-3. AORDP Site-Specific Spending Priorities**



Site spending patterns largely reflect the priorities of their sites’ respective program strategy. Below, we explore the similarities and differences in how the seven AORDP grantees allocated and expended resources to implement and operate their respective reentry programs.

**Appendix E** contains detailed site-specific program cost summary profiles for each of the seven AORDP grantees.

**Case Management (\$16,445,000).** The single largest expenditure across the seven grantees was case management services, with sites spending, on average, approximately 41% of their budgets on these services. Four sites (California, Connecticut, Florida, and New Jersey) allocated nearly 50% of AORDP resources to case management, spending between \$1.4 million and \$4.3 million; although the Florida site devoted the largest share of AORDP resources (52%) to this budget category, the Massachusetts and New Jersey sites spent the most on case management: \$3.6 million and \$4.3 million, respectively. The costs of case management in these two sites likely reflect the higher costs of services in these areas, although the Massachusetts’ costs may also reflect the prolonged duration of case management services available to its AORDP clients (case managers work with clients for 12-18 months pre-release followed by up to 12 months of case management support after release). Regardless, the grantees’ allocations to case management services accurately mirrors the prominent role case managers played in AORDP grantees’ reentry programs, working intensively with clients on reentry preparations and transition planning, and post-release on service linkages and supports. Case management was a core, if not the central, reentry service offered by these programs.

**Exhibit 4-4. AORDP Grantees' Total Resource Allocations (SCA Funds and In-Kind/Cash)**

	California Amount (Pct.)	Connecticut Amount (Pct.)	Florida Amount (Pct.)	Massachusetts Amount (Pct.)	Minnesota Amount (Pct.)	New Jersey Amount (Pct.)	Pennsylvania Amount (Pct.)	Total
<b>Primary Costs</b>	\$2,607,000 (90%)	\$3,066,000 (82%)	\$4,411,000 (92%)	\$7,054,000 (94%)	\$2,712,000 (90%)	\$9,003,000 (99%)	\$6,056,000 (92%)	\$34,909,000
Administrative	\$770,000 (27%)	\$897,000 (24%)	\$998,000(21%)	\$1,968,000 (26%)	\$356,000 (12%)	\$576,000 (6%)	\$653,000 (10%)	\$6,218,000
Case Management	\$1,406,000 (48%)	\$1,844,000 (49%)	\$2,488,000 (52%)	\$3,618,000 (48%)	\$1,171,000 (39%)	\$4,328,000 (47%)	\$1,590,000 (24%)	\$16,445,000
Employment/ Vocational Supports	\$11,000 (<1%)	\$215,000 (6%)	\$740,000 (15%)	\$1,309,000 (17%)	\$513,000 (17%)	\$0 (-%)	\$314,000 (5%)	\$3,101,000
Housing Supports	\$368,000 (13%)	\$110,000 (3%)	\$181,000 (4%)	\$160,000 (2%)	\$498,500 (17%)	\$364,000 (4%)	\$0 (-%)	\$1,681,000
Mental/Behavioral Health Services	\$52,000 (2%)	\$0 (-%)	\$4,000 (<1%)	\$0 (-%)	\$173,000 (6%)	\$3,736,000 (41%)	\$3,499,000 (53%)	\$7,463,000
<b>Secondary Costs</b>	\$304,000 (10%)	\$672,000 (18%)	\$363,000 (8%)	\$474,000 (6%)	\$287,000 (10%)	\$134,000 (1%)	\$515,000 (8%)	\$2,750,000
Basic Needs	\$28,000 (9%)	\$100,000 (15%)	\$8,000 (2%)	\$98,000 (21%)	\$23,100 (8%)	\$128,000 (96%)	\$0 (-%)	
Mentoring/Peer Supports	\$2,000 (1%)	\$0 (-%)	\$1,000 (<1%)	\$0 (-%)	\$208,000 (72%)	\$0 (-%)	\$165,000 (32%)	
Research/Eval.	\$236,000 (78%)	\$131,000 (20%)	\$0 (-%)	\$376,000 (79%)	\$56,000 (20%)	\$0 (-%)	\$197,000 (38%)	
Risk Assessment	\$37,000 (12%)	\$0 (-%)	\$18,000 (5%)	\$0 (-%)	\$0 (-%)	\$6,000 (4%)	\$146,000 (28%)	
Miscellaneous	\$0 (-%)	\$441,000 (66%)	\$337,000 (93%)	\$0 (-%)	\$0 (-%)	\$0 (-%)	\$8,000 (2%)	
<b>Total</b>	\$2,912,000	\$3,738,000	\$4,774,000	\$7,529,000	\$2,999,000	\$9,137,000	\$6,571,000	\$37,660,000

Within in this category, resources largely supported AORDP program case management staff (typically full-time case manager positions) who worked with clients pre- and post-release. It could also, however, have included other staff engaged in case management services such as the designated Parole Officer and Community Reentry Advocates in the Connecticut site. A portion of resources under this category covered materials or support services related to case management.

*Administrative Costs (\$6,219,000).* Expenditures in this category varied greatly across the seven AORDP grantees, ranging from 6% (New Jersey) to 27% (California) of site budgets. In general, funds in this category offset the salaries for senior level leaders and managers engaged in collaboration and planning activities, and project coordinators and partner staff charged with direct program implementation. The portion of staff time covered also ranged considerably by position type and across sites. Grant funds typically covered a full-time project coordinator, but much smaller percentages of other staff time. In the Connecticut site, for example, expenditures in this category covered 39% of a Parole Manager’s time (a position central to the program) but just 3% of Court Services Personnel, primarily to attend taskforce meetings.

*Employment/Vocational Supports (\$3,101,000).* Expenditures on employment/vocational services varied with respect to the amount spent but also the range of services supported. Six of the seven AORDP site spent resources on employment/vocational services for participants; these services comprised between 5% to 17% of the sites’ program expenditures with one site spending less than 1% of its program resources in this area. The New Jersey site did not allocate or reportedly spend resources specifically for employment services, although the site did assess participants’ vocational skills and leveraged community-based resources to assist participants with obtaining gainful employment.<sup>23</sup> The California site spent less than one percent of its budget (\$10,795) on the Roots of Success job readiness and training program, which focuses on linking participants to “green” jobs. In contrast, the Minnesota site spent \$513,171 on transitional employment services and Massachusetts spent approximately \$1.3 million. Minnesota’s employment/ vocational services suite consisted of workforce development, job club,<sup>24</sup> financial literacy training, and employment preparation, placement, and retention support offered through its Community Reentry Hub, and wage subsidies. Massachusetts’ employment services were provided by key partner Youth Options Unlimited (YOU) and consisted of transitional employment opportunities for AORDP participants; costs included associated staff positions (YOU supervisor; vocational programming and a Career Development Coordinator who worked with the vocational program; a Job Developer who helped clients

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<sup>23</sup> As reported in the New Jersey Evaluability Assessment report, although not paid for by the AORDP grant, the site’s Community Reintegration Program (CRP) leverages educational and vocational services for CRP clients through the Hudson County One-Stop Program and the County’s Division of Vocational Rehabilitation for jobs and training. In addition, the site’s core housing provider created its own social enterprises to hire their CRP residents after the 90 days of post-release programming had been provided: street maintenance; *Growing Hands* Urban Farm Program; and *Made Especially for You* bath and body lotions.

<sup>24</sup> The job club is a 14-hour class offered twice each month that focuses on job searching, financial education, and interviewing skills.

become employment ready; two Employment Caseworkers; and a Career Specialist) and funding for education, training, and job search stipends. Please see the site-specific cost summary profiles in Appendix E for additional details on the other AORDP grantees' expenditures in this area.

*Housing Supports (\$1,681,000).* The AORDP grantees' investments in housing supports were modest, comprising between just 2% and 17% of the sites' overall expenditures; one site (Pennsylvania) did not budget or reportedly expend any resources on housing for its AORDP program participants.<sup>25</sup> One site (Florida) reported greatly overestimating the need for housing in its initial program budget and subsequently reduced and reallocated those funds to a general fund that allowed for greater flexibility in addressing participant needs. Resources spent on housing included contracts with housing providers, as well as housing subsidies.

*Mental/Behavioral Health Services (\$7,463,000).* By and large, just two sites expended significant resources on meeting the behavioral health needs of their participants: New Jersey and Pennsylvania. These two sites spent approximately 41% (\$3,735,000) and 53% (\$3,499,000) of program resources on these services. These expenditures are consistent with the programmatic focus of these AORDP sites as both sites' target populations focused on individuals with behavioral health needs. In New Jersey, these resources largely supported pre-release substance abuse treatment and related services offered through the site's jail-based therapeutic community. In Pennsylvania, these resources supported pre-release therapy and forensic vocational rehabilitation services to people with co-occurring disorders, and reentry case planning.

Two sites did not expend any AORDP program resources on mental/behavioral health services. The remaining three sites spent less than 6% of their program resources on these services.

*Mentoring/Peer Supports (\$376,000).* Four (California, Florida, Minnesota, Pennsylvania) of the seven AORDP grantees funded mentoring/peer supports, spending a cumulative amount of approximately \$376,104 on these services. It should be noted, however, that the cost of Connecticut's Community Reentry Advocates, who served in both a case management and peer mentoring role, are counted under Case Management consistent with the emphasis of their duties. Services funded under the mentoring/peer supports category ranged from paraprofessional peer support specialists with lived experience, as in the California site, to more traditional one-on-one mentoring models as in the Pennsylvania site and group mentoring in the Minnesota site. Minnesota (\$208,000) and Pennsylvania (\$165,000) made the most significant allocation to mentoring/peer support services, spending between 3 to 7% of program resources on these services. Details of the sites' mentoring and peer support services

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<sup>25</sup> The lack of funds for housing supports in the PA site may likely reflect the program's emphasis on front-loading services: the site largely used its AORDP funds to cover the costs of pre-release services not covered through other available funding streams; the program's definition of completion reflects this emphasis: clients attached one-month of services post-release were considered to have completed the program although staff acknowledged serving participants for as long as needed, typically by tapping into state Medicaid funds to do so.

are described in the evaluation's topical report on the sites' use of behavior change techniques (Willison, Rossman, Lindquist, Walters, & Lattimore, in press).

*Basic Needs (\$385,000).* Six of the seven sites budgeted resources to cover participants' basic needs, although expenditures comprised less than 1% of any site's overall program costs. These resources covered the gamut of client needs ranging from childcare to transportation, clothing and hygiene products, to fees for basic identification documents such as birth certificates or driver's licenses. Although a small expenditure overall, stakeholders viewed these resources as critical.

*Research/Evaluation (\$997,000).* Five sites expended resources to engage and retain local evaluators. These expenditures were counted toward the cost of program operations if evaluation activities were formative in nature or focused on building program capacity through data capture and analysis (i.e., to inform midcourse adjustments or monitor program operations). California, Connecticut, Massachusetts, Pennsylvania made relatively substantial investment of program resources to research and evaluation, although these allocations generally represented less than 10% of their overall program costs.

*Risk Assessment (\$207,000).* Four sites spent program resources on risk assessment, primarily training staff on new assessment protocols. Expenditures represented less than 1% of total program costs. The Pennsylvania site made the most significant investment in risk assessment, spending approximately \$146,000 to implement the Global Appraisal of Individuals Need Short Screen (GAIN-SS); the site did not have a tool to screen for behavioral health and criminogenic risks prior to the AORDP award.

## 4.5 Cost Per AORDP Participant

Average cost per participant was calculated using a straightforward proportion: the *numerator* is the amount of resources—including SCA grant funds, in-kind contributions, and other funding accessed by the seven AORDP grantees to provide the full complement of their reentry strategy—expended over the grant, generally a 60-month period spanning approximately October 2010 to September 2015; the *denominator* is the number of AORDP clients served. Due to absence of comparable and reliable service utilization data across the sites, this calculation must assume that AORDP clients within a site received a similar complement of services under that reentry program. In reality, only one site could provide service utilization data, however, these data were not available at the individual-level for all services. Please see Section 5.1 for more information about the percentage of prospective study participants who self-reported receiving each service.

As discussed in Chapter 2, per participant costs were calculated for the total number of clients served as reported by each AORDP grantee. According to site figures, the seven AORDP projects cumulatively served 5,556 individuals. **Exhibit 4-5** presents the average participant cost for each site’s AORDP program. Average program costs, based on the sites’ self-reported numbers of participants served and site-verified budget data, range from \$3,516 (Florida) to \$19,354 (Massachusetts) with an overall average per participant cost of \$6,778.

**Exhibit 4-5. Average AORDP Participant Cost**

	Total AORDP Program Costs	Total # Served (Site)	Cost Calculation
California	\$2,912,000	423	\$6,883
Connecticut	\$3,738,000	437	\$8,553
Florida	\$4,774,000	1,358	\$3,516
Massachusetts	\$7,529,000	389	\$19,354
Minnesota	\$2,999,000	406	\$7,385
New Jersey	\$9,137,000	1,273	\$7,177
Pennsylvania	\$6,571,000	1,270	\$5,174
	\$37,659,208	5,556	\$6,778

## 4.6 Cost of Reentry Programs

The average AORDP participant cost based on the total number of participants served (\$6,778) is generally in keeping with those calculated for three similar reentry efforts: the *Prisoner Reentry Initiative (PRI)*, *Serious and Violent Offender Reentry Initiative (SVORI)*, and the *Maryland Reentry Program (MREP)*.

*SVORI*, similar to the AORDP initiative, was a multi-site, comprehensive reentry initiative. *SVORI* programs, which served both juveniles and adults, provided a continuum of care with services that began during incarceration, increasing immediately prior to release, and continuing for several years post-release. As with the AORDP grantees, costs varied across sites. The 2009 *SVORI* evaluation examined both pre- and post-release service costs, and found that costs for pre-release services varied considerably (Lattimore & Visher, 2009) with the incremental cost for enhanced pre-release reentry programming ranging from \$658 per client (Pennsylvania adult program) to \$1,480 (the South Carolina adult program). They found that pre-release *SVORI* participation cost \$129 extra per person per month or \$1,548 per year, with most of the cost due to service programming. However, these differences in cost were not statistically significant. The *SVORI* evaluation also examined how costs differed for post-release services and found that nine months post-release enhanced reentry was associated with \$154 higher monthly costs (\$1,848 per year) and \$248 higher monthly costs at 15 months post-release (\$2,976 per year); yet, the *SVORI* enhanced reentry post-release only cost \$105 more per month after nine months and \$97 more per month after 15 months post-release when examined in relations to the comparison group. The *SVORI* evaluation also indicated that the *SVORI* program resulted in increased service usage by participants. Averages per participant

costs were not explicitly noted in the report, however the cost of serving a SVORI participant, if they received one year of pre-release services and two years of post-release services would appear to be approximately \$6,400.

The Urban Institute's study of the *Maryland Reentry Partnership Initiative (REP)* calculated the average per participant cost to be \$6,900 (Roman, Brooks, Lagerson, Chalfin, Tereshchenko, & Center., 2007). This figure is similar to the SVORI costs mentioned above. REP provided clients with comprehensive reentry services including vocational training, housing assistance, and mental and behavioral health treatment. Services were delivered in the community by community based organizations with some minimal pre-release case management and planning.

Abt Associates also evaluated a reentry program in New York City run by the Fortune Society, which had an average cost per participant of approximately \$3,265. This program offered clients and a variety of services: housing, substance abuse treatment, mental health counseling, family support, health, a drop-in center, the Alternatives to Incarceration Program, and others (McDonald et al., 2008).

The *Prisoner Re-Entry Initiative (PRI)* is another reentry program for which cost information is available. PRI consisted of employment focused programs that provided mentoring, job training, housing referrals, and other comprehensive transitional services to returning citizens. Grant funds could only be used on post-release services including case management, counseling, basic skills training, job placement assistance, remedial education and other supportive services. Grant funds could not be used on housing or behavioral health services. Therefore, PRI services were more focused and less comprehensive than those provided to SCA participants. Nonetheless, the PRI evaluation found that the program cost the Federal government \$2,495 per participant and that if other in-kind or donated resources were include the total per participant cost increased to \$3,438. Program management costs accounted for approximately 33% of grant expenditures and workforce preparedness services accounted for another 25% (Holl, Kolovich, Bellotti, & Paxton, 2009).

Lastly, the Washington State Institute for Public Policy (WSIPP) produced a helpful summary of the cost-benefit analysis of various programs aimed at reducing crime, including programs similar to those funded by the Adult Second Chance Act (Aos, Phipps, Barnoski, & Lieb, 2001). WSIPP found that drug treatment programs cost \$2,500 on average. In-prison therapeutic communities cost \$2,604 per participant without aftercare (treatment once released) and \$3,100 with aftercare. In-prison non-residential substance abuse treatment cost \$1,500 on average, substance abuse treatment programs with case management cost \$2,204 per participant (including treatment), treatment in the community cost \$2,187, and treatment in jails cost \$1,172. WSIPP also examined cognitive behavioral interventions, Moral Reconciliation Therapy or Reasoning and Rehabilitation, and found they cost \$300 per participant. Job counseling and job search assistance cost \$722 per client and in-prison vocational education cost \$1,960 per participant. Comparing these costs directly to the AORDP Second Chance Act-

funded programs is difficult because many AORDP programs provided several of these programs.

## 4.7 Chapter Summary

The seven AORDP sites accessed a total of \$37,660,000 in federal and local resources to plan and implement their respective reentry programs from FY2011 through 2016. Federal SCA funding totaled approximately \$20 million (with an average award of approximately \$2.9 million per site), with grantees contributing an additional \$22.1 million in local resources (required in-kind and cash match with addition occasional, site-specific contributions) toward program implementation. On average, grantees spent \$4.6 million on their AORDP programs. Case management comprised the sites' main spending priority at approximately 44% of program expenditures. This was followed by mental and behavioral health services (20%) and administrative costs (17%). Housing supports was the smallest spending category, comprising just 4% of the sites' expenditures. Average program costs, based on the sites' self-reported numbers of participants served and site-verified budget data, ranged from \$3,509 (Florida) to \$19,354 (Massachusetts). The overall average per participant cost of \$6,778 is generally in keeping with those calculated for similar reentry efforts.

# Chapter 5. Prospective Study Findings

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As described in Chapter 2, the prospective study was designed to address three key research questions:

1. Did those who enrolled in AORDP programming receive more services than the comparison group?
2. Did those who enrolled in AORDP programming have better reentry outcomes than the comparison group?
3. What were the independent effects of group membership and service receipt?

This chapter describes the characteristics of the treatment and comparison group members included in the prospective study and presents the results of analyses performed to address the key research questions.

## 5.1 Prospective Sample Member Characteristics

Baseline characteristics for treatment and comparison group members are shown in **Exhibit 5-1**. All data are weighted to adjust for selection bias. On average, sample members were in their mid-thirties at the time of enrollment into the study. About 27% of the sample was female. Just over one-third was white, with 42% black and about 24% Hispanic. Over half of sample members were parents, and about 44% were either married or in a steady intimate relationship at baseline. Around 62% of sample members had at least a high school diploma or GED, and just over half were employed during the 6 months prior to incarceration. Over a third had received treatment for a mental health problem at some point before incarceration, and about half had ever received professional treatment for drugs or alcohol. Family involvement in the justice system was high, with just under two-thirds reporting that someone in their family had ever been convicted of a crime.

Sample members had fairly extensive criminal histories, with an average age of first arrest at 18 years and an average of 13 previous arrests and just over 2 previous prison terms. The most common offense type for the current incarceration was public order crimes, which is likely due to the MNDOC program's exclusive focus on release violators. About 26% were incarcerated for a property crime, 23% incarcerated for a drug crime, and 19% incarcerated for a person crime.

**Exhibit 5-1. Baseline Characteristics of Prospective Sample**

VarLabel	Total N	Tx N	Comp N	Tx Wtd Mean	Comp Wtd Mean	P value
Age (years)	516	234	282	35.1	35.1	0.9922
Sex (percent male)	515	233	282	74.7	69.7	0.2599
Race/Ethnicity						
Nonhispanic White	516	234	282	35.10%	34.20%	0.8223
Nonhispanic Black	516	234	282	41.30%	42.40%	0.7934
Hispanic	516	234	282	23.60%	23.40%	0.9620
Parent of a minor child	516	234	282	55.40%	56.70%	0.7588
Married or in a steady intimate relationship	516	234	282	43.20%	43.70%	0.9241
Has at least a high school degree or GED	516	234	282	63.30%	61.90%	0.7526
Employed at some point in the 6 months before incarceration	516	234	282	53.90%	54.70%	0.8513
Ever received treatment for a mental health problem	516	234	282	35.60%	34.60%	0.9844
Ever received professional treatment for alcohol or drugs	516	234	282	49.80%	50.00%	0.9003
At least one family member has been convicted of a crime	516	234	282	64.80%	65.20%	0.9234
At least one family member has had problems with drugs or alcohol	516	233	282	69.70%	69.40%	0.9302
Focal incarceration offense type						
Person crime	516	234	282	19.80%	19.20%	0.8764
Drug crime	516	234	282	22.20%	22.80%	0.8818
Property crime	516	234	282	26.90%	25.90%	0.8033
Public order crime	516	234	282	59.60%	60.20%	0.8974
Other crime	516	234	282	1.70%	1.80%	0.9501
Ever been in a juvenile detention facility	516	233	282	44.90%	44.40%	0.9160
Number of previous prison terms	516	233	282	2.2	2.2	0.9198
Age at first arrest	516	234	280	18.4	18.4	0.9321
Number of previous convictions	512	232	280	6.4	6.3	0.7857
Number of previous arrests	505	228	277	13.1	12.6	0.6389

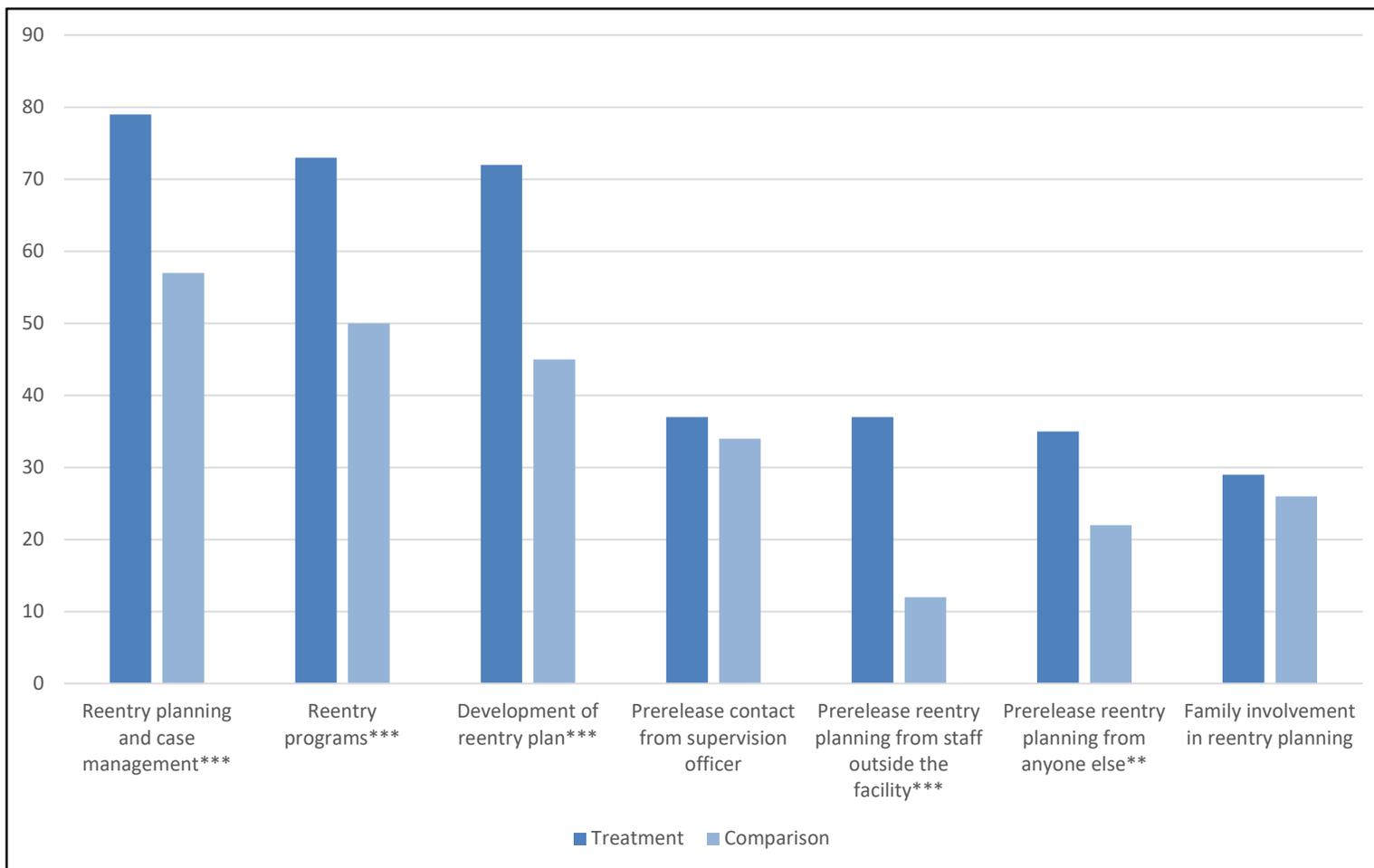
**5.2 Impact on Service Receipt**

To determine whether individuals who enrolled in AORDP programming received more services than the comparison group, we compared self-reported service receipt for a number of service groupings, comparing the proportion of treatment and comparison group members who received any services in each grouping, and the total number of services received, at various time points. As noted previously, dosage (e.g., number of hours, sessions) was not measured, which precludes our ability to compare the intensity of services received between the groups.

The weights developed to adjust for selection bias were applied to the data. Detailed results of for these analyses, including the weighted means, test statistics, and p values for significance tests for each service grouping and individual service at baseline, 6 months, and 12 months are shown in **Appendix F**. The analytic sample size for each comparison is also shown in Appendix F; as noted previously, due to sample attrition, the analytic sample size for 6- and 12-month outcomes was around 300.

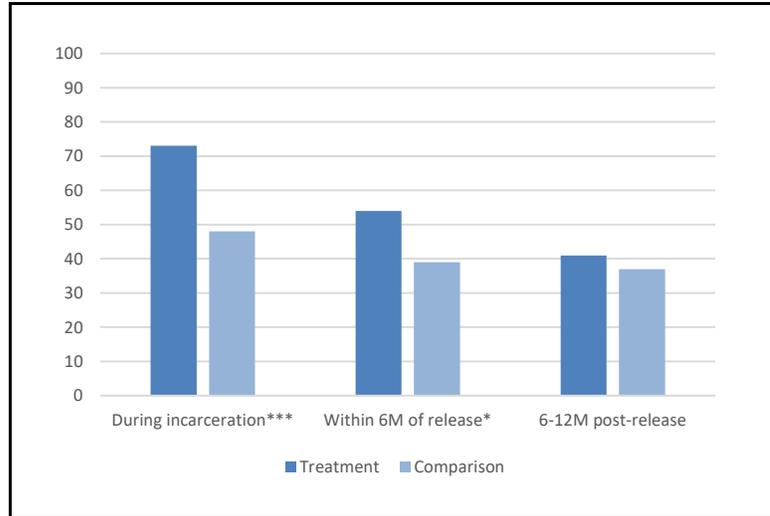
First, pre-release reentry planning services delivered during the focal incarceration were examined. A significantly higher proportion of AORDP participants (93%) reported receiving at least one of the seven services in this grouping than the comparison group (81%),  $p < 0.001$ . As evident from **Exhibit 5-2**, significantly higher proportions of AORDP participants reported receiving each of the seven services in this service grouping than comparison group members, with the exception of pre-release contact from one's supervision officer and family involvement in reentry planning. Overall, treatment group members received an average of 4.0 services in this grouping and comparison group members reported an average of 2.7 ( $p$  for difference  $< 0.001$ ).

**Exhibit 5-2. Reentry Planning Services Received During Focal Incarceration**



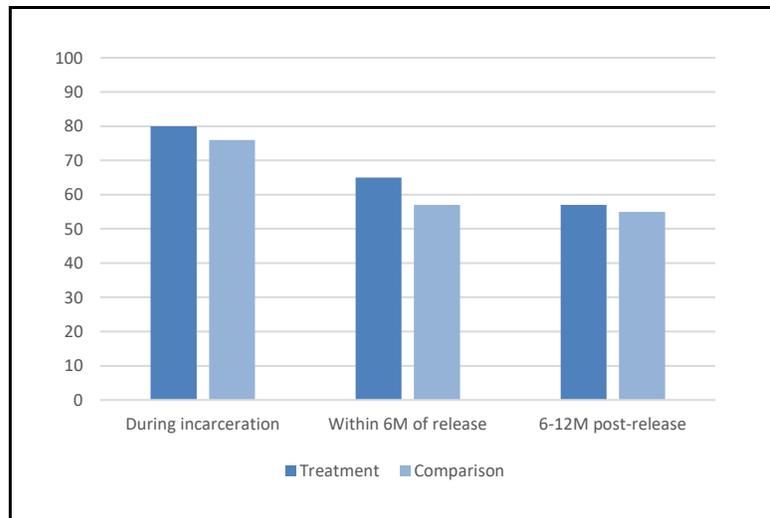
For the remaining service groupings, service receipt during the focal incarceration, within the first 6 months of release, and between 6-12 months of release was compared. The results for service coordination, which includes needs assessments, case management, and follow-up on referrals, are shown in **Exhibit 5-3**. A significantly higher proportion of AORDP participants than comparison group members reported receiving at least one service in this grouping during the focal incarceration and within 6 months of release, with decreasing likelihood of service receipt evident with each successive time period. In addition, AORDP participants received significantly more services within this grouping than comparison group members during incarceration (1.5 vs. 0.9,  $p < 0.001$ ) and within 6 months of release (1.2 vs. 0.8,  $p < 0.01$ ).

**Exhibit 5-3. Service Coordination (Proportion of Treatment and Comparison Group Members Receiving Any Services)**



With regard to assistance with public benefits and resources (see **Exhibit 5-4**), similar proportions of treatment and comparison group members reported receiving at least one service of this type at each time period, with declining service receipt evident over time. When examining the number of individual services within this grouping (which included public healthcare assistance, public financial assistance, legal assistance, housing assistance, identification assistance, transportation assistance, assistance getting a driver’s license, and clothing banks or food pantries), the treatment group reported receiving significantly more than the comparison group during the focal incarceration (2.3 vs. 1.9,  $p < 0.01$ ). No differences were evident at the 6- or 12-month time periods.

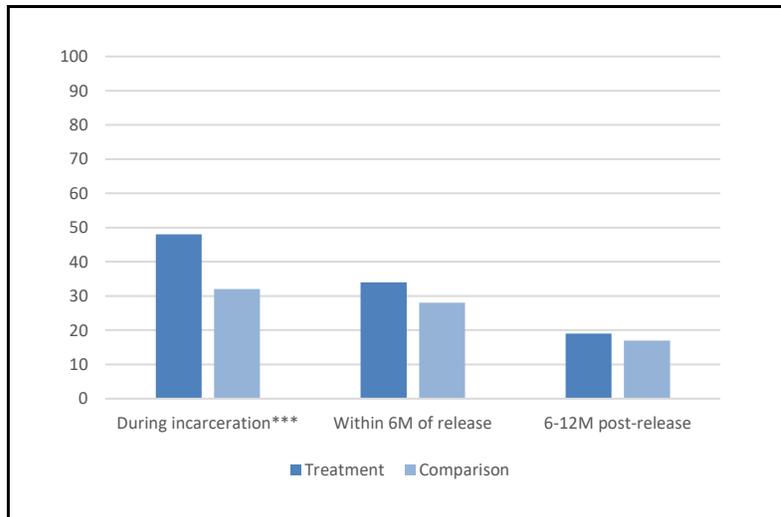
**Exhibit 5-4. Public Benefits and Resources Services (Proportion of Treatment and Comparison Group Members Receiving Any Services)**



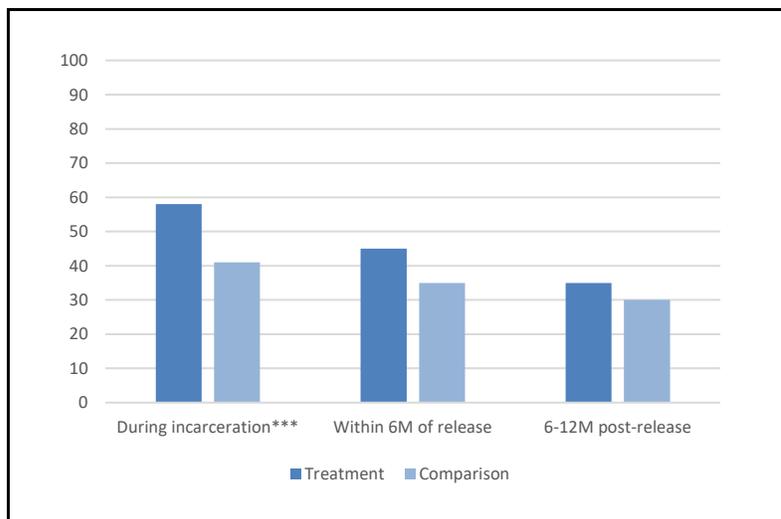
For life skills and money management services, which were reported less frequently than the other service groupings, AORDP participants were significantly more likely to receive at least one of these services (and to receive more of these services) than comparison group members during the focal incarceration (see **Exhibit 5-5**). Differences at the other time periods were not significant.

**Exhibit 5-6** shows receipt of cognitive behavioral services, which include programs designed to change criminal thinking as well as anger management programs. While the treatment group was significantly more likely to report receiving this type of service during the focal incarceration (and to receive more of this type of service), no differences were evident at either post-release time period.

**Exhibit 5-5. Life Skills and Money Management (Proportion of Treatment and Comparison Group Members Receiving Any Services)**



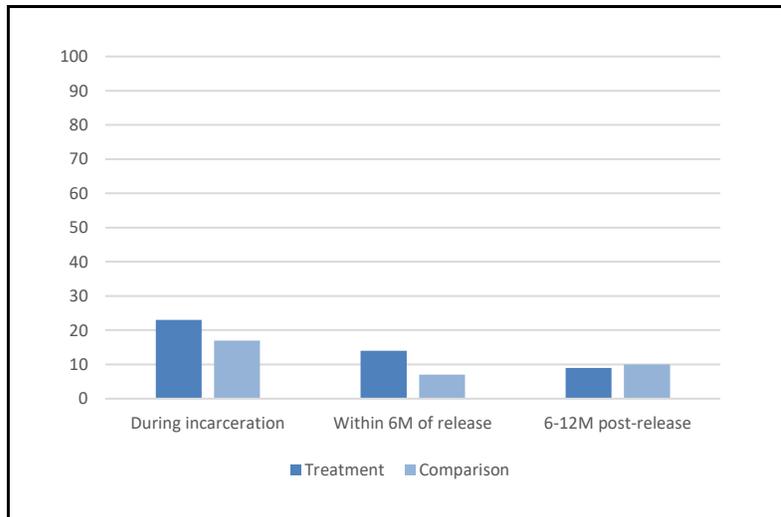
**Exhibit 5-6. Cognitive Behavioral Services (Proportion of Treatment and Comparison Group Members Receiving Any Services)**



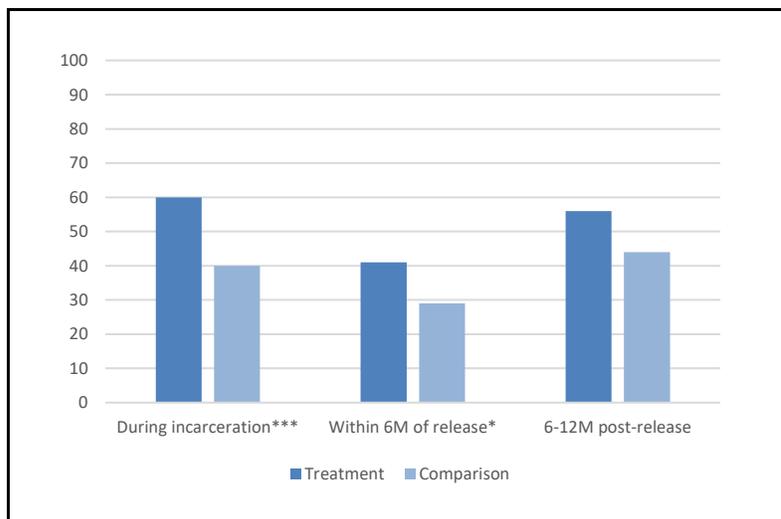
No differences in the likelihood of receiving educational services were evident between the groups, and very few respondents reported receiving such services after release (see *Exhibit 5-7*).

For employment services, which included job assistance, employment preparation, trade or job training programs, vocational or technical certifications, and transitional job placement or subsidized employment, a treatment differential was evident during incarceration and within 6 months of release (see *Exhibit 5-8*). At these time points, treatment group members were significantly more likely than comparison group members to report receiving at least one service in this grouping and to receive more of these services. Differences at the 12 month follow-up were not significant.

**Exhibit 5-7. Educational Services (Proportion of Treatment and Comparison Group Members Receiving Any Services)**



**Exhibit 5-8. Employment Services (Proportion of Treatment and Comparison Group Members Receiving Any Services)**

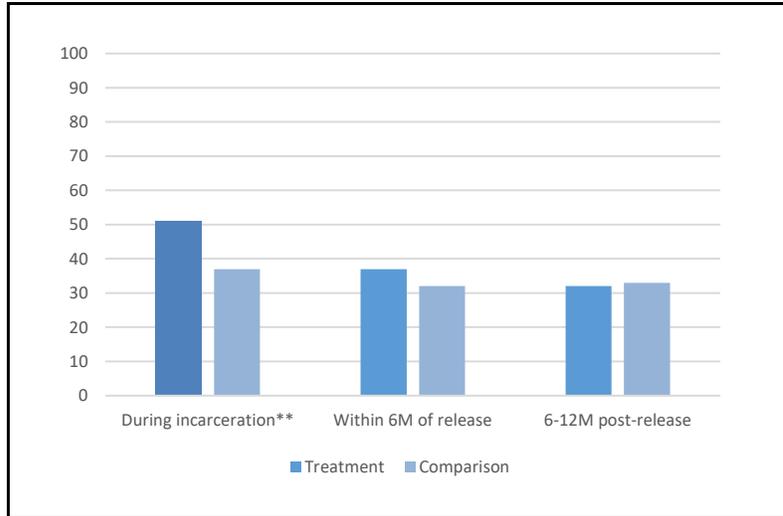


Mentoring and faith-based services, which included spiritual services, mentoring from the faith-based community, other faith-based services, and mentoring other than faith-based, are shown in **Exhibit 5-9**.

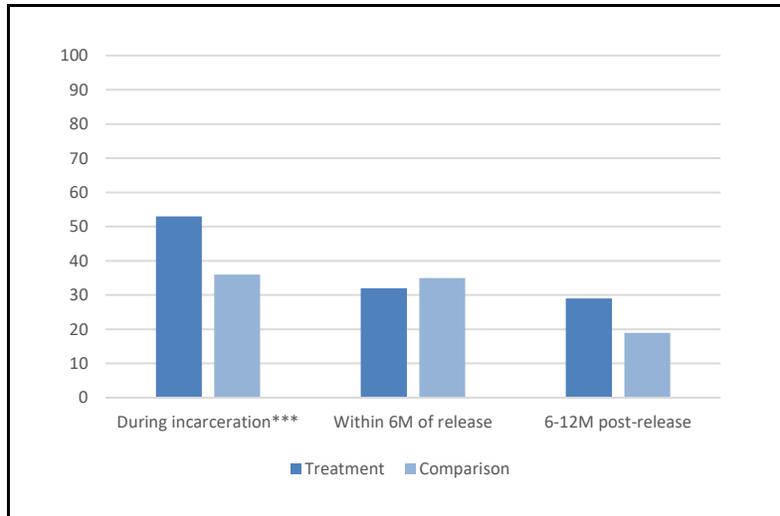
Although a significantly greater proportion of treatment group members reported receiving at least one service in this grouping during the focal incarceration (and more of these services), no differences were evident after release.

A similar pattern was evident for child and family services, which included child support modifications, child custody modifications, assistance with personal relationships, or parenting programs (see **Exhibit 5-10**).

**Exhibit 5-9. Mentoring and Faith-Based Services (Proportion of Treatment and Comparison Group Members Receiving Any Services)**



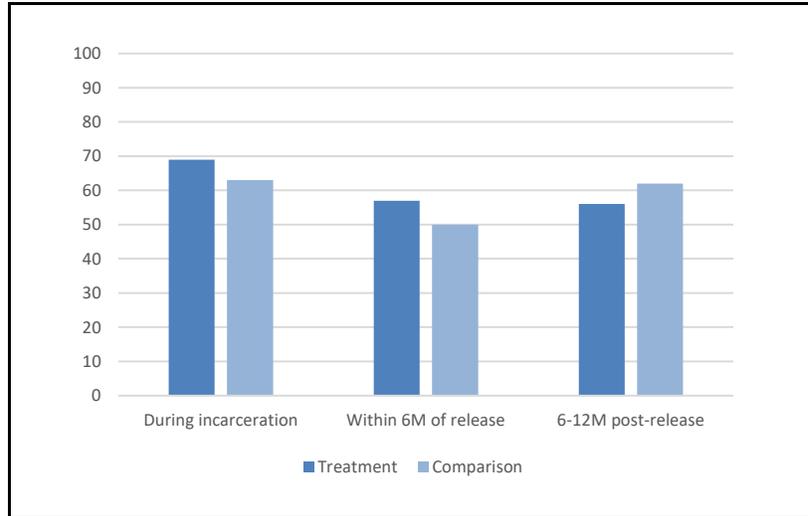
**Exhibit 5-10. Child and Family Services (Proportion of Treatment and Comparison Group Members Receiving Any Services)**



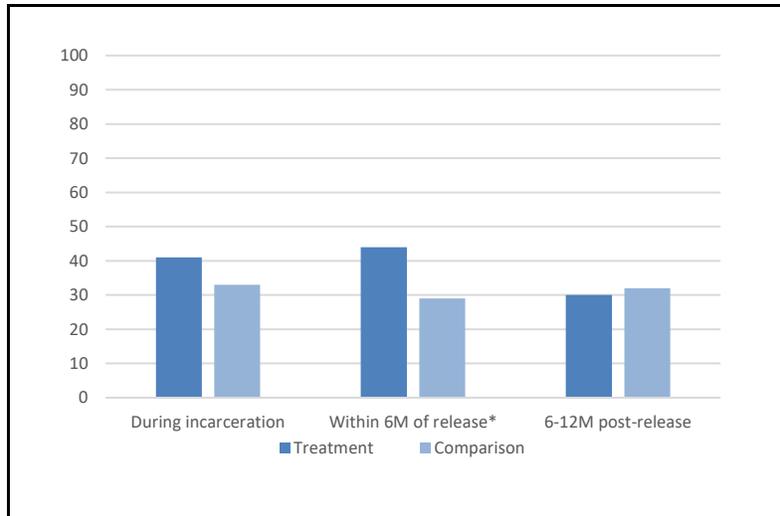
The treatment and comparison groups were equally likely to report receiving at least one physical health service, including physical health care, dental services, or prescription medicine for a physical health care problem, at each of the three time periods (see **Exhibit 5-11**). Fairly high proportions of both groups reported physical health service receipt, and no differences between groups in the number of physical health services received were evident.

Interestingly, receipt of mental health services did not appear to decline substantially after release, and a treatment differential was evident at the immediate post-release time period. AORDP participants were significantly more likely than comparison group members to report receiving at least one mental health service (including mental health care, prescription medicine for a mental health problem, and participation in survivors’ groups related to physical or sexual abuse) within 6 months of release (see **Exhibit 5-12**).

**Exhibit 5-11. Physical Health Services (Proportion of Treatment and Comparison Group Members Receiving Any Services)**

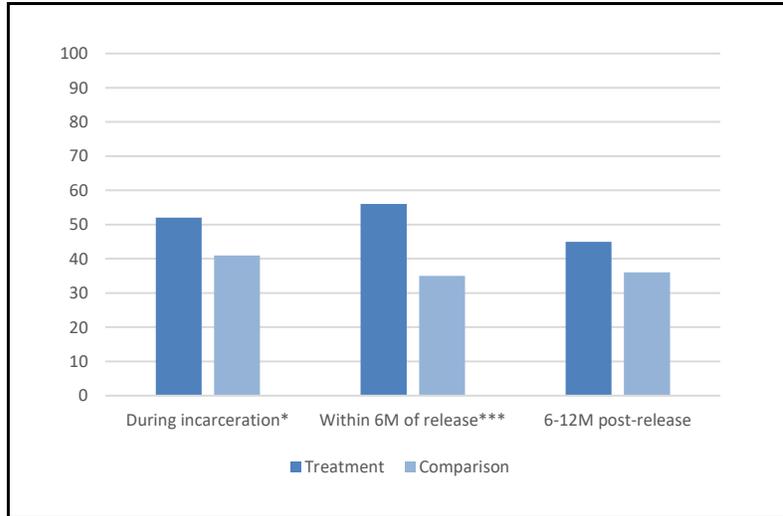


**Exhibit 5-12. Mental Health Services (Proportion of Treatment and Comparison Group Members Receiving Any Services)**



For substance use services, a treatment differential was evident during the focal incarceration and at the first post-release time period. The data shown in **Exhibit 5-13** suggests that many respondents were able to access substance use services (which included both professional substance abuse treatment as well as AA/NA and group education) in the immediate post-release time period. However, by the final follow-up period, the treatment differential for this service grouping was not statistically significant.

**Exhibit 5-13. Substance Use Services (Proportion of Treatment and Comparison Group Members Receiving Any Services)**



In sum, the results shown in this section confirm that AORDP program participation increased participants’ access to a variety of services. For nine of the 12 service groupings explored, the treatment group was significantly more likely than the comparison group to report receiving at least one service of that type for at least one time period. The only service areas for which treatment effects were not found were public benefits and resources, educational services, and physical health services. The findings also clearly show that the greatest impact was found for services delivered during the focal incarceration, with decreasing proportions of both treatment and comparison group members receiving nearly every service type after release. The only exceptions to this pattern were mental health and substance use services (where the treatment differential was actually larger at the immediate post-release time period than during the focal incarceration) but by 6-12 months post-release, no treatment differential was evident for any of the 12 service groupings explored.

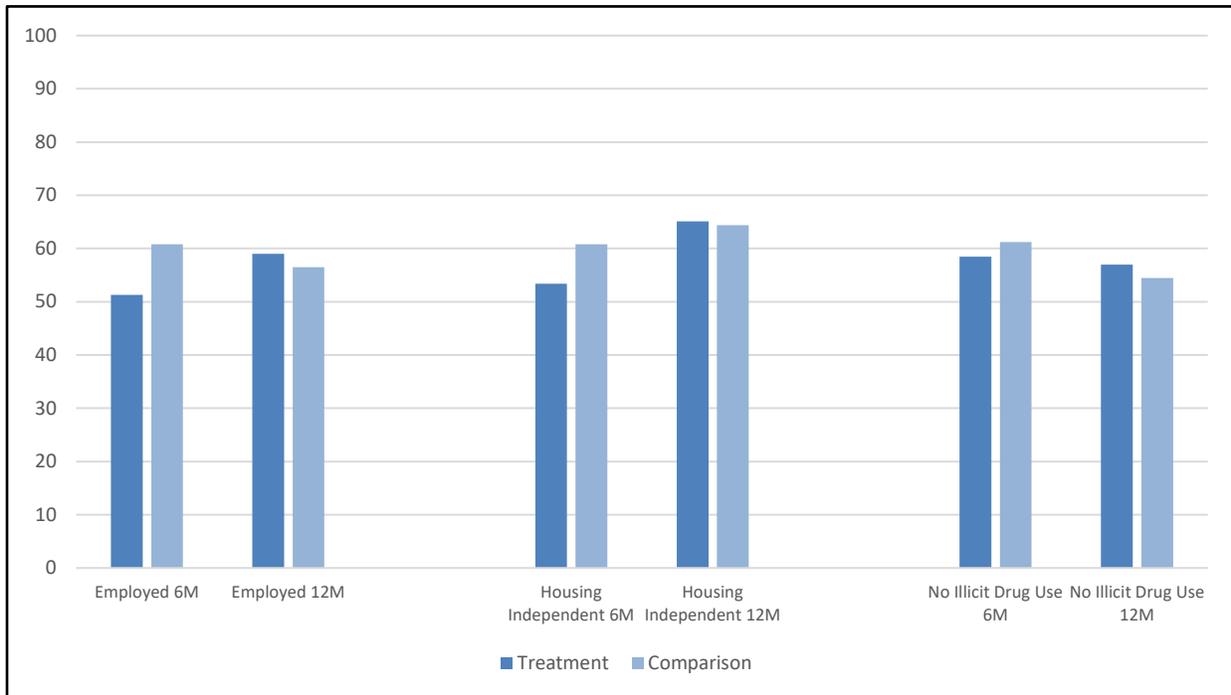
### 5.3 Impact on Reentry Outcomes

#### 5.3.1 Comparison of Weighted Means

To determine whether individuals who enrolled in AORDP programming had better reentry outcomes than the comparison group, we compared the two groups on several core outcomes at 6- and 12-months post-release. The weights developed to adjust for selection bias were applied to the data.

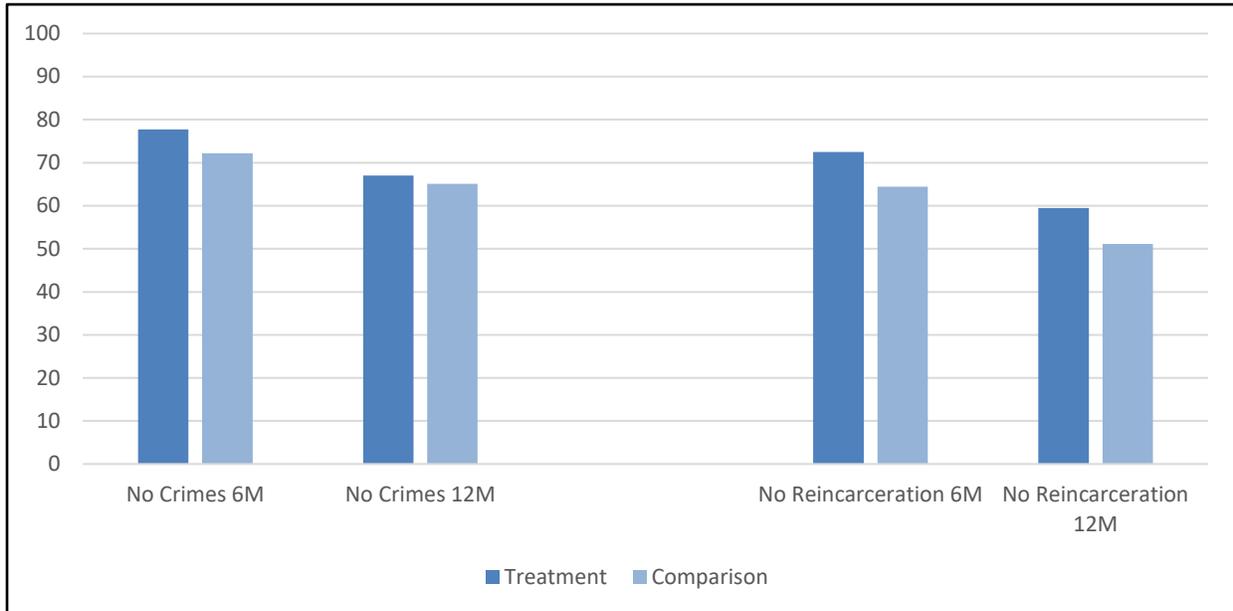
The results for employment, housing independence, and illicit drug use at 6- and 12-months post-release are shown in **Exhibit 5-14**. Comparable proportions of treatment and comparison group members reported being employed, reported primarily living in their own place or contributing financially to housing costs, and did not report or test positive for (in the oral swab drug tests) any drugs other than marijuana at both the 6 and 12 month follow up interviews.

**Exhibit 5-14. Differences in Weighted Means Results for Employment, Housing, and Illicit Drug Use**



The results for self-reported criminal activity and reincarceration are shown in **Exhibit 5-15**. (Note that recidivism based on official data sources is covered later in this chapter.) The graph shows the proportion of treatment and comparison group members who did not report engaging in any criminal behavior and not getting reincarcerated in jail and prison during the reference periods. None of the differences shown are statistically significant, which suggests that the two groups had a similar likelihood of refraining from criminal activity and avoiding reincarceration at both time periods.

**Exhibit 5-15. Differences in Weighted Means Results for Self-Reported Criminal Behavior and Reincarceration**



In addition to these five core outcomes, a number of additional outcomes were explored in nine domains, including:

- Recidivism (number of reincarcerations, illegal income, specific offenses [violent crimes, other crimes against people, weapon possession, drug possession, drug sales, prescription drug crimes, other drug crimes, DUI, property crimes, public order crimes])
- Family Functioning (providing any financial support for children, criminogenic family exposure, family emotional support)
- Peer Exposure/Gang activity (criminogenic peers, gang membership)
- Housing (housing stability, criminogenic exposure in housing)
- Employment (number of months worked, current employment, number of hours worked per week, income, insurance coverage, paid leave)
- Physical and Mental Health (overall physical health, number of physically healthy/unhealthy days, number of mentally healthy/unhealthy days, health-related limitations, post-traumatic stress disorder)
- Substance Use (problematic drug use scale, use of the following specific substances during the reference period and within the past 30 days: alcohol use, binge drinking, prescription stimulant abuse, prescription pain reliever abuse, other prescription drug abuse, marijuana use, amphetamine use, cocaine use, heroin use, other drug use)

- Violence and Victimization (any victimization, frequency of victimization, any perpetration, frequency of perpetration)
- Compliance with Supervision (compliance with supervision condition, positive drug tests, formal violations)

As noted previously, grantees were not required to offer interventions explicitly designed to target each of these outcomes or domains. The results of the differences in means analyses for these outcomes are shown in **Appendix G**. The overwhelming pattern was lack of significant differences between the treatment and comparison groups. For virtually every outcome explored, the treatment and comparison groups had similar values at both 6 and 12 months.

### 5.3.2 Comparison of Trajectories Over Time

In addition to examining point in time differences in reentry outcomes between treatment and comparison group members, we also used latent growth curve modeling to compare the trajectories of treatment and comparison group members over the entire follow-up period.

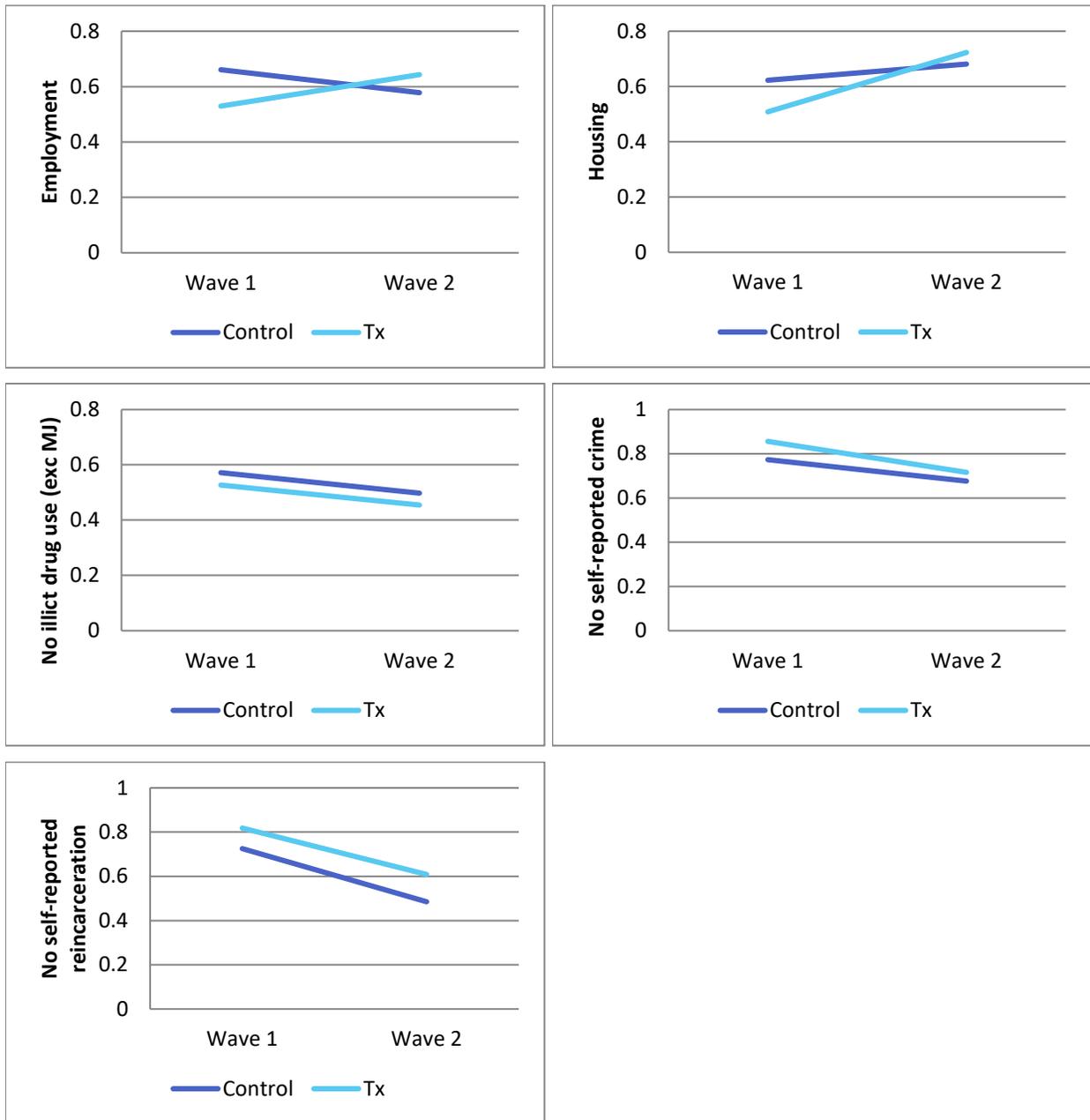
*Base Models.* Summary results from the base models run for the five core outcomes are shown in **Exhibit 5-16**. The group by time interaction effect indicates whether the treatment group had a significantly more positive (as indicated by positive estimates) or negative (as indicated by negative estimates) slope than the comparison group. As evident from the exhibit, for employment and housing independence, significant positive treatment effects were found. Specifically, AORDP participants had more positive trajectories after release for employment (controlling for whether they were employed prior to incarceration) and housing independence (i.e., living in their own house or apartment or contributing financially to housing; controlling for whether they were housing independent prior to incarceration). Treatment effects were not found in the base models for the other three core outcomes.

**Exhibit 5-16. Latent Growth Curve Model Results for Core Outcomes (Base Models)**

Outcome	Sample Size	Estimate for Group*Time Effect	Standard Error	P value
Employment*	369	0.82	0.34	0.02
Housing Independence*	366	0.67	0.34	<0.05
Illicit Drug Use	366	0.01	0.36	0.98
Self-Reported Criminal Behavior	366	-0.37	0.35	0.30
Self-Reported Reincarceration	369	-0.03	0.37	0.93

The growth curves for each outcome are shown in **Exhibit 5-17**. When examining the trajectories for employment, it is evident that while the treatment group improved in terms of employment status across the post-release time points, the opposite pattern occurred with the comparison group. For housing independence, both groups saw improvements over time, but the treatment group had a steeper slope (i.e., a more dramatic improvement) than the

**Exhibit 5-17. Growth Curves for Treatment and Comparison Group Members (Base Models)**



comparison group, which accounted for the significant group by time interaction effect. (Not surprisingly, the models also found that preincarceration employment and housing independence were significantly associated with positive trajectories for post-release employment and housing, respectively; data not shown.) For illicit drug use, self-reported criminal behavior, and self-reported reincarceration, the pattern for both groups was a negative slope, such that both the treatment and the comparison groups tended to deteriorate (at a similar rate) on these outcomes over time.

*Fully Specified Models.* After controlling for the baseline and 6 month service grouping indicators, we continued to observe a positive group by time interaction for employment (**Exhibit 5-18**) and housing independence (**Exhibit 5-19**) and nonsignificant effects for the remaining outcomes (**Exhibits 5-20** through **5-22**). In examining the independent effects of service receipt, the predominant pattern is one of nonsignificant findings, such that having received services (based on fairly crude indicators of service receipt that do not reflect dosage or timing) during the focal incarceration or within the first 6 months of release generally does not influence one’s trajectory with regard to the outcomes explored.

Specifically, when examining employment trajectories (**Exhibit 5-18**), the only significant pattern with regard to service receipt was that having received educational services during the focal incarceration was associated with a more positive post-release trajectory for employment. However, receipt of physical health services and substance use services during the focal incarceration and receipt of mental health services within 6 months of release were negatively associated with one’s employment trajectory. These findings are likely related to the fact that individuals who need these services may have more employment constraints than individuals without such service needs.

**Exhibit 5-18. Results for Fully Specified Latent Growth Curve Model: Employment**

Independent Variable	Estimate	Standard Error	P value
<b>Group by time*</b>	<b>0.96</b>	<b>0.38</b>	<b>0.01</b>
Reentry planning (BL)	1.12	0.67	0.10
Service coordination (BL)	0.21	0.43	0.63
Service coordination (6M)	-0.43	0.40	0.28
Assistance with public benefits/resources (BL)	0.24	0.53	0.65
Assistance with public benefits/resources (6M)	0.29	0.43	0.50
Life skills/money management (BL)	0.41	0.47	0.39
Life skills/money management (6M)	0.69	0.55	0.21
Cognitive behavioral services (BL)	-0.05	0.56	0.93
Cognitive behavioral services (6M)	-0.07	0.50	0.88
<b>Educational services (BL)***</b>	<b>1.61</b>	<b>0.35</b>	<b>&lt;0.0001</b>
Educational services (6M)	-0.95	0.57	0.10
Employment services (BL)	0.51	0.41	0.21
Employment services (6M)	0.82	0.44	0.06
Mentoring/faith-based services (BL)	0.13	0.38	0.73
Mentoring/faith-based services (6M)	-0.10	0.40	0.80
Child/family services (BL)	-0.33	0.52	0.53
Child/family services (6M)	-0.45	0.49	0.37

(continued)

**Exhibit 5-18. Results for Fully Specified Latent Growth Curve Model: Employment (continued)**

Independent Variable	Estimate	Standard Error	P value
<b>Physical health services (BL)</b>	<b>-0.85</b>	<b>0.39</b>	<b>0.03</b>
Physical health services (6M)	0.41	0.41	0.32
Mental health services (BL)	-0.02	0.42	0.96
<b>Mental health services (6M)**</b>	<b>-1.29</b>	<b>0.46</b>	<b>0.005</b>
<b>Substance abuse services (BL)*</b>	<b>-1.01</b>	<b>0.47</b>	<b>0.03</b>
Substance abuse services (6M)	-0.31	0.41	0.46

The model for housing independence (*Exhibit 5-19*) found that receiving assistance with public benefits or resources within the first six months of release was positively associated with improvements in housing independence (i.e., living in one's own place or contributing financially to housing costs). However, similar to the employment model, having received substance abuse services during the focal incarceration was associated with a negative trajectory for this outcome.

**Exhibit 5-19. Results for Fully Specified Latent Growth Curve Model: Housing Independence**

Independent Variable	Estimate	Standard Error	P value
<b>Group by time interaction*</b>	0.74	0.37	0.04
Reentry planning (BL)	1.18	0.64	0.07
Service coordination (BL)	-0.30	0.40	0.46
Service coordination (6M)	-0.24	0.38	0.51
Assistance with public benefits/resources (BL)	-0.79	0.52	0.13
<b>Assistance with public benefits/resources (6M)*</b>	<b>0.80</b>	<b>0.40</b>	<b>&lt;0.05</b>
Life skills/money management (BL)	0.09	0.45	0.84
Life skills/money management (6M)	-0.18	0.50	0.71
Cognitive behavioral services (BL)	-0.48	0.53	0.36
Cognitive behavioral services (6M)	-0.35	0.46	0.45
Educational services (BL)	0.37	0.42	0.38
Educational services (6M)	-0.21	0.54	0.70
Employment services (BL)	0.32	0.39	0.40
Employment services (6M)	0.04	0.41	0.92
Mentoring/faith-based services (BL)	0.45	0.36	0.21

(continued)

**Exhibit 5-19. Results for Fully Specified Latent Growth Curve Model: Housing Independence (continued)**

Independent Variable	Estimate	Standard Error	P value
Mentoring/faith-based services (6M)	-0.36	0.37	0.33
Child/family services (BL)	0.09	0.45	0.84
Child/family services (6M)	0.25	0.47	0.60
Physical health services (BL)	-0.32	0.37	0.39
Physical health services (6M)	0.21	0.38	0.58
Mental health services (BL)	-0.32	0.37	0.39
Mental health services (6M)	-0.37	0.42	0.38
<b>Substance abuse services (BL)*</b>	<b>-1.14</b>	<b>0.43</b>	<b>0.01</b>
Substance abuse services (6M)	-0.39	0.39	0.31

No service grouping indicators were significantly associated with sample members' trajectories for illicit drug use (*Exhibit 5-20*).

**Exhibit 5-20. Results for Fully Specified Latent Growth Curve Model: Illicit Drug Use**

Independent Variable	Estimate	Standard Error	P value
Group by time interaction	-0.27	0.38	0.49
Reentry planning (BL)	0.33	0.71	0.64
Service coordination (BL)	-0.46	0.44	0.29
Service coordination (6M)	-0.47	0.60	0.43
Assistance with public benefits/resources (BL)	-0.32	0.56	0.57
Assistance with public benefits/resources (6M)	0.10	0.45	0.82
Life skills/money management (BL)	0.08	0.49	0.88
Life skills/money management (6M)	0.35	0.56	0.53
Cognitive behavioral services (BL)	-0.20	0.58	0.73
Cognitive behavioral services (6M)	0.49	0.52	0.34
Educational services (BL)	0.75	0.47	0.11
Educational services (6M)	-0.47	0.60	0.43
Employment services (BL)	0.21	0.43	0.64
Employment services (6M)	0.65	0.46	0.16
Mentoring/faith-based services (BL)	-0.25	0.40	0.53

(continued)

**Exhibit 5-20. Results for Fully Specified Latent Growth Curve Model: Illicit Drug Use  
(continued)**

Independent Variable	Estimate	Standard Error	P value
Mentoring/faith-based services (6M)	-0.65	0.41	0.11
Child/family services (BL)	-0.19	0.55	0.72
Child/family services (6M)	0.47	0.52	0.37
Physical health services (BL)	0.00	0.41	0.99
Physical health services (6M)	-0.61	0.42	0.15
Mental health services (BL)	-0.42	0.45	0.35
Mental health services (6M)	0.26	0.47	0.58
Substance abuse services (BL)	-0.51	0.49	0.30
Substance abuse services (6M)	-0.32	0.44	0.47

Similarly, no service grouping indicators were significantly associated with sample members' trajectories for self-reported criminal behavior (*Exhibit 5-21*).

**Exhibit 5-21. Results for Fully Specified Latent Growth Curve Model: Criminal Behavior**

Independent Variable	Estimate	Standard Error	P value
Group by time interaction	-0.40	0.38	0.29
Reentry planning (BL)	-0.43	0.68	0.53
Service coordination (BL)	0.41	0.41	0.32
Service coordination (6M)	0.54	0.40	0.18
Assistance with public benefits/resources (BL)	-0.28	0.55	0.61
Assistance with public benefits/resources (6M)	-0.23	0.43	0.60
Life skills/money management (BL)	-0.23	0.47	0.63
Life skills/money management (6M)	1.00	0.53	0.06
Cognitive behavioral services (BL)	0.00	0.55	1.00
Cognitive behavioral services (6M)	0.15	0.49	0.75
Educational services (BL)	0.13	0.44	0.76
Educational services (6M)	-0.11	0.58	0.85
Employment services (BL)	0.12	0.40	0.78
Employment services (6M)	-0.39	0.43	0.37
Mentoring/faith-based services (BL)	0.22	0.38	0.57

(continued)

**Exhibit 5-21. Results for Fully Specified Latent Growth Curve Model: Criminal Behavior (continued)**

Independent Variable	Estimate	Standard Error	P value
Mentoring/faith-based services (6M)	0.11	0.39	0.79
Child/family services (BL)	-0.59	0.52	0.26
Child/family services (6M)	0.22	0.49	0.66
Physical health services (BL)	0.24	0.39	0.54
Physical health services (6M)	-0.45	0.40	0.72
Mental health services (BL)	-0.42	0.42	0.32
Mental health services (6M)	-0.13	0.45	0.77
Substance abuse services (BL)	-0.15	0.47	0.76
Substance abuse services (6M)	-0.28	0.41	0.49

For the self-reported reincarceration model, the only significant finding was that receiving any substance abuse treatment services within the first 6 months of release was associated with a significantly more negative trajectory for this outcome (*Exhibit 5-22*).

**Exhibit 5-22. Results for Fully Specified Latent Growth Curve Model: Reincarceration**

Independent Variable	Estimate	Standard Error	P value
Group by time interaction	0.03	0.40	0.94
Reentry planning (BL)	-1.17	0.72	0.11
Service coordination (BL)	0.30	0.45	0.50
Service coordination (6M)	0.40	0.44	0.36
Assistance with public benefits/resources (BL)	0.24	0.57	0.67
Assistance with public benefits/resources (6M)	-0.37	0.47	0.43
Life skills/money management (BL)	-0.15	0.52	0.78
Life skills/money management (6M)	0.15	0.57	0.80
Cognitive behavioral services (BL)	0.39	0.60	0.64
Cognitive behavioral services (6M)	0.11	0.53	0.84
Educational services (BL)	-0.10	0.48	0.84
Educational services (6M)	-0.76	0.61	0.21
Employment services (BL)	0.34	0.44	0.44
Employment services (6M)	0.25	0.47	0.60

(continued)

**Exhibit 5-22. Results for Fully Specified Latent Growth Curve Model: Reincarceration (continued)**

Independent Variable	Estimate	Standard Error	P value
Mentoring/faith-based services (BL)	0.74	0.41	0.07
Mentoring/faith-based services (6M)	-0.54	0.42	0.20
Child/family services (BL)	0.16	0.57	0.78
Child/family services (6M)	0.32	0.54	0.55
Physical health services (BL)	0.22	0.42	0.60
Physical health services (6M)	0.59	0.44	0.17
Mental health services (BL)	-0.49	0.46	0.29
Mental health services (6M)	-0.36	0.48	0.46
Substance abuse services (BL)	0.67	0.51	0.20
<b>Substance abuse services (6M)*</b>	<b>-1.08</b>	<b>0.46</b>	<b>0.02</b>

*5.3.3 Rearrest Models*

The final set of models included in the prospective outcome study used official arrest data to determine whether individuals enrolled in the AORDP programs were less likely to be rearrested (and/or had longer time to first arrest) than comparison group members.

Bivariate comparisons of the proportion of treatment and comparison group members in each site who had any rearrest within various reference periods are shown in **Exhibit 5-23**, along with the median number of arrests for each group. The groups had a similar likelihood of getting rearrested within 6 and 12 months and a comparable number of rearrests within the follow-up period.

**Exhibit 5-23. Descriptive Rearrest Data for Prospective Sample, by Group**

Outcome	Treatment Group (n=220)	Comparison Group (n=273)
Any arrest within 6 months	29.96%	31.73%
Any arrest within 12 months	46.68%	50.31%
Any arrest within Follow-up Period	59.56%	59.87%
Median Number of Arrests	0.45	0.51

Several types of multivariate models were run to assess the impact of AORDP enrollment on arrest outcomes among the prospective sample. **Binary logistic regression** models were estimated to compare the odds of rearrest within 6 and 12 months of release between the

treatment and comparison groups. Next, **negative binomial regression models**<sup>26</sup> were used to determine whether AORDP enrollment affected the *number* of post-release arrests incurred by treatment and comparison group members. The time to first rearrest was assessed using **parametric survival models**. Finally, **competing hazard Cox models** were estimated to examine the effects of AORDP participation on the first new arrest *by offense type* (person, drug, property, and public order/other). (See Chapter 2 for more details about the analytic approach.)

The weights to adjust for selection bias were applied to the data for all models. **Exhibit 5-24** summarizes the main treatment effects for the binary logistic regression, negative binomial regression, and parametric survival models. The exhibit shows the parameter estimates and standard errors for the treatment indicator. None of the parameter estimates for the group effect were statistically significant, indicating that the treatment and comparison groups were equally likely to be rearrested within 6 and 12 months, and a comparable time period until their first rearrest and until their first rearrest for specific offense types. In addition, as the negative binomial regression models showed, the two groups had a comparable number of rearrests. Specifically, the difference in the logs of expected arrest counts between treatment and comparison group members (0.06) was not statistically significant.

**Exhibit 5-24. Summary Results for Binary Logistic, Negative Binomial, and Parametric Survival Models**

Outcome	n	Odds/Incident Rate/Hazard Ratio	Parameter Estimate for Group Effect	Standard Error	T value	P statistic
Any arrest within 6 months	493	1.043	0.042	0.104	0.40	0.690
Any arrest within 12 months	493	1.076	0.073	0.096	0.75	0.451
Total number of arrests	493	1.062	0.060	0.120	0.47	0.641
Time to rearrest	490	0.931	-0.071	0.124	-0.58	0.564
Time to first person arrest	488	1.047	0.046	0.241	0.19	0.848
Time to first property arrest	488	0.831	-0.185	0.246	-0.75	0.452
Time to first drug arrest	488	0.971	-0.029	0.370	-0.08	0.937
Time to first public order/other arrest	488	0.908	-0.097	0.204	-0.48	0.635

## 5.4 Conclusions

Analysis of self-reported interview data confirmed that AORDP enrollment clearly increased access to services, but the greatest impact was found for services delivered during the focal

<sup>26</sup> Negative binomial models were run in SAS-callable SUDAAN, which accommodates weighted data. (SAS does not have a Survey Procedure for modeling count variables.) SUDAAN also adjusts for the nesting of individuals within sites.

incarceration, with decreasing proportions of both treatment and comparison group members receiving nearly every service type after release. With regard to reentry outcomes, the treatment and comparison groups generally performed similarly along a wide variety of domains at 6 and 12 months post-release. However, when examining sample members' overall trajectories on five core outcomes, we found positive treatment effects for housing independence and employment. Specifically, the treatment group had more positive trajectories over time with respect to living in their own home or apartment (or contributing to the cost of their housing) and getting a job. This pattern was found even when controlling for the services that people received. Finally, when examining rearrest outcomes using administrative data, no treatment effects were found. The treatment and comparison groups were equally likely to be rearrested within 6 and 12 months of release, had a comparable number of rearrests, and a comparable time period until their first rearrest overall and for specific offense types.

# Chapter 6. Recidivism Study Findings

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As described in Chapter 2, the site-specific recidivism study was designed to determine whether individuals who enrolled in each site's AORDP program had better recidivism outcomes than comparable individuals who received standard reentry programming. To maximize statistical power and support site-level analyses, the treatment group for the recidivism study included all individuals who were ever enrolled in each AORDP program and who were released from incarceration between January 1, 2012, and December 31, 2014, as well as a matched comparison group in each site (see Chapter 2 for additional details on comparison group selection). This study component relied exclusively on administrative data. The primary outcomes for the recidivism study were rearrest and reincarceration in state prison, although where data were available, rearrest in county jail and supervision outcomes (e.g., violations, revocations) were also examined.

## 6.1 Recidivism Study Sample Characteristics

Basic background characteristics for the treatment and comparison groups included in the recidivism study were compared for each site. The specific variables available for analysis differed by site depending on data availability, which was generally more comprehensive for the DOC sites. (As described in Section 2.5, we attempted to obtain administrative data in each site on age, race, ethnicity, gender, current offense, prior criminal record [e.g., age at first arrest, number of prior arrests or commitments], risk scores, length of stay, number of dependents, and marital status.)

Not surprisingly, sample characteristics differed across sites, reflecting each site's program eligibility criteria. Within a given site, the treatment and comparison samples were generally comparable, with the exceptions noted below. Wherever possible, each site's model included as control variables all of the characteristics below.

In California, where the site served women releasing from county jail and for which comparison women were recruited from a comparable facility in a different county, two differences between treatment and comparison women were evident (**Exhibit 6-1**). Treatment women were older and had been incarcerated for a longer period of time than the comparison women. The groups were comparable in terms of criminal history and focal incarceration offense type (which was predominantly property crimes).

In Connecticut, where the focus was on men and women returning from state prisons to a specific geographic area and where numerous administrative data elements could be used to select a closely-matched comparison group, no significant differences between the treatment and comparison group members were detected (**Exhibit 6-2**).

**Exhibit 6-1. Characteristics of California Sample (All Female)**

	T_Mean (n=169)	C_Mean (n=193)	T-C Diff	Std Dev	T-stat	P value
<b>Age at Focal Incarceration Release*</b>	34.96	32.38	2.59	9.59	2.56	0.011
Criminal History: Age of First Adult Arrest	22.11	21.54	0.56	4.88	1.09	0.278
Criminal History: Number of Adult Arrests	16.56	17.12	-0.56	13.72	-0.39	0.695
Focal incarceration for person crime	0.15	0.12	0.03	0.34	0.80	0.422
Focal incarceration for property crime	0.58	0.64	-0.06	0.49	-1.12	0.256
Focal incarceration for drug crime	0.13	0.19	-0.06	0.37	-1.46	0.146
Focal incarceration for public order crime	0.25	0.26	-0.01	0.44	-0.23	0.819
Focal incarceration for other crime	0.07	0.04	0.02	0.23	0.99	0.323
<b>Length of Focal Incarceration (in days)**</b>	162.60	123.00	39.59	131.33	2.84	0.005

\*p<.05, \* p <.01; \*\*\* p <.001

**Exhibit 6-2. Characteristics of Connecticut Sample**

	T_Mean (n=376)	C_Mean (n=379)	T-C Diff	Std Dev	T-stat	P value
Percent male	0.78	0.75	0.02	0.42	0.712	0.477
Age at Focal Incarceration Release	36.82	36.89	-0.08	10.48	-0.099	0.921
Race: White	0.23	0.24	-0.01	0.43	-0.196	0.845
Race: Black	0.61	0.64	-0.02	0.48	-0.685	0.493
Ethnicity: Hispanic	0.15	0.12	0.03	0.34	0.997	0.319
Age at first adult arrest	24.73	25.72	-0.99	7.82	-1.53	0.128
Number of Prior Arrests	7.45	7.20	0.25	6.89	0.507	0.613
Focal incarceration for person crime	0.27	0.28	-0.01	0.45	-0.258	0.796
Focal incarceration for property crime	0.25	0.26	0.00	0.44	-0.103	0.918
Focal incarceration for drug crime	0.24	0.25	-0.01	0.43	-0.444	0.657
Focal incarceration for public order crime	0.35	0.37	-0.02	0.48	-0.523	0.601
Focal incarceration for other crime	0.18	0.17	0.01	0.38	0.337	0.736
Violence History Risk Score (Scored by CT DOC)	1.71	1.71	0.01	0.88	0.088	0.930
Drug and Alcohol Score (Scored by CT DOC)	2.72	2.64	0.07	1.48	0.688	0.491
Educational Score (Scored by CT DOC)	2.55	2.50	0.05	0.83	0.863	0.389
Vocational Training Score (Scored by CT DOC)	3.30	3.31	-0.02	0.64	-0.346	0.730
Overall_Risk_Score (Scored by CT DOC)	3.11	3.12	-0.01	0.78	-0.218	0.828
Length of Focal Incarceration (in days)	573.40	580.70	-7.23	689.15	-0.144	0.885

\*p<.05, \*\* p <.01; \*\*\* p <.001

In Florida, which served men reentering from a reentry center after being transferred from a state prison, a large number of administrative data elements were available to select the comparison group. As a result of the matching procedures, the treatment and comparison groups were comparable on most demographic and criminal history characteristics (**Exhibit 6-3**). The only exception was that treatment group members had a significantly longer focal incarceration than comparison group members.

**Exhibit 6-3. Characteristics of Florida Sample (All Male)**

	T_Mean (n=287)	C_Mean (n=294)	T-C Diff	Std Dev	T-stat	P value
Age at Focal Admission	33.69	34.24	-0.55	10.84	-0.609	0.543
Race: White	0.37	0.40	-0.03	0.49	-0.795	0.427
Race: Black	0.60	0.57	0.03	0.49	0.767	0.444
Ethnicity: Hispanic	0.03	0.03	0.00	0.17	0.052	0.959
Percent married	0.07	0.05	0.01	0.24	0.596	0.552
Has Dependents	0.25	0.23	0.02	0.43	0.454	0.650
Age at First Adult Arrest	21.41	22.27	-0.86	7.09	-1.438	0.151
Number of Prior Prison Commitments	1.18	1.14	0.05	1.77	0.307	0.759
Criminal History: Number of Adult Arrests	14.91	14.59	0.32	12.95	0.285	0.776
Employment Status prior to focal incarceration	0.48	0.49	-0.01	0.5	-0.132	0.895
Focal incarceration for person crime	0.43	0.39	0.03	0.49	0.832	0.406
Focal incarceration for property crime	0.40	0.42	-0.01	0.49	-0.264	0.792
Focal incarceration for drug crime	0.31	0.31	0.00	0.46	-0.073	0.942
Focal incarceration for public order/other crime	0.30	0.32	-0.02	0.46	-0.526	0.599
<b>Length of Focal Incarceration (in days)**</b>	1349.30	1037.40	311.93	1294.61	2.904	0.004
Sentenced to Post-Prison Supervision	0.21	0.20	0.00	0.4	0.045	0.965

\*p<.05, \* p <.01; \*\*\* p <.001

Characteristics for the treatment group in Massachusetts, which consisted of men with extensive, serious, criminal histories, are shown in **Exhibit 6-4**. As discussed in Chapter 2, no viable options for a rigorous comparison group were identified in this site

**Exhibit 6-4. Characteristics of Massachusetts Sample (All Male)**

	T_Mean (n=162)	Std Dev
Race: Black	0.80	0.40
Risk level	1.61	0.61
Education (percent with HS diploma/GED)	0.43	0.66
Percent with any dependents	0.50	0.50
Criminal History: Number of prior adult arraignments	19.89	18.19
Length of Focal Incarceration (in days)	367.94	178.28

\*p<.05, \* p <.01; \*\*\* p <.001

In Minnesota, which served male release violators and implemented random assignment procedures to identify the comparison group, the only significant difference between treatment and comparison group members was age, with treatment men significantly older than comparison men (**Exhibit 6-5**). Not surprisingly, given the focus on release violators, the average length of incarceration in Minnesota appeared to be shorter than in the other prison-based sites (Connecticut and Florida).

**Exhibit 6-5. Characteristics of Minnesota Sample (All Male)**

	T_Mean (n=194)	C_Mean (n=178)	T-C Diff	Std Dev	T-stat	P value
<b>Age at Focal Incarceration Release*</b>	37.26	34.58	2.68	10.16	2.531	0.012
Race: White	0.30	0.29	0.01	0.46	0.144	0.886
Percent married	0.07	0.08	-0.01	0.26	-0.447	0.655
Criminal History: Number of Adult Arrests	14.65	15.29	-0.64	11.53	-0.533	0.595
Length of Focal Incarceration (in days)	112.30	117.20	-4.88	39.09	-1.193	0.234
Sentenced to Intensive Supervision after focal incarceration	0.49	0.51	-0.02	0.5	-0.370	0.712

\*p<.05, \* p <.01; \*\*\* p <.001

Characteristics for the treatment and comparison samples in New Jersey, which targeted men and women releasing from a county jail and with diagnosed mental health and/or substance use disorders, are shown in **Exhibit 6-6**. As evident, the comparison group contained a disproportionately high number of individuals classified as low risk whereas the treatment group contained more high risk individuals. Although risk level was included as a control variable in the multivariate models, this difference should be kept in mind when interpreting the results.

**Exhibit 6-6. Characteristics of New Jersey Sample**

	T_Mean (n=344)	C_Mean (n=339)	T-C Diff	Std Dev	T-stat	P value
Percent male	0.65	0.67	-0.02	0.48	-0.482	0.630
Age at Focal Incarceration Release	38.13	37.20	0.93	10.74	1.132	0.258
Race: White	0.19	0.14	0.05	0.37	1.622	0.105
Race: Black	0.56	0.57	-0.01	0.5	-0.240	0.810
Race: Other	0.25	0.29	-0.04	0.44	-1.090	0.276
<b>NJ classified as low risk***</b>	0.19	0.34	-0.15	0.44	-4.307	0.000
NJ classified as medium risk	0.26	0.26	0.00	0.44	0.017	0.987
<b>NJ classified as high risk***</b>	0.55	0.40	0.15	0.49	3.791	0.000

\*p<.05, \* p <.01; \*\*\* p <.001

Finally, in Pennsylvania, where the target population was individuals at medium-high need for substance abuse, mental health, or co-occurring services and where treatment and comparison group members came from two different counties, a few differences were evident. The treatment group had a greater proportion of men, were slightly older when they had their first arrest as an adult, and were less likely to have been arrested for a property offense as their focal arrest than comparison men (see **Exhibit 6-7**).

**Exhibit 6-7. Characteristics of Pennsylvania Sample**

	T_Mean (n=452)	C_Mean (n=139)	T-C Diff	Std Dev	T-stat	P value
<b>Percent male*</b>	0.75	0.66	0.09	0.46	2.03	0.043
Length of Focal Incarceration (in days)	153.66	179.56	-25.89	128.89	-2.08	0.019
Criminal History: Number of Adult Arrests	7.66	7.27	0.39	6.13	0.64	0.520
<b>Criminal History: Age of First Adult Arrest**</b>	23.57	21.50	2.08	7.52	2.77	0.002
Focal Arrest: Had Any Person/Violent Offenses	0.50	0.43	0.06	0.50	1.32	0.094
<b>Focal Arrest: Had Any Property Offenses**</b>	0.77	0.88	-0.11	0.40	-2.92	0.002
Focal Arrest: Had Any Drug Offenses	0.43	0.49	-0.06	0.50	-1.24	0.214
Focal Arrest: Had Any Public Order Offenses	0.68	0.64	0.03	0.47	0.85	0.394
Focal Arrest: Other Offense or Unknown	0.16	0.14	0.02	0.36	0.50	0.619

\*p<.05, \* p <.01; \*\*\* p <.001

## 6.2 Rearrest Outcomes

Arrest data, which included dates and offense type for each arrest, were coded as “days until arrest,” reflecting the number of days from each sample member’s release from their focal incarceration until their arrest for particular crimes.<sup>27</sup> We used the BJS National Corrections Reporting Program (NCRP) offense codes and categorized each arrest as being for a person, property, drug, public order, or other offense. In addition to the “days until” measures, we also created binary measures reflecting any rearrest in particular time periods (within 6 months of release, within 12 months of release, within the entire follow-up period<sup>28</sup>) and the total number of rearrests.

### 6.2.1 Bivariate Findings

Bivariate comparisons of the proportion of treatment and comparison group members in each site who had any rearrest within various reference periods are shown in **Exhibit 6-8**, along with the median number of arrests for each group. Rates of rearrest varied by site, and in some cases, by group. Positive treatment effects at the bivariate level were found in a few sites. In Florida, significantly fewer treatment group members were rearrested within 6 and 12 months of release than comparison group members. In Minnesota, significantly fewer treatment group members were rearrested within 12 months of release than comparison group members. In New Jersey, significantly fewer treatment group members were rearrested within 6 months than comparison group members.

<sup>27</sup> Arrests that took place during the focal incarceration were coded with negative values and were not included in the survival analyses modeling time until first arrest.

<sup>28</sup> The specific follow-up period varied for each individual in the sample and was included as an offset in the negative binomial models to account for the differential exposure period.

**Exhibit 6-8. Descriptive Rearrest Data, by Site**

	Any Rearrest Within						Median Number of Arrests	
	6 Months		12 Months		Follow-Up Period			
	Treatment	Comp	Treatment	Comp	Treatment	Comp	Treatment	Comp
CA	67 (39.64%)	70 (36.27%)	98 (57.99%)	111 (57.51%)	133 (78.70%)	138 (71.50%)	3	4
CT	180 (48.81%)	185 (47.87%)	247 (65.69%)	255 (67.28%)	329 (87.50%)	321 (84.70%)	3	3
FL	51* (17.77%)	71 (24.15%)	82* (28.57%)	118 (40.14%)	172 (59.93%)	176 (59.86%)	2	2
MA	39 (24.07%)		75 (46.30%)		114 (73.55%)		2	
MN	35 (18.04%)	40 (22.47%)	61* (31.44%)	71 (39.89%)	132 (68.04%)	125 (70.22%)	1.5	1
NJ	51** (14.83%)	74 (21.83%)	99 (28.78%)	106 (31.27%)	180 (52.33%)	166 (48.97%)	2	2
PA	110 (24.34%)	30 (21.58%)	177 (39.15%)	44 (31.65%)	282 (62.39%)	79 (56.83%)	1	1

\*p<.05, \* p <.01; \*\*\* p <.001

Not surprisingly, in all sites, increasing proportions of sample members were rearrested with each successive follow-up period such that 49-88% of sample members had an arrest at some point during the total follow-up period. Importantly, however, the disparate follow-up periods for each individual in the sample should be kept in mind when interpreting the last two sets of columns in Exhibit 6-8. Individuals released at the tail end of the eligibility window had shorter follow-up periods than those released at the beginning, and in some sites, there were systematic differences between treatment and comparison group members. As discussed in Chapter 2 (see Exhibit 2-9), the treatment groups in Minnesota, New Jersey, and Pennsylvania had significantly longer follow-up periods for rearrest outcomes than the comparison groups—a pattern that should makes it more difficult to detect positive treatment effects at the bivariate level in these sites. Because of the variable follow-up periods for each individual in the sample, the negative binomial models adjust for each sample member’s follow-up period.

*6.2.2 Multivariate Models*

Several types of multivariate models were run to assess the impact of AORDP enrollment on arrest outcomes in each site while controlling for several potentially confounding variables. **Binary logistic regression** models were estimated to compare the odds of rearrest within 6 and 12 months of release for between the treatment and comparison groups. Next, **negative binomial regression models** were used to determine whether AORDP enrollment affected the *number* of post-release arrests incurred by treatment and comparison group members in each site. The time to first rearrest was assessed using **parametric survival models**. Finally, **competing hazard Cox models** were estimated to examine the effects of AORDP participation

on the first new arrest *by offense type* (person, drug, property, and public order/other). (See Chapter 2 for more details about the analytic approach.)

All multivariate models controlled for as many potentially confounding variables as possible (based on data availability) including age, race, ethnicity, gender, current offense, prior criminal record (e.g., age at first arrest, number of prior arrests or commitments), risk scores, length of stay, number of dependents, and marital status. The number and type of independent variables included in each model varied by site based on relevance and availability of data. In addition, the negative binomial models included the number of days in the follow-up period as an offset.

**Exhibit 6-9** summarizes the main treatment effects in each site (except Massachusetts, which did not have a comparison group) for the binary logistic regression, negative binomial regression, and parametric survival models. The exhibit shows the parameter estimates and standard errors for the treatment indicator, with full model results for each site shown in **Appendix H**.

The results generally indicated few significant effects of AORDP enrollment on recidivism net of other control variables. However, two positive treatment effects were found. In New Jersey, those enrolled in the AORDP program had a significantly lower probability of being rearrested within 6 months than comparison group members ( $p < 0.05$ ). In Florida, those who enrolled in the AORDP program had a significantly lower probability of being rearrested within 12 months ( $p < 0.01$ ). In addition to the isolated positive effects, a few negative effects were also found. In Connecticut, treatment group members incurred more arrests in the follow-up period (the logs of expected arrest counts were .163 units higher for treatment group members than comparison cases) and had a shorter time to first arrest, on average, than comparison group members ( $p$  for both differences  $< 0.05$ ). In Pennsylvania, treatment group members incurred more arrests in the follow-up period than comparison group members ( $p < 0.001$ ); the logs of expected arrest counts were .528 units higher for treatment group members than comparison cases.

**Exhibits 6-10** through **6-16** shows the Kaplan–Meyer cumulative failure curves for days until first arrest separately for the treatment and comparison groups in each sites. Although the charts show a longer time until first arrest for the treatment group than the comparison group in a few sites, the multivariate models (which adjust for a number of control variables) did not find a significant positive treatment effect for this outcome in any site (and, in Connecticut, revealed a shorter time until first arrest for the treatment group).

**Exhibit 6-9. Summary Results for Binary Logistic, Negative Binomial, and Parametric Survival Models**

	Any Arrest Within 6 Months			Any Arrest Within 12 Months			Total Number of Arrests			Time until Arrest		
	OR	Parameter Estimate	SE	OR	Parameter Estimate	SE	Incident Rate Ratio	Parameter Estimate	SE	Time Ratio	Parameter Estimate	SE
CA	1.546	.436	(.235)	1.315	.274	(.234)	.968	-.033	(.100)	.814	-.206	(.192) <sup>°</sup>
CT	.922	-.081	(.157)	.867	-.143	(.167)	1.177	.163*	(.066)	.768	-.264*	(.106) <sup>°</sup>
FL	.709	-.343	(.224)	.552	-.594**	(.193)	.963	-.033	(.108)	1.356	.305	(.159) <sup>°</sup>
MA												
MN	.780	-.248	(.271)	.711	-.341	(.233)	.964	-.037	(.127)	1.077	.074	(.135) <sup>°</sup>
NJ	.608	-.497*	(.215)	.857	-.154	(.178)	1.052	.051	(.120)	1.139	.130	(.157) <sup>°°</sup>
PA	1.252	.225	(.248)	1.453	.374	(.222)	1.696	.528***	(.129)	1.139	.130	(.194) <sup>°°</sup>

\*p<.05, \* p <.01; \*\*\* p <.001; OR=odds ratio; SE=standard error

Note: ° = Log Logistic; °° = Log Normal; °°° = Weibull; °°°° = Exponential

Exhibit 6-10. Cumulative Failure Curve for Days Until First Arrest, California

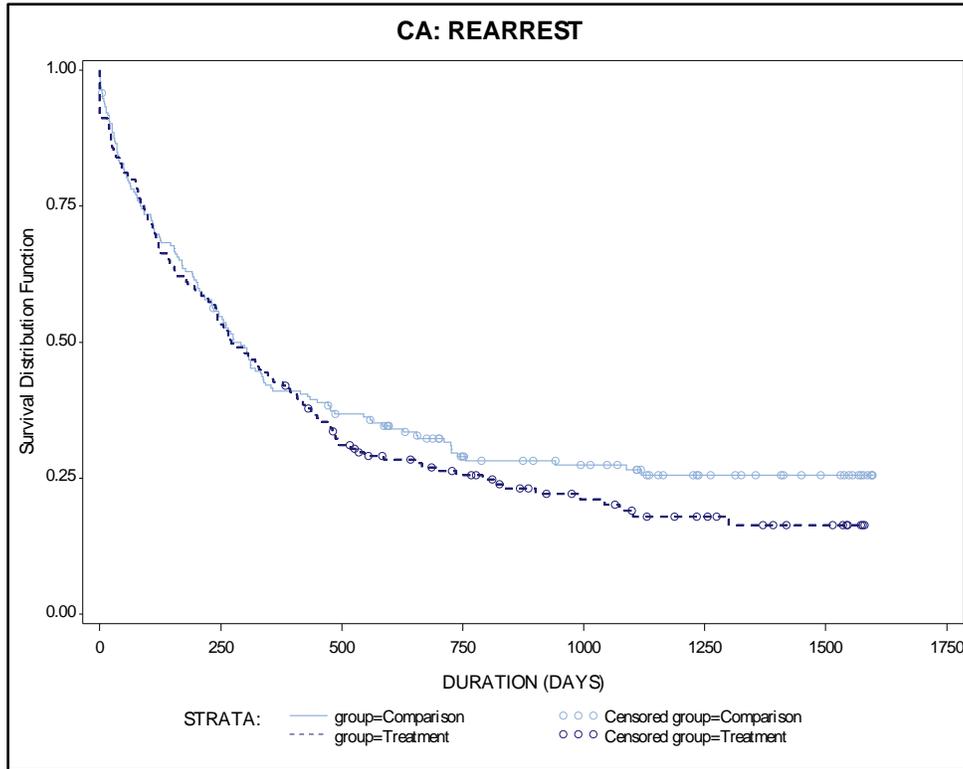


Exhibit 6-11. Cumulative Failure Curve for Days Until First Arrest, Connecticut

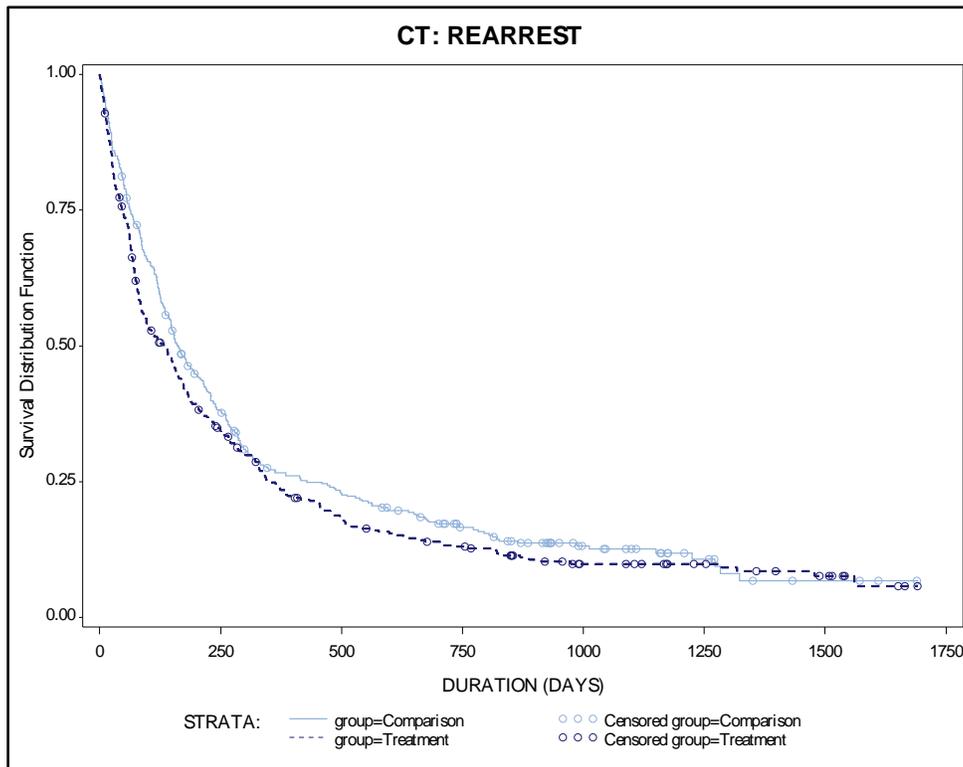


Exhibit 6-12. Cumulative Failure Curve for Days Until First Arrest, Florida

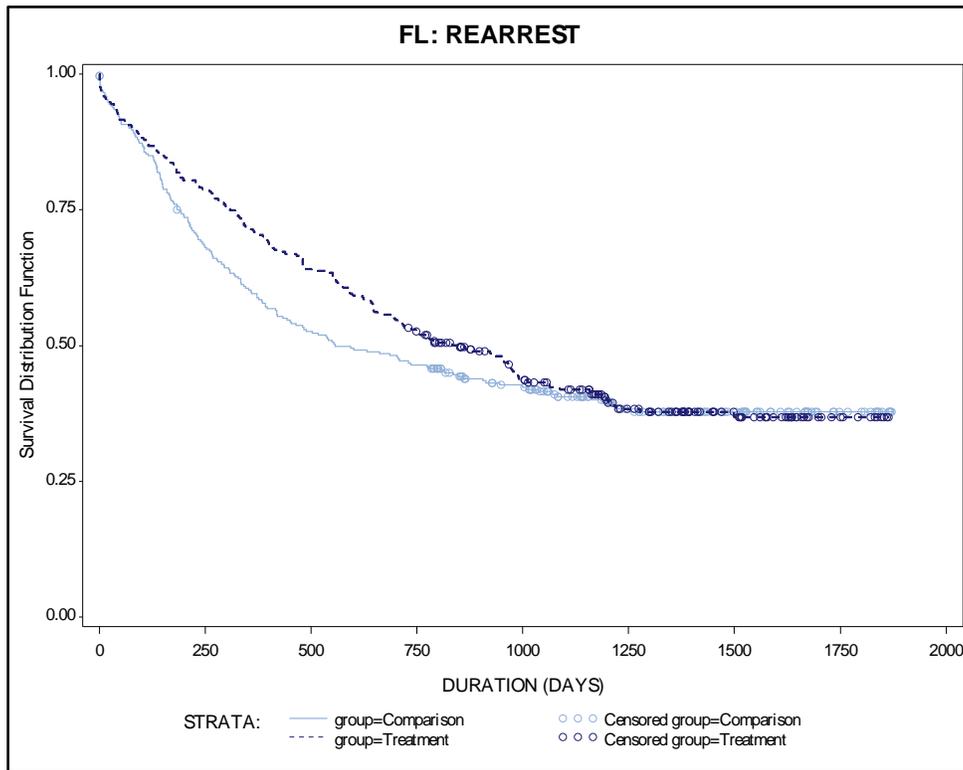


Exhibit 6-13. Cumulative Failure Curve for Days Until First Arrest, Massachusetts

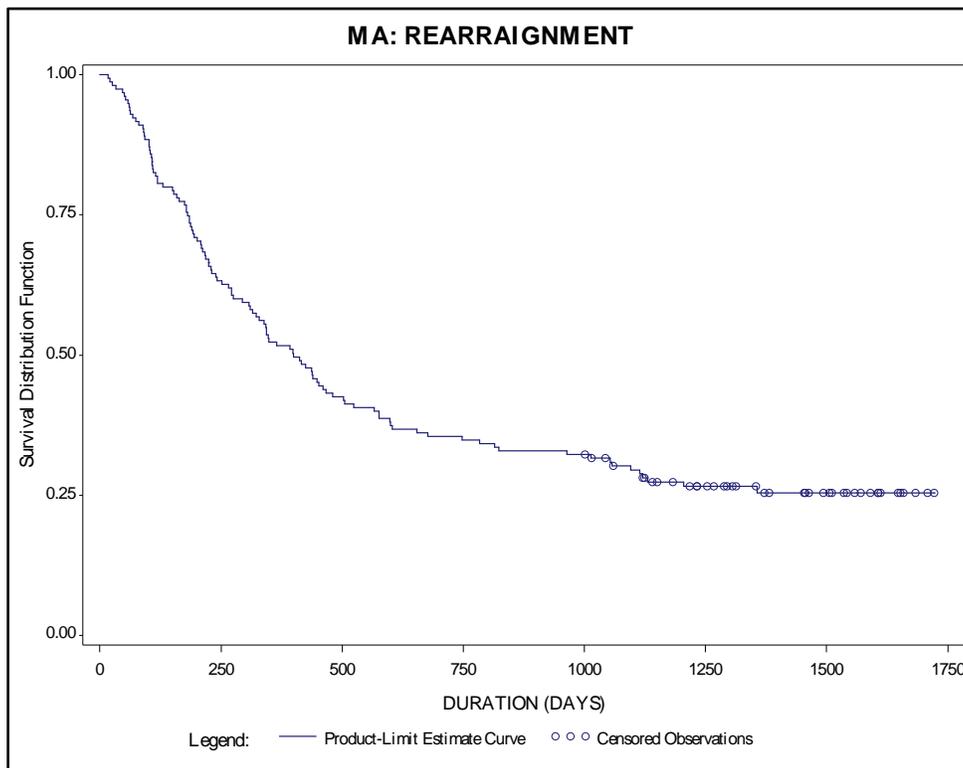


Exhibit 6-14. Cumulative Failure Curve for Days Until First Arrest, Minnesota

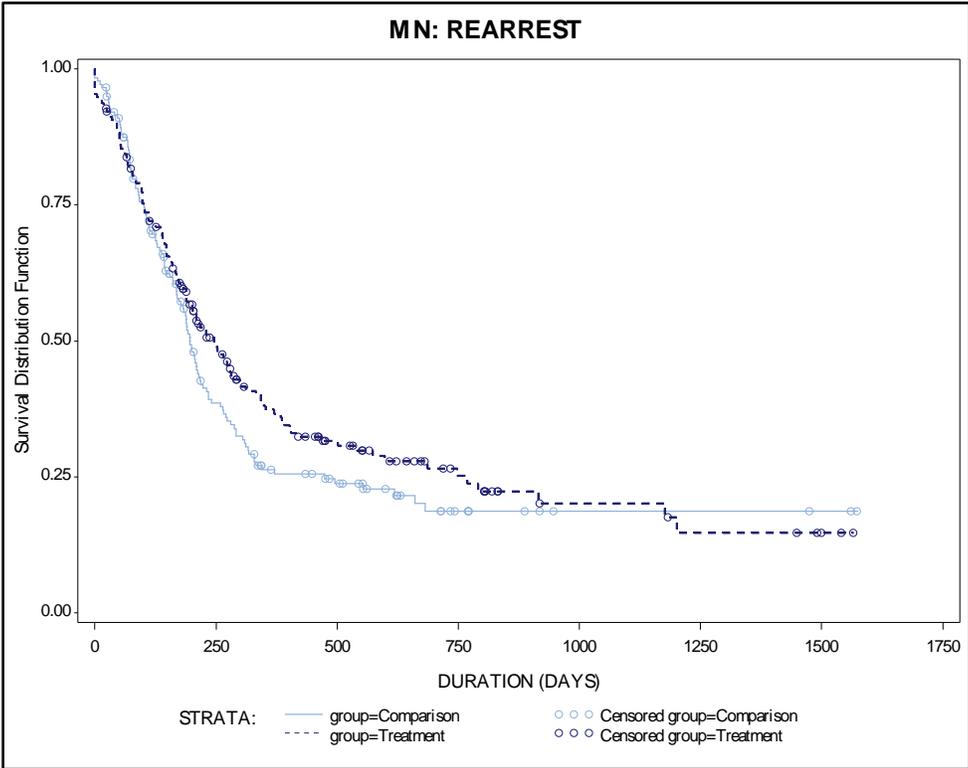
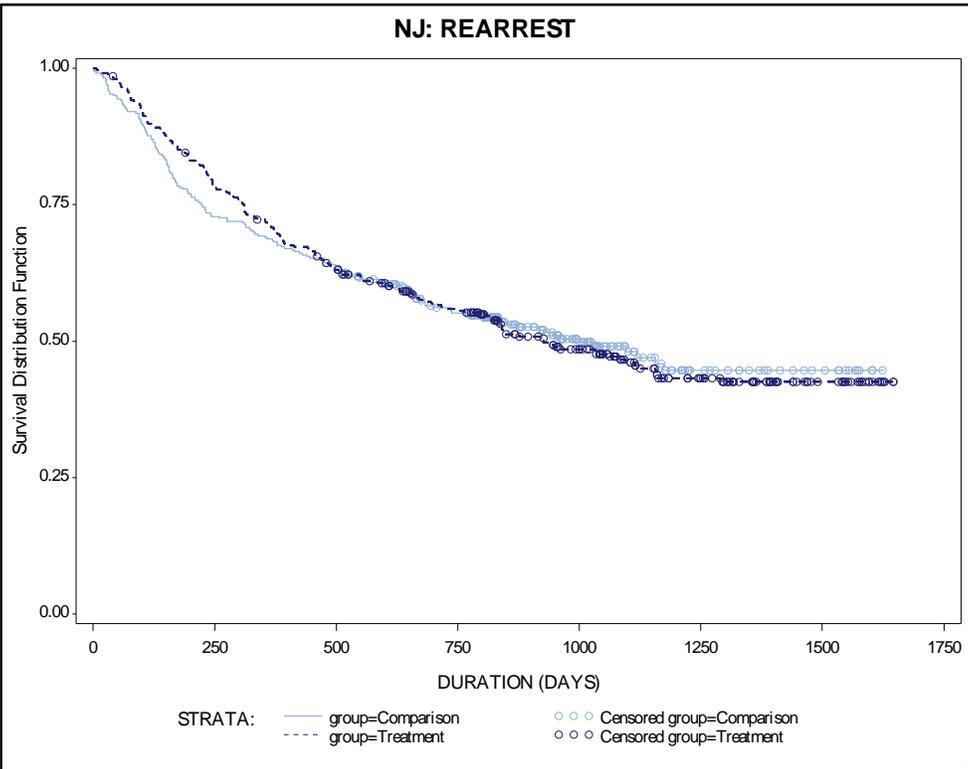
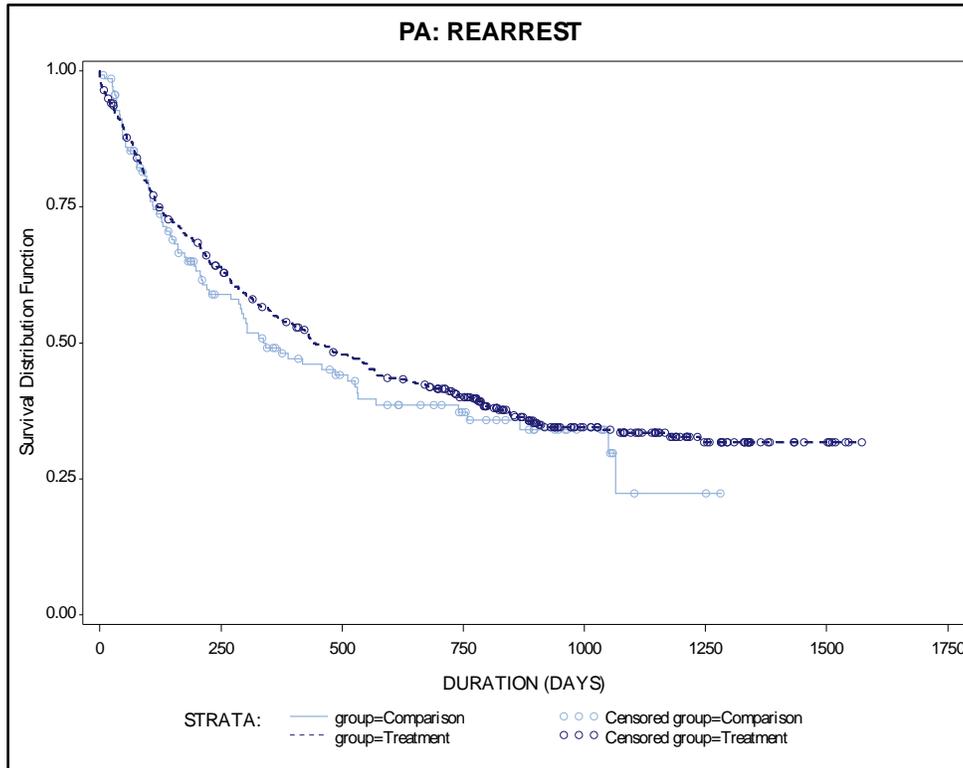


Exhibit 6-15. Cumulative Failure Curve for Days Until First Arrest, New Jersey



**Exhibit 6-16. Cumulative Failure Curve for Days Until First Arrest, Pennsylvania**



The results of the competing hazard Cox models, which examined the effects of AORDP participation on the first new arrest by offense type, are summarized in **Exhibit 6-17**. In the exhibit, negative coefficients imply a lower hazard rate for individuals in the treatment group, which indicate positive treatment effects while positive coefficient indicate negative treatment effect. In general, the findings are mixed. Positive effects were found for time to first public order/other arrest in New Jersey and Pennsylvania, such that AORDP participants had a lower hazard rate for this type of crime ( $p$  for both differences  $<0.05$ ). Negative effects were found for time to first property arrest in California ( $p < 0.01$ ) and time to first drug arrest in Minnesota ( $p < 0.05$ ). Mixed effects were found in Connecticut. In this site, the treatment group had a lower hazard rate for time to first person arrest and property arrest but a higher hazard rate for time to first drug arrest ( $p < 0.001$  for all differences).

**Exhibit 6-17. Summary Results for Competing Hazard Models (Parameter Estimates and Standard Errors)**

	Person Arrest	Property Arrest	Drug Arrest	Public Order or Other Arrest
CA	.180 (.255)	.473** (.174)	.673 (.376)	-.730 (.545)
CT	-3.787*** (1.013)	-1.649*** (.303)	1.879*** (.181)	-.161 (.124)
FL	-.180 (.122)	-.404 (.317)	-2.944 (3.347)	!
MA				
MN	-.173 (.316)	-.468 (.416)	.068* (.343)	.059 (.166)
NJ	.033 (.288)	.296 (.192)	-.021 (.122)	-.825* (.377)
PA	.373 (.365)	-.219 (.167)	.735 (.625)	-.807* (.336)

\*p <.05; \*\* p <.01; \*\*\* p <.001

!=Model would not converge

## 6.3 Incarceration Outcomes

Data on reincarceration in state prison was obtained for all sites except Massachusetts and New Jersey. From these data, we created variables reflecting any reincarceration in prison and the number of days until first reincarceration. This measure does not distinguish between reincarcerations for new offenses and those for revocations. In two sites (California and Pennsylvania), we were also able to examine reincarceration in county jail. In these sites, we examined any reincarceration in jail and the number of days until first jail reincarceration.

### 6.3.1 Bivariate Findings

Bivariate comparisons of the proportion of treatment and comparison group members in each site who had any reincarceration in prison and jail during the follow up period are shown in **Exhibit 6-18**. As evident from the exhibit, in all sites, the treatment and comparison groups had a comparable likelihood of getting reincarcerated in a state prison. However, in both California and Pennsylvania, treatment group members were significantly less likely than comparison group members to be reincarcerated in county jail.

**Exhibit 6-18. Descriptive Reincarceration Data, by Site**

	Any Reincarceration			
	Prison		Jail	
	Treatment	Comparison	Treatment	Comparison
CA	6 (3.55%)	5 (2.59%)	71 (42.01%)**	112 (58.03%)
CT	166 (44.15%)	151 (39.84%)	n/a	n/a
FL	17 (5.92%)	24 (8.16%)	n/a	n/a
MA	n/a	n/a	n/a	n/a
MN	130 (67.01%)	109 (61.24%)	n/a	n/a
NJ	n/a	n/a	n/a	n/a
PA	27 (5.97%)	5 (3.60%)	118 (26.11%***)	100 (71.94%)

\*p<.05, \* p <.01; \*\*\* p <.001

### 6.3.2 Multivariate Models

The time to first reincarceration was assessed using **parametric survival models**. These models controlled for several potentially confounding variables including age, race, ethnicity, gender, current offense, prior criminal record (e.g., age at first arrest, number of prior arrests or commitments), risk scores, length of stay, number of dependents, and marital status. As with the rearrest models, the number and type of independent variables included in each model varied by site based on relevance and availability of data. **Exhibit 6-19** summarizes the main treatment effects, by site, for the parametric survival models. The exhibit shows the parameter estimates and standard errors for the treatment indicator, with full model results for each site shown in **Appendix H**.

**Exhibit 6-19. Summary Results for Parametric Survival Models (Parameter Estimates and Standard Errors)**

	Time Until Prison Reincarceration			Time Until Jail Reincarceration		
	Time Ratio	Parameter Estimate	SE	Time Ratio	Parameter Estimate	SE
CA	.931	-.071	(.625) °°°°	2.138	.760**	(.235)°
CT	.614	-.488**	(.174) °°	n/a	n/a	n/a
FL	.996	.298	(.388) °°°	n/a	n/a	n/a
MA	n/a	n/a	n/a	n/a	n/a	n/a
MN	.960	-.041	(.122) °°	n/a	n/a	n/a
NJ	n/a	n/a	n/a	n/a	n/a	n/a
PA	.797	-.227	(.972) °°	8.539	2.145***	(.287) °°

\*p<.05, \* p <.01; \*\*\* p <.001

° = Log Logistic; °° = Log Normal; °°° = Weibull; °°°° = Exponential

The results indicate that AORDP enrollment did not generally affect time to first reincarceration in state prison. However, in Connecticut, a negative treatment effect was observed such that the treatment group had a shorter time until first reincarceration in prison ( $p < 0.01$ ).

Interestingly, however, in both sites in which jail reincarceration data could be obtained (California and Pennsylvania), positive treatment effects were observed for this outcome. Specifically, in California and Pennsylvania, treatment group members had a longer time until first jail reincarceration ( $p$  for both differences  $< 0.001$ ).

## 6.4 Supervision Outcomes

We attempted to obtain supervision data in each site to examine technical violations and probation revocations. However, due to issues with data availability, we were only able to examine these outcomes in Florida. In this site, comparable proportions of treatment (9.4%) and comparison group members (11.9%) received a technical violation after their release and about 6% of both groups had their supervision revoked during the follow-up period. Parametric survival models revealed comparable risk for both outcomes between treatment and comparison group members. These findings could be the result of few people receiving post-release supervision in Florida and therefore not having the opportunity to be violated or revoked. The Florida Department of Corrections FY 2015-2016 Annual Report shows that only a third of released prisoners receive supervision (Florida Department of Corrections, n.d.).

## 6.5 Chapter Summary

Although some scattered effects—both positive and negative—were found in the site-specific recidivism analyses, the general pattern was of null findings. No clear pattern of consistent positive (or negative) effects was identified in any site. AORDP participation did not generally affect the likelihood of getting rearrested within 6 or 12 months after release from the focal incarceration (although some positive effects were found for these outcomes in Florida and New Jersey) and when considering the total number of arrests, the treatment groups in Connecticut and Pennsylvania had *more* rearrests than the comparison group. AORDP participation also did not appear to positively affect individual's time until first rearrest, although when examining survival rates for rearrests for specific offense types, a scattering of positive (and negative) effects were found. In both of the sites in which jail reincarceration data could be obtained (California and Pennsylvania), AORDP participants had a longer time until their first jail reincarceration than comparison group members. However, no positive findings for prison reincarceration were observed (and in Connecticut, the treatment group had a shorter time until their first prison reincarceration than the comparison group).



# Chapter 7. Conclusions

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## 7.1 Summary of Findings

### 7.1.1 Process Evaluation

The AORDP grantees provided a comprehensive mix of services to justice-involved adults under state or local custody who were about to return to the community. Grantees selected program interventions and services matched to the unique needs of their respective target populations (see Section 3.1 for a detailed discussion of the populations served by each site). While the programs had some common elements, they should be considered as seven distinct models for reentry programming. Further, each program was implemented in a unique contextual environment and some grantees had more established infrastructures for reentry programming than others.

The programs provided an array of pre- and post-release services (although data from the prospective outcome study indicate that pre-release services were much more heavily emphasized than post-release services), including education and literacy programs, job placement, housing services, and mental health and substance abuse treatment. Risk and needs assessments, transition case planning, and case management were key elements in each grantees' AORDP program. According to stakeholder interviews, numerous systems-level improvements occurred because of the SCA mandates to create comprehensive and coordinated service networks to support reentering individuals and use EBPs. Prospects for sustaining at least some portions of the AORDP programs were promising in most sites, with the AORDP model developed in several sites described as a model for expansion or replication.

### 7.1.2 Cost Study

The cost study documented that the seven AORDP sites accessed a total of \$37,660,000 in federal and local resources to plan and implement their respective reentry programs from FY2011 through 2016. Federal SCA funding totaled approximately \$20 million (with an average award of approximately \$2.9 million per site), with the grantees contributed an additional \$22.1 million in local resources (required in-kind and cash match with addition occasional, site-specific contributions) toward program implementation. On average, grantees spent \$4.6 million on their AORDP programs. Case management comprised the sites' main spending priority at approximately 44% of program expenditures. This was followed by administrative mental and behavioral health services (20%) and administrative costs (17%). Housing supports was the smallest spending category, comprising just 4% of the sites' expenditures. Average program costs, based on the sites' self-reported numbers of participants served and site-verified budget data, range from \$3,509 (Florida) to \$19,354 (Massachusetts) with an overall average per participant cost of \$6,778.

### 7.1.3 Prospective Outcome Study

**Access to Services.** The prospective outcome study found that AORDP enrollment clearly increased access to services, but the greatest impact was found for services delivered during the focal incarceration, with decreasing proportions of both treatment and comparison group members receiving nearly every service type after release. For the following service groupings, AORDP participants were significantly more likely to receive services than comparison group members **during the focal incarceration only**: life skills/money management, cognitive behavioral services, mentoring/faith-based services, and child/family services. For the following service groupings, AORDP participants were significantly more likely to receive services than comparison group members **both during the focal incarceration and within the first 6 months of release**: service coordination, employment services, and substance use. For mental health services, AORDP participants were significantly more likely to receive services than comparison group members **within the first 6 months of release only**. No treatment differential was observed for any service groupings **within 6-12 months of release**. Finally, no treatment effects were found **at any time period** for public benefits/resources, educational services, and physical health services.

The findings related to access to services from the prospective outcome study, which were based on self-report, were largely consistent with our understanding of the program models based on the process evaluation. For example, none of the AORDP sites emphasized physical health services, educational services, or public benefits as core components of their models. Another pertinent consideration from the process evaluation is the distinction between referrals and delivery of services. Based on process evaluation findings, the AORDP programs worked hard to increase their referral networks. However, referrals did not always translate into service delivery, as most post-release services were voluntary and there were a number of barriers to individuals' access of post-release services (as described in "Retention of Participants, Section 3.2).

**Reentry Outcomes.** AORDP enrollment did not generally affect reentry outcomes across a large set of domains, including self-reported recidivism, family functioning, negative peer exposure and gang activity, substance use, physical and mental health, employment, housing, violence and victimization, and compliance with supervision. When comparing treatment and comparison group members' status on these outcomes at 6 and 12 months post release, the two groups were similar on nearly every outcome. However, when examining sample members' overall **trajectories** on five core outcomes using latent growth curve modeling, we found positive treatment effects for housing independence and employment. Specifically, the treatment group had more positive trajectories on these outcomes over time than the comparison group. This pattern was found even when controlling for the services that people received.

**Rearrest Outcomes.** When examining rearrest outcomes among the prospective sample using administrative data, no treatment effects were found. The treatment and comparison groups were equally likely to be rearrested within 6 and 12 months, had comparable number of

rearrests, and a comparable time period until their first rearrest overall as well as for specific offense types.

#### 7.1.4 *Site-Specific Recidivism Analyses*

The site-specific recidivism analyses generally found null treatment effects, although some scattered effects—both positive and negative—were found. No clear pattern of consistent positive (or negative) effects was identified in any site.

*Arrest Outcomes.* AORDP participation did not generally affect the likelihood of getting rearrested within 6 or 12 months after release from the focal incarceration. However, positive treatment effects were found in two sites. In Florida, AORDP participants were less likely than comparison group members to be rearrested within 12 months and in New Jersey, AORDP participants were less likely than comparison group members to be rearrested within 6 months. When considering the total number of arrests, no positive treatment effects were found and, in Connecticut and Pennsylvania, the treatment group had more rearrests than the comparison group. AORDP participation also did not appear to positively affect individual’s time until first rearrest. In no sites did the treatment group have a longer time until their first arrest than comparison group members and in Connecticut, the treatment group had a shorter time until their first arrest than the comparison group. Finally, when examining survival rates for rearrests for specific offense types, results were largely null. However, a scattering of positive effects were found, including time until first person rearrest in Connecticut, time until first property rearrest in Connecticut, and time until first public order or other rearrest in New Jersey and Pennsylvania. Some negative effects were also found, including time until first property rearrest in California, and time until first drug arrest in Connecticut and Minnesota.

*Jail Reincarceration.* In both of the sites in which jail reincarceration data could be obtained, positive treatment effects were found. Specifically, AORDP participants in California and Pennsylvania had a longer time until their first jail reincarceration than comparison group members in these sites.

*Prison Reincarceration.* In the five sites in which data on prison reincarceration were obtained, treatment effects on this outcome were largely null. However, a negative treatment effect was observed for in Connecticut, where treatment group members had a shorter time until their first prison reincarceration.

## 7.2 Design Limitations and Considerations

### 7.2.1 *Limitations*

*Prospective Study.* When considering the findings presented in this report, particularly the outcome evaluation findings, several limitations should be kept in mind. The prospective study had a small sample (516 individuals were enrolled in the study), which limits the statistical power of this study component and makes it difficult to detect treatment effects. This

limitation was exacerbated by the fairly high attrition experienced in the prospective study (40% percent of the sample was not interviewed at 6 months, and 38% was not interviewed at 12 months), as the analytic sample size for the 6- and 12-month analyses was reduced to around 300. The high attrition also introduces some concerns about the representativeness of the analytic samples; however, the propensity model weights developed to adjust for selection bias also appeared to eliminate any observed attrition bias and the treatment and comparison groups had similar attrition rates.

Another design limitation that should be kept in mind is the nonexperimental study designs implemented in most sites. Although random assignment was implemented in two sites (Minnesota and New Jersey), which limits concerns about selection bias, the quasi-experimental nature of the designs established in the other sites (primarily entailing matching techniques to replicate selection of the treatment group on individuals with similar characteristics) does not reduce concerns about selection bias to the same extent. In these sites, the treatment and comparison group members may have differed on characteristics that could have influenced the outcomes explored in the study. Propensity modeling was used as a post-hoc strategy for minimizing remaining selection bias, given the nonexperimental designs. Although the two groups were equivalent on a number of observable characteristics after applying the weights (as described in Appendix C), this technique cannot completely eliminate the potential for selection bias.

Finally, the disparate program models should be kept in mind when interpreting the prospective study results. By design, the prospective study was intended to assess the overall impact of SCA funding on the set of grantees by pooling data across sites. However, it should be kept in mind that each site's target population, service delivery approach, and infrastructure for reentry programming was unique, with essentially seven distinct models represented in the evaluation. Therefore, the prospective study cannot be used to draw conclusions about the effectiveness of specific program models—only the overall SCA programs implemented across sites during the time period of the prospective study enrollment. Notably, the prospective study took a “snapshot” approach in enrolling individuals who participated in the seven SCA programs at a particularly point in time. The prospective sample therefore only included a small portion (approximately 13%) of the total, cumulative number of individuals enrolled across these sites, which limits the generalizability of the prospective findings even for the seven sites included in the evaluation.

*Site-Specific Recidivism and Cost Studies.* The site-specific recidivism analyses overcame some of the limitations associated with the prospective study, mainly the small sample sizes and pooling of data across site. This study component had much larger samples (because administrative data were obtained for all individuals enrolled in AORDP programming and the comparison group in each site) and had sufficient statistical power to assess outcomes individually by site. However, similar design limitations as encountered in the prospective study plagued the site-specific recidivism analyses. In each site except Minnesota, matching (using available administrative data) was used to identify comparison group members that were as similar as possible to individuals who enrolled in the AORDP programs). In some sites, very little

administrative data was available for this purpose, which limits the quality of the selection process.

Another limitation of the site-specific recidivism analyses was the exclusive focus on criminal justice outcomes. Due to limitations in the data maintained by the relevant agencies in the seven sites, the analyses were limited to rearrest and, in most sites, reincarceration in state prison. Jail reincarceration data could only be obtained in two sites and supervision outcomes in one. We could not explore other important reentry outcomes, such as employment, substance use, or housing for this study component. Further, due to extremely limited data on service receipt, we could not assess the impact of SCA funding on access to services or the relationship between service utilization and rearrest among the administrative data samples.

Finally, because we made the decision to forego monetizing recidivism outcomes in the cost study (based on the site-specific recidivism analyses showing that SCA program participation was not associated with reductions in the overall number of arrests), we cannot determine if a site's approach may have been cost effective or ineffective. Violent crimes are more costly than other types of crimes, so the lack of an effect for general recidivism does not necessarily guarantee no effects for costs.

### *7.2.2 Considering the Treatment Differential*

When considering the general lack of impact of AORDP enrollment on criminal justice and other reentry outcomes, the limited treatment differential should be kept in mind. Although SCA funding did increase access to services for individuals who enrolled in the programs, the prospective outcome study revealed that most of the treatment differential was evident only in the pre-release phase. Few AORDP participants received services post-release (see Section 5.1), which means that the outcome evaluation essentially compared outcomes between individuals who got a larger number of pre-release services and those who got fewer pre-release services. In addition, the treatment differential was fairly modest. Not all treatment group members actually received comprehensive services and, at the same time, the comparison group certainly had access to services both prior to and after release. Comparison group members were not stopped from accessing comparable (or even the same) services. This means that that, as with most evaluations of human services programming, by no means were we comparing SCA programming to “nothing”. In fact, for many services, the comparison group was just as likely as the treatment group to access the services after release. In some sites, these services were delivered as part of standard reentry programming and it is possible that some changes implemented under SCA in the jurisdictions affected “treatment as usual” for the comparison group members that were included the evaluation. This phenomenon is a growing reality for evaluations of reentry programs, as many jurisdictions, including jails, have worked to develop reentry structures over the past decade. The fact that “treatment as usual” may actually reflect an integrated reentry approach has implications for truly understanding the counterfactual in evaluation studies.

In addition to the lack of a stark treatment differential—particularly one that extended beyond release, it is important to note that we were unable to obtain high quality data on service

duration, intensity, or quality. Our approach for the prospective study was to document whether sample members received each of various types of services. Documenting how long people received services (in terms of the number of hours of exposure and over what time period, which is extremely difficult to capture via self-reported data collection and typically unavailable in grantee administrative records) may have revealed further information about the extent of the treatment differential between the two groups. A related consideration is that we also have no information about the quality of services received or the continuity from pre- to post-release, in terms of whether provider curricula or approaches were aligned with one another or contradictory. This is an important consideration for reentry programming, although extremely difficult to document in an evaluation.

Finally, it should be noted that our intent to treat approach counted anyone who enrolled in the AORDP program as a treatment group member. Some individuals may have dropped out shortly after enrollment or not even received any services, yet they were still considered AORDP participants. This conservative approach, which is considered the gold standard in evaluation studies, further dilutes the actual treatment differential among study sample members. For this particular evaluation, treatment group assignment was sometimes complicated by a lack of clear definitions and procedures at the sites regarding enrollment, engagement, and completion (either successful or not).

### *7.2.3 Considering Local Evaluation Findings*

Some of the AORDP sites conducted local evaluations of their programming, and these results should be considered when interpreting the cross-site evaluation findings. The MN DOC's local evaluation found null effects for rearrest and reincarceration for a new offense (Clark, 2015), both of which are consistent with our study findings. The local evaluation in this site did not examine time until first arrest for specific offense types (where we found a negative effect for one crime type: drug crimes). Interestingly, the agency explored two additional outcomes that we did not, and found positive treatment effects. Specifically, treatment group members had a lower risk of supervised release revocations and reconvictions. Additional, "as-treated", comparisons revealed that receiving more reentry assistance significantly reduced supervision revocations as well as rearrests. Analyses also showed that employment assistance, including subsidized employment, was especially effective at reducing recidivism (Clark, 2015).

The CT DOC's process and outcome evaluation of NHRI, conducted by researchers at the University of Connecticut, did not find significant treatment effects with respect to time to first rearrest or reincarceration in the 12-months after release from the focal incarceration. Subgroup analyses found that for both treatment and comparison group members, release type (halfway house versus probation) and risk score affected risk of rearrest: participants released to a halfway house were at less risk of rearrest than those released to probation; in turn, the hazard of rearrest increased 31% for every increase in TPAI score. The evaluation also found that both treatment and comparison group members reported increased satisfaction with their housing situation, improved mental health, and decreased use of alcohol and drugs over time,

although both groups also reported less community integration over time (Baker, Marin, & Hsiu-Ju, 2013).

The Beaver County, PA, local evaluation consisted of an examination of reincarceration rates among AORDP participants but did not include a comparison group. The analyses revealed a 20% decrease in reincarceration rates among ChancesR participants compared to the baseline year of 2011. Further, those who “remained in service” longer than 65 days had lower recidivism rates than those with less than 65 days of service (HPW Associates, 2016). When taking into consideration our site-specific analyses for Pennsylvania, which did include a comparison group from a different county and found that the treatment group had a longer time to reincarceration in jail than the comparison group, these results are encouraging.

### 7.3 Implications for Policy and Program Development

Findings from this evaluation suggest several implications for reentry policy and practice, as well as program development. Reentry work continues to evolve as the evidence base grows. With regard to the SCA specifically, since the conclusion of the AORDP grant funding period, BJA has made several modifications to SCA grant requirements to reflect emerging research, the needs of the field, and the implementation experiences of grantees. Such changes include an emphasis on practitioner-researcher partnerships (grantees must work with a research partner to develop and implement their programs and track specific outcomes), greater use of available data and innovation for intervention development, the combination of planning and implementation into multiyear planning with full funding contingent on the submission of detailed research and implementation plans, requirements that grantees use a validated risk/needs assessment tool, and increased emphasis of assessing outcomes (and using standardized operationalization of recidivism).<sup>29</sup> The results of the AORDP evaluation suggest further considerations for policymakers and practitioners involved in reentry work.

#### 7.3.1 *Expand Conceptualization of Reentry Success*

Future evaluations should examine—and policymakers should consider—multiple outcomes conducive to reentry success, including incremental progress and indicators of increased stability among reentering individuals. Currently, recidivism remains the primary measure of reentry success for most evaluations. It is extremely difficult for reentry programs to achieve large reductions in recidivism. The AODRP grantees served a high need population with significant barriers to overcome (e.g., low educational attainment, few marketable skills, high levels of addiction and mental illness, limited social and community supports, homelessness, etc.), and it is unlikely that substantial reductions in recidivism can be achieved without addressing the many criminogenic risk factors involved. Clearly, other outcomes are worthy of investigation. Participant milestones like earning a GED are significant successes in and of

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<sup>29</sup> The current evaluation assessed the impact of the AORDP programs as implemented from approximately 2012 to 2015, therefore it cannot speak to the effectiveness of any changes made to the SCA grant program after that point.

themselves; they may also represent an important incremental building block leading to greater stability (i.e., more and better job options).

Traditional criminal justice outcome metrics also imply an unrealistic linear path between programming, services, and cessation of criminal activity. Although the comprehensive services provided by the AORDP grantees are critical to meeting participants' multiple needs, there is a chain of causal connections that must be made between teaching someone how to develop a resume, make better decisions, abstain from drugs and alcohol, and forsake crime. Time, resource, and measurement limitations make it difficult for evaluations to assess these paths.

Yet, this evaluation found some evidence that AORDP participation improved housing independence and employment, but not criminal behavior (or rearrest). It may be that a longer follow-up period is needed to detect the long-term effects on rearrest, or it may be that having stable housing and a job do not always translate into abstinence from criminal behavior. Taking into account these milestones, as well as more nuanced criminal justice outcomes such as prolonged time to reoffending, decreases in offending over time, and changes in the severity of reoffending may offer important key insights into the path toward reentry stability and success. More research should be done to explore the interplay between these factors over time.

### *7.3.2 Incorporate Cognitive Behavioral Interventions as Core Reentry Components*

Motivating the reentry population to change their thinking and lifestyle is extremely challenging. Yet the efficacy of cognitive behavioral interventions (CBI) to reduce the likelihood of reoffending is well-substantiated (Lipsey, Landenberger, & Wilson, 2007; Pearson, Lipton, Cleland, & Yee, 2002; Wilson, Bouffard, & MacKenzie, 2005) and widely viewed by researchers as a core component of any comprehensive reentry strategy. As described in Chapter 3, however, cognitive-based interventions were not a core component of many sites' reentry AORDP programming. Four grantees offered a cognitive behavioral change program, either pre- or post-release or both, and worked to deliver the full curriculum; the remaining three grantees created their own CBI approach, based on manualized materials or by combining manualized materials with other resources. CBT should continue to be emphasized as a core reentry component in reentry programming, ideally pre-release (and in conjunction with other key services), where a full CBT curriculum could be delivered at the right intensity, and in a custodial setting where staff—both programming and security—are trained on CBT and able to reinforce CBT principles in their interactions with participants.

### *7.3.3 Identify Opportunities to Provide Long-term, Post-release Supports*

The study findings that few sample members received post-release services (and that there was essentially no difference in the likelihood of getting services 12 months after release between treatment and comparison group members) speaks to the need for a greater emphasis on the delivery of post-release services. Most AORDP programs offered relatively short periods of post-release community-based services and supports (i.e., less than six months). Further, decisions to discharge participants were often governed by budgetary constraints as opposed to goal-related benchmarks. Programming and services should be provided for a longer period

after release to ensure participants achieve a sufficient level of stability, and informed by routine reassessment and updated service plans to ensure that service delivery and monitoring reflects the client’s progress and needs. Few AORDP grantees conducted reassessment in the community post-release.

#### *7.3.4 Prioritize Training and Technical Assistance*

The process evaluation findings that the amount and frequency of training and technical assistance conducted varied greatly by site suggest that reentry program developers should bolster training efforts to enhance staff capacity and program reach. Routine training is key for building proficiency in service delivery. Specifically, staff charged with delivering various program curricula should be fully trained with a demonstrated proficiency in program facilitation, and routine booster trainings should be provided to ensure staff skill levels are maintained. In this way, programs can ensure services delivered with the intended dosage and content.

Program developers should also prioritize training correctional staff on key reentry practices and curricula offered pre-release to ensure that correctional staff are well-positioned to reinforce the principles underlying reentry programming and services. Doing so will underscore the valuable role correctional staff play in reentry and should ensure that participants receive a consistent message regarding the program’s objectives and expectations.

#### *7.3.5 Institute Quality Assurance*

Program developers and program administrators should institute quality assurance mechanisms to closely monitor reentry program delivery for fidelity to designated program curricula and service protocols. Quality assurance protocols consider not only how service delivery aligns with the curricula or practice used but also what organizational support the partner or program may need to deliver the curricula or use the practice with fidelity including training resources and staffing support. Staff charged with quality assurance monitoring should be trained on the specifics of program curricula or practices such as risk/needs assessment, periodically observe program and treatment sessions to monitor implementation fidelity, and review program case files and other data sources to identify areas for corrective action. Such observation should occur across the reentry program’s key components, recognizing that most reentry programs rely on multiple partners (behavioral health, housing, employment/vocational, etc.) to deliver services that address participants’ diverse needs.

Additionally, reentry program stakeholders should consider developing a basic training curriculum that clearly describes staff roles and responsibilities, documents and describes critical program components, and discusses key processes and their administration. Doing so will equip staff and increase the likelihood that critical processes will be implemented with fidelity and used as intended. For example, although stakeholders in the AORDP sites demonstrated strong support for criminogenic risk/needs assessment, it appeared that few programs used these to their fullest potential, possibly diminishing program impact.

### 7.3.6 *Track Service Utilization*

Programs should strive to collect client-level data on actual service receipt, both in the facility and in the community, to monitor and measure whether service dosage approaches and/or meet the recommended thresholds necessary for recidivism reduction as outlined in the literature: 300 hours for high-risk individuals; 200 hours for moderate- to high-risk individuals, and 100 hours for moderate risk individuals (Carter & Sankovitz, 2014) over a three to nine month period (Matthews et al., 2001). Delivering interventions at the specified dosage and level of intensity is critical to improved reentry success, including recidivism reduction.

Recognizing that many programs struggle to collect such information, funders should consider both designating a portion of each award to support the development of such data collection mechanisms and providing sites with ongoing technical assistance to support the collection of reliable service utilization data. Conversely, funders could also prioritize funding to applicants with the demonstrated ability to reliably collect and produce client-level service utilization data.

### 7.3.7 *Streamline Program Design*

Reentry programs are, by design and necessity, multifaceted. Meeting participants' multiple and often diverse needs, however, may dilute the efficacy of these programs if there is insufficient capacity, focus, or resources to deliver each at the appropriate level. Program developers may wish to consider sequencing the delivery of services in a manner that both aligns with assessed needs and leverages the reentry process. For example, programs may consider "frontloading" cognitive behavioral interventions, delivering them to participants in the facility when they are most likely to consistently attend programming and assuming there is sufficient time to deliver the curricula in its entirety. Doing so would address the most pressing criminogenic need, laying a foundation for other services. CBT-based behavioral health treatments could be delivered concurrently or after the CBI, serving to both reinforce key principles while allowing participants opportunity to apply these principles. Vocational training or employment services could follow, and housing and family support/relationships could be addressed in the order of assessed need.

## 7.4 **Implications for Future Research**

### 7.4.1 *Measure Dosage*

It is now widely accepted that individuals at higher risk to reoffend should receive more intensive services than those deemed to represent a lower risk; conversely, research indicates that providing intensive services to low risk individuals can be counterproductive, even harmful. The recommended dosage level for medium risk individuals is 100 hours of programming and 200 hours or more of programming for high risk individuals, sometimes with the specification to structure 40-70 percent of an individual's free time with these services over a 3-9 month period especially after leaving a custodial setting (Gendreau et al., 2004; Matthews et al., 2001). Despite the consensus that dosage matters, there is relatively little written about exactly what

counts. Future reentry research should include measure of dosage both to examine the extent to which these benchmarks are achieved and to compile a more accurate profile of the duration, intensity and composition of services participants receive as part of a comprehensive reentry initiative. Doing so will allow researchers to examine the impact of effective service provision with respect to when and in what combination or sequence services are provided for optimal impact; it will also yield actionable information about the continuity of pre-post-service provision. In short, future evaluations should also measure dosage, in addition to service profiles, and do so in relation to key outcomes.

#### *7.4.2 Incorporate Longer Follow-up Periods*

Finally, future reentry evaluations would benefit from larger sample sizes (necessary for statistical power) and longer follow-up periods. Both often require longer program periods in order to recruit an adequate number of subjects and for those subjects to experience the full complement of program services. Longer observational periods also mean longer wait times for results, delaying the dissemination of findings and limiting the utility of those findings to impact program decisions in real time. More varied measures of success, including indicators of incremental progress and multiple outcomes, may provide more actionable information in the short-term while allowing longer observation periods for end outcomes like recidivism reduction.



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# Appendix A. Logic Model for the Second Chance Act

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## Second Chance Act Prisoner Reentry Initiative Logic Model

**Goal(s):** Increase Public Safety and Reduce Recidivism by 50 percent over 5 years

INPUTS	ACTIVITIES	OUTCOMES	OUTCOME MEASURES	LONG TERM OUTCOMES/IMPACT*
<ul style="list-style-type: none"> <li>■ Support of the Chief Executive officer of the state, unit of local government, territory, or Indian Tribe</li> <li>■ Extensive description of the role of state corrections departments, community corrections agencies, juvenile justice systems, and/or local jail systems – that will ensure successful reentry</li> <li>■ Extensive evidence of collaboration with state and local government agencies, as well as stakeholder groups.</li> <li>■ Analysis plan for: statutory, regulatory, rules-based, and practice-based hurdles to reintegration of offenders</li> <li>■ Target Population (TP): High-Risk Offenders</li> <li>■ Risk and Needs Assessments</li> <li>■ Reentry Task Force membership</li> <li>■ 5-year Reentry Strategic Plan</li> <li>◇ Plan to follow and track TP</li> </ul>	<ul style="list-style-type: none"> <li>■ Develop and coordinate a Reentry Task Force</li> <li>■ Administer validated assessment tools to assess the risk factors and needs of returning inmates</li> <li>■ Establish pre-release planning procedures</li> <li>■ Provide offenders with educational, literacy, and vocational services</li> <li>■ Provide substance abuse, mental health, and health treatment and services</li> <li>■ Provide coordinated supervision and comprehensive services for offenders upon release from prison or jail</li> <li>■ Connect inmates with their children and families</li> <li>■ Provide victim appropriate services</li> </ul>	<ul style="list-style-type: none"> <li>■ A reduction in recidivism rates for the target population</li> <li>■ Reduction in crime</li> <li>■ Increased employment opportunities</li> </ul>	<ul style="list-style-type: none"> <li>Number of new offenders added to the TP this quarter</li> <li>Total number of TP in the initiative</li> <li>Number of TP released this quarter</li> <li>Total number of TP released since the beginning of the initiative</li> <li>Number of TP resentenced to prison with a new conviction this quarter</li> <li>Total Number of TP resentenced to prison with a new conviction since the beginning of the initiative</li> <li>Total number of crimes reported during this quarter</li> <li>Total population for the area that the TP is returning to (i.e., statewide, county, city, neighborhood)</li> <li>Number of TP who found employment this quarter</li> <li>Total Number of TP who are employed</li> <li>Number of TP who have enrolled in an educational program this quarter</li> </ul>	<ul style="list-style-type: none"> <li>■ Increase public safety</li> <li>■ Reduce Recidivism by 50 percent over 5 years</li> </ul>

<ul style="list-style-type: none"> <li>◇ Sustainability Plan</li> <li>◇ Plan to collect and provide data for performance measures</li> <li>■ Pre- and post-release programming</li> <li>■ Mentors</li> <li>■ Provide a 50 percent match [only 25 percent can be in-kind]</li> </ul>	<ul style="list-style-type: none"> <li>■ Deliver continuous and appropriate drug treatment, medical care, job training and placement, educational services, and housing opportunities</li> <li>■ Examine ways to pool resources and funding streams to promote lower recidivism rates</li> <li>■ Collect and provide data to meet performance measurement requirements</li> </ul>	<ul style="list-style-type: none"> <li>■ Increased education opportunities</li> <li>■ Reduction in violations of conditions of supervised release</li> <li>■ Increased payment of child support</li> <li>■ Increased housing opportunities</li> <li>■ Increased participation in substance abuse services</li> <li>■ Increased participation in mental health services</li> </ul>	<p>Total number of TP who are currently enrolled in an educational program</p> <p>Number of TP who have violated the conditions of their release this quarter</p> <p>Total number of TP who have violated the conditions of their release</p> <p>Total number of TP that are required to pay child support</p> <p>Number of TP who paid their child support this quarter</p> <p>Number of target population who found housing this quarter</p> <p>Total number of TP who have housing</p> <p>Number of TP who were assessed as needing substance abuse services this quarter</p> <p>Total number of TP who have been assessed as needing substance abuse services</p> <p>Number of TP who enrolled in a substance abuse program this quarter</p> <p>Total number of TP enrolled in a substance abuse program</p> <p>Number of TP who were assessed as needing mental health services this quarter</p> <p>Total number of TP who have been assessed as needing mental health services</p> <p>Number of TP who enrolled in a mental health program this quarter</p> <p>Total number of TP enrolled in a mental health program</p>	
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		<ul style="list-style-type: none"><li>■ Reduction in drug abuse</li> <li>■ Reduction in alcohol abuse</li></ul>	<p>Total number of TP re-assessed regarding substance use during the reporting period</p> <p>Total number of TP re-assessed as having <i>reduced</i> their substance use during this reporting period</p> <p>Total number of TP re-assessed regarding alcohol use during the reporting period</p> <p>Total number of TP re-assessed as having <i>reduced</i> their alcohol use during this reporting period</p>	
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# Appendix B. Survey Instruments

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Because of their length, survey instruments are at the back of this report.



# Appendix C. Propensity Model Balance Checks

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**Appendix C-1. Propensity Model Balance Checks**

Variable	Total N	T_N	C_N	T_Mean	C_Mean	Diff in unwtd means (T-C)	T-stat	P-value_(2-sided)	p_sig_u	Unwtd stddiff  > 0.2	T_Wtd_Mean	C_Wtd_Mean	Diff in wtd means (T-C)	Odds Ratio	Parm Est	Std Error	Wald Chi-Sq	P-Value	p_sig_wtd	Post-adjustmnt stndrdz diff  > 0.2
<b>Site</b>																				
California	516	234	282	0.15	0.19	-0.042	-1.25	0.2104		0	0.17	0.17	0.002	1.02	0.016	0.252	0.004	0.9505		0
Connecticut	516	234	282	0.19	0.17	0.021	0.63	0.5270		0	0.17	0.17	-0.004	0.97	-0.031	0.245	0.016	0.8984		0
Florida	516	234	282	0.18	0.17	0.009	0.28	0.7828		0	0.17	0.17	-0.002	0.98	-0.016	0.246	0.004	0.9486		0
New Jersey	516	234	282	0.18	0.17	0.009	0.28	0.7828		0	0.17	0.17	-0.002	0.99	-0.014	0.246	0.003	0.9546		0
Pennsylvania	516	234	282	0.12	0.11	0.005	0.19	0.8455		0	0.12	0.12	0.006	1.06	0.054	0.301	0.032	0.8586		0
Minnesota	516	234	282	0.19	0.19	-0.003	-0.10	0.9208		0	0.19	0.19	0.001	1.01	0.006	0.238	0.001	0.9809		0
<b>Demographics/Background Characteristics</b>																				
Male	514	233	281	0.78	0.69	0.091	2.32	0.0208	*	1	0.75	0.70	0.047	1.27	0.236	0.218	1.165	0.2804		0
Current age	516	234	282	36.71	33.99	2.721	2.93	0.0036	**	1	35.09	35.08	0.011	1.00	0.000	0.009	0.000	0.9908		0
White, non-Hispanic	516	234	282	0.31	0.37	-0.058	-1.37	0.1698		0	0.35	0.34	0.012	1.06	0.054	0.200	0.073	0.7877		0
Black, non-Hispanic	516	234	282	0.46	0.40	0.057	1.29	0.1967		0	0.41	0.43	-0.013	0.95	-0.055	0.189	0.084	0.7717		0
Other race (not white or black non-Hispanic)	516	234	282	0.24	0.23	0.001	0.03	0.9788		0	0.24	0.23	0.001	1.01	0.007	0.221	0.001	0.9764		0
Married or in a steady relationship	516	234	282	0.40	0.43	-0.031	-0.71	0.4795		0	0.43	0.44	-0.003	0.99	-0.011	0.191	0.003	0.9535		0
Has child under 18	515	234	281	0.58	0.55	0.033	0.75	0.4511		0	0.55	0.57	-0.013	0.95	-0.053	0.190	0.078	0.7807		0
Graduated high school	516	234	282	0.63	0.62	0.012	0.28	0.7812		0	0.63	0.62	0.012	1.06	0.053	0.194	0.075	0.7846		0
Learning problems scale (math, reading, writing)	516	234	282	4.86	4.93	-0.066	-0.45	0.6508		0	4.91	4.91	-0.002	1.00	-0.001	0.057	0.000	0.9878		0
<b>Employment, Violence, and Drug Use Prior to Incarceration</b>																				
Employed in the 6 months prior	516	234	282	0.54	0.57	-0.036	-0.82	0.4132		0	0.54	0.55	-0.007	0.97	-0.030	0.189	0.025	0.8747		0
No illegal income 6 months prior	516	234	282	0.52	0.56	-0.039	-0.88	0.3780		0	0.54	0.55	-0.006	0.98	-0.023	0.189	0.015	0.9012		0
Any violence perpetration 6 months prior	516	234	282	0.45	0.44	0.005	0.12	0.9015		0	0.43	0.44	-0.001	1.00	-0.004	0.189	0.000	0.9840		0
Any violence victimization 6 months prior	516	234	282	0.53	0.51	0.011	0.26	0.7959		0	0.52	0.52	-0.002	0.99	-0.009	0.188	0.002	0.9640		0

(continued)

### Appendix C-1. Propensity Model Balance Checks (continued)

Variable	Total N	T_N	C_N	T_Mean	C_Mean	Diff in unwt'd means (T-C)	T-stat	P-value_(2-sided)	p_sig_u	Unwt'd stddiff  > 0.2	T_Wtd_Mean	C_Wtd_Mean	Diff in wtd means (T-C)	Odds Ratio	Parm Est	Std Error	Wald Chi-Sq	P-Value	p_sig_wtd	Post-adjustmnt stndrdz'd diff  > 0.2
Drug use interfered with work	514	234	280	0.32	0.31	0.010	0.24	0.8122		0	0.33	0.29	0.030	1.15	0.143	0.202	0.496	0.4814		0
Drug use caused an accident/put in danger	514	234	280	0.23	0.19	0.034	0.93	0.3505		0	0.23	0.18	0.046	1.33	0.283	0.229	1.530	0.2161		0
Spent less time at work/school/with friends to use drugs	514	234	280	0.39	0.33	0.064	1.51	0.1320		0	0.38	0.32	0.069	1.35	0.302	0.197	2.366	0.1240		0
Kept taking drug to avoid withdrawal symptoms	514	234	280	0.40	0.34	0.059	1.38	0.1693		0	0.38	0.33	0.050	1.25	0.220	0.195	1.273	0.2591		0
Sick or withdrawal symptoms when didn't take drug	514	234	280	0.38	0.35	0.034	0.80	0.4266		0	0.37	0.34	0.033	1.15	0.143	0.196	0.535	0.4647		0
Spent a lot of time getting/using/recovering from drugs	513	234	279	0.46	0.44	0.016	0.37	0.7105		0	0.45	0.44	0.012	1.05	0.047	0.190	0.061	0.8056		0
Use caused problems with family/friends/work/police	513	234	279	0.58	0.56	0.014	0.32	0.7469		0	0.58	0.55	0.029	1.13	0.120	0.190	0.398	0.5284		0
Increased amount of drug for same effect	513	233	280	0.49	0.48	0.014	0.32	0.7480		0	0.49	0.45	0.038	1.16	0.151	0.189	0.640	0.4238		0
Drug use caused emotional/psychological problems	510	232	278	0.41	0.37	0.035	0.81	0.4157		0	0.39	0.37	0.026	1.12	0.112	0.194	0.333	0.5640		0
Drug use caused physical health/medical problems	510	232	278	0.34	0.31	0.028	0.66	0.5092		0	0.32	0.31	0.010	1.05	0.048	0.202	0.056	0.8124		0
Unable to cut down on drug use	506	229	277	0.38	0.41	-0.027	-0.62	0.5339		0	0.38	0.41	-0.030	0.88	-0.126	0.194	0.421	0.5163		0
Used more drugs/used them for longer than planned	515	233	282	0.45	0.46	-0.010	-0.22	0.8281		0	0.44	0.46	-0.017	0.93	-0.068	0.189	0.131	0.7178		0

(continued)

## Appendix C-1. Propensity Model Balance Checks (continued)

Variable	Total N	T_N	C_N	T_Mean	C_Mean	Diff in unwt'd means (T-C)	T-stat	P-value_(2-sided)	p_sig_u	Unwt'd stddiff  > 0.2	T_Wtd_Mean	C_Wtd_Mean	Diff in wtd means (T-C)	Odds Ratio	Parm Est	Std Error	Wald Chi-Sq	P-Value	p_sig_wtd	Post-adjustmnt stndrdz'd diff  > 0.2
<b>History of Mental Health and AOD Treatment</b>																				
Received mental health tx prior to incarceration	516	234	282	0.36	0.34	0.015	0.35	0.7228		0	0.35	0.35	0.000	1.00	-0.001	0.198	0.000	0.9967		0
Received AOD tx prior to incarceration	516	234	282	0.46	0.55	-0.092	-2.09	0.0367	*	0	0.50	0.50	-0.004	0.98	-0.018	0.188	0.009	0.9260		0
<b>Family History of Crime/AOD Problem</b>																				
Any family ever convicted of crime	516	234	282	0.69	0.61	0.082	1.95	0.0514		0	0.65	0.65	-0.006	0.97	-0.028	0.198	0.020	0.8881		0
Any family ever had AOD problems	515	233	282	0.70	0.67	0.034	0.82	0.4140		0	0.70	0.69	0.005	1.02	0.022	0.202	0.012	0.9128		0
Any family member ever in gang	512	233	279	0.18	0.20	-0.021	-0.61	0.5421		0	0.19	0.19	0.002	1.01	0.012	0.243	0.002	0.9621		0
<b>Criminal History</b>																				
Ever in juvenile detention	515	233	282	0.46	0.43	0.034	0.77	0.4443		0	0.45	0.45	0.004	1.02	0.015	0.190	0.006	0.9391		0
Age at first arrest	513	234	279	18.42	18.25	0.176	0.27	0.7893		0	18.33	18.36	-0.027	1.00	-0.001	0.012	0.002	0.9675		0
Number of arrests (lifetime)	504	228	276	13.81	12.40	1.409	1.30	0.1937		0	13.08	12.59	0.483	1.00	0.004	0.008	0.200	0.6548		0
Number of convictions (lifetime)	511	232	279	7.59	5.77	1.824	2.82	0.0050	**	1	6.45	6.30	0.149	1.00	0.003	0.014	0.059	0.8084		0
Number of prior juvenile incarcerations	512	232	280	1.54	1.75	-0.215	-0.71	0.4773		0	1.76	1.70	0.062	1.01	0.005	0.029	0.025	0.8756		0
Number of prior incarcerations	515	233	282	2.57	2.06	0.510	1.61	0.1074		0	2.22	2.19	0.025	1.00	0.002	0.027	0.006	0.9367		0
<b>Focal Incarceration Offense Type</b>																				
Person/violent crime	516	234	282	0.21	0.17	0.031	0.91	0.3649		0	0.20	0.19	0.005	1.03	0.034	0.240	0.020	0.8888		0
Drug crime	516	234	282	0.21	0.22	-0.010	-0.27	0.7907		0	0.22	0.23	-0.007	0.96	-0.038	0.227	0.028	0.8680		0
Property crime	516	234	282	0.32	0.23	0.098	2.50	0.0128	*	1	0.27	0.26	0.012	1.07	0.064	0.210	0.093	0.7603		0
Public order crime	516	234	282	0.57	0.63	-0.063	-1.45	0.1471		0	0.60	0.60	-0.005	0.98	-0.020	0.192	0.011	0.9184		0
Other crime	516	234	282	0.01	0.02	-0.008	-0.75	0.4559		0	0.02	0.02	-0.001	0.95	-0.052	0.785	0.004	0.9470		0

# Appendix D. Outcome Variable Descriptions

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**Exhibit D-1. Description of Outcome Variables**

<b>Outcome</b>	<b>Variable Description</b>
<b>Recidivism Outcomes</b>	
No self-reported crimes	The respondent did not report committing any of the following crime types during the reference period: violent crimes, other crimes against people, drug sales, prescription drug crimes, other drug crimes, DUI, property crimes, public order crimes
No reincarceration in jail/prison	The respondent did not report being incarcerated in a jail or prison during the reference period.
Number of reincarcerations	The number of times the respondent reported being incarcerated in a jail or prison during the reference period (coded as 0 if no reincarcerations)
No illegal income	The respondent did not report supporting him/herself with illegal income during the reference period
No violent crimes	The respondent did not report committing any violent crimes (physical or sexual assault, rape, robbery, manslaughter, attempted murder, murder, vehicular manslaughter, or vehicular homicide) during the reference period
No other crimes against people	The respondent did not report committing any other crimes against people (hit and run, child neglect, harassment) during the reference period
No weapon possession	The respondent did not carry a gun, knife, or other weapon during the reference period
No drug possession	The respondent did not use or possess drugs or drug paraphernalia during the reference period
No drug sales	The respondent did not sell any drugs during the reference period
No prescription drug crimes	The respondent did not commit any prescription drug crimes (forging prescriptions, stealing, or selling prescription drugs) during the reference period
No other drug crimes	The respondent did not commit any other drug crimes (manufacturing or trafficking) during the reference period
No DUI	The respondent did not drive while intoxicated or under the influence during the reference period
No property crimes	The respondent did not commit any property crimes (burglary, larceny, auto theft, bad checks, fraud, forgery, or grand theft) during the reference period
No public order crimes	The respondent did not commit any crimes such as prostitution, soliciting, shoplifting, or disorderly conduct during the reference period
No person crimes	The respondent did not report committing any of the following crimes during the reference period: violent crimes, other crimes against people

(continued)

**Exhibit D-1. Description of Outcome Variables (continued)**

<b>Outcome</b>	<b>Variable Description</b>
No drug crimes	The respondent did not report committing any of the following crimes during the reference period: drug sales crimes, prescription drug crimes, or other drug crimes (note: this measure did not include drug possession because the item wording did not distinguish between legal and illegal drug/paraphernalia possession)
<b>Supervision Compliance Outcomes</b>	
Complied with all supervision conditions	The respondent did not report ever failing to comply with any conditions of his/her supervision during the reference period (limited to those under supervision)
No positive drug tests on supervision	The respondent did not report testing positive for drug use during the time that he/she was on supervision during the reference period (limited to those under supervision)
No formal supervision violations	The respondent did not report receiving a formal violation during the reference period (limited to those under supervision)
<b>Employment Outcomes</b>	
Any employment	The respondent reported being employed at any point during the reference period.
Number of months worked	The number of months the respondent reported working during the reference period (coded as 0 for respondents who were not employed during the reference period)
Currently employed	The respondent reported currently having a job
Number of hours usually working per week	The number of hours a week the respondent reported usually working for his/her current or most recent job (0 if unemployed)
Monthly income	Current monthly gross income (note: this outcome is limited to respondents who have been employed during reference period)
Job quality scale	Scale (range 0-3) reflecting whether current/most recent job provides formal pay (1 point), health insurance coverage (1 point), and fully paid leave (1 point) (note : this outcome is limited to respondents who have been employed during reference period)
<b>Housing Outcomes</b>	
Housing independent	Respondent reported that he/she was either 1) mostly living in his/her own place or 2) was contributing financially to his/her housing costs during the reference period
Has mostly lived in one's own place	Respondent reported that he/she has mostly lived in his/her own house or apartment (meaning his/her name is on the title, mortgage, or lease) during the reference period
Has lived in only 1 place	Respondent reported that he/she has lived in only one place during the reference period
Not living with criminally involved or drug using people	Respondent reported that, during the reference period, he/she has not lived with anyone who has 1) ever been in jail, prison, or some other correctional institution, or 2) uses illegal drugs

(continued)

**Exhibit D-1. Description of Outcome Variables (continued)**

Outcome	Variable Description
<b>Substance Use Outcomes</b>	
Count of all drugs used within reference period	Of the following drugs, the number that the respondent reported using at least one time during the reference period: marijuana, powder cocaine, crack cocaine, heroin, methamphetamine, other amphetamines, hallucinogens or designer drugs, prescription medications, or methadone
Count of illicit drugs used within reference period	Of the following drugs, the number that the respondent reported using at least one time during the reference period: powder cocaine, crack cocaine, heroin, methamphetamine, other amphetamines, hallucinogens or designer drugs, prescription medications, or methadone
No drug use within reference period	Respondent did not report using any of the following drugs during the reference period: marijuana, powder cocaine, crack cocaine, heroin, methamphetamine, other amphetamines, hallucinogens or designer drugs, prescription medications, or methadone. In addition, the respondent did not test positive to any drugs in the oral swab drug test.
No illicit drug use within reference period	Respondent did not report using any of the following drugs during the reference period: powder cocaine, crack cocaine, heroin, methamphetamine, other amphetamines, hallucinogens or designer drugs, prescription medications, or methadone. In addition, the respondent did not test positive to any drugs in the oral swab drug test
Count of all drugs used within past 30 days	Of the following drugs, the number that the respondent reported using at least one time during the past 30 days: marijuana, powder cocaine, crack cocaine, heroin, methamphetamine, other amphetamines, hallucinogens or designer drugs, prescription medications, or methadone
Count of all illicit drugs used within past 30 days	Of the following drugs, the number that the respondent reported using at least one time during the past 30 days: powder cocaine, crack cocaine, heroin, methamphetamine, other amphetamines, hallucinogens or designer drugs, prescription medications, or methadone
No drug use within past 30 days	The respondent did not report using any of the following drugs within the past 30 days: marijuana, powder cocaine, crack cocaine, heroin, methamphetamine, other amphetamines, hallucinogens or designer drugs, prescription medications, or methadone
No illicit drug use within past 30 days	The respondent did not report using any of the following drugs within the past 30 days: powder cocaine, crack cocaine, heroin, methamphetamine, other amphetamines, hallucinogens or designer drugs, prescription medications, or methadone

(continued)

**Exhibit D-1. Description of Outcome Variables (continued)**

<b>Outcome</b>	<b>Variable Description</b>
Problematic drug use	Scaled variable (range 0-12) reflecting the number of problems caused by drugs during the reference period (e.g., spending a lot of time getting drugs, using them, or recovering from their use; tried to cut down but were unable to do it; gotten so high or sick from drugs that it kept you from doing work, going to school, or caring for children. Coded such that higher values indicates less problematic use.
Count of positive swab test results for drugs	Of the following substances tested in the oral swab test, the number for which the respondent tested positive: THC, amphetamines, methamphetamine, cocaine, opiates, oxycodone, phencyclidine, barbiturates, benzodiazepines, methadone
Count of positive swab test results for illicit drugs	Of the following substances tested in the oral swab test, the number for which the respondent tested positive: amphetamines, methamphetamine, cocaine, opiates, oxycodone, phencyclidine, barbiturates, benzodiazepines, methadone
Any positive oral swab results for drugs	Respondent tested positive for at least one of the following substances in the oral swab test: THC, amphetamines, methamphetamine, cocaine, opiates, oxycodone, phencyclidine, barbiturates, benzodiazepines, methadone
Any positive oral swab results for illicit drugs	Respondent tested positive for at least one of the following substances in the oral swab test: amphetamines, methamphetamine, cocaine, opiates, oxycodone, phencyclidine, barbiturates, benzodiazepines, methadone
No alcohol use within reference period	Respondent did not report having a drink or any type of alcoholic beverage during the reference period
No alcohol use within past 30 days	Respondent did not report drinking any alcohol during the past 30 days
Never drunk within past 30 days	Respondent did not report drinking alcohol to the point of being drunk in the past 30 days
No prescription stimulant abuse within reference period	Respondent reported no use of prescription stimulants (e.g., Ritalin, Adderall) without a prescription or for other reasons than were prescribed, or in larger amounts, or more often than his/her doctor ordered during the reference period
No prescription stimulant abuse within past 30 days	Respondent reported no use of prescription stimulants (e.g., Ritalin, Adderall) without a prescription or for other reasons than were prescribed, or in larger amounts, or more often than his/her doctor ordered during the past 30 days
No prescription pain reliever abuse within reference period	Respondent reported no use of prescription pain relievers (e.g., OxyContin, morphine) without a prescription or for other reasons than were prescribed, or in larger amounts, or more often than his/her doctor ordered during the reference period

(continued)

**Exhibit D-1. Description of Outcome Variables (continued)**

<b>Outcome</b>	<b>Variable Description</b>
No prescription pain reliever abuse within past 30 days	Respondent reported no use of prescription pain relievers (e.g., OxyContin, morphine) without a prescription or for other reasons than were prescribed, or in larger amounts, or more often than his/her doctor ordered during the past 30 days
No other prescription drug abuse within reference period	Respondent reported no use of other prescription drugs (e.g., Valium, sedatives) without a prescription or for other reasons than were prescribed, or in larger amounts, or more often than his/her doctor ordered during the reference period
No other prescription drug abuse within past 30 days	Respondent reported no use of other prescription drugs (e.g., Valium, sedatives) without a prescription or for other reasons than were prescribed, or in larger amounts, or more often than his/her doctor ordered during the past 30 days
No marijuana use within reference period	Respondent reported no use of marijuana or hashish during the reference period
No marijuana use within past 30 days	Respondent reported no use of marijuana or hashish during the past 30 days
No amphetamine use within reference period	Respondent reported no use of non-prescription amphetamines or methamphetamine during the reference period
No amphetamine use within past 30 days	Respondent reported no use of non-prescription amphetamines or methamphetamine during the past 30 days
No cocaine use within reference period	Respondent reported no use of cocaine (e.g., powder, crack cocaine) during the reference period
No cocaine use within past 30 days	Respondent reported no use of cocaine (e.g., powder, crack cocaine) during the past 30 days
No heroin use within reference period	Respondent reported no use of heroin or opium during the reference period
No heroin use within past 30 days	Respondent reported no use of heroin or opium during the past 30 days
No other drug use within reference period	Respondent reported no other drug use (e.g., synthetic marijuana, club drugs, inhalants, other drugs) during the reference period
No other drug use within past 30 days	Respondent reported no other drug use (e.g., synthetic marijuana, club drugs, inhalants, other drugs) during the past 30 days
<b>Health Outcomes</b>	
Current overall health	Respondent rated current health as excellent or very good
Number of physically unhealthy days (in past 30 days)	Number of days during the past 30 days that the respondent reported his/her physical health was not good
Number of mentally unhealthy days (in past 30 days)	Number of days during the past 30 days that the respondent reported his/her mental health was not good

(continued)

**Exhibit D-1. Description of Outcome Variables (continued)**

<b>Outcome</b>	<b>Variable Description</b>
Total number of healthy days (in past 30 days)	Inverse of the number of physically/mentally unhealthy days during the past 30 days
Number of days (in past 30 days) in which activities were limited due to poor health	Number of days during the past 30 days that the respondent reported being unable to do his/her usual activities (e.g., self-care, work, recreation) because of poor physical or mental health
No health related limitations	Respondent reported not currently being limited in any way in any activities because of any impairment or health problem
PTSD symptoms	Scale (range 0-4) reflecting the number of PTSD symptoms (out of 4) the respondent reported experiencing in the past month due to an experience that was frightening, horrible, or upsetting (higher values=more symptoms)
<b>Violence/Victimization Outcomes</b>	
Any violent victimization within reference period	Respondent reported experiencing any of the following forms of victimization at least once during the reference period: being threatened with being hit by a fist or something else that could hurt him/her; having anything thrown at him/her that could hurt him/her; being pushed, grabbed, or shoved; being slapped, kicked, bitten, or hit with a fist; being threatened with a weapon or having a weapon used on him/her; requiring medical attention for violent acts directed at him/her by others
Any perpetration of violence within reference period	Respondent reported doing at least one of the following to someone else during the reference period: threatening to hit someone with a fist or anything else that could hurt them; throwing anything at someone that could hurt them; pushing, grabbing, or shoving someone; slapping, kicking, biting, or hitting someone with a fist; threatening to use or using a weapon on someone
<b>Family/Peer Outcomes</b>	
Provided financial support for at least one child within reference period	Respondent providing financially supporting in any way at least one of his/her children under the age of 18 during the reference period (note: outcome limited to parents of minor children)
Criminogenic family exposure	Scale (ranging from 0-3) reflecting whether respondent spends time with family members who have ever been convicted of a crime (1 point), ever had problems with drugs or alcohol (1 point), ever been in a gang (1 point), and who sometimes or often convince him/her to do something he/she knew he/she shouldn't do (1 point) (higher values=more criminogenic family exposure)

(continued)

**Exhibit D-1. Description of Outcome Variables (continued)**

<b>Outcome</b>	<b>Variable Description</b>
Family emotional support	Scale (ranging from 0-30) reflecting the degree of emotional support/bonding with family members the respondent has spent the most time with during the reference period (e.g., you feel close to your family, you want your family to be involved in your life, you have someone in your family to talk to about yourself or your problems) (note: higher values=more support)
Criminogenic peer exposure	Scale (ranging from 0-3) reflecting whether half or most of the nonfamily members the respondent spends time are employed (1 point), have never served time in a correctional facility (1 point), are not taking illegal drugs regularly (1 point), are not gang members (1 point), and never convince him/her to do things he/she knew he/she shouldn't do (1 point) (higher values=less criminogenic peer exposure)
Not a gang member	Respondent reports that he/she is currently not a gang member

# Appendix E. Site-Specific Cost Profiles

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## E.1 Solano County (CA) AORDP Cost Summary Profile

The Solano County (CA) Women’s Reentry Achievement Program (WRAP), led by the county’s Department of Human and Social Services (DHSS), uses a collaborative strategy to address the challenges faced by women transitioning from the Solano County jail to the community. WRAP targets women who are currently in or recently confined to the Solano County jail, have been assessed as medium or high risk for reoffending, and are returning to or currently living in Solano County for services. As described in Chapter 3: Findings from the Process Evaluation, WRAP is an entirely new reentry program for Solano County. The program’s core components consist of intensive case management that begins in jail and continues for six months post-release, coupled with gender-specific cognitive based therapies (*Helping Women Recover* and *Beyond Trauma*), peer mentoring, transitional housing, and assistance with basic needs (i.e., food, clothing, identification documents, eligibility, transportation).<sup>30</sup> Continuity of service is a central goal of the WRAP program, and as such many core program elements are offered both in the jail and in the community; housing and employment are largely post-release services as are parenting classes. WRAP recruited its first cases in January 2011 and its last case under the grant in September 2015. A total of 423 individuals were served by the program.

### Data Sources

To identify the costs associated with program implementation and operation, researchers reviewed the site’s Second Chance Act Adult Offender Reentry Demonstration project (AORDP) proposal budgets and budget narratives for FY2010, FY2011 and FY2013, obtained any final financial reports filed with the Bureau of Justice Assistance (BJA) under the SCA grant program, and conducted teleconferences with key stakeholders to verify budget allocations and actual expenditures.

### Funding WRAP

According to BJA and site financial documents, a total of \$3,414,000<sup>31</sup> were available to plan and implement WRAP. Solano County received four Second Chance Act (SCA) awards for the Women’s Reentry Achievement Program totaling \$1,683,000.<sup>32</sup> Additionally, the site allocated

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<sup>30</sup> WRAP also offers Reading Legacies, a program that helps incarcerated women maintain a presence in the lives of their children by allowing women to record popular bedtime stories; the recording and companion bedtime story book are provided to the child.

<sup>31</sup> Cost figures were rounded to the nearest thousand if above four figures and to the nearest hundred if less than four figures.

<sup>32</sup> Award #2010-CZ-BX-0114 for \$355,763 in FY2010; 2011-CZ-BX-0018 for \$373,721 in FY2011; 2011-CZ-BX-0018 for \$187,000 in FY2012; and 2011-CZ-BX-0018 for \$766,407 in FY2013.

\$1,731,000 in resources (in-kind and required cash match)<sup>33</sup> toward implementation. Of the SCA funds received for WRAP, Solano County spent \$1,400 on travel to required BJA SCA meetings which this analysis does *not* consider to be a part of total implementation costs. Furthermore, not all allocated funds were spent down: approximately \$136,000 of SCA funds were reported as unobligated under the site's initial SCA WRAP award, and \$105,000 of match funds in FY2010 were allocated for positions that did not ultimately participate in the grant.<sup>34</sup> Between FY2011 and FY2015 the site reported an additional \$124,000 in unobligated SCA funds, and \$136,000 in unspent match funds. Thus, we estimate that approximately \$2,912,000 was applied to implement and operate the WRAP. For more information on the materials reviewed to arrive at these figures, please see the Data Sources sidebar.

### *WRAP Expenditures: Primary and Secondary Costs*<sup>35</sup>

Review of the aforementioned materials suggests that Solano County devoted the majority of its resources to **Administrative** and **Case Management** supports, which together account for 70% of program expenditures. As *Exhibit E1-A* indicates, the next most significant resource allocation (13%) was for **Housing Support**.

- **Administrative:** Over the SCA grant period, approximately 26% of program resources were allocated for administrative positions with between 8% to 22% supporting senior-level leadership engaged in collaboration and administration at the executive level (lead agency's Deputy Director; initiative's co-Directors); a staff analyst to manage the grant budget and operations; a data manager who reviewed WRAP data trends, produced periodic reports about the program, and assisted in tracking clients throughout the

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<sup>33</sup> The FY2010 BJA solicitation to which the AORDP evaluation sites responded included a match requirement: "As required by the Second Chance Act, a grant made under this program may not cover more than 50 percent of the total costs of the project being funded. The applicant must identify the source of the 50 percent non-federal portion of the budget and how match funds will be used. The recipient of a grant must provide 25 percent of the total project cost in cash match, and 25 percent of the total project cost may be matched by making in-kind contributions of goods or services that are directly related to the purpose for which the grant was awarded. Federal funds received and cash match provided by the grantee shall be used to supplement, not supplant, non-federal funds that would otherwise be available for the activities funded under this section. The applicant must identify the source of the 25 percent non-federal cash portion of the budget and how both cash and in-kind match funds will be used. The Attorney General may waive the match requirement upon a determination of fiscal hardship..." (2010: 7; as accessed June 2012 - <http://www.ojdp.gov/grants/solicitations/FY2010/Secondchancementoring.pdf>)

<sup>34</sup> These positions include a Social Services Program Coordinator, a Health Education Specialist, a Mental Health Services Manager, a Deputy Probation Officer, a Family Violence Prevention Officer, a Corrections Lieutenant, an Operations Director at Mission Solano, a Mental Health Clinician, an Education Specialist, and an Alcohol and Drug Counselor.

<sup>35</sup> Across the seven AORDP reentry sites, the five most common expenditures (Primary Costs) were administrative positions, case management, employment/vocational supports, housing supports, and mental and behavioral health services. For ease of comparison these five categories are discussed first, before turning to less common expenditures (Secondary Costs) including basic needs, mentoring and peer supports, research/evaluation, risk assessments, and other miscellaneous expenditures. For descriptions of these ten categories see page five of this report.

program; a data supervisor who monitored clients and input data into the program's database; and Substance Abuse Administrator who ran team meetings and assisted with grant coordination.<sup>36</sup> Allocations under this category, ranging from 1% to 3%, also supported WRAP's guiding Reentry Council, miscellaneous office supplies and work stations for grant staff, and development of a central reentry website for one partner. Finally, in 2015, the Solano County Sheriff's Office received a substantial allocation of the grant's resources (29%) under this category, to facilitate the transition of WRAP program management and operations to the jail.

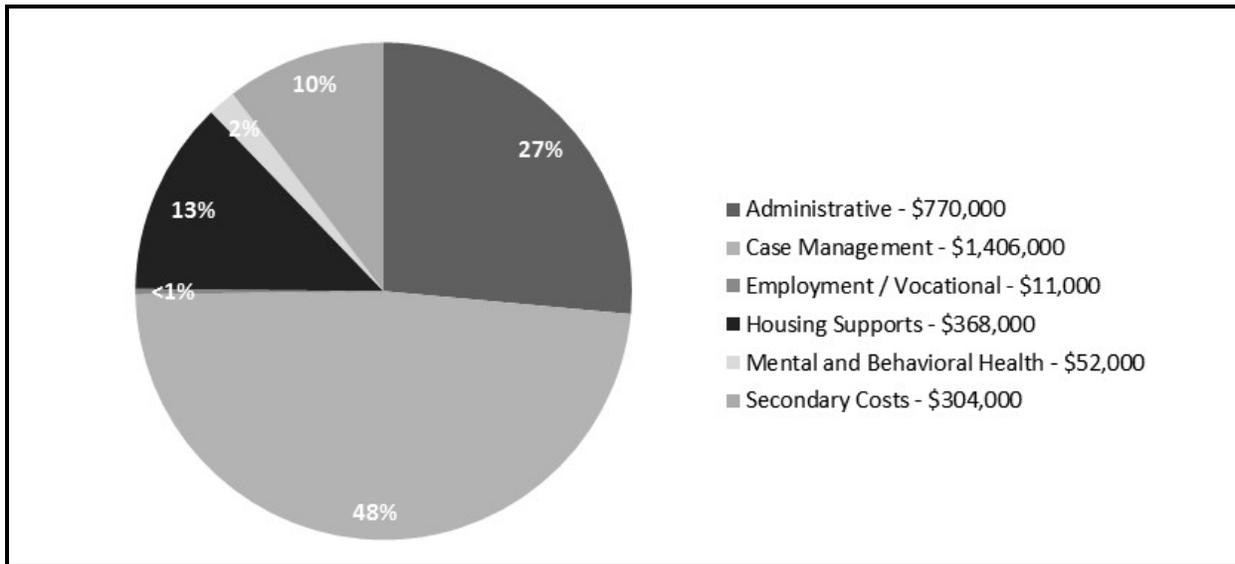
- **Case Management:** Nearly half of all program resources were allocated for case management, with the majority of these funds (95%) covering five WRAP case managers who worked to connect clients to necessary services both pre- and post-release. Between 1-2% of funding in this category also supported a public defender to work with clients involved in the court system; licenses to use a comprehensive case management software; funding for the use of county vehicles to assist in transporting staff; and other miscellaneous items such as office supplies, computers, and cell phone contracts.
- **Employment/Vocational:** Less than half of 1% of program resources (approximately \$10,795) were allocated for employment services, primarily to provide the Roots of Success training program (98%). A small portion of funds (2%) also supported a Job Skills Trainer.
- **Housing Supports:** Approximately 13% of program resources were allocated for housing supports, funding Mission Solano to provide transitional housing for WRAP clients.
- **Mental and Behavioral Health:** Approximately 2% of program resources (approximately \$52,392) were allocated for Mental and Behavioral Health services to provide the *Helping Women Recover* program.
- **Secondary Costs:** The remaining 10% of program resources were allocated for secondary costs, as described below.

WRAP's **Secondary Costs** (see *Exhibit E1-B*) largely supported **Research/Evaluation** (\$236,000), with funds primarily allocated for local evaluation (\$224,000) focused on program effectiveness and improvements, and data capture. This funding also supported a project advisor (\$200) during the first year of the grant who helped develop an evaluation plan and inform WRAP staff on the existing research base; and supported a data collection effort through UCLA in the last two years of the grant (\$12,000).

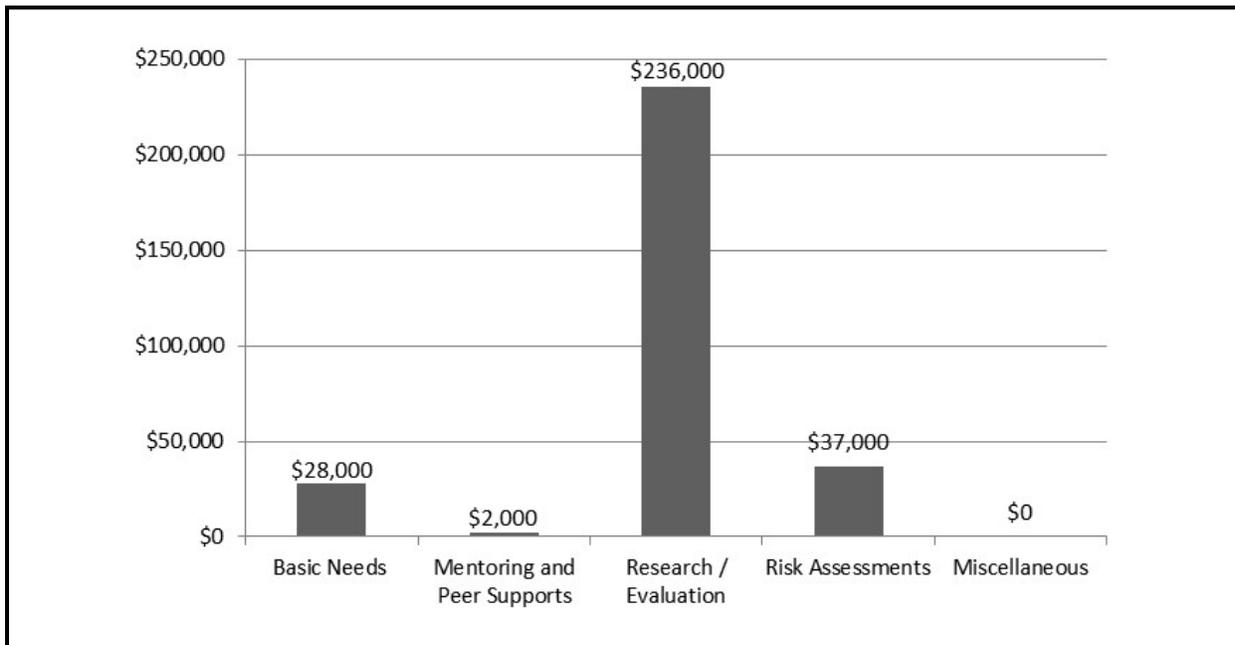
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<sup>36</sup> Data capture and monitoring were only classified as research/evaluation if they informed program delivery and refinements. Additionally, the indirect cost rate was not available for California as it was for some other sites.

**Exhibit E1-A. California WRAP Primary Costs**



**Exhibit E1-B. California WRAP Secondary Costs**



Solano County WRAP also used its grant funds to address the **Basic Needs** of its clients by providing childcare (\$2,100), client transportation to appointments/jobs/trainings (\$22,000), clothing and hygiene products (\$2,200), and support obtaining basic documents such as birth certificates and driver’s licenses (\$1,800). Grant resources were also allocated for **Mentoring and Peer Supports**, which funded Peer Mentors (\$2,000); and **Risk Assessment** activities by

funding trainings, registration, and probation staff time to administer the LSI-R Women's Supplemental Risk/Needs Assessment (\$37,000).

## *E.2 Connecticut Department of Corrections AORDP Cost Summary Profile*

The Connecticut Department of Correction's (CT DOC) New Haven Reentry Initiative (NHRI) employed a comprehensive reentry strategy featuring: team-based case management that began prior to release and continued in the community for up to 120-days after release; a furlough component that allowed qualifying male participants to attend services in the community before release; dual supervision, a collaborative pairing between the program's designated Parole Officer and community-based case managers; and holistic service provision. NHRI served incarcerated men and women in four Connecticut DOC facilities assessed as moderate to high risk to reoffend and who would return to New Haven or the surrounding area (West Haven or

### **Data Sources**

To identify the costs associated with program implementation and operation, researchers reviewed the site's Second Chance Act Adult Offender Reentry Demonstration project (AORDP) proposal budgets and budget narratives for FY2010, FY2011 and FY2013, obtained any final financial reports filed with the Bureau of Justice Assistance (BJA) under the SCA grant program, and conducted teleconferences with key stakeholders to verify budget allocations and actual expenditures.

Hamden) upon release. Pre-release case management was delivered by the CT DOC's reentry counselors, who reviewed assessment information and assisted participants in completing the Reentry Workbook Program (RWP), a 12 to 13 booster session program that reinforced previous cognitive-behavioral programming, and job readiness classes. Through this process, reentry counselors worked with participants to develop transition plans that stated goals in the RWP in the participants' own words. The RWP then followed participants into the community. Participants were also referred to the facility's Job Center in preparation for release. Community-based case managers at Easter Seal Goodwill Industries (ESGI) engaged NHRI participants in reentry planning prior to release. Male NHRI participants could transition to either the program's furlough component (described in Chapter 3: Findings from the Process Evaluation) or a halfway house. ESGI case managers and community reentry advocates, who are formerly incarcerated people, worked with a designated Parole Officer to supervise and engage NHRI clients in the reentry process. The goals and objectives recorded in the participant's RWP workbook guided the reentry process and services including housing, employment, education, and therapies. NHRI recruited its first case in the fall of 2010 and its last case under the grant in early 2015. A total of 437 people were served by the program.

### *Funding NHRI*

According to BJA and site financial documents, a total of \$4,068,000 were available to plan and implement the NHRI. The Connecticut Department of Corrections received three Second Chance Act (SCA) awards<sup>37</sup> for the New Haven Reentry Initiative totaling \$2,250,000.

<sup>37</sup> The three awards included 2010-CZ-BX-0026 for \$750,000 in 2010; 2011-CZ-BX-0035 for \$500,000 in FY2011; and 2011-CZ-BX-0035 for \$1,000,000 in FY2013.

Additionally, the state allocated \$1,818,000 in resources (in-kind and required cash match)<sup>38</sup> toward implementation. Of the SCA funds received for NHRI, this analysis *excludes* \$101,000 in unobligated funds. Of the state's allocated match funds, this analysis *excludes* \$229,000 of funds which were not ultimately applied to the grant.<sup>39</sup> Thus, we estimate that approximately \$3,738,000 was applied to implement and operate the NHRI. For more information on the materials reviewed to arrive at these figures, please see the Data Sources sidebar.

### *NHRI Expenditures: Primary and Secondary Costs*<sup>40</sup>

Review of the aforementioned materials suggests Connecticut devoted most its SCA resources for **Case Management** and **Administrative** supports, which together account for over 70% of NHRI expenditures (see *Exhibit E2-A*).

- **Administrative costs:** Over the SCA grant period, approximately 24% of program resources were allocated for administrative positions, including senior-level leadership engaged in collaboration and planning at the partner level and staff charged with direct implementation.<sup>41</sup> Among the positions and items supported by this funding: the NHRI Project Manager; the Deputy Director of Parole and two Parole Managers; two Co-Project Directors; a Counselor Supervisor; a Deputy Warden; an Assistant Director and Probation Officer at the Court Support Services Division; office supplies; and a data report. Personnel allocations under this category ranged substantially with these funds covering between 39% (NHRI Project Manager) to just 3% (Court Services personnel) of the various positions. An additional small cost item (7%) was the indirect cost rate (unspecified).<sup>42</sup>

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<sup>38</sup> The FY2010 BJA solicitation to which the AORDP evaluation sites responded included a match requirement: "As required by the Second Chance Act, a grant made under this program may not cover more than 50 percent of the total costs of the project being funded. The applicant must identify the source of the 50 percent non-federal portion of the budget and how match funds will be used. The recipient of a grant must provide 25 percent of the total project cost in cash match, and 25 percent of the total project cost may be matched by making in-kind contributions of goods or services that are directly related to the purpose for which the grant was awarded. Federal funds received and cash match provided by the grantee shall be used to supplement, not supplant, non-federal funds that would otherwise be available for the activities funded under this section. The applicant must identify the source of the 25 percent non-federal cash portion of the budget and how both cash and in-kind match funds will be used. The Attorney General may waive the match requirement upon a determination of fiscal hardship..." (2010: 7; as accessed June 2012 -

<http://www.ojjdp.gov/grants/solicitations/FY2010/Secondchancementoring.pdf>)

<sup>39</sup> Connecticut did not use any match or SCA grant funds on travel to required BJA meetings and other conferences.

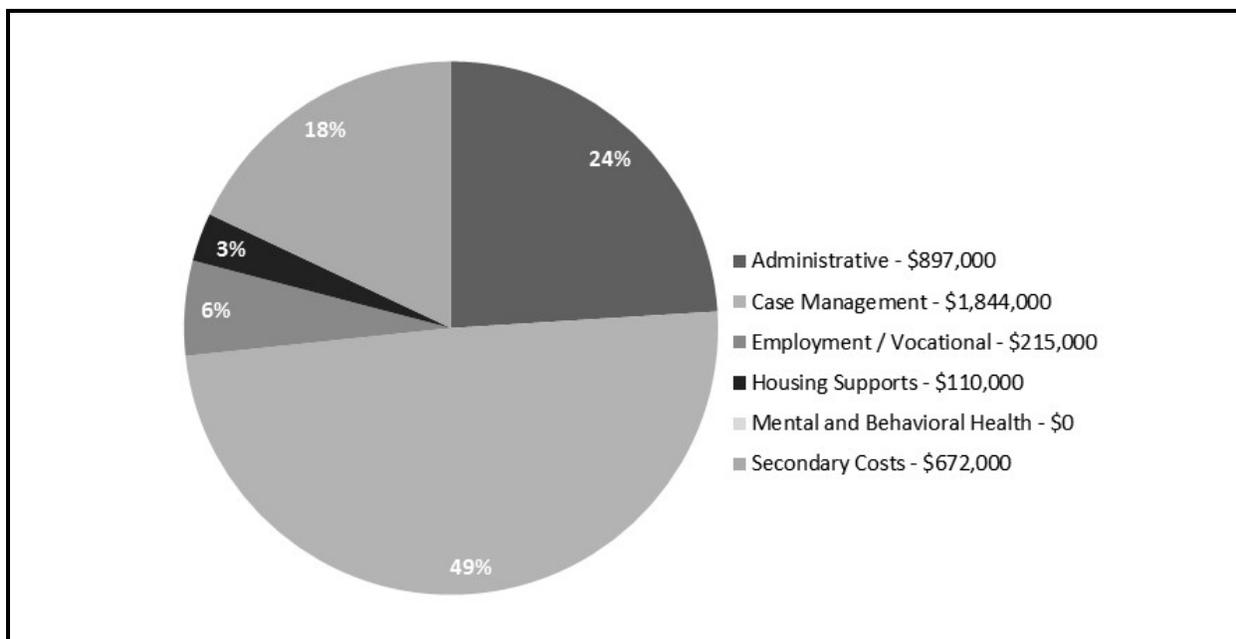
<sup>40</sup> Across the seven AORDP reentry sites, the five most common expenditures (Primary Costs) were administrative positions, case management, employment/vocational supports, housing supports, and mental and behavioral health services. For ease of comparison these five categories are discussed first, before turning to less common expenditures (Secondary Costs) including basic needs, mentoring and peer supports, research/evaluation, risk assessments, and other miscellaneous expenditures. For descriptions of these ten categories see page four of this report.

<sup>41</sup> Data capture and monitoring were only classified as research/evaluation if they informed program delivery.

<sup>42</sup> Connecticut included an indirect cost rate amount in its initial award budget but additional details were not provided.

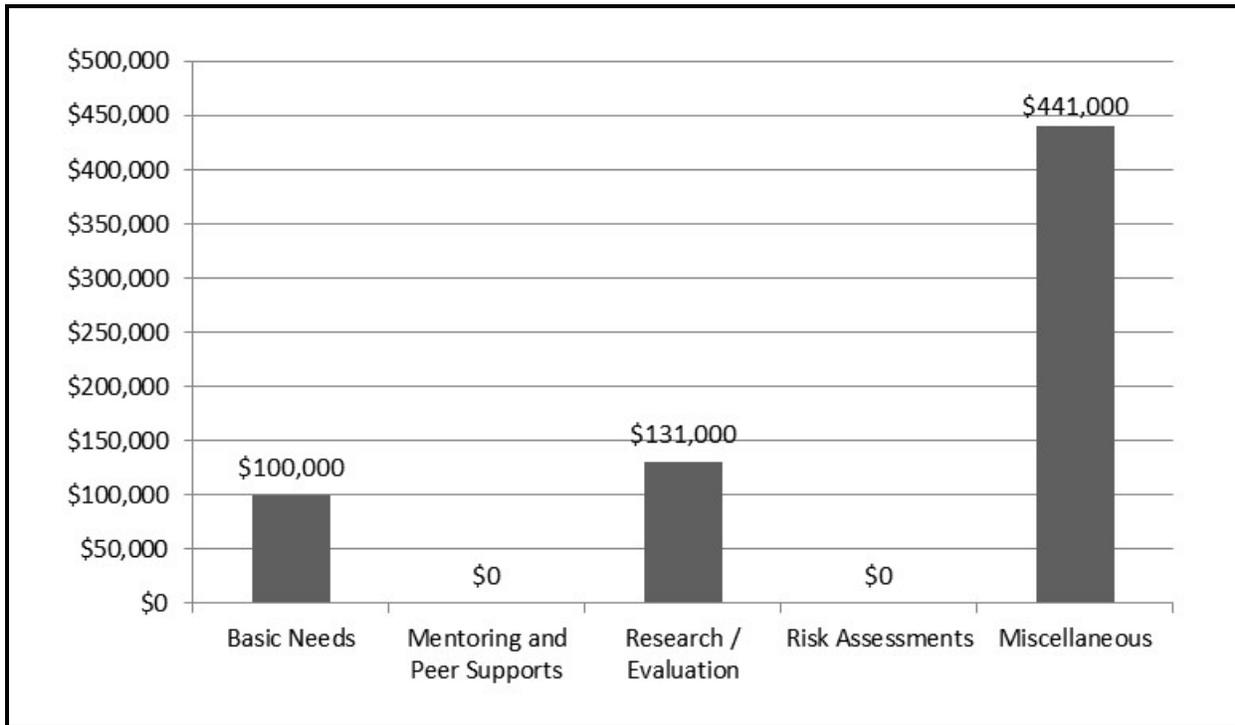
- **Case Management:** Approximately half (49%) of NHRI resources were allocated for case management, with the majority of these funds (86%) covering ESGI program staff: case managers, a community advocate, a reentry center coordinator, and the ESGI program director’s participation in the grant. Funding also supported a parole officer (13%) and high-speed document scanners (1%) used to circulate reentry workbooks and transition plans, completed pre-release, to partner agencies working with clients post-release.
- **Employment/Vocational:** Approximately 6% of program resources were allocated for counselors involved in a pre-release workbook and employment readiness program.
- **Housing Supports:** Approximately 3% of program resources secured placements in a 10-bed facility operated by Project MORE; participants placed with Project MORE also received case management services.
- **Mental and Behavioral Health:** The program did not allocate any resources for mental and behavioral health services.
- **Secondary Costs:** The remaining 18% of program resources were allocated for secondary costs, as described below.

**Exhibit E2-A. Connecticut NHRI Primary Costs**



NHRI **secondary costs** (see *Exhibit E2-B*) were mostly **Miscellaneous** (\$441,000), consisting of an in-kind DOC contribution which covered a variety of pre-release/facility-based programming such as substance abuse treatment, mental health counseling, and employment services. Unfortunately, a more detailed accounting of these expenditures was not available; therefore, they are listed as miscellaneous costs and not in other categories.

**Exhibit E2-B. Connecticut NHRI Secondary Costs**



Connecticut also used its SCA funding to support local **Research/Evaluation** (\$131,000) and address clients' **Basic Needs** (\$100,000). Allocations for **Research/Evaluation** supported a local evaluation conducted through the University of Connecticut, which helped guide program development. Allocations for **Basic Needs** supported bus tokens, short term housing assistance, and participation in an employment readiness program with money received from the Annie E. Casey Foundation in Year 1. Allocations for **Risk Assessments** supported delivery of the LSI-R risk assessment. Connecticut did not allocate any SCA funding directly for Mentoring and Peer Supports. The initiative's Community Advocates, however, could technically fall in this category; for the purposes of this analysis the Community Advocates are counted under case management as they performed both case management and peer support functions. Furthermore, even though Connecticut did not allocate any SCA funding directly for Risk Assessments, Case Managers at ESGI did administer risk assessments as a part of their case management responsibilities.

### E.3 Palm Beach County (FL) AORDP Cost Summary Profile

The Regional and State Transitional Ex-Offender Reentry (RESTORE) Initiative was an entirely new program funded under the Second Chance Act (SCA) and developed by the Palm Beach County Criminal Justice Commission (CJC) in partnership with the Florida Department of Corrections (FDC). The RESTORE initiative serves both adult men and women incarcerated in one of three designated FDC facilities—Sago Palm Reentry Center, the Atlantic Work Release Center, and the West Palm Beach Work Release Center—who are returning to Palm Beach County after release and who have been assessed as moderate to high risk to reoffend using the Level of Service Inventory-Revised (LSI-R). Eligible individuals are assigned by FDC to the Sago Palm facility approximately 18 to 36 months prior to release where they receive job readiness, educational, life skills, substance abuse treatment, family reunification, parenting, cognitive behavioral change, and victim impact programming. Pre-release counselors assess participant needs using a validated risk and needs tool, provide individual case management services, and assist participants in developing a transition plan. Approximately six months before release, individuals who choose to participate in RESTORE are assigned a community case manager. The RESTORE community case manager works to establish rapport with the individual and prepare them for their return to the community. After release, the RESTORE case managers link participants to transitional housing resources, employment services (including on-the-job training stipends), education, substance abuse and mental health treatment, transportation, peer support and mentoring, family reunification services, and obtaining identification and benefits. Post-release services are provided for approximately twelve months. Although most pre-release services are not unique to RESTORE, most post-release services are. RESTORE recruited its first cases under the SCA grant in June 2011 and served its last cases in September 2016. The program served 1,358 individuals pre-release, of which 437 also received services in the community post-release.

#### Data Sources

To identify the costs associated with program implementation and operation, researchers reviewed the site's Second Chance Act Adult Offender Reentry Demonstration project (AORDP) proposal budgets and budget narratives for FY2010, FY2011 and FY2013, obtained any final financial reports filed with the Bureau of Justice Assistance (BJA) under the SCA grant program, and conducted teleconferences with key stakeholders to verify budget allocations and actual expenditures.

#### Funding RESTORE

According to BJA and site financial documents, a total of \$6,708,000 was *available* to plan and implement RESTORE. Specifically, Palm Beach County received three SCA awards<sup>43</sup> for RESTORE totaling \$3,000,000 and contributed approximately \$3,708,000 (in-kind and required cash

<sup>43</sup> Review of OJP/BJA online awards and final financial reports indicates that Palm Beach County received two SCA awards: 2010-CZ-BX-0016 for \$750,000 in 2010 and 2012-CZ-BX-0016 totaling \$2,250,000 with installments in FY2012 for \$750,000 and again in FY2013 for \$1,500,000.

match and additional)<sup>44</sup> toward implementation. Of this total, the present analysis excludes approximately \$1,934,000 as follows: \$1,921,000 in local resources for security operations which were not unique to RESTORE participants, \$9,000 allocated for travel to required BJA meetings from SCA awards, approximately \$200 in unobligated SCA grant funds and \$4,000 in research staff time also from local resources. The research staff time was excluded as it was not used to run the program. Thus, we estimate that approximately \$4,774,000 in resources was applied to implement and operate RESTORE. For more information on the materials reviewed to arrive at these figures, please see the Data Sources sidebar (on previous page).

### *RESTORE Expenditures: Primary and Secondary Costs<sup>46</sup>*

A review of the aforementioned materials suggests the Palm Beach County AORDP site devoted the majority of its RESTORE resources to **Administrative** and **Case Management** supports: these allocations account for 73% of estimated RESTORE expenditures. As *Exhibit E3-A* indicates, **Employment/Vocational** services constitute the next most significant resource allocation at 15%.

- **Administrative costs:** Over the SCA grant period, approximately 21% program resources were allocated for administrative costs, which included a variety of positions: the RESTORE Project Manager (30% of this resource allocation category); CJC staff time

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<sup>44</sup> The FY2010 BJA solicitation to which the AORDP evaluation sites responded included a match requirement: "As required by the Second Chance Act, a grant made under this program may not cover more than 50 percent of the total costs of the project being funded. The applicant must identify the source of the 50 percent non-federal portion of the budget and how match funds will be used. The recipient of a grant must provide 25 percent of the total project cost in cash match, and 25 percent of the total project cost may be matched by making in-kind contributions of goods or services that are directly related to the purpose for which the grant was awarded. Federal funds received and cash match provided by the grantee shall be used to supplement, not supplant, non-federal funds that would otherwise be available for the activities funded under this section. The applicant must identify the source of the 25 percent non-federal cash portion of the budget and how both cash and in-kind match funds will be used. The Attorney General may waive the match requirement upon a determination of fiscal hardship." (2010: 7; as accessed June 2012 -

<http://www.ojdp.gov/grants/solicitations/FY2010/Secondchancementoring.pdf>)

<sup>45</sup> Additional in-kind contributions were made beyond those required (and thus detailed in the proposed budgets). For example, one additional contribution was staff time from the Palm Beach County Criminal Justice Commission. Some of the organizations contracted to provide case management and services post-release provided additional services, funded with their own resources, beyond the amount supported by the SCA grant. Extra resources beyond those detailed in the SCA budgets covered additional case manager positions, transitional housing, CJC staff resources dedicated only to RESTORE, and additional client support services. A detailed accounting of some of the costs was made available for this research, and a sufficient amount of information was available to estimate other costs (totaling \$708,000 or 15% of the total costs, mostly in later years).

<sup>46</sup> Across the seven AORDP reentry sites, the five most common expenditures (Primary Costs) were on administrative positions, case management, employment/vocational supports, housing supports, and mental and behavioral health services. For ease of comparison these five categories are discussed first, before turning to less common expenditures (Secondary Costs) including basic needs, mentoring and peer supports, research/evaluation, risk assessments, and other miscellaneous expenditures. For descriptions of these ten categories see page four of this report.

(17% of this allocation); Gulfstream Goodwill Industries Program Director and program supervision (9%).<sup>47</sup> Another significant administrative cost was rent for Gulfstream Goodwill Industries (11%). A smaller cost item was the indirect cost rate for Palm Beach County (4%).<sup>48</sup>

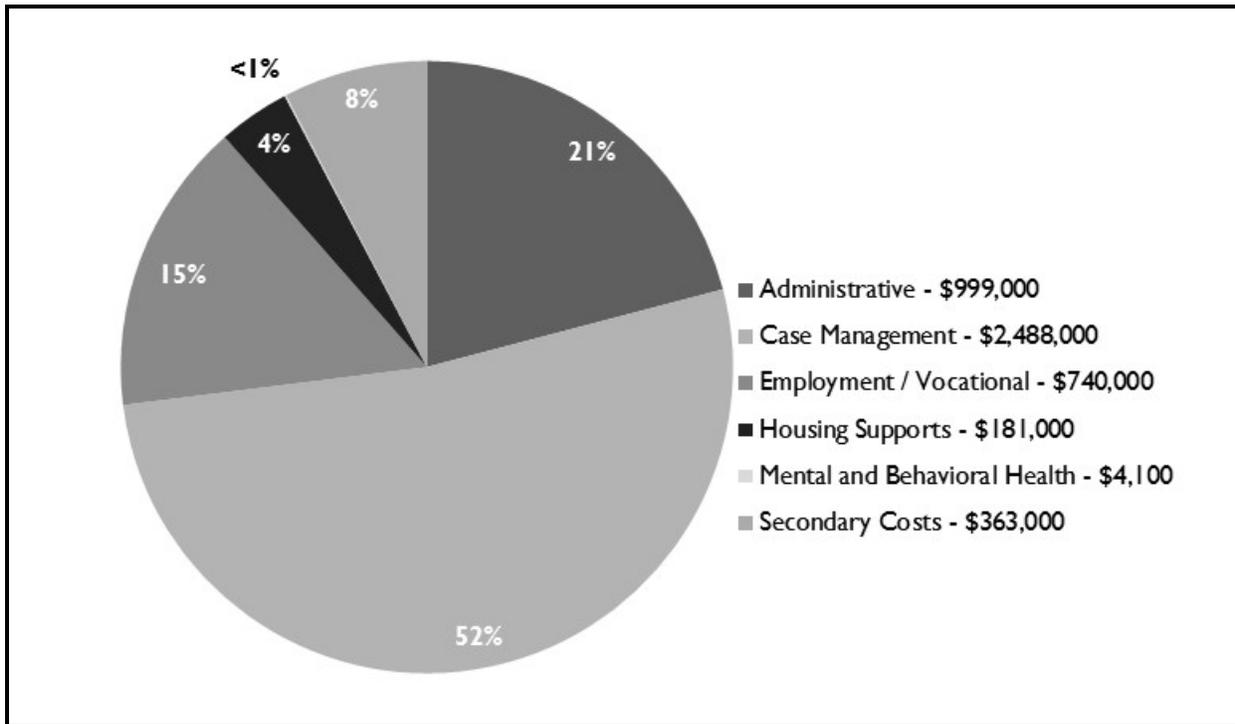
- **Case Management:** approximately half (52%) of RESTORE’s resources supported case management, with a substantial portion of the funding allocated for contracts with organizations for case manager positions (61%). Other case management resources funded positions such as a pre-release case management/project coordinator (10%) and a pre-release project counselor (12%). As indicated by the distribution of funding, case management is at the heart of RESTORE. Case management begins pre-release in the facility where participants have access to treatment and a Pre-Release Coordinator and Pre-Release Counselor develop case plans and administer assessments. Most of the treatment given to RESTORE participants in the facility was very similar to that given to non-RESTORE participants, generating no extra costs for the RESTORE program. Case management post-release began six months prior to release and was contracted out to three organizations: The Lord’s Place, City of Riviera Beach, and Gulfstream Goodwill industries. These organizations also provided support services.
- **Employment/Vocational Supports:** approximately 15% of program resources went to employment and vocational support services. One focus of post-release case management for RESTORE participants was helping them find employment. Participants were considered to have successfully completed RESTORE once they had maintained employment and housing for six months, signifying employment was a key goal of the program. To achieve this RESTORE funded two positions which focused on employment support: an employment coordinator (29%) and a job developer (13%). Another substantial portion of the employment and vocational supports resources went to GED teachers (25%) and GED registration fees (5%).
- **Housing Supports:** approximately 4% of RESTORE resources were allocated for housing supports with most (65%) of these resources designated for staffing and housing through The Lord’s Place, a key RESTORE partner.
- **Mental and Behavioral Health:** Only **0.1%** of resources were allocated for mental and behavioral health services and supports. The portion of total costs associated with mental and behavioral health does not appear in Exhibit E3-A as the whole percentage is less than 1%.
- **Secondary Costs:** Secondary costs comprised **8%** of the total program budget, and are described below.

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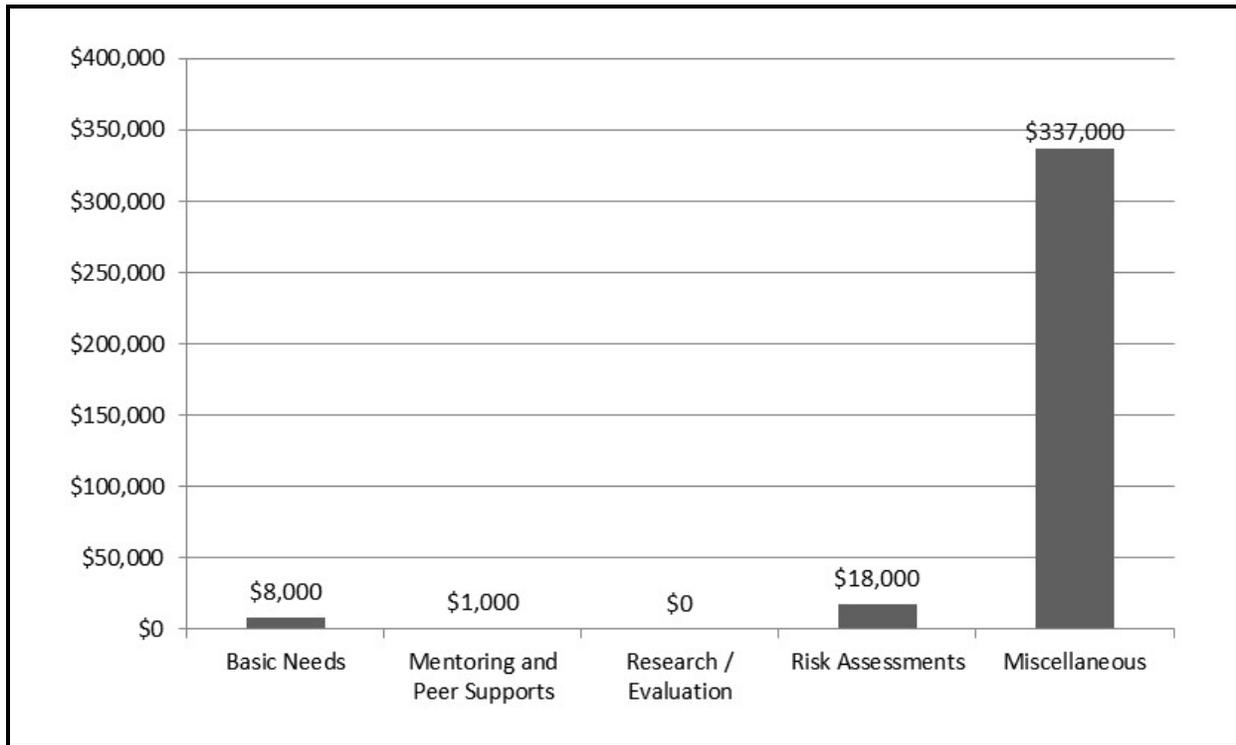
<sup>47</sup> Data capture and monitoring were only classified as research/evaluation if they informed program delivery.

<sup>48</sup> The indirect cost rate amount was identified for Florida and thus specified here. It was not available for all the sites.

**Exhibit E3-A. Florida RESTORE Primary Costs**



The vast majority of the RESTORE program’s **secondary costs** (approximately \$363,000) are best categorized as **Miscellaneous Costs** and most (76%) of the miscellaneous costs fall under the site’s general budget categories of “ex-offender support services” or “adult support services” (see **Exhibit E3-B**). These “support services” resources could be spent in areas such as housing assistance, bus passes, vocational training, education, peer supports, clothes and toiletries, tattoo removal, and substance abuse and mental health services. A more detailed accounting of these expenditures was not available for analysis, which is why they are included under miscellaneous costs and not in other cost categories. Other miscellaneous costs include family reunification services (5%) and program participation incentives (0.6%). The program also allocated 0.4% of its budget to support risk assessment and 0.2% on participants’ basic needs.

**Exhibit E3-B. Florida RESTORE Secondary Costs****E.4 Massachusetts AORDP Cost Summary Profile**

The Boston Reentry Initiative (BRI) uses a joint public safety and social service approach to reduce violent and gun crime among young men with extensive, serious criminal histories and to support their successful reintegration from the Suffolk County House of Corrections (SCHOC) into their Boston neighborhoods. Specifically, the BRI targets young men ages 17 to 30 sentenced to the SCHOC with

documented histories of violent and/or firearm offenses and gang associations who will return to one of Boston's high-crime hotspot neighborhoods and the adjacent areas (for additional details on the BRI approach please see Chapter 3: Findings from the Process Evaluation). Founded in 2000, the BRI is deeply rooted in long-standing collaborations between

law enforcement, prosecutors, and faith- and community-based organizations. Potential BRI participants are identified by the Boston Police Department (BPD) and SCHOC BRI staff and vetted by the US Attorney's Office (USAO) and the Suffolk County District Attorney's Office monthly. Key pre-release program components include (1) a pre-panel meeting where eligible BRI participants receive an introduction to the program led by the BRI Coordinator and the four

**Data Sources**

To identify the costs associated with program implementation and operation, researchers reviewed the site's Second Chance Act Adult Offender Reentry Demonstration project (AORDP) proposal budgets and budget narratives for FY2010, FY2011 and FY2013, obtained any final financial reports filed with the Bureau of Justice Assistance (BJA) under the SCA grant program, and conducted teleconferences with key stakeholders to verify budget allocations and actual expenditures.

BRI case managers (CMs); (2) the BRI Panel meeting during which eligible participants learn about available BRI services and the consequences of future reoffending as presented by representatives from the USAO and the District Attorney's office, and the Massachusetts departments of probation and parole; (3) BRI case management services including completion of intake paperwork, assessments (Level of Service Inventory-Revised [LSI-R] and Adult Substance Use Survey [ASUS]), and case planning; (4) SCHOC programming; and (5) a two-week BRI-specific job skills course and employment assistance. BRI CMs work with participants throughout their incarceration and for up to 12 months post-release.

### *Funding the BRI*

According to BJA and site financial documents, a total of \$8,771,000 were *available* to plan and implement the BRI through the receipt of three SCA awards<sup>49</sup> totaling \$4,257,000 and approximately \$4,514,000 (in-kind and required cash match)<sup>50</sup> that the site budgeted for implementation. Of this total, the present analysis *excludes* approximately \$1,242,000 as follows: \$18,000 allocated for travel to required BJA meetings; \$656,000 in FY2013 SCA grant and site match funds used to support the Overcoming The Odds (OTO) program in state prisons, an offshoot of the BRI model; approximately \$600 in unobligated FY2013 SCA grant funds; and \$569,000 in unused site match funds for positions which were not ultimately filled.<sup>51</sup> Thus, we estimate that approximately \$7,529,000 in resources *was applied* to implement and operate the BRI. For more information on the materials reviewed to arrive at these figures, please see the Data Sources sidebar.

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<sup>49</sup> Review of OJP/BJA online awards and final financial reports indicates that Boston received three SCA awards #2010-CZ-BX-0103 for \$749,828 in 2010; 2011-CZ-BX-0046 for \$750,000 in FY2011; and 2011-CZ-BX-0046 for \$2,757,242 in FY2013.

<sup>50</sup> The FY2010 BJA solicitation to which the AORDP evaluation sites responded included a match requirement: "As required by the Second Chance Act, a grant made under this program may not cover more than 50 percent of the total costs of the project being funded. The applicant must identify the source of the 50 percent non-federal portion of the budget and how match funds will be used. The recipient of a grant must provide 25 percent of the total project cost in cash match, and 25 percent of the total project cost may be matched by making in-kind contributions of goods or services that are directly related to the purpose for which the grant was awarded. Federal funds received and cash match provided by the grantee shall be used to supplement, not supplant, non-federal funds that would otherwise be available for the activities funded under this section. The applicant must identify the source of the 25 percent non-federal cash portion of the budget and how both cash and in-kind match funds will be used. The Attorney General may waive the match requirement upon a determination of fiscal hardship." (2010: 7; as accessed June 2012 - <http://www.ojjdp.gov/grants/solicitations/FY2010/Secondchancementoring.pdf>)

<sup>51</sup> These positions included 1 Full-Time Probation Officer, 3 Field Parole Officers, and funding for nightlight/homefront visits conducted after normal tour-of-duty hours.

### *BRI Expenditures: Primary and Secondary Costs*<sup>52</sup>

Review of the aforementioned materials suggests the Boston AORDP site devoted the majority of its BRI resources to **Administrative** and **Case Management** which together account for 74% of estimated BRI program expenditures. As **Exhibit E4-A** indicates, **Employment/Vocational** services constitute the next most significant resource allocation at 17%.

- **Administrative:** over the SCA grant period, approximately, 26% of all program resources were allocated for administrative costs.<sup>53</sup> Administrative costs included overtime for BRI Data Analysts (4% of this allocation), and rental costs associated with various partners (44% of the allocation). The remaining personnel covered under this allocation ranged from 1% to 15% for the following positions: a Database Administrator monitored payroll and database functioning; a BRI Project Coordinator who facilitated policy-level reentry issues among system leaders and partners; a Reentry Coordinator who managed BRI programming within the SCHOC and supervised the reentry teams; an Executive Director who managed the BRI case manager/mentors; the Deputy Director of Youth Options Unlimited (YOU), who managed BRI-related programming at YOU; and executive-level leaders including the Police Superintendent and Deputy/Assistant Deputy Superintendent who assisted with partnerships and strategic development of the grant. An additional small cost item was the indirect cost rate for the City of Boston (10%).<sup>54</sup>
- **Case Management:** almost one-half of program resources (48%) were allocated for case management, a key component of BRI, and related services. More than half (65%) of the resources allocated for case management supported four BRI case managers, with an additional 29% of the allocation supporting a variety of in-kind services provided by the Suffolk County House of Corrections; remaining resources under this category were allocated for probation or parole visits (4%); various trainings on case management best practices, offered by Health Resources in Action, a key partner (1%); and a victim advocate who worked with victims and the families of BRI participants to connect them to services (<1%).
- **Employment/Vocational Supports:** approximately 17% of BRI program resources were allocated for employment/vocational supports provided by key partner Youth Options Unlimited or YOU including Transitional Employment Slots for BRI participants and a YOU supervisor who oversaw the transitions services; vocational programming and a Career Development Coordinator who worked with the vocational program; a Job Developer who helped clients become employment ready (8%); two Employment

<sup>52</sup> Across the seven AORDP reentry sites, the five most common expenditures (Primary Costs) were on administrative positions, case management, employment/vocational supports, housing supports, and mental and behavioral health services. For ease of comparison these five categories are discussed first, before turning to less common expenditures (Secondary Costs) including basic needs, mentoring and peer supports, research/evaluation, risk assessments, and other miscellaneous expenditures. For descriptions of these ten categories see page four of this report.

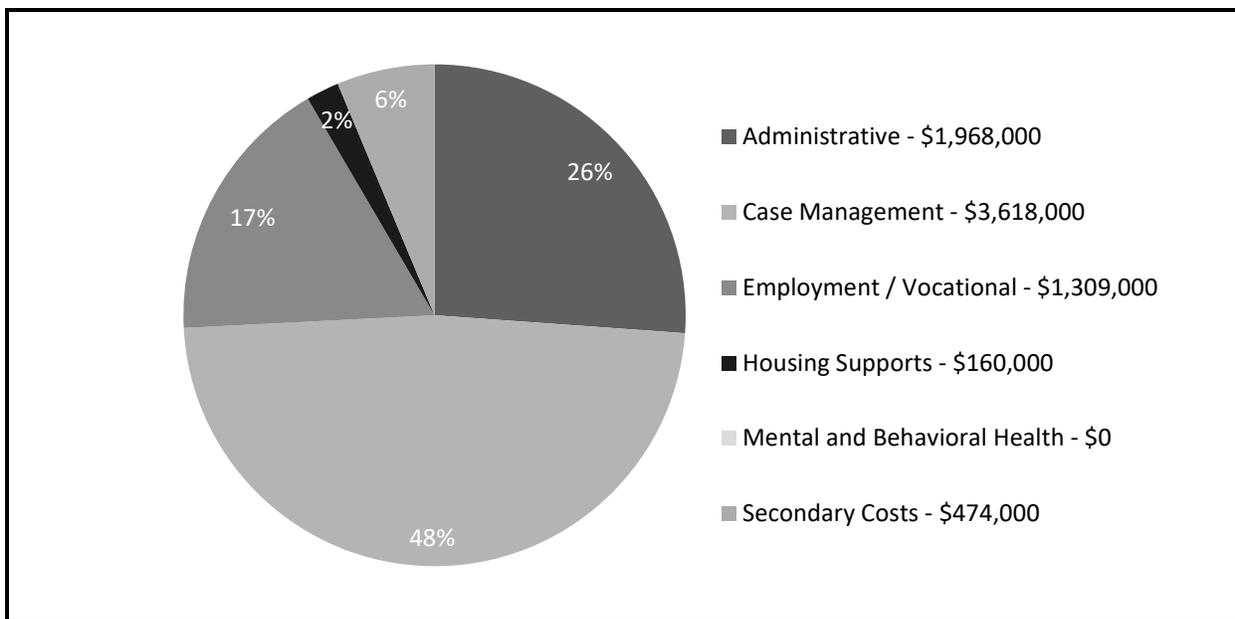
<sup>53</sup> Data capture and monitoring were only classified as research/evaluation if they informed program delivery.

<sup>54</sup> The indirect cost rate amount was identified for Massachusetts and thus specified here. It was not available for all the sites.

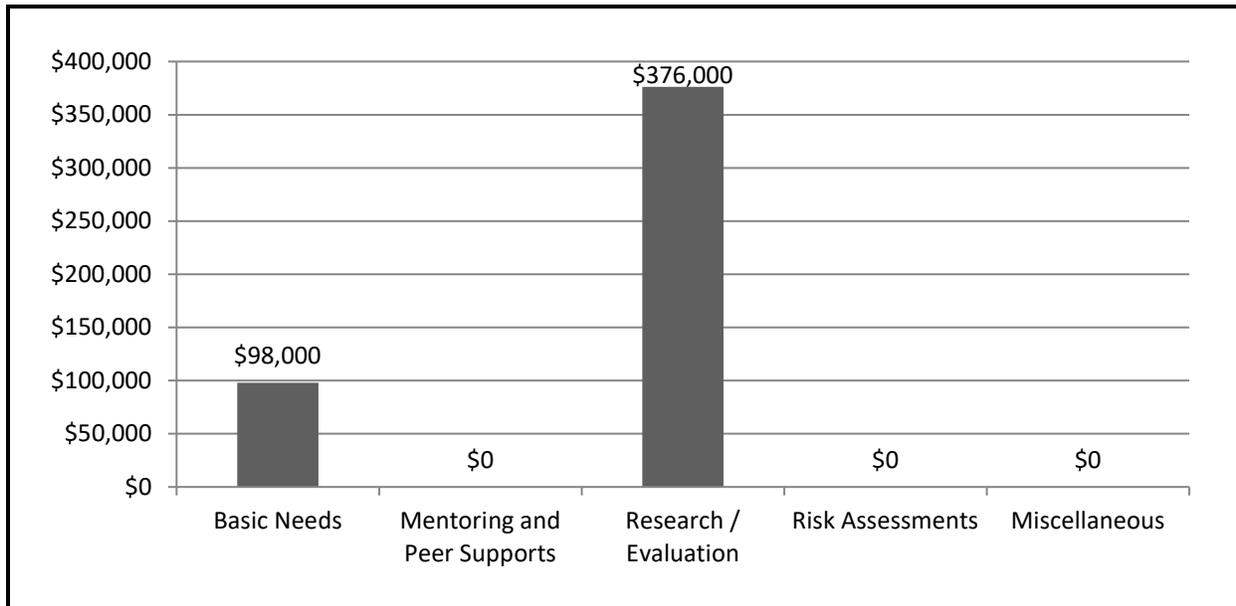
Caseworkers; a Career Specialist; employment services through SPAN, Inc.; coding lessons through the program Resilient Coders; and funding for education, training, and job search stipends. Resources for these various positions and services ranged from 31% to 1% of the allocation for this category.

- **Housing Supports:** approximately 2% of program resources were allocated for housing supports specifically transitional housing slots in the early years of the grant.
- **Mental and Behavioral Health:** the program did not allocate any resources for mental and behavioral health services.
- **Secondary Costs:** the remaining 6% of program resources were allocated for secondary costs, as described below.

**Exhibit E4-A. Massachusetts BRI Primary Costs**



BRI’s secondary costs, totaling \$474,000, primarily fall into the categories of **Basic Needs** and **Research/Evaluation**. BRI allocated resources to address BRI participants’ **Basic Needs (\$98,000)** by funding a variety of client-specific supports such as access to business clothing, bus passes, and license fees.

**Exhibit E4-B. Massachusetts BRI Secondary Costs**

Finally, the program supported **Research/Evaluation (\$376,000)** by allocating resources for a Data Collection/Analyst Manager who helped managed the database and screen participants for BRI participation (\$290,600); the involvement of a Director of Research and Development (\$46,500) to conduct an internal evaluation of the grant and relay best practices to partners; a Research Consultant (\$30,000) who synthesized and presented the extant research literature and analyzed the BRI recidivism outcomes; and a Research/ Policy Analyst (\$9,300) who conducted regular scans of reentry best practices and supported the program’s internal evaluation efforts. This site did not allocate any resources for risk assessment or mentoring and peer supports.

### ***E.5 Minnesota AORDP Cost Summary Profile***

The Minnesota Department of Correction (DOC)’s High Risk Recidivism Reduction Demonstration Project (HRRRP) aims to reduce recidivism among a unique, high-risk population of release violators (RVs) through collaborative case management and the colocation of services supported by DOC and community agency partnerships. The program targets male RVs

committed to Minnesota Correctional Facility (MCF)–Lino Lakes who are returning to one of four counties in the Minneapolis–St. Paul metro area (Anoka, Dakota, Ramsey, and Hennepin). Eligible participants must have spent 60 to 180 days in the facility prior to release and at least 150 days of supervised release or intensive supervised release in the community remaining on

#### **Data Sources**

To identify the costs associated with program implementation and operation, researchers reviewed the site’s Second Chance Act Adult Offender Reentry Demonstration project (AORDP) proposal budgets and budget narratives for FY2010, FY2011 and FY2013, obtained any final financial reports filed with the Bureau of Justice Assistance (BJA) under the SCA grant program, and conducted teleconferences with key stakeholders to verify budget allocations and actual expenditures.

their sentence. Eligible participants receive individualized transition planning and case management from a reentry coordinator for two to six months prior to release. Soon after enrollment, participants attend an orientation group session during which they are introduced to the program's services and expectations and meet key community partners. Upon release, a reentry team meeting is held to review client goals and to set up a schedule of services. Post-release services are offered through a community hub for six to twelve months. Co-located services include case management, employment assistance (including wage subsidies for transitional employment), transitional housing assistance, bus cards, and weekly life skills and mentoring groups (see Chapter 3: Findings from the Process Evaluation for additional details on program operations). Key partners include four community-based partner organizations and county community corrections departments from each of the four target counties. New to Minnesota DOC, the SCA reentry program was influenced by preceding reentry initiatives that date back to the Serious and Violent Offender Reentry Initiative. The overarching case management framework used in the program's design is the National Institute of Corrections' Transition from Prison to Community model. The HRRRP recruited its first cases under the AORDP Second Chance Act (SCA) grant in July of 2011 and its last case under the grant in June of 2015. A total of 406 individuals were served under HRRRP.

### *Funding the HRRRP*

According to BJA and site financial documents, a total of \$3,495,000 were *available* to plan and implement the HRRRP. The Minnesota Department of Corrections received four Second Chance Act awards<sup>55</sup> for the High Risk Recidivism Reduction Project totaling \$2,131,000. Additionally, the site allocated approximately \$1,364,000 in resources (in-kind and required cash match)<sup>56</sup> toward implementation. Of this total, the present analysis *excludes* approximately \$496,000 as follows: \$25,000 allocated for travel to required BJA meetings; and \$471,000 in unobligated

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<sup>55</sup> The four awards included 2010-CZ-BX-0032 for \$750,000 in 2010; 2011-CZ-BX-0015 for \$283,019 in FY2011; 2011-CZ-BX-0015 for \$137,000 in FY2012; and 2011-CZ-BX-0015 for \$961,000 in FY2013.

<sup>56</sup> The FY2010 BJA solicitation to which the AORDP evaluation sites responded included a match requirement: "As required by the Second Chance Act, a grant made under this program may not cover more than 50 percent of the total costs of the project being funded. The applicant must identify the source of the 50 percent non-federal portion of the budget and how match funds will be used. The recipient of a grant must provide 25 percent of the total project cost in cash match, and 25 percent of the total project cost may be matched by making in-kind contributions of goods or services that are directly related to the purpose for which the grant was awarded. Federal funds received and cash match provided by the grantee shall be used to supplement, not supplant, non-federal funds that would otherwise be available for the activities funded under this section. The applicant must identify the source of the 25 percent non-federal cash portion of the budget and how both cash and in-kind match funds will be used. The Attorney General may waive the match requirement upon a determination of fiscal hardship..." (2010: 7; as accessed June 2012 - <http://www.ojdp.gov/grants/solicitations/FY2010/Secondchancementoring.pdf>)

federal funds.<sup>57</sup> Thus, we estimate that approximately \$2,999,000 in resources *were applied* to implement and operate the HRRRP. For more information on the materials reviewed to arrive at these figures, please see the Data Sources sidebar.

### *HRRRP Expenditures: Primary and Secondary Costs*<sup>58</sup>

Review of the aforementioned materials suggests Minnesota devoted the majority of its SCA resources for **Case Management** and **Employment/Vocational** supports which together account for approximately 50% of HRRRP expenditures (see *Exhibit E5-A*). The program also devoted a significant amount of resources (17% of total resources) to **Housing Supports**.

- **Administrative:** over the SCA grant period, approximately 12% of program resources were allocated for positions and to support the grant, analyze data, select participants for participation in the program, and manage the program budget.<sup>59</sup> Personnel allocations under this category ranged from 14% to 70% to support a Project Administrator and Project Analyst; Work Stations (2%) and Indirect Costs (14%) rounded out the allocations under this category.<sup>60</sup>
- **Case Management:** approximately 39% of program resources were allocated for case management, which supported both direct service delivery and structures. Most of the resources under this category supported operations of the Community Reentry Hub (56%), a central location where HRRRP participants could access up to twelve months of post-release services. Another substantial allocation under this category included resources for a Reentry Coordinator (32%) and other reentry staff (12%) to provide post-release case management services to HRRRP participants.
- **Employment/Vocational Supports:** approximately 17% of program resources were allocated to provide post-release transitional employment services at the Community Reentry Hub (see above description).

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<sup>57</sup> Due in part to a government shutdown in 2011, the HRRRP faced an initial delay in program start up. This delay led to \$376,686 in unobligated funds at the end of the FY2010 grant, largely accounted for by reduced funds spent on transitional employment services, domestic violence programming, and other contracts. There were also some positions (e.g. a Victim Impact Instructor, and Facility Security Staff) in initial program budgets that were not ultimately involved in HRRRP operations, leading to \$34,305 in reduced match funds. There was \$94,392 in unobligated federal funds at the end of FY2015, accounted for by a lesser need for employment subsidies than program staff had initially forecasted.

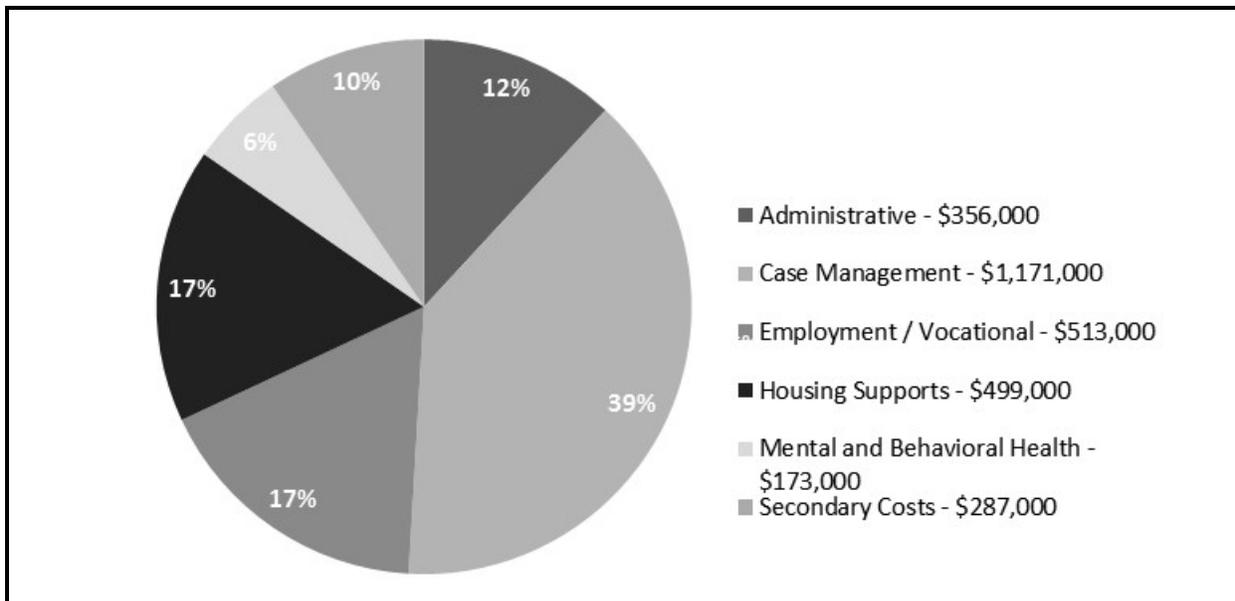
<sup>58</sup> Across the seven AORDP reentry sites, the five most common expenditures (Primary Costs) were administrative positions, case management, employment/vocational supports, housing supports, and mental and behavioral health services. For ease of comparison these five categories are discussed first, before turning to less common expenditures (Secondary Costs) including basic needs, mentoring and peer supports, research/evaluation, risk assessments, and other miscellaneous expenditures. For descriptions of these ten categories see page five of this report.

<sup>59</sup> Data capture and monitoring were only classified as research/evaluation if they informed program delivery.

<sup>60</sup> The indirect cost rate amount was identified for Minnesota and thus specified here. It was not available for all the sites.

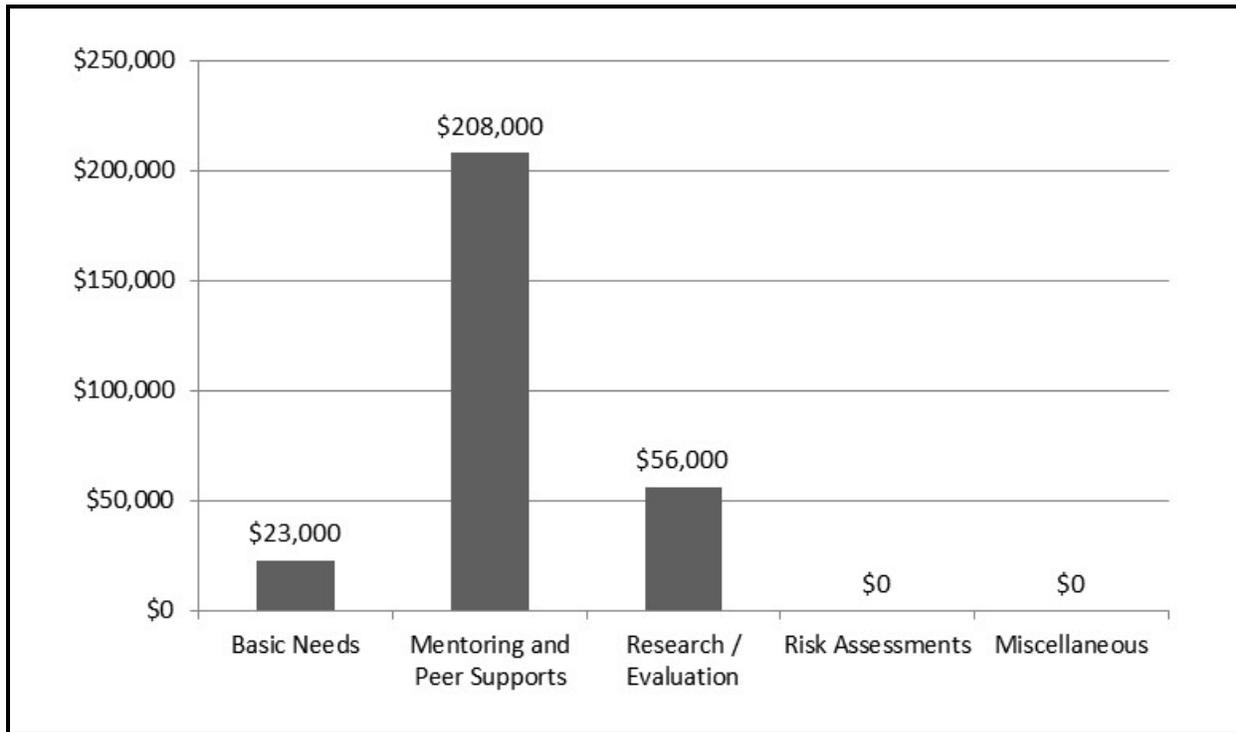
- **Housing Supports:** approximately 17% of program resources were allocated for housing supports, specifically post-release transitional housing and housing subsidies, provided by HRRRP partner ATTIC Correctional Services, Inc.
- **Mental and Behavioral Health:** approximately 6% of program resources were allocated for mental and behavioral health services. The vast majority of resources under this category (88%) supported the *Healing Generations* domestic violence curriculum, developed and delivered by The Family Partnership; a small portion (12%) went to a Victim Impact Instructor at the beginning of the grant, who was only funded for a short time.
- **Secondary Costs:** the remaining 10% of program resources were allocated for secondary costs, as described below.

**Exhibit E5-A. Minnesota HRRRP Primary Costs**



Minnesota’s Secondary costs (see *Exhibit E5-B*) mostly consisted of **Mentoring/Peer Supports** (\$208,000). Funding for Mentoring/Peer Supports supported Minnesota DOC’s partnership to provide group mentoring at the Community Reentry Hub.

Minnesota also supported **Research/Evaluation** by funding a researcher (\$56,000) to monitor data collected by the DOC; and supported the **Basic Needs** of HRRRP participants by funding bus passes (\$23,000). The grant did not spend any money on **Risk Assessment**, given an existing architecture which allowed for the administration of the MNSTARR and LS/CMI.

**Exhibit E5-B. Minnesota HRRRP Secondary Costs****E.6 Hudson County (NJ) AORDP Cost Summary Profile**

The Hudson County (NJ) Community Reintegration Program (CRP) operates as a partnership between the Hudson County Department of Corrections (HCDOC) and the Department of Family Services (DFS) and focuses on chronic jail populations—specifically, people who frequently cycle through the county jail

due to untreated mental illness or substance abuse disorders. Eligible individuals will have a diagnosed substance abuse or mental health disorder, as well as a long history of arrests and incarcerations, and will remain in Hudson County after release from jail. CRP participants receive a risk and needs assessment, pre- and post-

release case management and transition planning, and a range of community-based services. The community-based services include substance abuse treatment, housing supports, and educational, vocational and employment services. Social Rehabilitation Therapists (SRTs) from HCDOC provide pre-release case management, while DFS Community Service Workers (CSWs) provide post-release case management and facilitate the receipt of other community-based services including substance abuse treatment. Although most services are delivered post-release, CRP participants must comply with their recommended pre-release services to be

**Data Sources**

To identify the costs associated with program implementation and operation, researchers reviewed the site's Second Chance Act Adult Offender Reentry Demonstration project (AORDP) proposal budgets and budget narratives for FY2010, FY2011 and FY2013, obtained any final financial reports filed with the Bureau of Justice Assistance (BJA) under the SCA grant program, and conducted teleconferences with key stakeholders to verify budget allocations and actual expenditures.

eligible for services in the community. For those with substance abuse disorders, gender-specific therapeutic communities are available in-jail to provide drug treatment. CRP recruited its first cases under the Second Chance Act (SCA) grant in October 2009 and its last under the grant in July 2016. A total of 1,273 individuals were served by CRP under the SCA grant.

### *Funding the CRP*

According to BJA and site financial documents, a total of \$9,157,000 was available to plan and implement CRP. Specifically, Hudson County received two SCA awards<sup>61</sup> for the CRP program totaling \$3,438,000. Additionally, the site contributed \$5,720,000 in resources (in-kind and required cash match and additional)<sup>62,63</sup> toward implementation of the CRP. Of this total, the present analysis excludes approximately \$20,000 from SCA awards for travel expenses specific to the grant (required travel to the BJA SCA grantee meetings). There were no unobligated funds remaining from New Jersey's SCA grants. Thus, we estimate that approximately \$9,137,000 in resources were applied to implement and operate CRP. For more information on the materials reviewed to arrive at these figures please see the Data Sources sidebar.

### *CRP Expenditures: Primary and Secondary Costs*

Review of the aforementioned materials suggests that Hudson County devoted the majority of its resources to **Case Management** and **Mental and Behavioral Health**: together these areas accounted for over 88% of CRP's allocations. As *Exhibit E6-A* indicates, the next most significant resource allocation (6%) was for **Administrative** supports.

- **Administrative:** over the grant period, approximately 6% of program resources were allocated for administrative costs to support a variety of positions such as the project

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<sup>61</sup> Review of OJP/BJA online awards and final financial reports indicates that New Jersey received two SCA awards: 2010-CZ-BX-0055 in 2010 for \$750,000, and three allocations under 2011-CZ-BX-0032 totaling \$2,687,500 (the first allocation in FY2012 for \$750,000, the second in FY2013 for \$1,500,000, and the last in March 2013 for \$437,500).

<sup>62</sup> The FY2010 BJA solicitation to which the AORDP evaluation sites responded included a match requirement: "As required by the Second Chance Act, a grant made under this program may not cover more than 50 percent of the total costs of the project being funded. The applicant must identify the source of the 50 percent non-federal portion of the budget and how match funds will be used. The recipient of a grant must provide 25 percent of the total project cost in cash match, and 25 percent of the total project cost may be matched by making in-kind contributions of goods or services that are directly related to the purpose for which the grant was awarded. Federal funds received and cash match provided by the grantee shall be used to supplement, not supplant, non-federal funds that would otherwise be available for the activities funded under this section. The applicant must identify the source of the 25 percent non-federal cash portion of the budget and how both cash and in-kind match funds will be used. The Attorney General may waive the match requirement upon a determination of fiscal hardship..." (2010: 7; as accessed June 2012 - <http://www.ojjdp.gov/grants/solicitations/FY2010/Secondchancementoring.pdf>)

<sup>63</sup> Additional in-kind contributions were made beyond those required. For example, one additional contribution was funding for three community service workers, from the Department of Family Services.

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director (69% of resources under this category), a financial analyst (19%), a performance management contractor (10%), and supplies (2%).<sup>64</sup>

- **Case Management:** approximately 47% of program resources were allocated for case management, with the majority of the funding (55% of case management costs) going to a contract with Community Solutions Reentry program for community-based case management and day programming. A little more than one fifth of case management-related allocations were for Social Rehabilitation Therapists (23%) who provided pre-release case management at the Hudson County Correctional Center while 8% of case management resources covered a Clinical Case Manager. Community Service Workers (CSW), employees of the DFS, comprised another case management allocation (11% of resources under this category); three CSWs helped facilitate CRP clients' access to post-release services and Medicaid, greatly reducing the amount of time CRP participants had to wait prior to receipt of vital services. CSWs reportedly worked exclusively with CRP participants, and although their costs were not included as an in-kind match until the program's final supplemental SCA budget, this analysis calculated and applied an estimated cost of the CSWs for all grant years as they were an integral CRP component.<sup>65</sup>
- **Employment/Vocational Supports:** no CRP resources were allocated for employment or vocational supports.
- **Housing Supports:** only 4% of CRP's resources were used for housing supports.
- **Mental and Behavioral Health:** approximately 41% of program resources were budgeted for mental and behavioral health, most of which went to a contract with Integrity House for pre-release substance abuse treatment and community services (86% of resources in this category). Integrity House provided pre-release treatment for women through therapeutic communities, which operated in the jail and was funded by the Second Chance Act. Integrity House provided a variety of other services, including Seeking Safety (a trauma-informed care program for women), music therapy, and yoga. Integrity House also provided jail-based treatment and post-release and community

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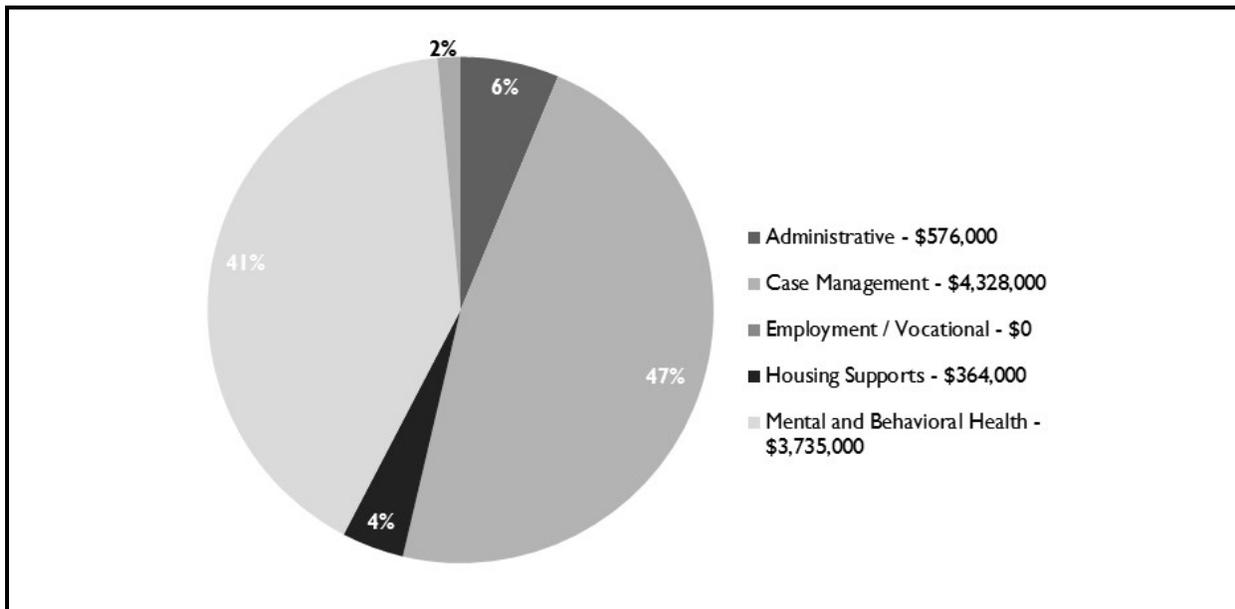
<sup>64</sup> Data capture and monitoring were only classified as research/evaluation if they informed program delivery. The indirect cost rate was not available for New Jersey as it was for some other AORDP sites.

<sup>65</sup> Some costs which were not funded completely by the SCA or included as an in-kind match in most of the proposed budgets were the community service workers mentioned above. However, the cost for two community service workers for six months was included as an in-kind match in the proposed budget for the extra award for the FY2013 supplemental grant. This information was then used to estimate the total cost of the two community service workers for the total life of the grant. The cost specified in the 2013 supplemental budget was then multiplied by 18 (using each year's non-salary personnel cost multiplier) to get the total cost for three community service workers for all three years, including when they were not included in the SCA grant budgets.

based support services for men which were funded through the inmate trust fund.<sup>66</sup> These post-release services included housing, employment services, medication, and outpatient treatment. These non-mental and behavioral health services are included in this category because only the full amount paid to Integrity House was available; the costs could not be broken down by type of service. The rest of the mental and behavioral health resources (15%) went to other post-release substance abuse treatment. Post-release treatment resources purchased treatment for CRP participants in the first 90 days post-release if they could not be enrolled in Medicaid immediately, after 90 days participants are expected to use Medicaid funded treatment. The SCA funded treatment CRP provided was a bridge to account for the delay before Medicaid could be accessed. After implementation of the Affordable Care Act (ACA), however, some of the resources intended for mental and behavioral health services were reallocated to housing supports. Implementation of the ACA allowed CRP to enroll participants in Medicaid prior to their release, meaning the funding which was originally intended to bridge the period after release was no longer needed.<sup>67</sup>

- **Secondary Costs:** the remaining 1% of CRP’s resources were allocated for secondary costs, as described below.

**Exhibit E6-A. New Jersey CRP Primary Costs**

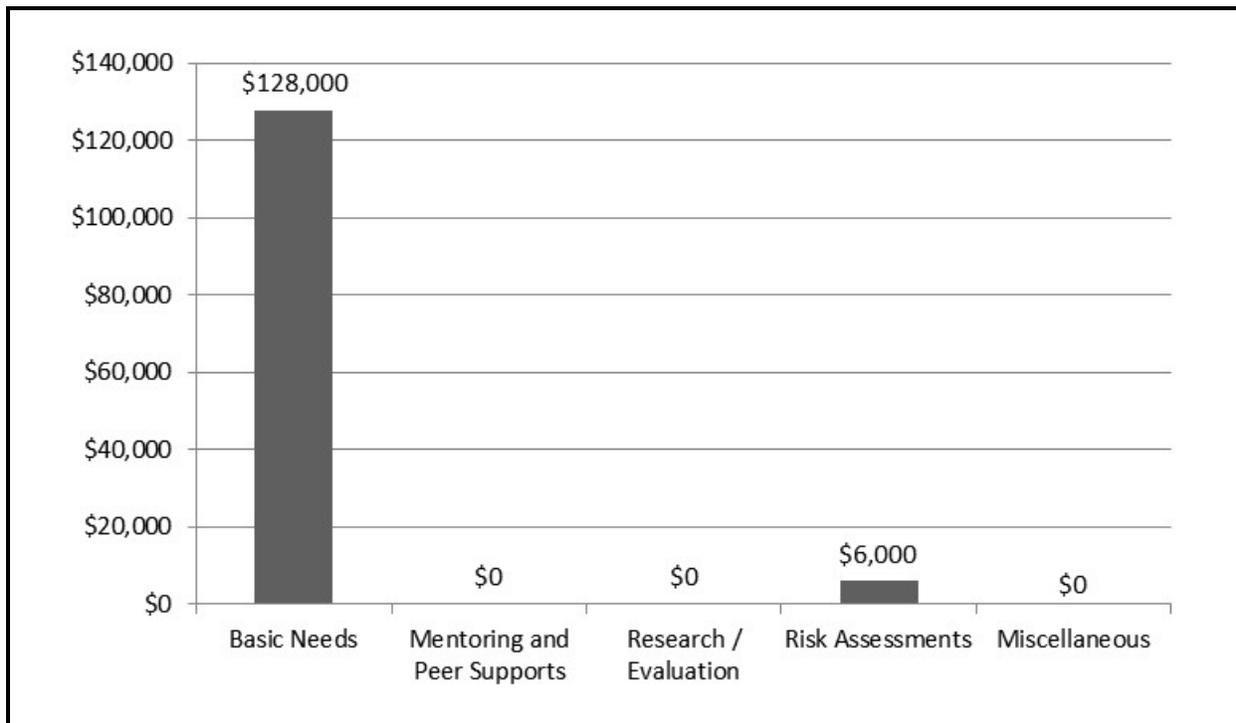


<sup>66</sup> Approximately \$2,320,000, in community and jail-based services were provided by Integrity House over four years; these services were funded by the Inmate Trust Fund, whose resources come from purchases at the in-facility commissary, phone calls, and other charges to those in prison or jail. Approximately 80% of these services were used by CRP participants. Therefore, the added cost in terms of total resources dedicated to CRP was estimated to be \$1,856,000.

<sup>67</sup> This shift from health to housing was noted in a Grant Adjustment Notice but the site could not supply the exact figures.

Hudson County’s secondary costs (see **Exhibit E6-B**) mostly covered participants’ **Basic Needs** (\$128,000) and costs associated with administering the COMPAS **Risk Assessment** (\$6,000). CRP did not expend any resources on mentoring or research and evaluation. Approximately 63% of resources allocated to meet participants’ basic needs consisted of flexible funds that covered a variety of basic needs with the remaining 37% used for bus passes (approximately \$47,000).

**Exhibit E6-B. New Jersey CRP Secondary Costs**



### E.7 Beaver County (PA) AORDP Cost Summary Profile

The ChancesR: Reentry, Reunification, and Recovery (hereafter ChancesR) program, led by Beaver County (PA) Behavioral Health (BCHC), serves adult men and women sentenced to the Beaver County Jail and who have mental health, substance use disorders (SUD) or co-occurring disorders (COD), as identified through the Global Appraisal of Individual Need Short Screener (GAIN SS) and an in-depth co-occurring assessment. The program’s core components consist of screening and assessment to identify behavioral health disorders, cognitive-based treatment groups that feature the *Seeking Safety* and *Thinking for a Change* curriculum, highly structured vocational/educational services, transition case planning

#### Data Sources

To identify the costs associated with program implementation and operation, researchers reviewed the site’s Second Chance Act Adult Offender Reentry Demonstration project (AORDP) proposal budgets and budget narratives for FY2010, FY2011 and FY2013, obtained any final financial reports filed with the Bureau of Justice Assistance (BJA) under the SCA grant program, and conducted teleconferences with key stakeholders to verify budget allocations and actual expenditures. ChancesR provided more detailed actual expenditure data than other programs, including grant funded expenditures and post-release service billing data.

and case management, and reentry sponsorship (mentoring) that begins in jail and continues in the community. Seamless service provision that addresses the obstacles faced by people returning to the community from jail, employment in particular, is an overarching goal of the ChancesR program. Program partners include Beaver County Behavioral Health (BCHC), the Beaver County Jail, Adult Probation, the Beaver County Rehabilitation Center (BCRC), NHS Human Services (NHS), and two community-based sponsorship (mentoring) programs: ROOTS (Reaching Over Obstacles to Succeed) and TRAILS (Transforming lives, Restoring hope, Advocating change, Identifying resources, Life planning, and Supporting families). Under the Second Chance Act (SCA) grant, the ChancesR program served 1,270 individuals between April 2011 and August 2016.

### *Funding ChancesR*

According to BJA and site financial documents, a total of \$6,584,000 was *available* to plan and implement ChancesR. Specifically, Beaver County received three SCA awards<sup>68</sup> for the ChancesR program totaling \$3,200,000. Additionally, the site contributed \$3,384,000 in resources (in-kind and required cash match and additional)<sup>69,70</sup> toward implementation. Of this total, the present analysis excludes approximately \$12,000 allocated for travel to required BJA meetings and other conferences from SCA awards. Thus, we estimate that approximately \$6,571,000 in resources was applied to implement and operate ChancesR.<sup>71</sup>

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<sup>68</sup> Review of OJP/BJA online awards and final financial reports indicates that Beaver County received three SCA awards #2010-CZ-BX-0076 for \$750,000 in 2010 and two allocations under 2011-CZ-BX-0049 totaling \$2,450,000, the first in FY2012 for \$750,000 and the second in FY2013 for \$1,700,000.

<sup>69</sup> The FY2010 BJA solicitation to which the AORDP evaluation sites responded included a match requirement: "As required by the Second Chance Act, a grant made under this program may not cover more than 50 percent of the total costs of the project being funded. The applicant must identify the source of the 50 percent non-federal portion of the budget and how match funds will be used. The recipient of a grant must provide 25 percent of the total project cost in cash match, and 25 percent of the total project cost may be matched by making in-kind contributions of goods or services that are directly related to the purpose for which the grant was awarded. Federal funds received and cash match provided by the grantee shall be used to supplement, not supplant, non-federal funds that would otherwise be available for the activities funded under this section. The applicant must identify the source of the 25 percent non-federal cash portion of the budget and how both cash and in-kind match funds will be used. The Attorney General may waive the match requirement upon a determination of fiscal hardship..." (2010: 7; as accessed June 2012 - <http://www.ojjdp.gov/grants/solicitations/FY2010/Secondchancementoring.pdf>)

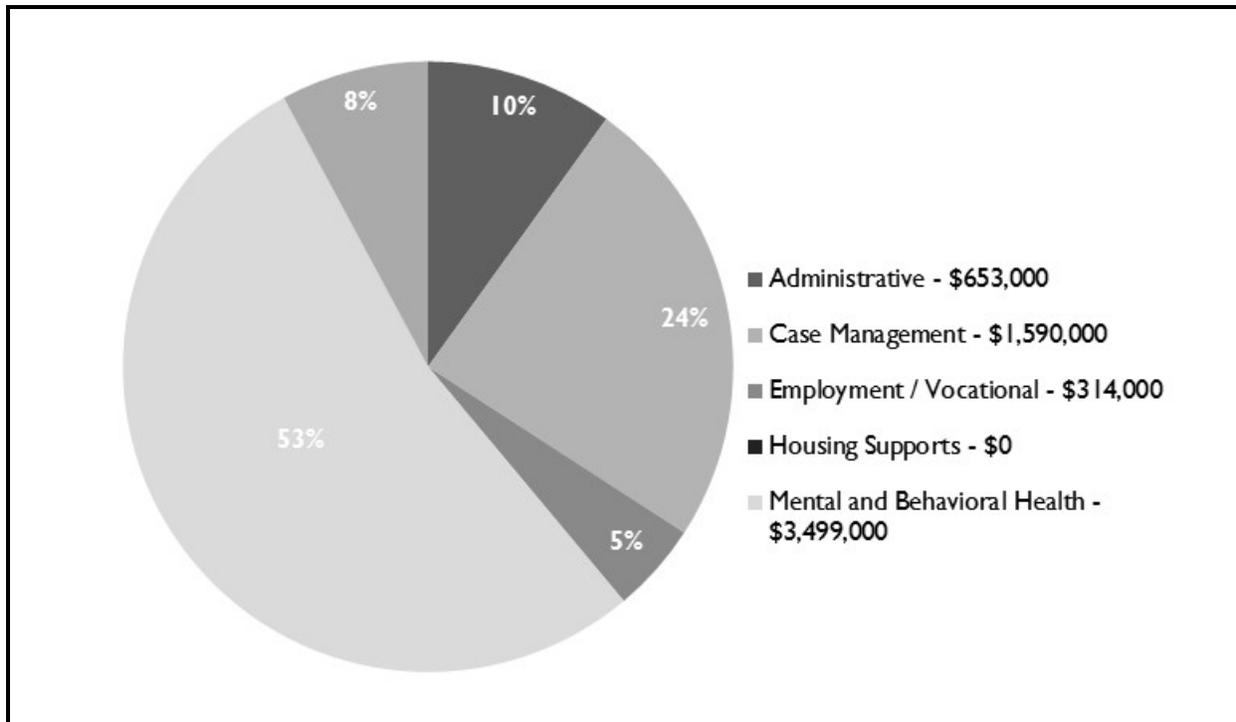
<sup>70</sup> Additional in-kind contributions of \$183,000 were made beyond those required (and thus detailed in the proposed budgets). For example, one additional contribution was funding for a reentry liaison, from Medicaid.

<sup>71</sup> It should be noted that the \$6,571,000 does not include the cost of additional post-release services accessed by participants at the direction of ChancesR but funded through the county's base funds and/or Medicaid and which are estimated by the program to total approximately \$8,952,000. The ChancesR program was unique in supplying this additional cost information about participant's post-release services which were not funded by the SCA grant or included in the required match, however, because it is unclear how post-release service costs for ChancesR participants differed from business as usual, these costs are not considered to be part wholly of ChancesR implementation or operating costs for this analysis.

### ChancesR Expenditures: Primary and Secondary Costs<sup>72</sup>

Review of the aforementioned materials suggests the Beaver County AORDP site devoted the majority of its ChancesR resources to **case management** and **mental and behavioral health services**. These two areas accounted for 77% of Pennsylvania's program costs as *Exhibit E7-A* indicates.

#### Exhibit E7-A. Pennsylvania ChancesR Primary Costs



- Administrative:** Approximately 10% of ChancesR costs (approximately \$628,012) were administrative in nature.<sup>73</sup> Indirect cost charges comprised 38% (\$238,644) of those administrative costs.<sup>74</sup> Other costs were associated with project management (31% of administrative costs) and financial expertise and assistance (12%), and a variety of other small items.

<sup>72</sup> Across the seven AORDP reentry sites, the five most common expenditures (Primary Costs) were on administrative positions, case management, employment/vocational supports, housing supports, and mental and behavioral health services. For ease of comparison these five categories are discussed first, before turning to less common expenditures (Secondary Costs) including basic needs, mentoring and peer supports, research/evaluation, risk assessments, and other miscellaneous expenditures. For descriptions of these ten categories see page four of this report.

<sup>73</sup> Data capture and monitoring were only classified as research/evaluation if they informed program delivery.

<sup>74</sup> The indirect cost rate amount was identified for Pennsylvania and thus specified here. It was not available for all the sites.

- **Case Management:** The program spent 24% of its resources on case management, of which 9% directly supported Forensic Assertive Community Treatment (FACT) services, which is a type of forensic case management reserved for those with serious, Axis I mental health diagnoses. Approximately 54% of case management resources went to NHS for a variety of activities for which costs could not be further parsed out, including additional case management and FACT services. Funding (31% of case management) also went to three reentry liaisons who provided blended case management and a reentry coordinator (4%) who was based in the jail and was responsible for discharge planning.<sup>75</sup> The vast majority of SCA funded case management was conducted pre-release. What was unique about ChancesR was their use of forensic case management, which was linked to the program's focus on individuals with COD.
- **Employment/Vocational Supports:** The program spent 5% on employment or vocational supports through a contract with Beaver County Rehabilitation Center. Cost amounts were not available for the specific employment/vocational support components that BCRC provided, however information on enrollment was available. BCRC enrolled 487 individuals in services, of which 403 received a vocational assessment; 361 enrolled in supported employment services (interview preparation, resume writing, life and job readiness skills); 139 received psychiatric rehabilitation services; and 66 received GED/academic support.
- **Housing Supports:** The ChancesR program did not allocate any resources for housing supports.
- **Mental and Behavioral Health:** Over half of the ChancesR program's resources (53%) were spent on mental and behavioral health services.<sup>76</sup> This category included funding

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<sup>75</sup> ChancesR participants had access to services which were not funded by the SCA nor counted as in-kind contributions. One of the reentry liaisons who served ChancesR clients was funded through Medicaid. This analysis assumes that the cost of the Medicaid funded reentry liaison was the same as the reentry liaison position allocated in the ChancesR budget, and this cost was included in the calculation above.

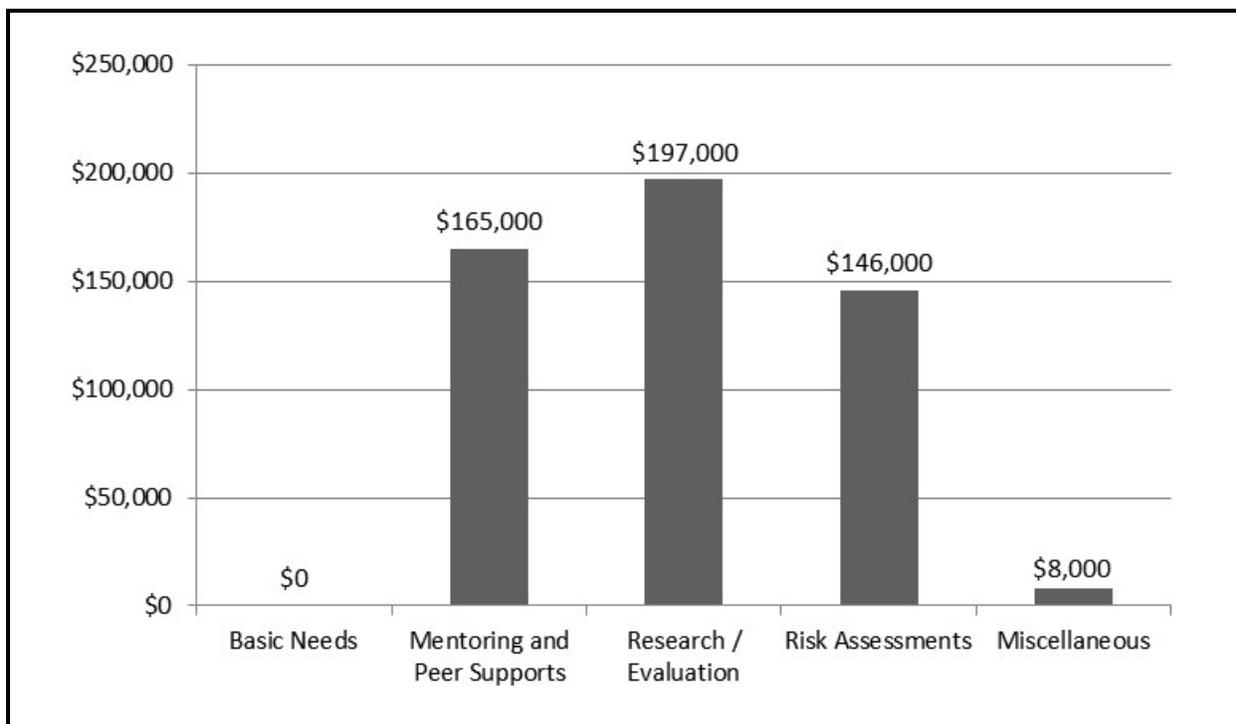
<sup>76</sup> In general, post-release services and case management available to ChancesR participants were available to other individuals released from jail and funded by Pennsylvania's HealthChoices (HC) initiative (Medicaid) and Beaver County. However, because ChancesR individuals were more likely to be released from jail with discharge plans, they might be expected to utilize a higher number of services, increasing the overall cost of the program. Unlike other AORDP grantees, the Beaver County site, was able to provide detailed billing information on post-release services and case management utilization by ChancesR participants. No similar information is available for those in the comparison group or for business as usual, so these additional costs should not be viewed in their entirety as part of the cost of running ChancesR. In total, an additional \$1.9 million was spent by Beaver County on post-release services, with 41% of that going to case management provided by NHS Human Services, 14% going to other types of case management, 16% on mental and behavioral health services, 23% on housing supports (including halfway house services), 2% on employment and vocational supports and the remainder on administration. A further \$7 million in services were billed to HC for ChancesR members with most services being mental and behavioral health (48%), followed by case management from NHS (22%), case management from other providers (17%), housing supports (7%) and administration (7%). Therefore, a further almost \$9 million was spent on ChancesR participants post-release. ChancesR participants had access to multiple levels of case management post-release, which cost \$3.8 million in total. 60 percent of those post-release case management costs were for FACT/ACT case management provided by NHS, 32% were for Intensive Case Management from Heritage Valley, and 6% were for Blended Case Management through BCBH.

for jailed based medical, dental, and mental health treatment (92% of mental and behavioral health costs), a forensic psychiatrist (7%), and the remainder on trainings for staff on programs such as *Seeking Safety*. It should be noted that the distinction between mental and behavioral health services and case management is complicated for case management models such as FACT. The jail-based treatment was provided through a contract with Southern Health Partners. Southern Health Partners provided a medical physician, a medical nurse, a psychiatric nurse, and a formulary to generate psychiatric and medical medications.

- **Secondary:** approximately 8% of program resources were allocated for secondary costs, as describe and discussed below.

Thirty-two percent of ChancesR's secondary costs (see **Exhibit E7-B**), and 3% of total program allocations, supported **Mentoring/Peer Supports** which were provided through two organizations, ROOTS and TRAILS Ministries. These organizations were paid a certain amount per match that they arranged and sustained between a ChancesR participant and a mentor. The other secondary costs were for **Research and Evaluation** (38% of secondary costs) and **Risk Assessments** (28%). Research and evaluation costs were included in the total program costs for ChancesR as they were used to improve and assist with the management of the program and were not one time costs. ChancesR contracted with an external evaluator for the research and evaluation services that were used to monitor and refine program operations; as such, this was counted as a ChancesR program operations cost.

#### Exhibit E7-B. Pennsylvania ChancesR Secondary Costs



Assessment costs were associated with participant screenings (Global Appraisal of Individual Need Short Screener—GAIN SS) for substance abuse or COD disorders conducted by NHS staff to determine participant eligibility for ChancesR, a key component of ChancesR pre-release services. Separately, a significant amount, \$111,000, was spent on staff training which were included in the totals above.

# Appendix F. Differences in Weighted Means Results for Service Receipt

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**Exhibit F-1. Differences in Means Statistics for Service Grouping Indicators at Baseline**

Variable Label	Total N	Tx N	Comp N	Tx Wtd Mean	Comp Wtd Mean	Std Error	Test Statistic	P value	Effect Size
Received any pre-release planning during focal incarceration	502	222	280	0.934	0.811	0.3522	11.4402	0.0007	1.19
Number of pre-release reentry services received (max=8) during focal incarceration	502	222	280	3.977	2.666	0.1962	6.6802	<.0001	0.63
Received any service coordination services during focal incarceration	502	222	280	0.731	0.476	0.2083	27.6751	<.0001	1.1
Number of service coordination services received (max=3) during focal incarceration	502	222	280	1.478	0.878	0.1096	5.4756	<.0001	0.55
Received any assistance with public benefits/resources during focal incarceration	502	222	280	0.796	0.758	0.2381	0.8191	0.3654	0.22
Number of public benefits/resources services received (max=8) during focal incarceration	502	222	280	2.326	1.856	0.1733	2.7113	0.0069	0.26
Received any life skills/money management services during focal incarceration	502	222	280	0.48	0.317	0.1961	12.1946	0.0005	0.68
Number of life skills/money management services received (max=2) during focal incarceration	502	222	280	0.635	0.463	0.0689	2.4998	0.0127	0.23

(continued)

**Exhibit F-1. Differences in Means Statistics for Service Grouping Indicators at Baseline (continued)**

Variable Label	Total N	Tx N	Comp N	Tx Wtd Mean	Comp Wtd Mean	Std Error	Test Statistic	P value	Effect Size
Received any cognitive behavioral services during focal incarceration	502	222	280	0.578	0.408	0.1949	12.3664	0.0004	0.69
Number of cognitive behavioral services received (max=2) during focal incarceration	502	222	280	0.891	0.576	0.0777	4.0496	<.0001	0.41
Received any educational services during focal incarceration (BL report)	502	222	280	0.228	0.171	0.2392	2.2899	0.1302	0.36
Received any employment services during focal incarceration	502	222	280	0.598	0.402	0.1946	16.6544	<.0001	0.79
Number of employment services received (max=4) during focal incarceration	502	222	280	1.138	0.698	0.1019	4.3109	<.0001	0.45
Received any mentoring/faith-based services during focal incarceration	502	222	280	0.506	0.372	0.1944	7.8796	0.005	0.55
Number of mentoring/faith-based services received (max=4) during focal incarceration	502	222	280	0.785	0.592	0.0919	2.1006	0.0362	0.21
Received any child/family services during focal incarceration	502	222	280	0.526	0.359	0.1946	12.2975	0.0005	0.68
Number of child/family services received (max=4) during focal incarceration	502	222	280	0.712	0.514	0.0765	2.5836	0.0101	0.25

(continued)

**Exhibit F-1. Differences in Means Statistics for Service Grouping Indicators at Baseline (continued)**

Variable Label	Total N	Tx N	Comp N	Tx Wtd Mean	Comp Wtd Mean	Std Error	Test Statistic	P value	Effect Size
Received any physical health services during focal incarceration	502	222	280	0.688	0.63	0.2062	1.5752	0.2095	0.26
Number of physical health services received (max=3) during focal incarceration	502	222	280	1.309	1.199	0.1057	1.0343	0.3015	0.1
Received any mental health services during focal incarceration	502	222	280	0.409	0.332	0.1975	2.8443	0.0917	0.33
Number of mental health services received (max=3) during focal incarceration	502	222	280	0.664	0.612	0.0867	0.5996	0.549	0.05
Received any substance abuse services during focal incarceration	502	222	280	0.513	0.413	0.1923	4.3726	0.0365	0.4
Number of substance abuse services received (max=2) during focal incarceration	502	222	280	0.875	0.699	0.0865	2.0328	0.0426	0.2

**Exhibit F-2. Differences in Means Statistics for Service Grouping Indicators at 6M**

Variable Label	Total N	Tx N	Comp N	Tx Wtd Mean	Comp Wtd Mean	Std Error	Test Statistic	P value	Effect Size
Received any service coordination services since release, at 6M	299	132	167	0.541	0.393	0.2516	5.6527	0.0174	0.6
Number of service coordination services received (max=3) since release, at 6M	299	132	167	1.21	0.792	0.1485	2.8156	0.0052	0.38
Received any assistance with public benefits/resources since release, at 6M	299	132	167	0.654	0.57	0.2626	1.8603	0.1726	0.36
Number of public benefits/resources services received (max=8) since release, at 6M	299	132	167	1.943	1.494	0.2299	1.9531	0.0517	0.25
Received any life skills/money management services since release, at 6M	299	132	167	0.336	0.284	0.2643	0.8558	0.3549	0.24
Number of life skills/money management services received (max=2) since release, at 6M	299	132	167	0.444	0.336	0.0753	1.4429	0.1501	0.19
Received any cognitive behavioral services since release, at 6M	299	132	167	0.448	0.348	0.2539	2.7001	0.1003	0.42
Number of cognitive behavioral services received (max=2) since release, at 6M	299	132	167	0.652	0.495	0.0922	1.6982	0.0905	0.21

(continued)

**Exhibit F-2. Differences in Means Statistics for Service Grouping Indicators at 6M (continued)**

Variable Label	Total N	Tx N	Comp N	Tx Wtd Mean	Comp Wtd Mean	Std Error	Test Statistic	P value	Effect Size
Received any education services since release, at 6M	299	132	167	0.137	0.072	0.3945	3.26922	0.07059	0.71
Received any employment services since release, at 6M	299	132	167	0.412	0.293	0.2589	4.1237	0.0423	0.53
Number of employment services received (max=5) since release, at 6M	299	132	167	0.728	0.501	0.1177	1.9243	0.0553	0.25
Received any mentoring/faith-based services since release, at 6M	299	132	167	0.371	0.322	0.2619	0.6938	0.4049	0.22
Number of mentoring/faith-based services received (max=4) since release, at 6M	299	132	167	0.684	0.531	0.1168	1.3165	0.189	0.17
Received any child/family services since release, at 6M	299	132	167	0.319	0.347	0.2612	0.2311	0.6307	-0.13
Number of child/family services received (max=4) since release, at 6M	299	132	167	0.401	0.414	0.0779	-0.155	0.8769	-0.02
Received any physical health services since release, at 6M	299	132	167	0.568	0.496	0.249	1.3643	0.2428	0.29
Number of physical health services received (max=3) since release, at 6M	299	132	167	0.983	0.867	0.1233	0.9346	0.3508	0.11

(continued)

**Exhibit F-2. Differences in Means Statistics for Service Grouping Indicators at 6M (continued)**

Variable Label	Total N	Tx N	Comp N	Tx Wtd Mean	Comp Wtd Mean	Std Error	Test Statistic	P value	Effect Size
Received any mental health services since release, at 6M	299	132	167	0.435	0.285	0.2613	6.3401	0.0118	0.66
Number of mental health services received (max=3) since release, at 6M	299	132	167	0.754	0.537	0.1126	1.93	0.0546	0.25
Received any substance abuse services since release, at 6M	299	132	167	0.564	0.354	0.2519	11.6376	0.0006	0.86
Number of substance abuse services received (max=2) since release, at 6M	299	132	167	0.927	0.612	0.1077	2.925	0.0037	0.36

**Exhibit F-3. Differences in Means Statistics for Service Grouping Indicators at 12-Month Follow-Up**

Variable Label	Total N	Tx N	Comp N	Tx Wtd Mean	Comp Wtd Mean	Std Error	Test Statistic	P value	Effect Size
Received any service coordination services within past 6 months, at 12M	309	143	166	0.414	0.373	0.2478	0.4597	0.4977	0.17
Number of service coordination services received (max=3) within past 6 months, at 12M	309	143	166	0.949	0.697	0.1402	1.7951	0.0736	0.24
Received any assistance with public benefits/resources within past 6 months, at 12M	309	143	166	0.574	0.553	0.2458	0.1213	0.7276	0.09
Number of public benefits/resources services received (max=8) within past 6 months, at 12M	309	143	166	1.545	1.455	0.2321	0.3896	0.6971	0.05
Received any life skills/money management services within past 6 months, at 12M	309	143	166	0.19	0.169	0.3108	0.217	0.6414	0.14
Number of life skills/money management services received (max=2) within past 6 months, at 12M	309	143	166	0.252	0.229	0.0653	0.36	0.7191	0.04
Received any cognitive behavioral services within past 6 months, at 12M	309	143	166	0.345	0.298	0.2591	0.6911	0.4058	0.22

(continued)

**Exhibit F-3. Differences in Means Statistics for Service Grouping Indicators at 12-Month Follow-Up (continued)**

Variable Label	Total N	Tx N	Comp N	Tx Wtd Mean	Comp Wtd Mean	Std Error	Test Statistic	P value	Effect Size
Number of cognitive behavioral services received (max=2) within past 6 months, at 12M	309	143	166	0.506	0.416	0.0898	1.0012	0.3175	0.13
Received any educational services in past 6 months (12M report)	309	143	166	0.085	0.095	0.4092	0.07746	0.78077	-0.11
Received any employment services within past 6 months, at 12M	309	143	166	0.348	0.267	0.2656	2.0644	0.1508	0.38
Number of employment services received (max=5) within past 6 months, at 12M	309	143	166	0.555	0.437	0.1023	1.1522	0.2501	0.14
Received any mentoring/faith-based services within past 6 months, at 12M	309	143	166	0.32	0.334	0.255	0.0707	0.7903	-0.07
Number of mentoring/faith-based services received (max=4) within past 6 months, at 12M	309	143	166	0.649	0.537	0.122	0.9178	0.3594	0.12
Received any child/family services within past 6 months, at 12M	309	143	166	0.288	0.188	0.2911	3.623	0.057	0.55
Number of child/family services received (max=4) within past 6 months, at 12M	309	143	166	0.371	0.247	0.0733	1.7005	0.09	0.22

(continued)

**Exhibit F-3. Differences in Means Statistics for Service Grouping Indicators at 12-Month Follow-Up (continued)**

Variable Label	Total N	Tx N	Comp N	Tx Wtd Mean	Comp Wtd Mean	Std Error	Test Statistic	P value	Effect Size
Received any physical health services within past 6 months, at 12M	309	143	166	0.556	0.623	0.2465	1.2795	0.258	-0.28
Number of physical health services received (max=3) within past 6 months, at 12M	309	143	166	0.995	1.091	0.1272	-0.7582	0.4489	-0.09
Received any mental health services within past 6 months, at 12M	309	143	166	0.298	0.317	0.2588	0.1276	0.7209	-0.09
Number of mental health services received (max=3) within past 6 months, at 12M	309	143	166	0.537	0.579	0.1057	-0.3968	0.6918	-0.05
Received any substance abuse services within past 6 months, at 12M	309	143	166	0.448	0.358	0.2451	2.3562	0.1248	0.38
Number of substance abuse services received (max=2) within past 6 months, at 12M	309	143	166	0.71	0.601	0.1013	1.0766	0.2825	0.13

**Exhibit F-4. Differences in Means Statistics for Individual Service Indicators at Baseline**

Variable Label	Total N	Tx N	Comp N	Tx Wtd Mean	Comp Wtd Mean	Std Error	Test Statistic	P value	Effect Size
<b>Pre-Release Reentry Planning Services</b>									
Received any reentry planning or case management during focal incarceration (combined BL/6M report)	502	222	280	0.787	0.565	0.2239	21.7649	0	1.04
Received any reentry planning or case management during focal incarceration (6M report)	298	131	167	0.745	0.496	0.2763	15.4727	8E-05	1.09
Participated in any reentry programs or classes during focal incarceration (BL report)	502	222	280	0.732	0.502	0.2051	23.5765	0	1
Had a reentry plan developed during focal incarceration (BL report)	501	221	280	0.718	0.446	0.2078	30.6996	0	1.15
Had contact with parole/probation officer during focal incarceration (BL report)	378	172	206	0.372	0.34	0.2303	0.3715	0.5422	0.14
Met with other staff from outside the facility to prepare for release during focal incarceration (BL report)	502	222	280	0.371	0.118	0.2436	36.9373	0	1.48
Worked with any other staff to help plan for release during focal incarceration (BL report)	502	222	280	0.354	0.224	0.2108	9.3263	0.0023	0.64

(continued)

**Exhibit F-4. Differences in Means Statistics for Individual Service Indicators at Baseline (continued)**

Variable Label	Total N	Tx N	Comp N	Tx Wtd Mean	Comp Wtd Mean	Std Error	Test Statistic	P value	Effect Size
Staff involved family members in planning for release during focal incarceration (BL report)	501	222	279	0.289	0.261	0.2125	0.4368	0.5087	0.14
<b>Service Coordination Services</b>									
Received a needs assessment during focal incarceration (BL report)	501	221	280	0.625	0.377	0.1989	26.0108	0	1.01
Received any case management during focal incarceration (BL report)	502	222	280	0.502	0.318	0.197	15.2647	9E-05	0.77
Received follow-up on case management (no if no case management received) during focal incarceration (BL report)	500	220	280	0.357	0.183	0.2214	16.673	4E-05	0.9
<b>Assistance with Public Benefits/Resources</b>									
Received any help arranging for public healthcare assistance during focal incarceration (combined BL/6M report)	502	222	280	0.384	0.364	0.195	0.1939	0.6597	0.09
Received help arranging for public financial assistance during focal incarceration (BL report)	502	222	280	0.239	0.162	0.231	4.4126	0.0357	0.49
Received legal assistance during focal incarceration (BL report)	502	222	280	0.174	0.123	0.2636	2.3473	0.1255	0.4

(continued)

**Exhibit F-4. Differences in Means Statistics for Individual Service Indicators at Baseline (continued)**

Variable Label	Total N	Tx N	Comp N	Tx Wtd Mean	Comp Wtd Mean	Std Error	Test Statistic	P value	Effect Size
Received any housing assistance during focal incarceration (combined BL/6M report)	502	222	280	0.463	0.312	0.1972	10.5666	0.0012	0.64
Received help getting documents necessary for employment (e.g., birth certificate) during focal incarceration (BL report)	502	222	280	0.386	0.394	0.1936	0.0257	0.8727	-0.03
Received help accessing resources (clothing banks, food pantries) for after release during focal incarceration (BL report)	502	222	280	0.26	0.215	0.2181	1.2957	0.255	0.25
Received help finding/paying for transportation for after release during focal incarceration (BL report)	502	222	280	0.191	0.111	0.262	5.8316	0.0157	0.63
Received help getting a driver's license during focal incarceration (BL report)	502	222	280	0.228	0.173	0.2321	2.1553	0.1421	0.34
<b>Life Skills/Money Management Services</b>									
Received help with money management skills during focal incarceration (BL report)	502	222	280	0.192	0.173	0.2462	0.2867	0.5924	0.13
Received help with other life skills during focal incarceration (BL report)	502	222	280	0.442	0.29	0.1985	11.2235	0.0008	0.67

(continued)

**Exhibit F-4. Differences in Means Statistics for Individual Service Indicators at Baseline (continued)**

Variable Label	Total N	Tx N	Comp N	Tx Wtd Mean	Comp Wtd Mean	Std Error	Test Statistic	P value	Effect Size
<b>Cognitive Behavioral Services</b>									
Received training on how to change attitudes related to criminal thinking during focal incarceration (BL report)	501	222	279	0.531	0.368	0.1944	11.7269	0.0006	0.67
Participated in any anger management programs during focal incarceration (BL report)	502	222	280	0.36	0.209	0.2162	12.1601	0.0005	0.75
<b>Educational Services</b>									
Received any educational services during focal incarceration (BL report)	502	222	280	0.228	0.171	0.2392	2.2899	0.1302	0.36
<b>Employment Services</b>									
Received any employment services or assistance with finding a job for after release during focal incarceration (BL report)	501	222	279	0.394	0.218	0.2079	16.643	5E-05	0.85
Participated in any programs to help prepare for employment (e.g., developing resumes, interviewing skills) during focal incarceration (BL report)	502	222	280	0.536	0.338	0.1951	17.5594	3E-05	0.82

(continued)

**Exhibit F-4. Differences in Means Statistics for Individual Service Indicators at Baseline (continued)**

Variable Label	Total N	Tx N	Comp N	Tx Wtd Mean	Comp Wtd Mean	Std Error	Test Statistic	P value	Effect Size
Participated in any trade/ job training programs during focal incarceration (BL report)	502	222	280	0.163	0.095	0.2911	4.5108	0.0337	0.62
Received any vocational/ technical certifications during focal incarceration (BL report)	502	222	280	0.045	0.049	0.4346	0.0425	0.8366	-0.09
<b>Mentoring/Faith-Based Services</b>									
Received spiritual, religious, or emotional support from faith-based provider during focal incarceration (BL report)	502	222	280	0.419	0.323	0.1986	4.307	0.038	0.41
Was connected with a faith-based mentor during focal incarceration (BL report)	502	222	280	0.139	0.115	0.2819	0.5813	0.4458	0.21
Received other services from faith-based provider during focal incarceration (BL report)	500	222	278	0.132	0.084	0.3012	2.8418	0.0918	0.51
Received mentoring services (other than from a faith-based provider) during focal incarceration (BL report)	502	222	280	0.095	0.07	0.3692	0.7937	0.373	0.33

(continued)

**Exhibit F-4. Differences in Means Statistics for Individual Service Indicators at Baseline (continued)**

Variable Label	Total N	Tx N	Comp N	Tx Wtd Mean	Comp Wtd Mean	Std Error	Test Statistic	P value	Effect Size
<b>Child/Family Services</b>									
Received help modifying child support during focal incarceration (BL report, limited to those with child support orders)	78	36	42	0.102	0.186	0.7575	0.8437	0.3583	-0.7
Received help modifying child custody arrangements during focal incarceration (BL report, limited to those with minor children)	281	129	152	0.064	0.048	0.5938	0.2642	0.6073	0.31
Received help working on personal relationships during focal incarceration (BL report)	502	222	280	0.443	0.289	0.1992	11.3802	0.0007	0.67
Received parenting classes during focal incarceration (BL report)	502	222	280	0.218	0.168	0.2429	1.7583	0.1848	0.32
<b>Physical Health Services</b>									
Received any physical health care during focal incarceration (BL report)	502	222	280	0.555	0.508	0.1924	0.961	0.327	0.19
Received any dental services during focal incarceration (BL report)	502	222	280	0.288	0.265	0.213	0.3035	0.5817	0.12

(continued)

**Exhibit F-4. Differences in Means Statistics for Individual Service Indicators at Baseline (continued)**

Variable Label	Total N	Tx N	Comp N	Tx Wtd Mean	Comp Wtd Mean	Std Error	Test Statistic	P value	Effect Size
Received any prescription medicine for a physical health condition during focal incarceration (BL report, limited to those with a physical health condition requiring medication)	305	135	170	0.785	0.696	0.2872	2.6419	0.1041	0.47
<b>Mental Health Services</b>									
Received any mental health care during focal incarceration (combined BL/6M report)	502	222	280	0.312	0.298	0.2063	0.1064	0.7443	0.07
Received any prescription medicine for a mental health condition during focal incarceration (BL report, limited to those with a mental health condition requiring medication)	271	119	152	0.529	0.445	0.263	1.6536	0.1985	0.34
Participated in services/ programs for survivors of sexual or physical abuse during focal incarceration (BL report)	501	222	279	0.071	0.079	0.3711	0.0766	0.782	-0.1

(continued)

**Exhibit F-4. Differences in Means Statistics for Individual Service Indicators at Baseline (continued)**

Variable Label	Total N	Tx N	Comp N	Tx Wtd Mean	Comp Wtd Mean	Std Error	Test Statistic	P value	Effect Size
<b>Substance Abuse Services</b>									
Received any professional substance abuse treatment during focal incarceration (combined BL/6M report)	502	222	280	0.452	0.351	0.1947	4.71	0.03	0.42
Received any other support/services for drugs or alcohol (AA/NA, drug education classes) during focal incarceration (BL report)	502	222	280	0.422	0.348	0.1965	2.5852	0.1079	0.32

**Exhibit F-5. Differences in Means Statistics for Individual Service Indicators at 6-Month Follow-up**

Variable Label	Total N	Tx N	Comp N	Tx Wtd Mean	Comp Wtd Mean	Std Error	Test Statistic	P value	Effect Size
<b>Service Coordination Services</b>									
Received a needs assessment since release (6M report)	299	132	167	0.414	0.267	0.2594	6.50029	0.01079	0.66
Received any case management since release (6M report)	299	132	167	0.489	0.331	0.2537	6.71116	0.00958	0.66
Received follow-up on case management (no if no case management received) since release (6M report)	297	131	166	0.31	0.195	0.2844	4.65407	0.03098	0.61
<b>Assistance with Public Benefits/Resources</b>									
Received any help arranging for public healthcare assistance since release (6M report)	299	132	167	0.328	0.31	0.2644	0.09284	0.7606	0.08
Received help arranging for public financial assistance since release (6M report)	299	132	167	0.243	0.253	0.2826	0.03717	0.84711	-0.05
Received legal assistance since release (6M report)	299	132	167	0.088	0.115	0.3806	0.63178	0.4267	-0.3
Received any housing assistance since release (6M report)	299	132	167	0.269	0.185	0.2941	2.70529	0.10002	0.48

(continued)

**Exhibit F-5. Differences in Means Statistics for Individual Service Indicators at 6-Month Follow-up**

Variable Label	Total N	Tx N	Comp N	Tx Wtd Mean	Comp Wtd Mean	Std Error	Test Statistic	P value	Effect Size
Received help getting documents necessary for employment (e.g., birth certificate) since release (6M report)	299	132	167	0.237	0.166	0.2963	2.2937	0.1299	0.45
Received help finding/paying for transportation since release (6M report)	299	132	167	0.321	0.179	0.2882	7.14343	0.00752	0.77
Received help getting a driver's license since release (6M report)	299	132	167	0.161	0.074	0.3928	4.93912	0.02626	0.87
Received help accessing resources (clothing banks, food pantries) since release (6M report)	299	132	167	0.296	0.211	0.2817	2.58585	0.10782	0.45
<b>Life Skills/Money Management</b>									
Received help with money management skills since release (6M report)	299	132	167	0.127	0.087	0.3802	1.25645	0.26232	0.43
Received help with other life skills since release (6M report)	299	132	167	0.317	0.249	0.2707	1.56175	0.21141	0.34
<b>Cognitive Behavioral Services</b>									
Received training on how to change attitudes related to criminal thinking since release (6M report)	299	132	167	0.393	0.28	0.2625	3.80717	0.05103	0.51

(continued)

**Exhibit F-5. Differences in Means Statistics for Individual Service Indicators at 6-Month Follow-up (continued)**

Variable Label	Total N	Tx N	Comp N	Tx Wtd Mean	Comp Wtd Mean	Std Error	Test Statistic	P value	Effect Size
Participated in any anger management programs since release (6M report)	299	132	167	0.258	0.215	0.2867	0.69382	0.40487	0.24
<b>Educational Services</b>									
Received any educational services since release (6M report)	299	132	167	0.137	0.072	0.3945	3.26922	0.07059	0.71
<b>Employment Services</b>									
Received any employment services or assistance with finding a job since release (6M report)	298	131	167	0.257	0.193	0.2916	1.58405	0.20818	0.37
Participated in any programs to help prepare for employment (e.g., developing resumes, interviewing skills) since release (6M report)	299	132	167	0.331	0.2	0.2825	5.88469	0.01527	0.69
Was placed in a transitional job/had wages paid for by a program since release (6M report)	299	132	167	0.044	0.064	0.5261	0.57215	0.4494	-0.4
Participated in any trade/job training programs since release (6M report)	299	132	167	0.087	0.071	0.4241	0.28228	0.59521	0.23
Received any vocational/technical certifications since release (6M report)	299	132	167	0.053	0.037	0.5867	0.42543	0.51424	0.38

(continued)

**Exhibit F-5. Differences in Means Statistics for Individual Service Indicators at 6-Month Follow-up (continued)**

Variable Label	Total N	Tx N	Comp N	Tx Wtd Mean	Comp Wtd Mean	Std Error	Test Statistic	P value	Effect Size
<b>Mentoring/Faith-Based Services</b>									
Received spiritual, religious, or emotional support from faith-based provider since release (6M report)	299	132	167	0.269	0.252	0.2821	0.1039	0.7472	0.09
Was connected with a faith-based mentor since release (6M report)	299	132	167	0.19	0.139	0.3356	1.23036	0.26734	0.37
Received other services from faith-based provider since release (6M report)	298	131	167	0.131	0.076	0.4021	2.28011	0.13104	0.61
Received mentoring services (other than from a faith-based provider) since release (6M report)	299	132	167	0.094	0.064	0.4263	1.01749	0.31312	0.43
<b>Child/Family Services</b>									
Received help modifying child support since release (6M report, limited to those with child support orders)	51	18	33	0.139	0.077	0.8995	0.53427	0.46482	0.66
Received help modifying child custody arrangements since release (6M report) limited to those with minor children)	158	72	86	0.025	0.037	0.948	0.18891	0.66383	-0.41
Received help working on personal relationships since release (6M report)	299	132	167	0.268	0.322	0.2714	0.89763	0.34342	-0.26

(continued)

**Exhibit F-5. Differences in Means Statistics for Individual Service Indicators at 6-Month Follow-up (continued)**

Variable Label	Total N	Tx N	Comp N	Tx Wtd Mean	Comp Wtd Mean	Std Error	Test Statistic	P value	Effect Size
Received parenting classes since release (6M report)	299	132	167	0.101	0.057	0.4615	1.82164	0.17712	0.62
<b>Physical Health Services</b>									
Received any physical health care since release (6M report)	299	132	167	0.371	0.35	0.2568	0.12679	0.72179	0.09
Received any dental services since release (6M report)	299	132	167	0.187	0.175	0.3112	0.07656	0.78202	0.09
Received any prescription medicine for a physical health condition since release (6M report, limited to those with a physical health condition requiring medication)	175	79	96	0.287	0.39	0.3397	1.8588	0.17276	-0.46
<b>Mental Health Services</b>									
Received any mental health care since release (6M report)	299	132	167	0.388	0.24	0.2707	6.6519	0.00991	0.7
Received any prescription medicine for a mental health condition since release (6M report, limited to those with a mental health condition requiring medication)	157	67	90	0.395	0.516	0.3547	1.90882	0.16709	-0.49

(continued)

**Exhibit F-5. Differences in Means Statistics for Individual Service Indicators at 6-Month Follow-up (continued)**

Variable Label	Total N	Tx N	Comp N	Tx Wtd Mean	Comp Wtd Mean	Std Error	Test Statistic	P value	Effect Size
Participated in services/ programs for survivors of sexual or physical abuse since release (6M report)	299	132	167	0.057	0.039	0.5837	0.48434	0.48646	0.41
<b>Substance Abuse Services</b>									
Received any professional substance abuse treatment since release (6M report)	299	132	167	0.451	0.295	0.2562	6.89601	0.00864	0.67
Received any other support/services for drugs or alcohol (AA/NA, drug education classes) since release (6M report)	299	132	167	0.476	0.316	0.2536	7.05647	0.0079	0.67

**Exhibit F-6. Differences in Means Statistics for Individual Service Indicators at 12-Month Follow-up**

Variable Label	Total N	Tx N	Comp N	Tx Wtd Mean	Comp Wtd Mean	Std Error	Test Statistic	P value	Effect Size
<b>Service Coordination Services</b>									
Received a needs assessment in past 6 months (12M report)	308	143	165	0.301	0.229	0.274	1.85675	0.173	0.37
Received any case management in past 6 months (12M report)	309	143	166	0.375	0.303	0.2564	1.59797	0.20619	0.32
Received follow-up on case management (no if no case management received) in past 6 months (12M report)	309	143	166	0.273	0.167	0.2966	4.44559	0.03499	0.63
<b>Assistance With Public Benefits/Resources</b>									
Received any help arranging for public healthcare assistance in past 6 months (12M report)	309	143	166	0.272	0.366	0.2563	2.89162	0.08904	-0.44
Received help arranging for public financial assistance in past 6 months (12M report)	309	143	166	0.236	0.265	0.2768	0.30611	0.58008	-0.15
Received legal assistance in past 6 months (12M report)	309	143	166	0.149	0.199	0.3104	1.23172	0.26707	-0.34
Received any housing assistance in past 6 months (12M report)	309	143	166	0.129	0.127	0.3593	0.00151	0.96903	0.01

(continued)

**Exhibit F-6. Differences in Means Statistics for Individual Service Indicators at 12-Month Follow-up (continued)**

Variable Label	Total N	Tx N	Comp N	Tx Wtd Mean	Comp Wtd Mean	Std Error	Test Statistic	P value	Effect Size
Received help getting documents necessary for employment (e.g., birth certificate) in past 6 months (12M report)	309	143	166	0.229	0.14	0.3283	3.35394	0.06704	0.6
Received help finding/paying for transportation in past 6 months (12M report)	309	143	166	0.223	0.182	0.3067	0.69322	0.40507	0.26
Received help getting a driver's license in past 6 months (12M report)	309	143	166	0.094	0.045	0.4994	2.52237	0.11224	0.79
Received help accessing resources (clothing banks, food pantries) in past 6 months (12M report)	309	143	166	0.214	0.132	0.3347	3.01392	0.08255	0.58
<b>Life Skills/Money Management Services</b>									
Received help with money management skills in past 6 months (12M report)	309	143	166	0.078	0.083	0.434	0.02867	0.86555	-0.07
Received help with other life skills in past 6 months (12M report)	309	143	166	0.175	0.146	0.3243	0.44216	0.50608	0.22
<b>Cognitive Behavioral Services</b>									
Received training on how to change attitudes related to criminal thinking in past 6 months (12M report)	309	143	166	0.315	0.262	0.2675	0.91722	0.33821	0.26

(continued)

**Exhibit F-6. Differences in Means Statistics for Individual Service Indicators at 12-Month Follow-up (continued)**

Variable Label	Total N	Tx N	Comp N	Tx Wtd Mean	Comp Wtd Mean	Std Error	Test Statistic	P value	Effect Size
Participated in any anger management programs in past 6 months (12M report)	309	143	166	0.191	0.154	0.3256	0.65104	0.41974	0.26
<b>Educational Services</b>									
Received any educational services in past 6 months (12M report)	309	143	166	0.085	0.095	0.4092	0.07746	0.78077	-0.11
<b>Employment Services</b>									
Received any employment services or assistance with finding a job in past 6 months (12M report)	308	142	166	0.185	0.178	0.3168	0.01994	0.88772	0.04
Participated in any programs to help prepare for employment (e.g., developing resumes, interviewing skills) in past 6 months (12M report)	309	143	166	0.247	0.179	0.3068	1.76995	0.18339	0.41
Was placed in a transitional job/had wages paid for by a program in past 6 months (12M report)	308	142	166	0.079	0.029	0.5872	3.2204	0.07273	1.05
Participated in any trade/job training programs in past 6 months (12M report)	308	142	166	0.084	0.05	0.4809	1.36777	0.2422	0.56

(continued)

**Exhibit F-6. Differences in Means Statistics for Individual Service Indicators at 12-Month Follow-up (continued)**

Variable Label	Total N	Tx N	Comp N	Tx Wtd Mean	Comp Wtd Mean	Std Error	Test Statistic	P value	Effect Size
Received any vocational/technical certifications in past 6 months (12M report)	309	143	166	0.042	0.03	0.6119	0.28116	0.59595	0.32
<b>Mentoring/Faith-Based Services</b>									
Received spiritual, religious, or emotional support from faith-based provider in past 6 months (12M report)	309	143	166	0.275	0.29	0.267	0.07981	0.77755	-0.08
Was connected with a faith-based mentor in past 6 months (12M report)	309	143	166	0.173	0.112	0.3428	2.17506	0.14026	0.51
Received other services from faith-based provider in past 6 months (12M report)	309	143	166	0.071	0.075	0.4435	0.02198	0.88214	-0.07
Received mentoring services (other than from a faith-based provider) in past 6 months (12M report)	308	142	166	0.131	0.06	0.4136	4.34256	0.03717	0.86
<b>Child/Family Services</b>									
Received help modifying child support in past 6 months (12M report, limited to those with child support orders)	54	22	32	0.088	0.076	1.2848	0.0155	0.90091	0.16

(continued)

**Exhibit F-6. Differences in Means Statistics for Individual Service Indicators at 12-Month Follow-up (continued)**

Variable Label	Total N	Tx N	Comp N	Tx Wtd Mean	Comp Wtd Mean	Std Error	Test Statistic	P value	Effect Size
Received help modifying child custody arrangements in past 6 months (12M report, limited to those with minor children)	173	78	95	0.07	0.083	0.579	0.10891	0.74139	-0.19
Received help working on personal relationships in past 6 months (12M report)	308	142	166	0.204	0.142	0.3214	1.7926	0.18061	0.43
Received parenting classes in past 6 months (12M report)	309	143	166	0.119	0.042	0.4878	5.30887	0.02122	1.12
<b>Physical Health Services</b>									
Received any physical health care in past 6 months (12M report)	309	143	166	0.393	0.407	0.2464	0.05061	0.82201	-0.06
Received any dental services in past 6 months (12M report)	309	143	166	0.239	0.26	0.2808	0.16456	0.685	-0.11
Received any prescription medicine for a physical health condition in past 6 months (12M report, limited to those with a physical health condition requiring medication)	181	79	102	0.318	0.303	0.3363	0.04649	0.82929	0.07

(continued)

**Exhibit F-6. Differences in Means Statistics for Individual Service Indicators at 12-Month Follow-up (continued)**

Variable Label	Total N	Tx N	Comp N	Tx Wtd Mean	Comp Wtd Mean	Std Error	Test Statistic	P value	Effect Size
<b>Mental Health Services</b>									
Received any mental health care since release (6M report)	309	143	166	0.245	0.271	0.2706	0.24488	0.6207	-0.13
Received any prescription medicine for a mental health condition in past 6 months (12M report, limited to those with a mental health condition requiring medication)	148	72	76	0.469	0.412	0.3526	0.43533	0.50939	0.23
Participated in services/ programs for survivors of sexual or physical abuse in past 6 months (12M report)	309	143	166	0.036	0.043	0.573	0.08351	0.7726	-0.17
<b>Substance Abuse Treatment</b>									
Received any professional substance abuse treatment in past 6 months (12M report)	308	143	165	0.316	0.299	0.257	0.08758	0.76727	0.08
Received any other support/services for drugs or alcohol (AA/NA, drug education classes) in past 6 months (12M report)	309	143	166	0.394	0.303	0.2514	2.55362	0.11004	0.4

# Appendix G. Differences in Weighted Means Results for Reentry Outcomes

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**Exhibit G-1. Differences in Weighted Means Results for Reentry Outcomes, 6-Month Follow-up**

Variable Label	Total N	Tx N	Comp N	Tx Wtd Mean	Comp Wtd Mean	Std Error	Test Statistic	P value	Effect Size
<b>Recidivism Outcomes</b>									
No self-reported crimes since release, at 6M	298	132	166	0.777	0.722	0.2898	1.033	0.3094	0.29
No reincarceration in jail/prison since release (self-report), at 6M	299	132	167	0.725	0.644	0.2704	1.9666	0.1608	0.38
Number of reincarcerations since release (self-report, 0 if no reincarcerations), at 6M	298	132	166	0.328	0.46	0.0816	-1.6143	0.1075	-0.17
No illegal income since release, at 6M	298	132	166	0.862	0.881	0.3732	0.2185	0.6402	-0.17
No violent crimes since release, at 6M	298	132	166	0.901	0.914	0.4179	0.122	0.7269	-0.15
No other crimes against people since release, at 6M	298	132	166	0.945	0.928	0.501	0.3366	0.5618	0.29
No weapon possession since release, at 6M	298	132	166	0.924	0.92	0.447	0.017	0.8961	0.06
No drug possession since release, at 6M	298	132	166	0.715	0.724	0.2714	0.0245	0.8755	-0.04
No drug sales since release, at 6M	298	132	166	0.876	0.9	0.3982	0.3839	0.5355	-0.25
No prescription drug crimes since release, at 6M	298	132	166	0.955	0.96	0.5846	0.063	0.8018	-0.15

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**Exhibit G-1. Differences in Weighted Means Results for Reentry Outcomes, 6-Month Follow-up (continued)**

Variable Label	Total N	Tx N	Comp N	Tx Wtd Mean	Comp Wtd Mean	Std Error	Test Statistic	P value	Effect Size
No other drug crimes since release, at 6M	297	131	166	0.951	0.96	0.6208	0.0958	0.7569	-0.19
No DUI since release, at 6M	297	131	166	0.902	0.86	0.4018	1.0171	0.3132	0.41
No property crimes since release, at 6M	297	131	166	0.961	0.952	0.6146	0.1214	0.7275	0.21
No public order crimes since release, at 6M	297	131	166	0.938	0.94	0.5405	0.0043	0.9477	-0.04
No person crimes since release, at 6M	298	132	166	0.901	0.888	0.3948	0.127	0.7216	0.14
No drug crimes since release, at 6M	297	131	166	0.869	0.894	0.3877	0.3731	0.5413	-0.24
<b>Supervision Compliance Outcomes</b>									
Complied with all supervision conditions since release (limited to those under supervision), at 6M	213	101	112	0.634	0.593	0.2951	0.3407	0.5594	0.17
No positive drug tests on supervision since release (limited to those under supervision), at 6M	214	101	113	0.738	0.748	0.3332	0.0255	0.8732	-0.05
No formal supervision violations since release (limited to those under supervision), at 6M	213	100	113	0.692	0.675	0.3094	0.0603	0.806	0.08
<b>Employment Outcomes</b>									
Any employment since release, at 6M	299	132	167	0.513	0.608	0.2521	2.3751	0.1233	-0.39

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**Exhibit G-1. Differences in Weighted Means Results for Reentry Outcomes, 6-Month Follow-up (continued)**

Variable Label	Total N	Tx N	Comp N	Tx Wtd Mean	Comp Wtd Mean	Std Error	Test Statistic	P value	Effect Size
Number of months worked since release, at 6M	298	132	166	1.843	2.149	0.273	-1.1213	0.2631	-0.14
Currently employed, at 6M	274	123	151	0.384	0.406	0.2656	0.1269	0.7217	-0.09
Number of hours usually working per week (0 if unemployed), at 6M	299	132	167	17.245	17.038	2.6795	0.0776	0.9382	0.01
Monthly income (if employed), at 6M	168	67	101	1588.88	1388.211	167.507	1.198	0.2326	0.29
Job quality scale (if employed; higher=better quality i.e. formal pay, health insurance, paid leave), at 6M	170	67	103	1.022	1.314	0.1805	-1.618	0.1075	-0.39
<b>Housing Outcomes</b>									
Housing independent at 6M (lived in one's own place or contributed to costs of housing)	298	132	166	0.534	0.608	0.2503	1.4685	0.2256	-0.3
Has mostly lived in one's own place within past 6 months, at 6M	298	132	166	0.211	0.227	0.2962	0.098	0.7542	-0.09
Has lived in only 1 place within past 6 months, at 6M	298	132	166	0.558	0.557	0.2491	0.0004	0.9835	0.01
Not living with criminally involved or drug using people, at 6M	297	132	165	0.721	0.65	0.2659	1.5482	0.2134	0.33

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**Exhibit G-1. Differences in Weighted Means Results for Reentry Outcomes, 6-Month Follow-up (continued)**

Variable Label	Total N	Tx N	Comp N	Tx Wtd Mean	Comp Wtd Mean	Std Error	Test Statistic	P value	Effect Size
<b>Substance Use Outcomes</b>									
Count of all drugs used (includes marijuana) since release, at 6M	299	132	167	1.15	1.262	0.19	-0.5886	0.5566	-0.06
Count of illicit drugs used (excludes marijuana) since release, at 6M	299	132	167	0.794	0.942	0.1639	-0.9005	0.3686	-0.09
No drug use (includes marijuana) since release, at 6M	298	132	166	0.432	0.5	0.2503	1.185	0.2763	-0.27
No illicit drug use (excludes marijuana) since release, at 6M	298	132	166	0.585	0.612	0.2531	0.2033	0.652	-0.11
Count of all drugs used (includes marijuana) within past 30 days, at 6M	299	132	167	0.625	0.677	0.1378	-0.376	0.7072	-0.04
Count of all illicit drugs used (excludes marijuana) within past 30 days, at 6M	299	132	167	0.378	0.47	0.1169	-0.786	0.4325	-0.08
No drug use (includes marijuana) within past 30 days, at 6M	296	131	165	0.616	0.659	0.2589	0.5033	0.4781	-0.18
No illicit drug use (excludes marijuana) within past 30 days, at 6M	296	131	165	0.75	0.776	0.2966	0.2342	0.6284	-0.14

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**Exhibit G-1. Differences in Weighted Means Results for Reentry Outcomes, 6-Month Follow-up (continued)**

Variable Label	Total N	Tx N	Comp N	Tx Wtd Mean	Comp Wtd Mean	Std Error	Test Statistic	P value	Effect Size
Problematic drug use since release (scale; higher=less problematic use) at 6M	299	132	167	10.063	9.685	0.3923	0.9619	0.3369	0.11
Count of positive swab test results for drugs (includes THC) at 6M	193	92	101	0.636	0.607	0.1205	0.233	0.816	0.05
Count of positive swab test results for illicit drugs (excludes THC) at 6M	193	92	101	0.396	0.43	0.0998	-0.3382	0.7356	-0.06
Any positive oral swab results for drugs (includes THC), at 6M	193	92	101	0.457	0.444	0.3043	0.027	0.8695	0.05
Any positive oral swab results for illicit drugs (excludes THC), at 6M	193	92	101	0.326	0.333	0.3215	0.0098	0.921	-0.03
No alcohol use since release, at 6M	298	132	166	0.447	0.391	0.2502	0.8511	0.3562	0.23
No alcohol use within past 30 days, at 6M	269	121	148	0.622	0.565	0.2672	0.7864	0.3752	0.24
Never drunk within past 30 days, at 6M	236	106	130	0.836	0.813	0.3683	0.1875	0.665	0.16
No prescription stimulant abuse since release, at 6M	298	132	166	0.902	0.896	0.4274	0.0262	0.8715	0.07
No prescription stimulant abuse within past 30 days, at 6M	288	128	160	0.976	0.969	0.8576	0.1015	0.75	0.27

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**Exhibit G-1. Differences in Weighted Means Results for Reentry Outcomes, 6-Month Follow-up (continued)**

Variable Label	Total N	Tx N	Comp N	Tx Wtd Mean	Comp Wtd Mean	Std Error	Test Statistic	P value	Effect Size
No prescription pain reliever abuse since release, at 6M	298	132	166	0.819	0.835	0.3088	0.1297	0.7188	-0.11
No prescription pain reliever abuse within past 30 days, at 6M	284	124	160	0.916	0.9	0.4124	0.2238	0.6362	0.2
No other prescription drug abuse since release, at 6M	298	132	166	0.922	0.887	0.3991	1.0186	0.3129	0.4
No other prescription drug abuse within past 30 days, at 6M	288	129	159	0.976	0.925	0.5994	3.8169	0.0507	1.17
No marijuana use since release, at 6M	298	132	166	0.644	0.675	0.2574	0.2938	0.5878	-0.14
No marijuana use within past 30 days, at 6M	276	122	154	0.734	0.775	0.2921	0.5795	0.4465	-0.22
No amphetamine use since release, at 6M	298	132	166	0.924	0.907	0.4928	0.2055	0.6503	0.22
No amphetamine use within past 30 days, at 6M	287	130	157	0.953	0.974	0.7632	0.6876	0.407	-0.63
No cocaine use since release, at 6M	298	132	166	0.817	0.783	0.3107	0.478	0.4893	0.21
No cocaine use within past 30 days, at 6M	284	127	157	0.885	0.873	0.3941	0.0887	0.7658	0.12
No heroin use since release, at 6M	298	132	166	0.895	0.855	0.3625	0.993	0.319	0.36
No heroin use within past 30 days, at 6M	288	129	159	0.935	0.922	0.4614	0.1618	0.6875	0.19

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**Exhibit G-1. Differences in Weighted Means Results for Reentry Outcomes, 6-Month Follow-up (continued)**

Variable Label	Total N	Tx N	Comp N	Tx Wtd Mean	Comp Wtd Mean	Std Error	Test Statistic	P value	Effect Size
No other drug use since release, at 6M	297	132	165	0.927	0.881	0.4237	1.6336	0.2012	0.54
No other drug use within past 30 days, at 6M	286	128	158	0.968	0.938	0.5944	1.4301	0.2317	0.71
<b>Health Outcomes</b>									
Current overall health (higher=better self-rating), at 6M	298	131	167	0.769	0.786	0.2991	0.1148	0.7347	-0.1
Number of physically unhealthy days (in past 30 days), at 6M	298	131	167	4.424	5.37	1.1645	-0.8123	0.4173	-0.1
Number of mentally unhealthy days (in past 30 days), at 6M	299	132	167	7.146	8.889	1.2692	-1.3729	0.1708	-0.15
Total number of healthy days (in past 30 days), at 6M	299	132	167	19.651	18.172	1.5094	0.9798	0.328	0.12
Number of days (in past 30 days) in which activities were limited due to poor health, at 6M	299	132	167	3.978	4.545	0.9845	-0.5758	0.5652	-0.07
No health related limitations, at 6M	299	132	167	0.807	0.827	0.3172	0.172	0.6784	-0.13
PTSD symptoms (higher=more symptoms), at 6M	299	132	167	1.024	1.089	0.183	-0.3571	0.7213	-0.04

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**Exhibit G-1. Differences in Weighted Means Results for Reentry Outcomes, 6-Month Follow-up (continued)**

Variable Label	Total N	Tx N	Comp N	Tx Wtd Mean	Comp Wtd Mean	Std Error	Test Statistic	P value	Effect Size
<b>Violence/Victimization Outcomes</b>									
Any violent victimization since release, at 6M	297	132	165	0.365	0.398	0.2583	0.2912	0.5895	-0.14
Any perpetration of violence since release, at 6M	297	132	165	0.246	0.313	0.2822	1.4241	0.2327	-0.34
<b>Family/Peer Outcomes</b>									
Provided financial support for at least one child since release (parents only), at 6M	157	72	85	0.687	0.748	0.3664	0.6775	0.4105	-0.3
Criminogenic family exposure (scale, higher values=less exposure), at 6M	298	132	166	1.034	1.092	0.1405	-0.4102	0.6819	-0.05
Family emotional support (scale, higher values=more support), at 6M	299	132	167	21.107	21.664	0.7558	-0.7367	0.4619	-0.1
Criminogenic peer exposure (scale, higher values =less exposure), at 6M	296	131	165	3.92	3.94	0.1486	-0.1338	0.8936	-0.02
Not a gang member, at 6M	298	131	167	0.966	0.973	0.6555	0.1247	0.7239	-0.23

**Exhibit G-2. Differences in Weighted Means Results for Reentry Outcomes, 12-Month Follow-up**

Variable Label	Total N	Tx N	Comp N	Tx Wtd Mean	Comp Wtd Mean	Std Error	Test Statistic	P value	Effect Size
<b>Recidivism Outcomes</b>									
No self-reported crimes within past 6 months, at 12M	294	138	156	0.67	0.651	0.2659	0.0962	0.7564	0.08
No reincarceration in jail/prison within past 6 months (self-report), at 12M	309	143	166	0.595	0.511	0.2458	1.9413	0.1635	0.34
Number of reincarcerations within past 6 months (self-report, 0 if no reincarcerations), at 12M	301	142	159	0.593	0.784	0.1504	-1.2735	0.2038	-0.14
No illegal income within past 6 months, at 12M	294	138	156	0.754	0.734	0.2929	0.1364	0.7119	0.11
No violent crimes within past 6 months, at 12M	294	138	156	0.881	0.961	0.5378	5.0532	0.0246	-1.21
No other crimes against people within past 6 months, at 12M	294	138	156	0.966	0.909	0.5654	3.4228	0.0643	1.05
No weapon possession within past 6 months, at 12M	294	138	156	0.883	0.921	0.4316	1.0051	0.3161	-0.43
No drug possession within past 6 months, at 12M	294	138	156	0.607	0.643	0.2577	0.3426	0.5583	-0.15
No drug sales within past 6 months, at 12M	294	138	156	0.863	0.846	0.3527	0.1541	0.6947	0.14
No prescription drug crimes within past 6 months, at 12M	294	138	156	0.932	0.924	0.4471	0.0613	0.8045	0.11

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**Exhibit G-2. Differences in Weighted Means Results for Reentry Outcomes, 12-Month Follow-up (continued)**

Variable Label	Total N	Tx N	Comp N	Tx Wtd Mean	Comp Wtd Mean	Std Error	Test Statistic	P value	Effect Size
No other drug crimes within past 6 months, at 12M	294	138	156	0.926	0.938	0.4838	0.1494	0.6992	-0.19
No DUI within past 6 months, at 12M	294	138	156	0.853	0.854	0.346	0.0006	0.9812	-0.01
No property crimes within past 6 months, at 12M	294	138	156	0.951	0.957	0.5249	0.0618	0.8037	-0.13
No public order crimes within past 6 months, at 12M	294	138	156	0.906	0.886	0.3873	0.3113	0.5769	0.22
No person crimes within past 6 months, at 12M	294	138	156	0.875	0.893	0.4306	0.1785	0.6726	-0.18
No drug crimes within past 6 months, at 12M	294	138	156	0.827	0.84	0.3278	0.0819	0.7747	-0.09
<b>Supervision Compliance Outcomes</b>									
Complied with all supervision conditions within past 6 months (limited to those under supervision), at 12M	190	94	96	0.514	0.527	0.3089	0.0271	0.8693	-0.05
No positive drug tests on supervision within past 6 months (limited to those under supervision), at 12M	188	93	95	0.702	0.716	0.339	0.041	0.8395	-0.07
No formal supervision violations within past 6 months (limited to those under supervision), at 12M	190	94	96	0.632	0.643	0.3223	0.0195	0.8889	-0.05

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**Exhibit G-2. Differences in Weighted Means Results for Reentry Outcomes, 12-Month Follow-up (continued)**

Variable Label	Total N	Tx N	Comp N	Tx Wtd Mean	Comp Wtd Mean	Std Error	Test Statistic	P value	Effect Size
<b>Employment Outcomes</b>									
Any employment within past 6 months, at 12M	309	143	166	0.59	0.565	0.2467	0.1775	0.6735	0.1
Number of months worked with past 6 months, at 12M	294	138	156	2.544	2.408	0.3165	0.43	0.6675	0.05
Currently employed, at 12M	270	122	148	0.406	0.369	0.2675	0.3418	0.5588	0.16
Number of hours usually working per week (0 if unemployed), at 12M	309	143	166	18.01	16.019	2.5293	0.7871	0.4318	0.1
Monthly income (if employed), at 12M	171	81	90	7314.222	1642.419	5763.3018	0.9841	0.3265	7.14
Job quality scale (if employed; higher=better quality i.e. formal pay, health insurance, paid leave), at 12M	179	85	94	1.162	1.329	0.179	-0.9323	0.3524	-0.23
<b>Housing Outcomes</b>									
Housing independent at 12M (lived in one's own place or contributed to costs of housing)	294	138	156	0.651	0.644	0.259	0.0124	0.9113	0.03
Has mostly lived in one's own place within past 6 months, at 12M	238	109	129	0.23	0.247	0.3157	0.0929	0.7606	-0.1
Has lived in only 1 place within past 6 months, at 12M	238	109	129	0.541	0.59	0.2779	0.5226	0.4697	-0.2

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**Exhibit G-2. Differences in Weighted Means Results for Reentry Outcomes, 12-Month Follow-up (continued)**

Variable Label	Total N	Tx N	Comp N	Tx Wtd Mean	Comp Wtd Mean	Std Error	Test Statistic	P value	Effect Size
Not living with criminally involved or drug using people, at 12M	294	138	156	0.689	0.641	0.2596	0.6941	0.4048	0.22
<b>Substance Use Outcomes</b>									
Count of all drugs used (includes marijuana) within past 6 months, at 12M	309	143	166	1.408	1.308	0.211	0.4699	0.6388	0.06
Count of illicit drugs used (excludes marijuana) within past 6 months, at 12M	309	143	166	1.034	0.967	0.1873	0.3603	0.7189	0.05
No drug use (includes marijuana) within past 6 months, at 12M	294	138	156	0.397	0.394	0.2554	0.0041	0.9492	0.02
No illicit drug use (excludes marijuana) within past 6 months, at 12M	294	138	156	0.57	0.545	0.2501	0.1558	0.693	0.1
Count of all drugs used (includes marijuana) within past 30 days, at 12M	309	143	166	1.065	0.802	0.1826	1.438	0.1514	0.22
Count of all illicit drugs used (excludes marijuana) within past 30 days, at 12M	309	143	166	0.75	0.541	0.1598	1.308	0.1918	0.21
No drug use (includes marijuana) within past 30 days, at 12M	292	137	155	0.497	0.559	0.2512	0.9891	0.32	-0.25

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**Exhibit G-2. Differences in Weighted Means Results for Reentry Outcomes, 12-Month Follow-up (continued)**

Variable Label	Total N	Tx N	Comp N	Tx Wtd Mean	Comp Wtd Mean	Std Error	Test Statistic	P value	Effect Size
No illicit drug use (excludes marijuana) within past 30 days, at 12M	292	137	155	0.663	0.701	0.2688	0.4094	0.5223	-0.17
Problematic drug use within past 6 months (scale; higher=less problematic use) at 12M	294	138	156	9.576	9.254	0.4299	0.7498	0.454	0.1
Count of positive swab test results for drugs (includes THC) at 12M	199	98	101	0.703	0.774	0.1295	-0.545	0.5864	-0.1
Count of positive swab test results for illicit drugs (excludes THC) at 12M	199	98	101	0.491	0.562	0.1137	-0.6202	0.5358	-0.12
Any positive oral swab results for drugs (includes THC), at 12M	199	98	101	0.493	0.537	0.3021	0.3375	0.5613	-0.18
Any positive oral swab results for illicit drugs (excludes THC), at 12M	199	98	101	0.353	0.418	0.309	0.7936	0.373	-0.28
No alcohol use within past 6 months, at 12M	294	138	156	0.469	0.419	0.2531	0.6453	0.4218	0.2
No alcohol use within past 30 days, at 12M	277	133	144	0.587	0.566	0.2569	0.1147	0.7348	0.09
Never drunk within past 30 days, at 12M	247	120	127	0.806	0.767	0.3212	0.5353	0.4644	0.23
No prescription stimulant abuse within past 6 months, at 12M	294	138	156	0.861	0.887	0.3723	0.4327	0.5106	-0.24

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**Exhibit G-2. Differences in Weighted Means Results for Reentry Outcomes, 12-Month Follow-up (continued)**

Variable Label	Total N	Tx N	Comp N	Tx Wtd Mean	Comp Wtd Mean	Std Error	Test Statistic	P value	Effect Size
No prescription stimulant abuse within past 30 days, at 12M	290	137	153	0.915	0.956	0.5214	1.8381	0.1752	-0.71
No prescription pain reliever abuse within past 6 months, at 12M	294	138	156	0.768	0.825	0.3124	1.2787	0.2581	-0.35
No prescription pain reliever abuse within past 30 days, at 12M	287	136	151	0.811	0.879	0.3686	2.0172	0.1555	-0.52
No other prescription drug abuse within past 6 months, at 12M	294	138	156	0.889	0.896	0.37	0.0439	0.834	-0.08
No other prescription drug abuse within past 30 days, at 12M	286	136	150	0.929	0.954	0.4999	0.8363	0.3605	-0.46
No marijuana use within past 6 months, at 12M	294	138	156	0.613	0.639	0.2564	0.1865	0.6658	-0.11
No marijuana use within past 30 days, at 12M	283	135	148	0.668	0.71	0.2756	0.5085	0.4758	-0.2
No amphetamine use within past 6 months, at 12M	294	138	156	0.836	0.883	0.3638	1.1629	0.2809	-0.39
No amphetamine use within past 30 days, at 12M	286	135	151	0.885	0.945	0.4901	2.6733	0.102	-0.8
No cocaine use within past 6 months, at 12M	294	138	156	0.829	0.759	0.3061	1.9598	0.1615	0.43
No cocaine use within past 30 days, at 12M	285	135	150	0.863	0.834	0.3582	0.4017	0.5262	0.23

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**Exhibit G-2. Differences in Weighted Means Results for Reentry Outcomes, 12-Month Follow-up (continued)**

Variable Label	Total N	Tx N	Comp N	Tx Wtd Mean	Comp Wtd Mean	Std Error	Test Statistic	P value	Effect Size
No heroin use within past 6 months, at 12M	294	138	156	0.861	0.844	0.3596	0.1425	0.7058	0.14
No heroin use within past 30 days, at 12M	287	135	152	0.894	0.882	0.4189	0.0761	0.7826	0.12
No other drug use within past 6 months, at 12M	294	138	156	0.884	0.882	0.3762	0.0011	0.9735	0.01
No other drug use within past 30 days, at 12M	283	137	146	0.913	0.957	0.5018	2.2496	0.1336	-0.75
<b>Health Outcomes</b>									
Current overall health (higher=better self-rating), at 12M	309	143	166	0.776	0.778	0.2892	0.0034	0.9534	-0.02
Number of physically unhealthy days (in past 30 days), at 12M	309	143	166	5.342	4.639	1.0586	0.6642	0.507	0.08
Number of mentally unhealthy days (in past 30 days), at 12M	306	142	164	8.117	8.33	1.3361	-0.1597	0.8733	-0.02
Total number of healthy days (in past 30 days), at 12M	309	143	166	18.217	19.047	1.4869	-0.5579	0.5773	-0.07
Number of days (in past 30 days) in which activities were limited due to poor health, at 12M	308	142	166	4.204	4.713	0.9894	-0.5142	0.6075	-0.06
Experienced frequent activity limitation days (in past 30 days), at 12M	309	143	166	0.158	0.152	0.326	0.0198	0.8882	0.05

(continued)

**Exhibit G-2. Differences in Weighted Means Results for Reentry Outcomes, 12-Month Follow-up (continued)**

Variable Label	Total N	Tx N	Comp N	Tx Wtd Mean	Comp Wtd Mean	Std Error	Test Statistic	P value	Effect Size
No health related limitations, at 12M	309	143	166	0.738	0.8	0.2882	1.4862	0.2228	-0.35
PTSD symptoms (higher=more symptoms), at 12M	309	143	166	1.214	1.34	0.1916	-0.6616	0.5087	-0.08
<b>Violence/Victimization Outcomes</b>									
Any violent victimization within past 6 months, at 12M	294	138	156	0.47	0.46	0.2493	0.024	0.8768	0.04
Any perpetration of violence within past 6 months, at 12M	294	138	156	0.291	0.372	0.2688	1.8411	0.1748	-0.36
<b>Family/Peer Outcomes</b>									
Provided financial support for at least one child within past 6 months (parents only), at 12M	173	78	95	0.753	0.753	0.3784	0.0001	0.9943	0
Criminogenic family exposure (scale, higher values=less exposure), at 12M	294	138	156	1.218	1.107	0.1472	0.7564	0.45	0.09
Family emotional support (scale, higher values=more support), at 12M	308	143	165	20.978	21.094	0.7134	-0.1626	0.871	-0.02
Criminogenic peer exposure (scale, higher values =less exposure), at 12M	291	135	156	3.927	3.839	0.1406	0.6291	0.5298	0.08
Not a gang member, at 12M	309	143	166	0.953	0.955	0.5428	0.0085	0.9264	-0.05



# Appendix H. Detailed Recidivism Study Findings

## H.1 Binary Logistic Model Results

**Exhibit H1-A. Full Binary Logistic Models for Post-release Arrest Within 6 and 12 Months in California**

Variable	Rearrest within			
	6 months		12 months	
	Parameter Estimate (SE)	Odds Ratio	Parameter Estimate (SE)	Odds Ratio
Treatment	.436 (.235)	1.547	.791 (.587)	2.206
Age at release	-.046* (.018)	0.955	-.072*** (.019)	0.931
Person offense	-.795* (.383)	0.452	-.767* (.341)	0.464
Drug offense	.745* (.326)	2.106	.478 (.340)	1.613
Public order	-.137 (.272)	0.872	-.004 (.273)	0.996
Age at first adult arrest	.020 (.030)	1.020	.043 (.029)	1.044
Number of prior adult arrests	.034** (.012)	1.035	.067*** (.015)	1.069
Length of stay	-.002* (.001)	0.998	-.001 (.001)	0.999
Intercept	.120 (.611)	1.127	.791 (.587)	2.206

\* $p < 0.05$ ; \*\* $p < 0.01$ ; \*\*\*  $p < 0.001$ ; SE=standard error

**Exhibit H1-B. Full Binary Logistic Models for Post-release Arrest Within 6 and 12 Months in Connecticut**

Variable	Rearrest within			
	6 months		12 months	
	Parameter Estimate (SE)	Odds Ratio	Parameter Estimate (SE)	Odds Ratio
Treatment	-.081 (.157)	0.922	-.143 (.166)	0.867
Age at release	.005 (.013)	1.005	.009 (.015)	1.009
Black	.177 (.206)	1.194	-.019 (.220)	0.981
Hispanic	-.314 (.282)	0.731	-.132 (.290)	0.876
Male	.280 (.207)	1.323	.114 (.216)	1.121
Person offense	-.064 (.203)	0.938	-.160 (.214)	0.852
Drug offense	.064 (.218)	1.066	-.240 (.228)	0.787
Public order offense	.035 (.183)	1.036	.028 (.196)	1.028
Other offense	.114 (.220)	1.121	-.239 (.224)	0.787
Age at first arrest	-.007 (.017)	0.993	-.024 (.018)	0.976

(continued)

**Exhibit H1-B. Full Binary Logistic Models for Post-release Arrest Within 6 and 12 Months in Connecticut (continued)**

Variable	Rearrest within			
	6 months		12 months	
	Parameter Estimate (SE)	Odds Ratio	Parameter Estimate (SE)	Odds Ratio
Number of prior arrests	.121*** (.023)	1.129	.134*** (.030)	1.143
Overall risk score	.123 (.115)	1.131	.072 (.121)	1.075
History of violence risk score	.015 (.094)	1.015	.066 (.100)	1.068
Alcohol and drug risk score	.014 (.060)	1.014	-.099 (.062)	0.906
Education risk score	.012 (.104)	1.012	-.030 (.112)	0.970
Vocational training risk score	.110 (.132)	1.116	.010 (.141)	1.010
Length of stay	-.0003* (.0001)	1.000	-.003* (.0001)	0.997
Intercept	-1.872 (.718)	0.154	-.059 (.739)	0.943

\* $p < 0.05$ ; \*\* $p < 0.01$ ; \*\*\*  $p < 0.001$ ; SE=standard error

**Exhibit H1-C. Full Binary Logistic Models for Post-release Arrest Within 6 and 12 Months in Florida**

Variable	Rearrest within			
	6 months		12 months	
	Parameter Estimate (SE)	Odds Ratio	Parameter Estimate (SE)	Odds Ratio
Treatment	-.343 (.223)	0.710	-.593 ** (.193)	0.553
Age at admission	-.079*** (.022)	0.924	-.076 *** (.018)	0.927
Black	.122 (.251)	1.130	.120 (.218)	1.127
Hispanic	-.244 (.689)	0.783	-.692 (.629)	0.501
Person offense	.246 (.254)	1.279	.226 (.229)	1.254
Property offense	.872 ** (.271)	2.392	.507* (.241)	1.660
Drug offense	.255 (.271)	1.290	.443 (.240)	1.557
Public order offense	.562 (.235)	1.754	.151 (.209)	1.163
Age at first arrest	.070* (.028)	1.073	.055* (.023)	1.057
Number of prior prison admissions	.200 (.089)	1.221	.143 (.083)	1.154
Number of prior arrests	.030 (.012)	1.030	.044*** (.012)	1.045

(continued)

**Exhibit H1-C. Full Binary Logistic Models for Post-release Arrest Within 6 and 12 Months in Florida (continued)**

Variable	Rearrest within			
	6 months		12 months	
	Parameter Estimate (SE)	Odds Ratio	Parameter Estimate (SE)	Odds Ratio
Length of stay	-.0003* (.0001)	1.000	-.0003** (.0001)	1.000
Married	-.231 (.527)	0.794	-.013 (.420)	0.987
Dependents	.147 (.248)	1.158	.004 (.220)	1.004
Employed prior to admission	.036 (.222)	1.037	-.013 (.193)	0.987
Intercept	-1.283 (.662)	0.277	-.049 (.579)	0.952

\* $p < 0.05$ ; \*\* $p < 0.01$ ; \*\*\* $p < 0.001$ ; SE=standard error

**Exhibit H1-D. Full Binary Logistic Models for Post-release Arrest Within 6 and 12 Months in Massachusetts**

Variable	Rearrest within			
	6 months		12 months	
	Parameter Estimate (SE)	Odds Ratio	Parameter Estimate (SE)	Odds Ratio
Black	.112 (.525)	1.119	-.033 (.464)	0.968
Risk level	.548 (.328)	1.730	.668* (.314)	1.950
Received high school diploma or GED	.540 (.302)	1.716	-.092 (.288)	0.912
Dependents	.242 (.405)	1.274	.435 (.365)	1.545
Number of prior arraignments	-.006 (.012)	0.994	-.009 (.011)	0.991
Length of stay	-.0001 (.001)	1.000	-.001 (.001)	0.999
Intercept	-2.132* (.937)	0.119	-.487 (.826)	0.614

\* $p < 0.05$ ; \*\* $p < 0.01$ ; \*\*\* $p < 0.001$ ; SE=standard error

**Exhibit H1-E. Full Binary Logistic Models for Post-release Arrest Within 6 and 12 Months in Minnesota**

Variable	Rearrest within			
	6 months		12 months	
	Parameter Estimate (SE)	Odds Ratio	Parameter Estimate (SE)	Odds Ratio
Treatment	-.249 (.272)	0.780	-.341 (.233)	0.711
Age at release	-.025 (.015)	0.975	-.047*** (.013)	0.954
White	-.438 (.318)	0.645	-.467 (.272)	0.627
Number of prior arrests	.019 (.012)	1.019	.026* (.011)	1.026
Intensive Supervision	-.692* (.284)	0.501	-.985*** (.245)	0.373
Length of stay	.004 (.003)	1.004	-.002 (.003)	0.998
Married	.155 (.497)	1.168	-.272 (.461)	0.762
Intercept	-.752 (.674)	0.471	1.708** (.600)	5.518

\* $p < 0.05$ ; \*\* $p < 0.01$ ; \*\*\*  $p < 0.001$ ; SE=standard error

**Exhibit H1-F. Full Binary Logistic Models for Post-release Arrest Within 6 and 12 Months in New Jersey**

Variable	Rearrest within			
	6 months		12 months	
	Parameter Estimate (SE)	Odds Ratio	Parameter Estimate (SE)	Odds Ratio
Treatment	-.497* (.215)	0.608	-.154 (.178)	0.857
Male	.036 (.232)	1.037	.366 (.196)	1.442
Black	.274 (.316)	1.315	.020 (.252)	1.020
Other race	.330 (.345)	1.391	.177 (.278)	1.194
Age at release	-.017 (.010)	0.983	-.008 (.008)	0.992
Medium Risk	.310 (.297)	1.363	.272 (.253)	1.313
High Risk	.213 (.270)	1.237	.424 (.226)	1.528
Intercept	-1.115 (.520)	0.328	-1.058 (.438)	0.347

\* $p < 0.05$ ; \*\* $p < 0.01$ ; \*\*\*  $p < 0.001$ ; SE=standard error

**Exhibit H1-G. Full Binary Logistic Models for Post-release Arrest Within 6 and 12 Months in Pennsylvania**

Variable	Rearrest within			
	6 months		12 months	
	Parameter Estimate (SE)	Odds Ratio	Parameter Estimate (SE)	Odds Ratio
Treatment	.225 (.248)	1.252	.374 (.222)	1.454
Male	.381 (.253)	1.464	.054 (.219)	1.055
Person	-.064 (.215)	0.938	.197 (.194)	1.218
Drug	-.144 (.217)	0.866	-.312 (.197)	0.732
Public Order	.237 (.238)	1.267	.534* (.214)	1.706
Other	.459 (.267)	1.582	.543* (.253)	1.721
Number of prior arrests	.020 (.018)	1.020	.021 (.017)	1.021
Age at first arrest	-.053 ** (.019)- .056** (.019)	0.946	-.068*** (.016)	0.934
Length of stay	-.001* (.001)	0.999	-.002* (.001)	0.998
Intercept	-.455 (.569)	0.634	.407 (.500)	1.502

\* $p < 0.05$ ; \*\* $p < 0.01$ ; \*\*\*  $p < 0.001$ ; SE=standard error

## H.2 Negative Binomial Model Results

**Exhibit H2-A. Negative Binomial Model Results for the Number of Post-release Arrests in California**

Variable	Estimate	IRR	SE	Z Value	P
Treatment	-.033	0.968	.100	0.11	.744
Age at release	-.039***	0.962	.008	25.98	<.000
Person offense	-.140	0.869	.160	0.77	.380
Drug offense	-.091	0.913	.141	0.41	.520
Public order	-.140	0.869	.116	1.45	.228
Age at first adult arrest	.042***	1.043	.012	11.48	.000
Number of prior adult arrests	.025***	1.025	.004	25.80	<.000
Length of stay	-.001*	0.999	.0004	6.39	.012
Intercept	1.745***	5.726	.246	50.51	.000

\* $p < 0.05$ ; \*\* $p < 0.01$ ; \*\*\*  $p < 0.001$ ; IRR= incident rate ratio; SE=standard error

**Exhibit H2-B. Negative Binomial Model Results for the Number of Post-release Arrests in Connecticut**

Variable	Estimate	IRR	SE	Z Value	P
Treatment	.162*	1.176	.066	2.45	.014
Age at release	.017**	1.017	.005	3.09	.002
Black	.149	1.161	.085	1.75	.080
Hispanic	-.028	0.972	.119	-0.24	.812
Male	-.031	0.969	.089	-0.35	.729
Person offense	-.108	0.898	.087	-1.25	.212
Drug offense	.094	1.099	.092	1.02	.306
Public order offense	.058	1.060	.078	0.75	.465
Other offense	-.035	0.966	.096	-0.36	.716
Age at first arrest	-.021**	0.979	.007	-3.09	.002
Number of prior arrests	.060***	1.062	.007	8.69	.000
Overall risk score	.096*	1.101	.048	1.99	.046
History of violence risk score	.126**	1.134	.041	3.06	.002
Alcohol and drug risk score	.023	1.023	.027	0.87	.386
Education score	-.052	0.949	.043	-1.20	.230
Vocational training score	-.013	0.987	.056	-0.23	.821
Length of stay	-.0002**	1.000	.0001	-3.12	.002
Intercept	-6.606***	0.001	.300	-22.04	.000

\* $p < 0.05$ ; \*\* $p < 0.01$ ; \*\*\*  $p < 0.001$ ; IRR= incident rate ratio; SE=standard error

**Exhibit H2-C. Negative Binomial Model Results for the Number of Post-release Arrests in Florida**

Variable	Estimate	IRR	SE	Z Value	P
Treatment	-.038	0.963	.108	-0.35	.726
Age at admission	-.054	0.947	.009	-5.74	.000
Black	.031	1.031	.121	0.26	.797
Hispanic	-.443	0.642	.329	-1.35	.178
Person offense	.214	1.239	.128	1.67	.094
Property offense	.285*	1.330	.140	2.04	.042
Drug offense	.105	1.111	.136	0.77	.440
Public order offense	.006	1.006	.121	0.05	.961
Age at first arrest	.039**	1.040	.012	3.12	.002
Number of prior prison admissions	.033***	1.034	.006	5.17	.000
Number of prior arrests	.065	1.067	.045	1.44	.150
Length of stay	-.0002	1.000	.0001	-4.10	.000
Married	-.210	0.811	.258	-0.82	.415
Dependents	-.090	0.914	.127	-0.71	.479
Employed prior to admission	-.049	0.952	.108	-0.45	.650
Intercept	-6.283***	0.002	.327	-19.19	.000

\* $p < 0.05$ ; \*\* $p < 0.01$ ; \*\*\*  $p < 0.001$ ; IRR= incident rate ratio; SE=standard error

**Exhibit H2-D. Negative Binomial Model Results for the Number of Post-release Arrests in Massachusetts**

Variable	Estimate	IRR	SE	Z Value	P
Black	.125	1.133	.199	0.63	0.531
Risk level	.262*	1.300	.128	2.04	0.042
Received high school diploma or GED	-.101	0.904	.128	-0.79	0.429
Dependents	.054	1.055	.156	0.35	0.729
Number of prior arraignments	.001	1.001	.004	0.32	0.753
Length of stay	-.0002	1.000	.0004	-0.59	0.558
Intercept	-6.478***	0.002	.344	-18.81	0.000

\* $p < 0.05$ ; \*\* $p < 0.01$ ; \*\*\*  $p < 0.001$ ; IRR= incident rate ratio; SE=standard error

**Exhibit H2-E. Negative Binomial Model Results for the Number of Post-release Arrests in Minnesota**

Variable	Estimate	IRR	SE	Z Value	P
Treatment	.066	1.068	.122	0.54	0.587
Age at release	-.042***	0.959	.007	-6.33	0.000
White	.107	1.113	.136	0.79	0.429
Number of prior arrests	.035***	1.036	.006	6.06	0.000
Intensive Supervision	-.262*	0.770	.126	-2.08	0.038
Length of stay	.0003	1.000	.002	0.18	0.853
Married	-.669*	0.512	.261	-2.56	0.010
Intercept	-4.921***	0.007	.316	-15.58	0.000

\* $p < 0.05$ ; \*\* $p < 0.01$ ; \*\*\*  $p < 0.001$ ; IRR= incident rate ratio; SE=standard error

**Exhibit H2-F. Negative Binomial Model Results for the Number of Post-release Arrests in New Jersey**

Variable	Estimate	IRR	SE	Z Value	P
Treatment	-.036	0.965	.121	-0.30	0.764
Male	.603***	1.828	.130	4.64	0.000
Black	-.180	0.835	.159	-1.13	0.257
Other race	-.291	0.748	.180	-1.61	0.107
Age at release	-.004	0.996	.005	-0.75	0.453
Medium risk	-.020	0.980	.170	-0.12	0.903
High Risk	.229	1.257	.151	1.51	0.130
Intercept	-6.949***	0.001	.278	-24.94	0.000

\* $p < 0.05$ ; \*\* $p < 0.01$ ; \*\*\*  $p < 0.001$ ; IRR= incident rate ratio; SE=standard error

**Exhibit H2-G. Negative Binomial Model Results for the Number of Post-release Arrests in Pennsylvania**

Variable	Estimate	IRR	SE	Z Value	P
Treatment	.528***	1.696	.129	4.10	.000
Male	-.135	0.874	.119	-1.13	.258
Person	.031	1.031	.108	0.29	.773
Drug	-.004	0.996	.108	-0.04	.971
Public Order	.140	1.150	.117	1.20	.230
Other	.349*	1.418	.135	2.58	.010
Number of prior arrests	.017	1.017	.009	1.82	.068
Age at first arrest	-.044***	0.957	.008	-5.20	.000
Length of stay	-.001*	0.999	.0004	-2.64	.008
Intercept	-5.946***	0.003	.256	-21.55	.000

\* $p < 0.05$ ; \*\* $p < 0.01$ ; \*\*\*  $p < 0.001$ ; IRR= incident rate ratio; SE=standard error

**H.3 Survival Models for Rearrest**

**Exhibit H3-A. Log Logistic Survival Model Results of Time to First Post-release Arrest in California**

Variable	Estimate	Time Ratio	SE	Z Value	P
Treatment	-.206	0.814	.191	1.16	.282
Age at release	.046**	1.047	.014	10.60	.001
Person offense	.613*	1.846	.281	4.78	.029
Drug offense	-.578*	0.561	.271	4.57	.032
Public order	.158	1.171	.224	0.50	.481
Other	.278	1.320	.434	0.41	.522
Age at first adult arrest	-.006	0.994	.025	0.05	.818
Number of prior adult arrests	-0.040***	0.961	.009	18.86	.000
Length of stay	.002*	1.002	.001	4.67	.030

\* $p < 0.05$ ; \*\* $p < 0.01$ ; \*\*\*  $p < 0.001$ ; SE=standard error

### Exhibit H3-B. Log Logistic Survival Model Results of Time to First Post-release Arrest in Connecticut

Variable	Estimate	Time Ratio	SE	Z Value	P
Treatment	-.264*	0.768	.106	-2.49	.013
Age at release	.002	1.002	.010	0.17	.862
Black	.002	1.002	.139	0.02	.988
Hispanic	.091	1.095	.184	0.50	.620
Male	-.158	0.854	.142	-1.12	.264
Person offense	.125	1.133	.139	0.90	.368
Drug offense	-.006	0.994	.151	-0.04	.970
Public order offense	-.044	0.957	.126	-0.35	.726
Other offense	.006	1.006	.151	0.04	.970
Age at first arrest	.014	1.014	.011	1.21	.228
Number of prior arrests	-.062***	0.940	.014	-4.45	.000
Number of prior prison admissions	-.015	0.985	.012	-1.23	.220
Overall risk score	-.106	0.899	.078	-1.35	.176
History of violence risk score	-.127	0.881	.065	-1.96	.051
Alcohol and drug risk score	-.076	0.927	.040	-1.89	.058
Education risk score	.089	1.093	.069	1.29	.197
Vocational training risk score	-.046	0.955	.089	-0.51	.609
Length of stay	.0003***	1.000	.0001	3.22	.000

\* $p < 0.05$ ; \*\* $p < 0.01$ ; \*\*\*  $p < 0.001$ ; SE=standard error

**Exhibit H3-C. Log Logistic Survival Model Results of Time to First Post-release Arrest in Florida**

Variable	Estimate	Time Ratio	SE	Z Value	P
Treatment	.305	1.357	.159	1.92	.055
Age at admission	.077***	1.080	.014	5.37	.000
Black	-.171	0.843	.180	-0.95	.341
Hispanic	.671	1.956	.507	1.32	.186
Person offense	-.162	0.850	.193	-0.84	.401
Property offense	-.629**	0.533	.200	-3.14	.002
Drug offense	-.300	0.741	.201	-1.49	.136
Public order offense	-.130	0.878	.173	-0.75	.455
Age at first arrest	-.039	0.962	.020	-1.95	.051
Number of prior prison admissions	-.157*	0.855	.068	-2.31	.021
Number of prior arrests	-.043***	0.958	.009	-4.80	.000
Length of stay	.0003**	1.000	.0001	3.20	.001
Married	.134	1.143	.354	0.38	.704
Dependents	-.169	0.845	.181	-0.93	.350
Employed prior to admission	.171	1.186	.160	1.07	.284
Post-prison supervision	-.390	0.677	.222	-1.76	.079

\* $p < 0.05$ ; \*\* $p < 0.01$ ; \*\*\*  $p < 0.001$ ; SE=standard error

**Exhibit H3-D. Log Normal Survival Model Results of Time to First Post-release Arraignment in Massachusetts**

Variable	Estimate	Time Ratio	SE	Z Value	P
Black	-.195	0.823	.268	-0.73	.466
Risk level	-.489**	0.613	.174	-2.81	.005
Received high school diploma or GED	-.067	0.935	.166	-0.40	.688
Dependents	-.108	0.898	.210	-0.51	.607
Number of prior arraignments	.005	1.005	.006	0.80	.425
Length of stay	.001	1.001	.001	0.99	.320

\* $p < 0.05$ ; \*\* $p < 0.01$ ; \*\*\*  $p < 0.001$ ; SE=standard error

**Exhibit H3-E. Log Logistic Survival Model Results of Time to First Post-release Arrest in Minnesota**

Variable	Estimate	Time Ratio	SE	Z Value	P
Treatment	.074	1.077	.135	0.30	.582
Age at release	.036***	1.037	.007	24.53	<.0001
White	.367*	1.443	.153	5.78	.016
Number of prior arrests	-.036***	0.965	.006	30.42	<.0001
Intensive Supervision	.013	1.013	.138	0.01	.924
Length of stay	.0004	1.000	.002	0.05	.826
Married	.242	1.274	.262	0.85	.356

\* $p < 0.05$ ; \*\* $p < 0.01$ ; \*\*\*  $p < 0.001$ ; SE=standard error

**Exhibit H3-F. Log Normal Survival Model Results of Time to First Post-release Arrest in New Jersey**

Variable	Estimate	Time Ratio	SE	Z Value	P
Treatment	.130	1.139	.157	0.69	.408
Male	-.515**	0.598	.169	9.32	.002
Black	.029	1.029	.215	0.02	.892
Other race	-.070	0.932	.241	0.09	.770
Age at release	.012	1.012	.007	2.52	.112
Medium Risk	.021	1.021	.221	0.01	.923
High Risk	-.208	0.812	.195	1.14	.286

\* $p < 0.05$ ; \*\* $p < 0.01$ ; \*\*\*  $p < 0.001$ ; SE=standard error

**Exhibit H3-G. Log Normal Survival Model Results of Time to First Post-release Arrest in Pennsylvania**

Variable	Estimate	Time Ratio	SE	Z Value	P
Treatment	.130	1.139	.194	-0.67	.501
Male	-.280	0.756	.188	-1.49	.137
Person	.009	1.009	.170	0.05	.957
Drug	-.069	0.933	.169	-0.41	.682
Public Order	-.259	0.772	.183	-1.41	.158
Other	-.120	0.887	.221	-0.54	.587
Number of prior arrests	-.035*	0.966	.015	-2.37	.018
Age at first arrest	.037**	1.038	.012	3.12	.002
Length of stay	.003***	1.003	.001	4.33	.000

\* $p < 0.05$ ; \*\* $p < 0.01$ ; \*\*\*  $p < 0.001$ ; SE=standard error

**H.4 Competing Hazard Model Results**

**Exhibit H4-A. Competing Hazard Cox Model Results of Time to First Post-release Arrest in California**

Variable	Offense Type							
	Person		Property		Drug		Public Order or Other	
	Parameter Estimate (SE)	Hazard Ratio						
Treatment	.179 (.255)	1.196	.473** (.174)	1.605	.673 (.376)	1.960	-.730 (.545)	0.482
Age at release	-.084*** (.023)	0.919	-.038** (.014)	0.963	-.009 (.023)	0.991	.023 (0.032)	1.023
Person offense	-.137 (.341)	0.872	-1.295*** (.368)	0.274	.100 (.515)	1.105	1.647** (.584)	5.191
Drug offense	-.551 (.491)	0.576	.429 (.245)	1.536	.935* (.435)	2.547	-1.416 (.871)	0.243
Public order offense	-.580 (.348)	0.560	-.576* (.225)	0.562	1.314** (.421)	3.721	1.802** (.554)	6.062
Other offense	.231 (.599)	1.260	.028 (.371)	1.028	2.106*** (.619)	8.215	-13.342*** (1123)	0.000
Age at first adult arrest	.017 (.036)	1.017	.002 (.023)	1.002	.040 (.042)	1.041	-.100 (.072)	0.905
Number of prior arrests	.040*** (.012)	1.041	.026** (.008)	1.026	.031** (.011)	1.031	.016 (.015)	1.016
Length of stay	-.001 (.001)	0.999	-.001 (.001)	0.999	.001 (.001)	1.001	.0004 (.002)	1.000

\*p <0.05; \*\*p<0.01; \*\*\* p<0.001; SE=standard error

**Exhibit H4-B. Competing Hazard Cox Model Results of Time to First Post-release Arrest in Connecticut**

Variable	Offense Type							
	Person		Property		Drug		Public Order or Other	
	Parameter Estimate (SE)	Hazard Ratio						
Treatment	-3.787*** (1.013)	0.023	-1.649*** (.303)	0.192	1.879*** (.181)	6.547	-.161 (.124)	0.851
Age at release	-.092** (0.031)	0.912	.070*** (.017)	1.073	-.033** (.011)	0.968	.018 (.010)	1.018
Black	-.857* (.382)	0.424	-.157 (.289)	0.855	.420* (.178)	1.522	.017 (.162)	1.017
Hispanic	-.483 (.484)	0.617	-.730 (.489)	0.482	.355 (.235)	1.426	.027 (.218)	1.027
Male	-.054 (0.346)	0.947	-.023 (.282)	0.977	.062 (.170)	1.064	.262 (.169)	1.300
Person offense	-.214 (.417)	0.807	-.092 (.285)	0.912	-.318 (.186)	0.728	.008 (.157)	1.008
Drug offense	-.023 (.415)	0.977	.291 (.291)	1.338	-.065 (.192)	0.937	-.151 (.176)	0.860
Public order offense	.247 (.343)	1.280	-.106 (.264)	0.899	.058 (.161)	1.060	.028 (.148)	1.028
Other offense	-.164 (.453)	0.849	-.109 (.330)	0.897	-.274 (.206)	0.760	.223 (.167)	1.250
Age at first arrest	.0419 (.036)	1.043	-.078 (.023)	0.925	.023 (.014)	1.023	-.023 (.012)	0.977
Number of prior arrests	.135*** (.029)	1.145	.031*** (.019)	1.031	.080*** (.013)	1.083	.049*** (.012)	1.050
Overall risk score	-.069 (.237)	0.933	.119 (.162)	1.126	.157 (.100)	1.170	.095 (.093)	1.100
History of violence risk score	-.039 (.180)	0.962	.128 (.125)	1.137	.130 (.080)	1.139	.036 (.071)	1.037
Alcohol and drug risk score	-.095 (.103)	0.909	.050 (.084)	1.051	.075 (.051)	1.078	.140** (.049)	1.150
Education risk score	-.044 (.228)	0.957	-.249 (.152)	0.780	-.032 (0.089)	0.969	-.030 (.079)	0.970
Vocational training risk score	-.069 (.253)	0.933	.103 (.176)	1.108	-.151 (.117)	0.860	.202* (.099)	1.224
Length of stay	-.0003 (.0003)	1.000	-.0002 (.0002)	1.000	-.0003* (.0002)	1.000	-.0001 (.0001)	1.000

\*p <0.05; \*\*p<0.01; \*\*\* p<0.001; SE=standard error

**Exhibit H4-C. Competing Hazard Cox Model Results of Time to First Post-release Arrest in Florida**

Variable	Offense Type							
	Person		Property		Drug		Public Order or Other	
	Parameter Estimate (SE)	Hazard Ratio						
Treatment	-.181 (.123)	0.834	-.404 (.316)	0.668	-2.944 (3.347)	0.053	!	!
Age at admission	-.054*** (.011)	0.947	-.107** (.034)	0.899	-1.908 (1.305)	0.148	!	!
Black	.027 (.140)	1.027	.186 (.362)	1.204	29.644 (77496)	7.49E12	!	!
Hispanic	-.712 (.429)	0.491	-.997 (1.067)	0.369	5.235 (77496)	187.729	!	!
Person offense	.355* (.140)	1.426	-2.327*** (.669)	0.098	-24.385 (22021)	0.000	!	!
Property offense	.478*** (.142)	1.613	.529 (.461)	1.697	-19.822 (7692)	0.000	!	!
Drug offense	.203 (.144)	1.225	.053 (.438)	1.054	25.325 (7016)	9.97E10	!	!
Public order offense	.135 (.132)	1.145	-.106 (.376)	0.899	-.617 (2.515)	0.540	!	!
Age at first arrest	.015 (.017)	1.015	.023 (.055)	1.023	2.580 (1.885)	13.197	!	!
Number of prior prison admissions	.094* (.042)	1.099	.122 (.144)	1.130	4.520 (3.371)	91.836	!	!
Number of prior arrests	.036*** (.006)	1.037	.122 (.144)	1.130	-.274 (0.263)	0.760	!	!
Length of stay	-.0002** (.0001)	1.000	.030 (.021)	1.030	-.010 (.007)	0.990	!	!
Married	-.006 (.273)	0.994	-14.747 (1069)	0.000	7.683 (6.036)	2171.123	!	!
Dependents	.167 (.136)	1.182	-.020 (.371)	0.980	3.018 (2.784)	20.450	!	!
Employed prior to admission	-.189 (.124)	0.828	-.048 (.319)	0.953	9.752 (8.653)	1.72E4	!	!
Post-prison supervision	.304 (.159)	1.355	.084 (.546)	1.088	-35.416 (1.14E5)	0.000	!	!

\*p <0.05; \*\*p<0.01; \*\*\* p<0.001; SE=standard error

! = Model would not converge

**Exhibit H4-D. Competing Hazard Cox Model Results of Time to First Post-release Arrest in Massachusetts**

Variable	Offense Type							
	Person		Property		Drug		Public Order or Other	
	Parameter Estimate	Hazard Ratio	Parameter Estimate	Hazard Ratio	Parameter Estimate	Hazard Ratio	Parameter Estimate	Hazard Ratio
Black	.312 (.337)	1.366	.511 (.637)	1.667	-.721 (.643)	0.486	-.389 (.893)	0.678
Risk level	.264 (.196)	1.302	.445 (.356)	1.560	.007 (.493)	1.007	-.644 (.764)	0.525
Received high school diploma or GED	-.278 (.231)	0.757	.665* (.316)	1.944	.891* (.380)	2.438	-1.254 (.964)	0.285
Dependents	.297 (.251)	1.346	.099 (.454)	1.104	-.370 (.581)	0.691	-.998 (.821)	0.369
Length of stay	-.0003 (.001)	1.000	.001 (.001)	1.001	-.001 (.490)	0.999	-.005 (.003)	0.995

\* $p < 0.05$ ; \*\* $p < 0.01$ ; \*\*\*  $p < 0.001$ ; SE=standard error

**Exhibit H4-E. Competing Hazard Cox Model Results of Time to First Post-release Arrest in Minnesota**

Variable	Offense Type							
	Person		Property		Drug		Public Order or Other	
	Parameter Estimate (SE)	Hazard Ratio						
Treatment	-.173 (.316)	0.841	-.468 (.416)	0.626	.068 (.343)	1.070	.059 (.166)	1.061
Age at release	-.023 (.017)	0.977	-.067* (.026)	0.935	-.024 (.019)	0.976	-.033*** (.009)	0.968
White	-.77 (.428)	0.463	.266 (.447)	1.305	-.130 (.378)	0.878	-.226 (.187)	0.798
Number of prior arrests	.029* (.013)	1.029	.018 (.020)	1.018	.022 (.014)	1.022	.036*** (.006)	1.037
Intensive Supervision	.497* (.336)	1.644	-.041 (.434)	0.960	.158 (.351)	1.171	-.122 (.171)	0.885
Length of stay	-.007 (.005)	0.993	-.005 (.006)	0.995	-.0003 (.005)	1.000	.0003 (.002)	1.000
Married	.251 (.539)	1.285	-.566 (1.030)	0.568	-.348 (.740)	0.706	-.482 (.367)	0.618

\* $p < 0.05$ ; \*\* $p < 0.01$ ; \*\*\*  $p < 0.001$ ; SE=standard error

**Exhibit H4-F. Competing Hazard Cox Model Results of Time to First Post-release Arrest in New Jersey**

Variable	Offense Type							
	Person		Property		Drug		Public Order or Other	
	Parameter Estimate (SE)	Hazard Ratio						
Treatment	.033 (.287)	1.034	.296 (.191)	1.344	-.001 (.181)	0.999	-.824* (.377)	0.439
Male	.363 (.332)	1.438	.537* (.214)	1.711	.469* (.204)	1.598	-.142 (.376)	0.868
Black	.912 (.537)	2.489	-.094 (.266)	0.910	-.187 (.236)	0.829	-.589 (.425)	0.555
Other race	.949 (.570)	2.583	.259 (.286)	1.296	-.233 (.274)	0.792	-.605 (.497)	0.546
Age at release	-.051*** (.015)	0.950	.010 (.009)	1.010	.0004 (.008)	1.000	-.043* (.018)	0.958
Medium risk	-.369 (.479)	0.691	.153 (.297)	1.165	-.122 (.252)	0.885	.514 (.498)	1.672
High risk	.291 (.370)	1.338	.576* (.257)	1.779	-.067 (.220)	0.935	.238 (.464)	1.269

\* $p < 0.05$ ; \*\* $p < 0.01$ ; \*\*\* $p < 0.001$ ; SE=standard error

**Exhibit H4-G. Competing Hazard Cox Model Results of Time to First Post-release Arrest in Pennsylvania**

Variable	Offense Type							
	Person		Property		Drug		Public Order or Other	
	Parameter Estimate (SE)	Hazard Ratio						
Treatment	.373 (.365)	1.452	-.219 (.167)	0.803	.735 (.625)	2.085	-.807* (.336)	0.446
Male	.204 (.329)	1.226	.072 (.160)	1.075	-.426 (.444)	0.653	.971* (.450)	2.641
Person	.540 (.279)	1.716	-.227 (.151)	0.797	.039 (.403)	1.040	-.188 (.326)	0.829
Drug	-.036 (.262)	0.965	-.024 (.144)	0.976	1.130** (.430)	3.096	-.202 (.332)	0.817
Public Order	.130 (.294)	1.139	-.013 (.165)	0.987	.560 (.484)	1.751	.966* (.409)	2.627
Other	-1.537* (.722)	0.215	.145 (.191)	1.156	.297 (.502)	1.346	.532 (.395)	1.702
Number of prior arrests	-.005 (.022)	0.995	.042*** (.001)	1.043	-.033 (.043)	0.968	-.013 (.033)	0.987
Age at first arrest	-.056* (.026)	0.946	-.027* (.012)	0.973	-.028 (.031)	0.972	.013 (.020)	1.013
Length of stay	-.002* (.001)	0.998	-.002** (.001)	0.998	-.0004 (.002)	1.000	-.001 (.001)	0.999

\* $p < 0.05$ ; \*\* $p < 0.01$ ; \*\*\* $p < 0.001$ ; SE=standard error

## H.5 Survival Models for Reincarceration

**Exhibit H5-A. Parametric Survival Model Results of Time to First Post-release Incarceration in California**

Variable	Jail °					Prison °°				
	Estimate	Time Ratio	SE	Z Value	p	Estimate	Time Ratio	SE	Z Value	p
Treatment	.760**	2.138	.235	10.49	.001	-.071	0.931	.625	0.01	.908
Age at release	.049**	1.050	.017	8.45	.004	.054	1.055	.057	0.92	.338
Person offense	.534	1.706	.357	2.24	.134	-.065	0.937	1.140	0.00	.954
Drug offense	-.642	0.526	.331	3.76	.052	23.120	1.099E10	1.16E5	0.00	.999
Public order	.165	1.179	.275	0.36	.548	-.185	0.831	.861	0.05	.829
Age at first adult arrest	-.010	0.990	.031	0.11	.740	.172	1.188	.161	1.14	.286
Number of prior adult arrests	-.043***	0.958	.010	17.52	<.000	-.027	0.973	.035	0.60	.437
Length of stay	.002	1.002	.001	3.62	.057	.002	1.002	.003	0.53	.464

\* $p < 0.05$ ; \*\* $p < 0.01$ ; \*\*\* $p < 0.001$ ; SE=standard error

° = Log Logistic; °° = Exponential

**Exhibit H5-B. Log Normal Survival Model Results of Time to First Post-release Prison Incarceration in Connecticut**

Variable	Estimate	Time Ratio	SE	Z Value	p
Treatment	-.488**	0.614	.174	-2.81	.005
Age at release	.031*	1.031	.014	2.21	.027
Black	-.329	0.720	.224	-1.47	.143
Hispanic	-.013	0.987	.310	-0.04	.967
Male	-.218	0.804	.232	-0.94	.348
Person offense	.225	1.252	.224	1.00	.316
Drug offense	.226	1.254	.244	0.93	.354
Public order offense	-.039	0.962	.201	-0.19	.847
Other offense	.041	1.042	.250	0.16	.870
Age at first arrest	-.013	0.987	.018	-0.75	.451
Number of prior arrests	-.048**	0.953	.017	-2.79	.005
Overall risk score	-.204	0.815	.128	-1.60	.110
History of violence risk score	-.263**	0.769	.103	-2.53	.011
Alcohol and drug risk score	-.083	0.920	.066	-1.26	.207
Education risk score	-.048	0.953	.114	-0.43	.671
Vocational training risk score	-.037	0.964	.145	-0.26	.796
Length of stay	.001**	1.001	.0002	3.21	.001

\* $p < 0.05$ ; \*\* $p < 0.01$ ; \*\*\* $p < 0.001$ ; SE=standard error

**Exhibit H5-C. Log Normal Survival Model Results of Time to First Post-release Prison Incarceration in Florida**

Variable	Estimate	Time Ratio	SE	Z Value	p
Treatment	-.003	0.997	.284	-0.01	.991
Age at admission	.063*	1.065	.029	2.16	.031
Black	-.113	0.893	.314	-0.36	.718
Hispanic	6.634	760.518	415.874	0.02	.987
Person offense	-.285	0.752	.324	-0.88	.380
Property offense	-1.202**	0.301	.387	-3.11	.002
Drug offense	-.283	0.754	.344	-0.82	.411
Public order offense	-.696*	0.499	.308	-2.26	.024
Age at first arrest	-.108**	0.898	.036	-3.00	.003
Number of prior prison admissions	-.273*	0.761	.114	-2.39	.017
Number of prior arrests	-.018	0.982	.016	-1.12	.265
Length of stay	.001*	1.001	.0002	2.31	.021
Married	.611	1.842	.742	0.82	.410
Dependents	-.605	0.546	.308	-1.96	.050
Employed prior to admission	-.148	0.862	.278	-0.53	.594
Post-prison supervision	-.221	0.802	.380	-0.58	.560

\*p <0.05; \*\*p<0.01; \*\*\* p<0.001; SE=standard error

**Exhibit H5-D. Log Normal Survival Model Results of Time to First Post-release Prison Incarceration in Minnesota**

Variable	Estimate	Time Ratio	SE	Z Value	p
Treatment	-0.041	0.960	0.122	0.11	0.735
Age at release	0.012*	1.012	0.006	3.95	0.047
White	0.364**	1.439	0.141	6.70	0.009
Number of prior arrests	-0.018***	0.982	0.006	10.99	0.0009
Intensive Supervision	-0.728***	0.483	0.127	33.05	<.0001
Length of stay	0.002	1.002	0.002	0.90	0.343
Married	-0.020	0.980	0.237	0.01	0.932

\*p <0.05; \*\*p<0.01; \*\*\* p<0.001; SE=standard error

**Exhibit H5-E. Parametric Survival Model Results of Time to First Post-release Incarceration in Pennsylvania**

Variable	Jail					Prison				
	Estimate	Time Ratio	SE	Z Value	p	Estimate	Time Ratio	SE	Z Value	p
Treatment	2.145***	8.542	.287	7.47	.000	-.227	0.797	.972	-0.23	.815
Male	-.325	0.723	.287	-1.12	.261	.206	1.229	.852	0.24	.809
Person offense	.335	1.398	.264	1.27	.204	.225	1.252	.771	0.29	.770
Drug offense	-.094	0.910	.261	-0.36	.720	-.059	0.943	.773	-1.08	.940
Public order offense	-.041	0.960	.282	-0.15	.884	.026	1.026	.875	0.03	.976
Other offense	.412	1.510	.354	1.17	.244	-.734	0.480	.965	-0.76	.447
Age at first adult arrest	.019	1.019	.018	1.04	.300	.059	1.061	.063	0.94	.348
Number of prior adult arrests	-.054*	0.947	.022	-2.42	.015	-.150*	0.861	.060	-2.50	.013
Length of stay	.005***	1.005	.001	4.89	.000	.004	1.004	.003	1.33	.184

\* $p < 0.05$ ; \*\* $p < 0.01$ ; \*\*\* $p < 0.001$ ; SE=standard error

## H.6 Survival Models for Time to First Incarceration for Technical Violations and Revocations

**Exhibit H6-A. Weibull Survival Model Results of Time to First Incarceration for Either a Technical Violation or Revocation in Florida**

Variable	Technical Violation					Revocation				
	Estimate	Time Ratio	SE	Z Value	p	Estimate	Time Ratio	SE	Z Value	p
Treatment	-.478	0.620	.278	-1.72	.085	.298	1.347	.388	0.77	.443
Age at admission	-.034	0.967	.025	-1.36	.173	-.032	0.969	.030	-1.06	.290
Black	-.208	0.812	.305	-0.68	.495	-.125	0.882	.433	-0.29	.773
Hispanic	.199	1.220	.625	0.32	.751	-1.432	0.239	1.124	-1.27	.203
Person offense	.909**	2.482	.332	2.74	.006	-.347	0.707	.499	-0.70	.487
Property offense	.660*	1.935	.313	2.11	.035	1.095*	2.989	.463	2.37	.018
Drug offense	-.261	0.770	.369	-0.71	.480	-.768	0.464	.578	-1.33	.184
Public order offense	-.098	0.907	.317	-0.31	.756	-.577	0.562	.456	-1.27	.206
Age at first arrest	.027	1.027	.032	0.87	.387	-.029	0.971	.045	-0.64	.520
Number of prior prison admissions	-.113	0.893	.132	-0.85	.393	.085	1.089	.150	0.57	.570
Number of prior arrests	.032*	1.033	.013	2.49	.013	.011	1.011	.016	0.72	.473
Length of stay	.00004	1.000	.0001	0.38	.701	-.0002	1.000	.0001	-1.19	.233
Married	.330	1.391	.450	0.73	.463	-.215	0.807	.778	-0.28	.783
Dependents	.393	1.481	.318	1.24	.217	.663	1.941	.472	1.40	.160
Employed prior to admission	-.032	0.969	.279	-0.12	.907	.317	1.373	.393	0.81	.421

\* $p < 0.05$ ; \*\* $p < 0.01$ ; \*\*\*  $p < 0.001$ ; SE=standard error

# Appendix B. Survey Instruments

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## **AORDP Baseline Instrument**

### **DOMAIN 1: PRIVACY DOCUMENTATION/CONSENT**

#### **BCON1**

INTERVIEWER: LOOK AROUND YOU IN ALL DIRECTIONS. MAKE SURE THAT YOU ARE OUT OF EARSHOT OF OTHER PEOPLE, INCLUDING PEOPLE WHO MAY BE IN AN ADJACENT ROOM OR OUTSIDE. FOR AN INTERVIEW SETTING TO BE CONSIDERED PRIVATE, YOU MUST BE CERTAIN THAT THE QUESTIONS YOU READ AND THE RESPONDENT'S ANSWERS CANNOT BE:

- (1) OVERHEARD OR
- (2) ASCERTAINED BY SOMEONE LOOKING THROUGH A WINDOW.

ARE YOU CONFIDENT THE INTERVIEW SETTING IS PRIVATE?

- 1 YES
- 2 NO – DO NOT CONTINUE UNLESS YOU ARE COMFORTABLE THAT THE SETTING IS PRIVATE

#### **BCON2**

[IF BCON1 = 2, ASK]

INTERVIEWER: BECAUSE YOU HAVE INDICATED THAT THE INTERVIEW SETTING IS NOT PRIVATE, YOU CANNOT PROCEED WITH THE INTERVIEW. YOU WILL NEED TO BREAK OFF THE INTERVIEW AND RESCHEDULE FOR A TIME WHEN YOU CAN CONDUCT THE INTERVIEW IN PRIVATE.

[DO NOT ALLOW INTERVIEWER TO CONTINUE PAST THIS POINT]

#### **BCON3**

[IF BCON1=1, ASK]

INTERVIEWER: HAVE YOU READ THE CONSENT FORM TO THE RESPONDENT?

- 1 YES
- 2 NO – HARD STOP – You must get consent before beginning the interview.

#### **BCON4**

[IF BCON3=2, ASK]

INTERVIEWER: STOP AND READ CONSENT FORM TO RESPONDENT. YOU CANNOT PROCEED UNTIL THIS HAS BEEN DONE.

[NOTE TO PROGRAMMER – INTERVIEWER SHOULD NOT BE ABLE TO START INTERVIEW UNLESS BCON3 = 1]

#### **BCON5**

[IF BCOM3=1]

INTERVIEWER: DID RESPONDENT CONSENT TO INTERVIEW?

- 1 YES – [BEGIN INTERVIEW]
- 2 NO – [HARD STOP – YOU CANNOT INTERVIEW THIS PERSON WITHOUT CONSENT]

**DOMAIN 2: REFERENCE CALENDAR**

BREF1

[IF BCON5=1]

IN WHAT TYPE OF FACILITY ARE YOU INTERVIEWING?†

- 1 JAIL
- 2 PRISON
- 3 OTHER CORRECTIONAL FACILITY
- 4 OTHER NON-CORRECTIONAL FACILITY

BREF2

First I'd like to ask about your incarceration. Please tell me the date you were incarcerated. I'm asking for the date you entered incarceration this time, not the date of your sentencing.

IF RESPONDENT CAN'T REMEMBER THE DAY, ENTER 15.

IF RESPONDENT CAN'T REMEMBER MONTH, ASK IF IT WAS EARLY IN THE YEAR OR LATE IN THE YEAR. IF EARLY, ENTER 03 FOR MONTH; IF LATE, ENTER 10 FOR MONTH. IF RESPONDENT CAN'T REMEMBER AT ALL, ENTER 06 FOR MONTH.

(mm/dd/yyyy)

[MONTH RANGE = 1-12, DK, RE]

[DAY RANGE = 1-31, DK, RE]

[YEAR RANGE = 1950-2014, DK, RE]

[Calculate incarceration duration based on current date].

BREF3

[SKIP IF BREF2 HAS DK OR RE RESPONSE]

That means you have been incarcerated for [CURRENT DATE MINUS DATE ENTERED IN BREF2]. Is that correct?

- 1 YES
- 2 NO
- DON'T KNOW
- REFUSED

[If BREF3 = 2, consistency check should say, "PLEASE CORRECT THE INCARCERATION DATE."]

CAL1

INTERVIEWER – USING A BLANK CALENDAR PAGE, CIRCLE THE INCARCERATION DATE ON THE CORRECT MONTH. WRITE THE YEAR AT THE TOP OF THAT PAGE.

I'm going to fill out some calendar pages to help us keep dates in mind. First, I'm going to circle the date when your current incarceration began – [FILL WITH DATE FROM BREF2].

Now I'm going to mark some dates that we'll be referring to during the interview. First, I'm going to mark the date that was one year before this incarceration. That date would be:[CALCULATE DATE AS BREF2 – 365 DAYS]

Now I'm going to mark the date 6 months prior to your current incarceration. That date would be:  
[DISPLAY -- CALCULATE DATE AS BREF2 – 6 MONTHS]

Now I'm going to mark the date that was 30 days before your incarceration. That date is: [DISPLAY -  
CALCULATE DATE AS BREF2 – 30 DAYS]

When I ask you questions about times <b>before,/b> your current incarceration, we'll look at these dates on the calendar.

DATES PRIOR TO INCARCERATION:

COUNT BACK 12 MONTHS BEFORE INCARCERATION DATE AND CIRCLE THAT DATE.  
COUNT BACK 6 MONTHS PRIOR TO INCARCERATION DATE AND CIRCLE THAT DATE.  
COUNT BACK 30 DAYS PRIOR TO INCARCERATION AND CIRCLE THAT DATE.

Now I'm going to mark some other dates. First, I'm going to circle today's date on the calendar.  
[DISPLAY CURRENT DATE]

Now I'm going to mark the date that was 30 days ago: [DISPLAY -- CALCULATE TODAY'S DATE – 30  
DAYS]

Finally I'm going to mark the date that was 90 days ago [DISPLAY - CALCULATE TODAY'S DATE – 90 DAYS]

We'll look at the calendar at those dates for several questions in the interview.

DATES PRIOR TO CURRENT DATE

MARK TODAY'S DATE ON THE CALENDAR  
COUNT BACK 30 DAYS FROM TODAY'S DATE AND CIRCLE THAT DATE  
COUNT BACK 90 DAYS FROM TODAY'S DATE AND CIRCLE THAT DATE

**DOMAIN 3: DEMOGRAPHICS**

BDEM1

Next, I'd like to ask some questions about you. What is your date of birth?  
(mm, dd, yyyy)  
[MONTH RANGE = 1-12, DK, RE]  
[DAY RANGE = 1-31, DK, RE]  
[YEAR RANGE = 1925-2000, RE]

AGEINEL

[IF YEAR IS RE, ASK]

I'm sorry. Because you cannot tell me your year of birth, you are not eligible to participate in the study.  
[END INTERVIEW]

*Logic after:*

[Calculate age based on current date]

BDEM1a

That would make you [calculated age] years old. Is that correct?

- 1 YES
- 2 NO
- DON'T KNOW
- REFUSED

*[Logic after:*

If calculated age < 18 then go to BDEM1b, else go to BDEM2]

[If BDEM1a = no, consistency check should say, "Please correct the date of birth."]

BDEM1b

[IF CALCULATED AGE IS LESS THAN 18, ASK]

I'm sorry. You must be at least 18 years of age to participate in this study.

[END INTERVIEW]

BDEM2

*RECORD RESPONDENT'S GENDER.*

(IF YOU CAN'T TELL, ASK): Do you identify as:

- 1 MALE
- 2 FEMALE
- 3 TRANSGENDER

BDEM3

Which of the following best describes you? Would you say:

(SELECT ALL THAT APPLY)

- 1 White;
- 2 Black or African American;
- 3 American Indian or Alaska Native;
- 4 Asian or East Indian;
- 5 Hispanic, Latino or Spanish;
- 6 Native Hawaiian or other Pacific Islander
- 7 OTHER
- 8 DON'T KNOW
- 9 REFUSED

[DK AND RE SHOULD NOT BE ALLOWED IF THE INTERVIEWER PICKS ANY OTHER RESPONSE CATEGORY]

BDEM4

In what country were you born?

- 1 UNITED STATES
- 2 OTHER
- 3 DON'T KNOW
- 4 REFUSED

BDEM4a

[If BDEM4=2]

SPECIFY OTHER COUNTRY

ALLOW 30

BDEM5

Have you ever served in the Armed Forces, including the Guard or Reserves?

1 YES

2 NO

DON'T KNOW

REFUSED

BDEM6

SHOWCARD 1

What is the <b>highest </b> grade or level of school you have completed?

1 NONE

2 8<sup>TH</sup> GRADE OR LESS

3 SOME HIGH SCHOOL

4 GED

5 HIGH SCHOOL DIPLOMA

6 VOCATIONAL/TECHNICAL/BUSINESS CERTIFICATE OR DIPLOMA

7 SOME COLLEGE

8 ASSOCIATE'S DEGREE (AA, AS)

9 BACHELOR'S DEGREE (BA, BS)

10 GRADUATE/PROFESSIONAL DEGREE (MA, MS, PhD, EDD, MEDICINE/MD, DENTISTRY/DDS,  
LAW/JJ/LLB, ETC)

DON'T KNOW

REFUSED

[DK AND RE SHOULD NOT BE ALLOWED IF THE INTERVIEWER PICKS ANY OTHER RESPONSE CATEGORY]

BDEM7

Do you have any vocational or technology certifications or licenses? By that we mean things like automotive service and repair, Commercial Driver's License, Microsoft Certified IT Professional, HVACR certification.

1 YES

2 NO

DON'T KNOW

REFUSED

BDEM8

[If BDEM7=1]

What certifications or licenses do you have?

[ALLOW UP TO 5 ENTRIES]

BDEM9

Are you currently taking any school courses, such as GED, vocational, or college courses?

1 YES

2 NO

DON'T KNOW

REFUSED

BDEM10

[BDEM9=1)

Are you currently taking....

(CODE ALL THAT APPLY)

1 High school courses,

2 A GED course,

3 Vocational training,

4 College courses,

5 Some other type of schooling

DON'T KNOW

REFUSED

BDEM11

The next set of questions is about reading, writing, and doing math. Please tell me how much you agree with the following statement.

SHOWCARD 2

It is easy for you to do math, such as figuring out a tip, adding up your bills, or counting change. Do you strongly agree, agree, disagree, or strongly disagree?

1 STRONGLY AGREE

2 AGREE

3 DISAGREE

4 STRONGLY DISAGREE

DON'T KNOW

REFUSED

BDEM12

It is easy for you to read a magazine, book, or newspaper.

1 STRONGLY AGREE

2 AGREE

3 DISAGREE

4 STRONGLY DISAGREE

DON'T KNOW

REFUSED

BDEM13

It is easy for you to write letters and fill out forms such as job applications or other written forms.

1 STRONGLY AGREE

2 AGREE

3 DISAGREE

4 STRONGLY DISAGREE

DON'T KNOW

REFUSED

**DOMAIN 4: FAMILY AND PEERS**

BFAM1

Are you...

1 Married,

2 Separated,

3 Divorced,

4 Widowed, or

5 Never married?

DON'T KNOW

REFUSED

BFAM2

[If BFAM1 NE 1)

Are you currently involved in a steady intimate relationship?

1 YES

2 NO

DON'T KNOW

REFUSED

BFAM3

[if BFAM1=1 or BFAM2=1)

Did you live with that person before you were incarcerated?

REFER TO REFERENCE CALENDAR.

1 YES

2 NO

DON'T KNOW

REFUSED

BFAM4

How many children under the age of 18 do you have? Please count all children that you consider yourself to be a parent of.

[RANGE 0-25]

DON'T KNOW

REFUSED

BFAM5

[If BFAM4 GE1]

During the six months prior to your incarceration this time, how many of your children lived with you?

REFER TO REFERENCE CALENDAR

[RANGE 1-25]

DON'T KNOW

REFUSED

[EDIT CHECK – BFAM5 CANNOT BE LARGER THAN BFAM4]

BFAM6

[If BFAM4 GE1]

Of your children under the age of 18, how many did you financially support in any way during the six months prior to your incarceration?

REFER TO REFERENCE CALENDAR.

[RANGE 1-25]

[EDIT CHECK – BFAM5 CANNOT BE LARGER THAN BFAM4]

BFAM7

[If BFAM4 GE1]

During the six months prior to your incarceration this time, were you required by a court to pay child support for any of your children under the age of 18?

1 YES

2 NO

DON'T KNOW

REFUSED

BFAM8

[If BFAM7=1]

Has the court order for child support changed while you have been incarcerated?

1 YES

2 NO

DON'T KNOW

REFUSED

BFAM9

[If BFAM7=1]

Are you currently making any child support payments?

1 YES

2 NO

DON'T KNOW

REFUSED

**DOMAIN 5: HOUSING**

BHOU1

SHOWCARD 3

The next questions ask about the six months before you were incarcerated this time. REFER TO REFERENCE CALENDAR. During this time period, did you live <B>mostly</B>...

- 1 In your own house or apartment, meaning your name was on the title, mortgage, or lease;
- 2 In someone else's house or apartment, including your parents' place;
- 3 In a residential treatment facility;
- 4 In a transitional housing facility or halfway house;
- 5 In a shelter;
- 6 On the street or you were homeless;
- 7 In no set place or you moved around a lot;
- 8 In some other place or situation?

DON'T KNOW

REFUSED

[DK AND RE SHOULD NOT BE ALLOWED IF THE INTERVIEWER PICKS ANY OTHER RESPONSE CATEGORY]

BHOU2

In the six months before you were incarcerated this time, did you pay any rent or mortgage?

1 YES

2 NO

DON'T KNOW

REFUSED

**DOMAIN 6: EMPLOYMENT**

BEMP1

Have you ever had a job working for pay?

1 YES

2 NO

DON'T KNOW

REFUSED

BEMP2

At any point during the 6 months prior to incarceration did you have a job?

1 YES

2 NO

DON'T KNOW

REFUSED

## BEMP3

How did you support yourself during those six months?

	YES	NO
A A job	1	2
B Support from your family	1	2
C Support from your friends	1	2
D A government program or public assistance	1	2
E Illegal income	1	2
F Some other type of support	1	2

[DK AND RE SHOULD BE ALLOWED FOR EACH ITEM]

## BEMP4

[if BEMP2=2]

## SHOWCARD 4

What were the **main** reasons you were not working? Please select all that apply. You...

[CODE ALL THAT APPLY]

- 1 Were ill or disabled and unable to work,
- 2 Were retired,
- 3 Were taking care of home or family,
- 4 Were going to school,
- 5 Could not find work,
- 6 Could not get transportation,
- 7 Did not want to work,
- 8 Were incarcerated,
- 9 Were too young to obtain a work permit,
- 10 Had some other reason?

DON'T KNOW

REFUSED

[DK AND RE SHOULD NOT BE ALLOWED IF THE INTERVIEWER PICKS ANY OTHER RESPONSE CATEGORY]

## BEMP5

[if BEMP2=1] How many different jobs did you have during the six months prior to incarceration?

USE REFERENCE CALENDAR.

1. 1
2. 2 or 3
3. 4 or 5
4. More than 5

DON'T KNOW

REFUSED

BEMP6

[if BEMP5 >1]

Were you working more than 1 job at the same time?

1 YES

2 NO

DON'T KNOW

REFUSED

BEMP7

[if BEMP2=1]

How many hours a week did you usually work? [IF BEMP5 >1] If you had more than one job, please count hours from all of your jobs.

[RANGE – 1 – 140]

DON'T KNOW

REFUSED

BEMP8

[if BEMP2=1]

How much did you earn per month from **before** taxes but including any tips, bonuses, or commissions?

[IF BEMP5 > 1]If you had more than one job, please include income from all of your jobs.

[RANGE – 1-999999] \$

BEMP9

[if BEMP2=1]

For your job, did you receive...

[IF BEMP5 > 1]If you had more than one job during this time period, please answer for your main job

1 Formal pay, where you received a pay stub;

2 Casual pay, where your pay was 'under the table' or 'off the books';

3 You were self-employed?

DON'T KNOW

REFUSED

BEMP10

[if BEMP2=1]

Did your job provide health insurance coverage? [IF BEMP5 > 1] If you had more than one job during this time period, please answer for your main job.

1 YES

2 NO

DON'T KNOW

REFUSED

BEMP11

[if BEMP2=1]

Did your job provide any fully paid leave, such as sick leave or vacation leave? [IF BEMP5 > 1] If you had more than one job during this time period, please answer for your main job.

1 YES

2 NO

DON'T KNOW

REFUSED

**DOMAIN 7: INCARCERATION CHARACTERISTICS AND CRIMINAL HISTORY**

Now I'd like to ask about your criminal history.

BINCAR1

How old were you the first time you were arrested?

[RANGE - 7-99]

DON'T KNOW

REFUSED

BINCAR2

How many times in your life have you been arrested?

[RANGE - 0-100]

BINCAR3

How many times in your life have you been convicted of a crime?

[RANGE - 0-100]

DON'T KNOW

REFUSED

BINCAR4

In your entire life, have you ever been locked up in a juvenile detention facility, a juvenile training school, or in any other kind of juvenile correctional facility because of committing a crime?

1 YES

2 NO

DON'T KNOW

REFUSED

BINCAR5

[IF BINCAR4 = 1]

How many times in your life have you been locked up in a juvenile detention facility, a juvenile training school, or in any other kind of juvenile correctional facility?

[RANGE - 0-100]

DON'T KNOW

REFUSED

BINCAR6

Not counting your current term of incarceration, how many times in your life have you been sent to **prison**? Do not include any time you may have spent in a juvenile facility in your answer.

[RANGE - 0-100]

DON'T KNOW

REFUSED

BINCAR7

Now I'd like to ask about your current incarceration. Are you currently serving time for a parole violation?

1 YES

2 NO

DON'T KNOW

REFUSED

BINCAR8

[IF BINCAR7=1]

Was the parole violation for a technical violation, like failing to report, a new crime, or both?

1 TECHNICAL VIOLATION

2 NEW CRIME

3 BOTH

DON'T KNOW

REFUSED

BINCAR9

[IF BINCAR7=2 OR BINCAR8=2 OR 3]

Please look at Showcard 5. What crimes were you convicted of for this term of incarceration?

Select all that apply...

	YES	NO
A Homicide	1	2
B Rape	1	2
C Other sex offense (not rape)	1	2
D Robbery	1	2
E Assault	1	2
F Burglary	1	2
G Theft	1	2
H Car theft	1	2
I Fraud or forgery	1	2
J Weapons offense	1	2
K Drug dealing	1	2
L Drug possession	1	2
M DWI or DUI	1	2
N SOME OTHER OFFENSE	1	2

[DON'T KNOW AND REFUSED SHOULD BE ALLOWED FOR ANY ITEM]

BINCAR9A

[IF BINCAR9=14]

SPECIFY OTHER OFFENSE

[50 CHARACTERS]

BINCAR10

When do you expect to be released from this term of incarceration—the term you’re serving right now?  
(MM/DD/YYYY)

[RANGE – MONTH – 01 – 12, DK, RE]

[RANGE – DAY – 01 – 31, DK, RE]

[RANGE – YEAR – 2014 – 2100]

EDIT CHECK – DATE IN BINCAR10 MUST BE LATER THAN CURRENT DATE.

BINCAR11

During this term of incarceration, how many disciplinary infractions have you received?

1 NONE

2 ONE

3 2-3

4 MORE THAN 3

DON'T KNOW

REFUSED

BINCAR12

During this term of incarceration, how many times have you been put in administrative segregation?

1 NONE

2 ONE

3 2-3

4 MORE THAN 3

DON'T KNOW

REFUSED

BINCAR13

Do you currently have a job here in this institution? Do **not** include work release.

1 YES

2 NO

DON'T KNOW

REFUSED

BINCAR14

Do you currently have a work release job?

1 YES

2 NO

DON'T KNOW

REFUSED

BINCAR15

The next questions ask how often you have talked on the phone with your family and friends during the past 90 days. REFER TO REFERENCE CALENDAR. During the past 90 days, have you talked on the phone with any of the following people? Please select all that apply.

	YES	NO	NOT APPLICABLE
A. Your spouse or intimate partner	1	2	NA
B. Your children	1	2	NA
C. Any other family members such as parents, grandparents, siblings, cousins, or other relatives	1	2	NA
D. Your friends	1	2	NA

[DON'T KNOW OR REFUSED IS ALLOWED FOR ALL OF THE ABOVE]

BINCAR16

[if BINCAR15a=1]

SHOWCARD 6

How often have you talked to your spouse/partner in the past 90 days?

- 1 ONCE
- 2 2-3 TIMES
- 3 MORE THAN 3 TIMES
- DON'T KNOW
- REFUSED

BINCAR17

[if BINCAR15B=1]

SHOWCARD 6

How often have you talked to your children in the past 90 days?

- 1 ONCE
- 2 2-3 TIMES
- 3 MORE THAN 3 TIMES
- DON'T KNOW
- REFUSED

BINCAR18

[if BINCAR15C= 1]

SHOWCARD 6

How often have you talked to your other family members in the past 90 days?

- 1 ONCE
- 2 2-3 TIMES
- 3 MORE THAN 3 TIMES
- DON'T KNOW
- REFUSED

BINCAR19

[if BINCAR15D=1]

SHOWCARD 6

How often have you talked to your friends in the past 90 days?

1 ONCE

2 2-3 TIMES

3 MORE THAN 3 TIMES

DON'T KNOW

REFUSED

BINCAR20

Now please tell me if you have received any mail, including letters or electronic messages from the same categories of people within the past 90 days. REFER TO REFERENCE CALENDAR. During the past 90 days, have you received any mail from any of the following people? Please select all that apply.

	YES	NO	NOT APPLICABLE
A. Your spouse or intimate partner	1	2	NA
B. Your children	1	2	NA
C. Any other family members such as parents, grandparents, siblings, cousins, or other relatives	1	2	NA
D. Your friends	1	2	NA

[DON'T KNOW OR REFUSED IS ALLOWED FOR ALL OF THE ABOVE]

BINCAR21

[if BINCAR20A=1]

SHOWCARD 6

How often have you received mail from your spouse/partner in the past 90 days?

1 ONCE

2 2-3 TIMES

3 MORE THAN 3 TIMES

DON'T KNOW

REFUSED

BINCAR22

[if BINCAR20B=1]

SHOWCARD 6

How often have you received mail from your children in the past 90 days?

1 ONCE

2 2-3 TIMES

3 MORE THAN 3 TIMES

DON'T KNOW

REFUSED

BINCAR23

[if BINCAR20C=1]

SHOWCARD 6

How often have you received mail from your other family members in the past 90 days?

- 1 ONCE
- 2 2-3 TIMES
- 3 MORE THAN 3 TIMES
- DON'T KNOW
- REFUSED

BINCAR24

[if BINCAR20D=1]

SHOWCARD 6

How often have you received mail from your friends in the past 90 days?

- 1 ONCE
- 2 2-3 TIMES
- 3 MORE THAN 3 TIMES
- DON'T KNOW
- REFUSED

BINCAR25

Now please tell me if you have received any in-person visits from the same categories of people within the past 90 days. REFER TO REFERENCE CALENDAR. During the past 90 days, have you received any personal visits from any of the following people? Please select all that apply.

	YES	NO	NOT APPLICABLE
A. Your spouse or intimate partner	1	2	NA
B. Your children	1	2	NA
C. Any other family members such as parents, grandparents, siblings, cousins, or other relatives	1	2	NA
D. Your friends	1	2	NA
[DON'T KNOW OR REFUSED IS ALLOWED FOR ALL OF THE ABOVE]			

BINCAR26

[if BINCAR25A=1]

SHOWCARD 6

How often have you received personal visits from your spouse/partner in the past 90 days?

- 1 ONCE
- 2 2-3 TIMES
- 3 MORE THAN 3 TIMES
- DON'T KNOW
- REFUSED

BINCAR27

[if BINCAR25B=1]

SHOWCARD 6

How often have you received personal visits from your children in the past 90 days?

1 ONCE

2 2-3 TIMES

3 MORE THAN 3 TIMES

DON'T KNOW

REFUSED

BINCAR28

[if BINCAR25C=1]

SHOWCARD 6

How often have you received personal visits from your other family members in the past 90 days?

1 ONCE

2 2-3 TIMES

3 MORE THAN 3 TIMES

DON'T KNOW

REFUSED

BINCAR29

[if BINCAR25D=1]

SHOWCARD 6

How often have you received personal visits from your friends in the past 90 days?

1 ONCE

2 2-3 TIMES

3 MORE THAN 3 TIMES

DON'T KNOW

REFUSED

BINCAR30

Finally, I'd like to ask about video visitation. Please tell me if you have had video visits with the same categories of people within the past 90 days. REFER TO REFERENCE CALENDAR. During the past 90 days, have you had video visits with any of the following people? Please select all that apply.

	YES	NO	NOT APPLICABLE
A. Your spouse or intimate partner	1	2	NA
B. Your children	1	2	NA
C. Any other family members such as parents, grandparents, siblings, cousins, or other relatives	1	2	NA
D. Your friends	1	2	NA
[DON'T KNOW OR REFUSED IS ALLOWED FOR ALL OF THE ABOVE]			

BINCAR31

[If BINCAR30A=1]

SHOWCARD 6

How often have you had video visits with your spouse/partner in the past 90 days?

1 ONCE

2 2-3 TIMES

3 MORE THAN 3 TIMES

DON'T KNOW

REFUSED

BINCAR32

[If BINCAR30B=1]

SHOWCARD 6

How often have you had video visits with your children in the past 90 days?

1 ONCE

2 2-3 TIMES

3 MORE THAN 3 TIMES

DON'T KNOW

REFUSED

BINCAR33

[if BINCAR30C=1]

SHOWCARD 6

How often have you had video visits with your other family members in the past 90 days?

1 ONCE

2 2-3 TIMES

3 MORE THAN 3 TIMES

DON'T KNOW

REFUSED

BINCAR34

[if BINCAR30D=1]

SHOWCARD 6

How often have you had video visits with your friends in the past 90 days?

1 ONCE

2 2-3 TIMES

3 MORE THAN 3 TIMES

DON'T KNOW

REFUSED

**DOMAIN 8: PROGRAM OPERATIONS AND SERVICES****BPOS1**

Next, I'd like to ask about programs and services you may have received during this current term of incarceration. REFER TO REFERENCE DATE AND POINT TO DATE THAT CURRENT INCARCERATION BEGAN. During this term of incarceration, have you received a needs assessment? A needs assessment is where staff ask you questions to figure out what kinds of services or programs could help you, such as drug treatment, counseling, health care, vocational training, or education.

1 YES

2 NO

DON'T KNOW

REFUSED

**BPOS2**

During this term of incarceration, have you met with a specific person from the institution who talks with you about issues or needs you have, tries to get you into services or programs, helps you get benefits or assistance, and monitors your progress? These services are called case management and the person who provides them could be called a social worker, case manager, or case worker, or it could be your parole or probation officer.

1 YES

2 NO

DON'T KNOW

REFUSED

**BPOS3**

[If BPOS2=1]

Who has provided you with case management during this term of incarceration?

(SELECT ALL THAT APPLY):

	YES	NO
A A parole or probation officer from within the correctional facility	1	2
B A parole or probation officer from <b>outside</b> the correctional facility	1	2
C A social worker, case manager, or case worker who is not a parole or probation officer	1	2

[DON'T KNOW AND REFUSED SHOULD BE ALLOWED FOR ANY ITEM]

**BPOS4**

[If BPOS2=1]

Is a staff member following up to make sure you actually get the services that you were referred to, or to monitor your progress in the programs or services that you are receiving?

1 YES

2 NO

DON'T KNOW

REFUSED

BPOS5

During this term of incarceration, have you participated in any programs or classes that were designed to help prepare you for release?

1 YES

2 NO

DON'T KNOW

REFUSED

BPOS6

Has a reentry plan been developed for you?

1 YES

2 NO

DON'T KNOW

REFUSED

BPOS7

Have you met with the person who will be your parole or probation officer after you are released?

1 YES

2 NO

NOT APPLICABLE

DON'T KNOW

REFUSED

BPOS8

Have you met with any other staff from outside of the prison to help plan for your release?

1 YES

2 NO

DON'T KNOW

REFUSED

BPOS9

During this term of incarceration, have you worked with anyone else to help plan for your release?

1 YES

2 NO

DON'T KNOW

REFUSED

BPOS10

Think about the people working with you to plan for your release. Have they involved any of your family members in this process?

1 YES

2 NO

DON'T KNOW

REFUSED

BPOS11

[If BFAM7=1]

During this term of incarceration, have you received help with modifying any child support you owe?

1 YES

2 NO

DON'T KNOW

REFUSED

BPOS12

[If BFAM4 GE 1]

During this term of incarceration, have you received help with modifying custody arrangements for your children?

1 YES

2 NO

DON'T KNOW

REFUSED

BPOS13

During this term of incarceration, have you received help arranging for public financial assistance after your release, such as disability benefits or welfare?

1 YES

2 NO

DON'T KNOW

REFUSED

BPOS14

Have you received help arranging for public healthcare assistance after your release, such as Medicare or Medicaid?

1 YES

2 NO

DON'T KNOW

REFUSED

BPOS15

Have you received legal assistance?

1 YES

2 NO

DON'T KNOW

REFUSED

BPOS16

Have you received spiritual, religious, or emotional support from faith-based providers? Remember, we are still talking about services during this term of incarceration.

1 YES

2 NO

DON'T KNOW

REFUSED

**BPOS17**

Have you been connected with a mentor from the faith-based community?

1 YES

2 NO

DON'T KNOW

REFUSED

**BPO18**

Have you received other services from faith-based providers? For example, faith-based providers may provide services that are not religious or spiritual services and could include things like housing or employment assistance.

1 YES

2 NO

DON'T KNOW

REFUSED

**BPOS19**

Have you received help getting documents necessary for employment, such as your birth certificate, social security card, or photo identification card?

1 YES

2 NO

DON'T KNOW

REFUSED

**BPOS20**

Have you received help with money management?

1 YES

2 NO

DON'T KNOW

REFUSED

**BPOS21**

Have you received help with other life skills?

1 YES

2 NO

DON'T KNOW

REFUSED

**BPOS22**

Have you received help with working on personal relationships?

1 YES

2 NO

DON'T KNOW

REFUSED

BPOS23

Have you received training on how to change your attitudes related to criminal thinking?

1 YES

2 NO

DON'T KNOW

REFUSED

BPOS24

Have you received any parenting classes? Remember, we are still talking about services during this term of incarceration.

1 YES

2 NO

DON'T KNOW

REFUSED

BPOS25

Have you participated in any services or programs for survivors of sexual or physical abuse?

1 YES

2 NO

DON'T KNOW

REFUSED

BPOS26

Have you received any mentoring services? Please don't count any mentoring from a faith-based community member.

1 YES

2 NO

DON'T KNOW

REFUSED

BPOS27

Have you participated in any anger management programs? 1 YES

2 NO

DON'T KNOW

REFUSED

BPOS28

Have you received any educational services, such as GED or basic education classes?

1 YES

2 NO

DON'T KNOW

REFUSED

BPOS29

Have you received help with finding or paying for transportation for when you are released?

1 YES

2 NO

DON'T KNOW

REFUSED

BPOS30

Have you received help with finding or keeping a place to live for when you are released?

1 YES

2 NO

DON'T KNOW

REFUSED

BPOS31

Have you received help getting a driver's license for when you are released?

1 YES

2 NO

DON'T KNOW

REFUSED

BPOS32

Have you received help with accessing resources such as clothing banks and food pantries for when you are released?

1 YES

2 NO

DON'T KNOW

REFUSED

BPOS33

Have you received any employment services or assistance with finding a job for when you are released?

1 YES

2 NO

DON'T KNOW

REFUSED

BPOS34

Have you participated in any programs to help prepare you for employment, such as developing resumes or working on interviewing skills?

1 YES

2 NO

DON'T KNOW

REFUSED

BPOS35

Have you participated in any trade or job training programs? Remember, we are still talking about services during this term of incarceration.

- 1 YES
- 2 NO
- DON'T KNOW
- REFUSED

BPOS36

Have you received any vocational and technical certifications or licenses?

- 1 YES
- 2 NO
- DON'T KNOW
- REFUSED

BPOS37

Have you received any medical treatment or physical health care?

- 1 YES
- 2 NO
- DON'T KNOW
- REFUSED

BPOS38

Have you received any **dental** services?

- 1 YES
- 2 NO
- DON'T KNOW
- REFUSED

BPOS39

Have you received any prescription medicine for a physical health condition you have had? If you do not have a physical health condition requiring prescription medicine, you can say "Not applicable"

- 1 YES
- 2 NO
- 3 NOT APPLICABLE – NO PHYSICAL HEALTH CONDITION
- DON'T KNOW
- REFUSED

BPOS40

Have you received mental health treatment or health care for emotional problems?

- 1 YES
- 2 NO
- DON'T KNOW
- REFUSED

BPOS41

Have you received any prescription medicine for a mental health condition you have had? If you do not have a mental health condition requiring prescription medicine, you can say "Not applicable"

- 1 YES
- 2 NO
- 3 NOT APPLICABLE – NO MENTAL HEALTH CONDITION
- DON'T KNOW
- REFUSED

BPOS42

**Before** you were incarcerated this time, had you ever received treatment for a mental health problem?

- 1 YES
- 2 NO
- DON'T KNOW
- REFUSED

BPOS43

SHOWCARD 7

Which of the following conditions have you ever received care for from a doctor, counselor, or other health professional? Please select all that apply.

	YES	NO
A. Alcohol abuse/dependence	1	2
B. Anxiety disorder (generalized anxiety)	1	2
C. Attention deficit/hyperactivity disorder (ADD/ADHD)	1	2
D. Bipolar disorder (manic depression)	1	2
E. Conduct disorder	1	2
F. Depression/dysthymia	1	2
G. Drug abuse/dependence	1	2
H. Obsessive compulsive disorder	1	2
I. Oppositional defiant disorder (ODD)	1	2
J. Post-traumatic stress disorder (PTSD)	1	2
K. Phobia (social or specific)	1	2
L. Schizophrenia	1	2
M. Some other problem/diagnosis	1	2

[DON'T KNOW AND REFUSED SHOULD BE ACCEPTED FOR ANY ITEM]

## BPOS44

[if any conditions in BPOS50 = 1. ASK ONLY FOR ITEMS ANSWERED 1]

Are you currently receiving treatment for these problems? If so, which ones?

	YES	NO
A. Alcohol abuse/dependence	1	2
B. Anxiety disorder (generalized anxiety)	1	2
C. Attention deficit/hyperactivity disorder (ADD/ADHD)	1	2
D. Bipolar disorder (manic depression)	1	2
E. Conduct disorder	1	2
F. Depression/dysthymia	1	2
G. Drug abuse/dependence	1	2
H. Obsessive compulsive disorder	1	2
I. Oppositional defiant disorder (ODD)	1	2
J. Post-traumatic stress disorder (PTSD)	1	2
K. Phobia (social or specific)	1	2
L. Schizophrenia	1	2
M. Some other problem/diagnosis	1	2

[DON'T KNOW AND REFUSED SHOULD BE ACCEPTED FOR ANY ITEM]

## BPOS45

During the six months prior to your incarceration this time, about how many days were you hospitalized or in an intensive outpatient program for emotional or psychological problems? REFER TO REFERENCE CALENDAR

NUMBER OF DAYS: (RANGE 0 – 180)

DON'T KNOW

REFUSED

## BPOS46

Now I'm going to ask about any drug or alcohol services you may have received. During this term of incarceration, have you received any professional treatment for drugs or alcohol, such as treatment in a residential facility, group therapy, or individual counseling?

1 YES

2 NO

DON'T KNOW

REFUSED

## BPOS47

During this term of incarceration, have you received any other support or services for drugs or alcohol, such as Alcoholics Anonymous (AA), Narcotics Anonymous (NA), or drug education classes or programs?

1 YES

2 NO

DON'T KNOW

REFUSED

BPOS48

**Before** you were incarcerated this time, did you ever receive professional treatment for drugs or alcohol, such as treatment in a residential facility, group therapy, or individual counseling?

1 YES

2 NO

DON'T KNOW

REFUSED

BPOS49

How many times in your life before you were incarcerated this time did you start a drug or alcohol treatment program?

[RANGE – 0 – 90]

BPOS 50

SHOWCARD 8

Now I'd like to ask about areas of your life that you may need help with. Please tell me how much you agree with the following statements.

You would like more employment services, such as vocational training, job readiness programs, or certification programs. Would you say...

1 Strongly agree

2 Agree

3 Disagree

4 Strongly disagree

DON'T KNOW

REFUSED

BPOS 51

You would like more educational programs, such as GED, basic education, or higher education classes.

1 STRONGLY AGREE

2 AGREE

3 DISAGREE

4 STRONGLY DISAGREE

DON'T KNOW

REFUSED

BPOS 52

You would like more alcohol or drug treatment services.

1 STRONGLY AGREE

2 AGREE

3 DISAGREE

4 STRONGLY DISAGREE

DON'T KNOW

REFUSED

BPOS 53

You would like more mental health treatment or health care for emotional problems.

- 1 STRONGLY AGREE
- 2 AGREE
- 3 DISAGREE
- 4 STRONGLY DISAGREE
- DON'T KNOW
- REFUSED

BPOS 54

You would like more training on how to change attitudes related to criminal thinking.

- 1 STRONGLY AGREE
- 2 AGREE
- 3 DISAGREE
- 4 STRONGLY DISAGREE
- DON'T KNOW
- REFUSED

BPOS 55

You would like more help with housing and accessing resources like clothing banks and food pantries for when you are released.

- 1 STRONGLY AGREE
- 2 AGREE
- 3 DISAGREE
- 4 STRONGLY DISAGREE
- DON'T KNOW
- REFUSED

**DOMAIN 9: PHYSICAL AND MENTAL HEALTH**

BPMH1

The next questions ask about your health. In your life, how many times have you had a head injury, such as from a fall, car crash, sports injury, blast, or gunshot?

[RANGE - 0-99 times]

BPMH2

[if BPMH1 GE1]

How old were you when the first head injury happened?

[RANGE - 0-99 years]

BPMH3

[if BPMH1 GE1]

How old were you when the last head injury happened?

[RANGE - 0-99 years]

BPMH4

[if BPMH1 GE1]

For how many of these injuries did you receive medical attention, including being treated in an emergency department, doctor's office, or clinic?

[RANGE - 0-99]

BPMH5

[if BPMH1 GE1]

For how many of these injuries did you become disoriented, see stars, feel dazed or confused, lose your memory of the events, or **nearly** black out? The next question asks about injuries where you did lose consciousness or get knocked out.

[RANGE - 0-99]

BPMH6

[if BPMH1 GE1]

For how many of these injuries were you knocked out or did you lose consciousness?

[RANGE - 0-99]

BPMH7

[If BPMH6 GE1]

For how many of these injuries were you unconscious for more than 30 minutes?

[RANGE -0-99]

BPMH8

Now I'm going to ask you some questions about your current health. Would you say that in general your health is excellent, very good, good, fair, or poor?

1 EXCELLENT

2 VERY GOOD

3 GOOD

4 FAIR

5 POOR

DON'T KNOW

REFUSED

BPMH9

Now thinking about your physical health, which includes physical illness and injury, for how many days during the past 30 days was your physical health not good?

[RANGE -0-30]

BPMH10

Now thinking about your mental health, which includes stress, depression, and problems with emotions, for how many days during the past 30 days was your mental health not good?

[RANGE -0-30]

BPMH11

During the past 30 days, for about how many days did poor physical or mental health keep you from doing your usual activities, such as self-care, work, or recreation?

[RANGE -0-30]

BPMH12

These next questions are about physical, mental, or emotional problems or limitations you may have in your daily life. Are you **limited** in any way in any activities because of any impairment or health problem?

- 1 YES
- 2 NO
- DON'T KNOW
- REFUSED

BPMH13

[IF BPMH12=1]

What is the <B>major</B> impairment or health problem that limits your activities?

FI: DO NOT READ. CODE ONLY ONE CATEGORY.

- 1 ARTHRITIS/RHEUMATISM
- 2 BACK OR NECK PROBLEM
- 3 FRACTURES, BONE/JOINT INJURY
- 4 WALKING PROBLEM
- 5 LUNG/BREATHING PROBLEM
- 6 HEARING PROBLEM
- 7 EYE/VISION PROBLEM
- 8 HEART PROBLEM
- 9 STROKE PROBLEM
- 10 HYPERTENSION/HIGH BLOOD PRESSURE
- 11 DIABETES
- 12 CANCER
- 13 DEPRESSION/ANXIETY/EMOTIONAL PROBLEM
- 14 OTHER IMPAIRMENT/PROBLEM
- DON'T KNOW
- REFUSED

BPMH14

[IF BPMH12=1]

For <B> how long</B> have your activities been limited because of your major impairment or health problem?

NUMBER:

SPECIFY THE UNIT OF TIME

- 1 DAYS
- 2 WEEKS
- 3 MONTHS
- 4 YEARS

BPMH15

[IF BPMH12=1]

Because of any impairment or health problem, do you need the help of other persons with your <B>personal care</B> needs, such as eating, bathing, dressing, or getting around the house?

1 YES

2 NO

DON'T KNOW

REFUSED

BPMH16

[IF BPMH12=1]

Because of any impairment or health problem, do you need the help of other persons in handling your <B>routine</B> needs, such as everyday household chores, doing necessary business, shopping, or getting around for other purposes?

1 YES

2 NO

DON'T KNOW

REFUSED

BPMH17

During the past 30 days, for about how many days did <B>pain</B> make it hard for you to do your usual activities, such as self-care, work, or recreation?

[RANGE - 0-30]

BPMH18

During the past 30 days, for about how many days have you felt <B>sad, blue, or depressed</B>?

[RANGE - 0-30]

BPMH19

During the past 30 days, for about how many days have you felt <B>worried, tense, or anxious</B>?

[RANGE - 0-30]

BPMH20

During the past 30 days, for about how many days have you felt you did <B>not </B> get <B>enough rest or sleep</B>?

[RANGE - 0-30]

BPMH21

During the past 30 days, for about how many days have you felt <B>very healthy and full of energy</B>?  
(0-30)

[RANGE – 0 – 30]

BPMH22

In your life, have you ever had any experience that was so frightening, horrible, or upsetting, that, **in the past month, you...**

have had nightmares about it or thought about it when you did not want to?

1 YES

2 NO

DON'T KNOW

REFUSED

BPMH23

tried hard not to think about it or went out of your way to avoid situations that reminded you of it? 1 YES

2 NO

DON'T KNOW

REFUSED

BPMH24

were constantly on guard, watchful, or easily startled?

1 YES

2 NO

DON'T KNOW

REFUSED

BPMH25

felt numb or detached from others, activities, or your surroundings?

1 YES

2 NO

DON'T KNOW

REFUSED

## **DOMAIN 10: ACASI**

### **ACASI Tutorial**

#### **ACASI1**

[NO AUDIO REQUIRED]

You will complete the rest of this interview on your own using the computer and headphones. Before you start, we'll go through a short practice session together so you can learn how to use this computer to answer the interview questions. After this introduction, I will move away from the computer and will not be able to see your answers so that you can take the interview in privacy.

MOVE COMPUTER SO RESPONDENT CAN SEE THE SCREEN.

For each question, the answers will appear on the screen. The answer will correspond to a number. To choose an answer you will need to press the number.

PRESS **ENTER** BUTTON.

After you choose your answer, you must touch the **ENTER** button on the right side of the keyboard. The ENTER button is the large button with a left hand arrow on it. PRESS THE **ENTER** BUTTON.

#### **ACASI2**

[NO AUDIO REQUIRED]

If you want to go back to the previous question, use the up arrow on your keyboard. You can use the up arrow to go back to the previous question and change the answer. You can also use the up arrow to see your previous answer without changing it.

If you don't know the answer to the question, press the [F3] key and you will go on to the next question. POINT OUT AND PRESS THE [F3] KEY.

#### **ACASI3**

[NO AUDIO REQUIRED]

If you don't want to answer the question, you can press the [F4] key [POINT TO THE F4 KEY] and you will go on to the next question. PRESS **[F4]** KEY.

#### **ACASI4**

[NO AUDIO REQUIRED]

If you want the computer to read the question again, you can press the [F10] button [POINT TO [F10] BUTTON].

**ACAS15**

[NO AUDIO REQUIRED]

You can adjust the volume here [DEMONSTRATE VOLUME ADJUSTMENT, ON THE HEADPHONE CORD]. Or if you want to turn the volume off you can adjust it on your headphones or take your headphones off.

Please put on your headphones. When you are ready, let me know.

MOVE COMPUTER SO RESPONDENT CAN USE IT. ONCE RESPONDENT HAS HEADPHONES ON, PRESS THE **ENTER** BUTTON SO RESPONDENT CAN BEGIN PRACTICE SESSION.

**PLAY AUDIO FOR ALL FOLLOWING SCREENS**

**ACAS16**

This screen will play while you adjust the volume in your headphones. When you have adjusted the volume to a level that is comfortable to you, touch the **ENTER** button to continue with the practice session.

**ACAS17**

Welcome to RTI's self-interviewing system, which lets you control the interview and answer in complete privacy. In this system, you can read the questions on the computer screen and hear them read through the headphones.

First, you will learn how to use the system and complete some practice questions. You will learn how to enter answers and how to back-up if you make a mistake and want to change an answer.

If you would like to just see the questions on the screen, you can turn off the voice on your headphones or take them off.

Touch the large **ENTER** button. The ENTER button is the one with an arrow pointing to the left.

**ACAS18**

After you hear the question, you will hear the possible answers. To answer the question, you simply pick the number associated with your answer and then press the ENTER button.

Do you like ice cream?

*For Yes, press 1*

*For No, press 2*

**ACAS19**

The last question was a Yes-No question. Other questions will have more answers to choose from, and you will pick your answer from a list.

I like pepperoni pizza. Would you say you strongly agree, agree, disagree or strongly disagree? Pick the number that best fits you and press the ENTER button.

*For Strongly agree, press 1*

*For Agree, press 2*

*For Disagree, press 3*

*For Strongly Disagree, press 4*

**ACASI10**

For some questions you will enter your answer using the number keys on the keyboard. Try using the number keys to answer the question below. If you need to change your answer press the delete key to remove what you have already entered and then put in a new answer.

How old were you the first time you were arrested?

NUMBER: \_\_\_\_\_ [RANGE: 0 – 999]

**ACASI11**

You can tell the computer to repeat a question by touching the **[F10]** button. Try this now.

How many times did you listen to this question?

*I have listened to this screen more than once.*

*I have only listened to this screen one time*

**ACASI12**

Some questions will ask about the 30 days prior to this incarceration. Remember that you can use your reference calendar if you want to.

PRESS THE ENTER KEY TO CONTINUE.

**ACASI13**

If you have any questions, ask your interviewer now. If not, tell the interviewer you are ready to begin and he or she will move away from the computer. Press the ENTER key when you are ready to begin.

**BACAS1**

Are you a U.S. Citizen?

1 Yes

2 No

DON'T KNOW

REFUSED

**BACAS2**

Now I'm going to ask you about your use of alcohol and other drugs. Remember that your answers will be kept completely confidential. Our data security procedures will prevent anyone outside the study from finding out what your answers were. Have you ever, even once, had a drink or any type of alcoholic beverage?

1 Yes

2 No

DON'T KNOW

REFUSED

**BACAS3**

[IF BACAS2=1]

How old were you the **<B>first</B>** time you drank alcohol?

[RANGE – 0 – 99]

BACAS4

[if BACAS2=1]

Did you drink alcohol in the 30 days before this incarceration? It may be helpful to look at the reference calendar for this question.

1 Yes

2 No

DON'T KNOW

REFUSED

BACAS5

[BACAS2=1]

Did you drink alcohol to the point of being drunk in the 30 days before this incarceration?

1 Yes

2 No

DON'T KNOW

REFUSED

BACAS6

Now I'm going to ask about your use of prescription drugs...We are interested in knowing whether you have used the following medicines without a prescription or for other reasons than were prescribed, or in larger amounts, or more often than your doctor ordered.

Look at Showcard 9

Have you ever, even once, used prescription <B>stimulants</B>, such as Ritalin, Dexedrine, Adderall, diet pills, or Benzedrine, without a prescription or for other reasons than were prescribed, or in larger amounts, or more often than your doctor ordered?

1 Yes

2 No

DON'T KNOW

REFUSED

BACAS7

[if BACAS6=1]

How old were you the <B>first</B> time you used stimulants?

[RANGE – 0 – 99]

BACAS8

[if BACAS6=1]

Did you use stimulants in the 30 days before this incarceration?

1 Yes

2 No

DON'T KNOW

REFUSED

BACAS9

Please look at Showcard 10

Have you ever, even once, used prescription<b> pain relievers</b>, including opioids and morphine derivatives such as Vicodin, OxyContin, codeine, morphine, without a prescription or for other reasons than were prescribed, or in larger amounts, or more often than your doctor ordered?

1 Yes

2 No

DON'T KNOW

REFUSED

BACAS10

[if BACAS9=1]

How old were you the <B>first</B> time you used pain relievers or opiates?

[RANGE – 0 – 99]

BACAS11

[if BAAS9=1]

Did you use pain relievers or opiates in the 30 days before this incarceration? Every day; A few days per week, but not daily; A few days per month; Not at all?

1 Every day

2 A few days per week but not daily

3 A few days per month

4 Not at all

DON'T KNOW

REFUSED

BACAS12

Please look at Showcard 11.

Now I'm going to ask about your use of other prescription drugs that you have used without a prescription or for other reasons than were prescribed, or in larger amounts, or more often than your doctor ordered. This includes <B>sedatives</B>, such as barbiturates, sleeping pills, qualudes, or Phenobarbital; <B>tranquilizers</B>, such as Xanax, Valium, nerve pills, or tranks; or <B>methadone</B>, such as Street Methodone or Amidone . Have you ever, even once, used any of these other prescription drugs without a prescription or for other reasons than were prescribed, or in larger amounts, or more often than your doctor ordered?

1 Yes

2 No

DON'T KNOW

REFUSED

BACAS13

[if BACAS12=1]

How old were you the **first** time you used any of these other prescription drugs?

[RANGE – 0 -99]

BACAS14

[If BACAS12=1]

Did you use any of these other prescription drugs in the 30 days before this incarceration?

1 Yes

2 No

DON'T KNOW

REFUSED

BACAS15

Please look at Showcard 12.

Now I am going to ask about your recreational use of other drugs. I will be asking about marijuana, cocaine, heroin, amphetamines, and other drugs. Have you ever, even once, used <B>marijuana or hashish</B>? Marijuana is also called pot, grass, or hash. Please do not count synthetic marijuana, like Spice, here.

1 Yes

2 No

DON'T KNOW

REFUSED

BACAS16

[If BACAS15=1]

How old were you the <B>first</B> time you used marijuana or hashish?

[RANGE – 0 – 99]

BACAS17

[if BACAS15=1]

Did you use marijuana or hashish in the 30 days before this incarceration?

1 Yes

2 No

DON'T KNOW

REFUSED

BACAS18

Please look at Showcard 13.

Have you ever, even once, used non-prescription <B>amphetamines or methamphetamine</B>? This includes speed, meth, crystal meth, ice, and chalk.

1 Yes

2 No

DON'T KNOW

REFUSED

BACAS19

[If BACAS18=1]

How old were you the <B>first</B> time you used non-prescription amphetamines or methamphetamine?

[RANGE – 0 – 99]

BACAS20

[If BACAS18=1]

Did you use non-prescription amphetamines or methamphetamine in the 30 days before this incarceration?

1 Yes

2 No

DON'T KNOW

REFUSED

BACAS21

Please look at Showcard 14.

Have you ever, even once, used <B>cocaine</B>? This includes cocaine in all forms, such as powder cocaine, crack cocaine, free base, or coco paste.

1 Yes

2 No

DON'T KNOW

REFUSED

BACAS22

[If BACAS21=1]

How old were you the <B>first</B> time you used cocaine?

[RANGE – 0-99]

BACAS23

[If BACAS21=1]

Did you use cocaine in the 30 days before this incarceration?

1 Yes

2 No

DON'T KNOW

REFUSED

BACAS24

Please look at Showcard 15.

Have you ever, even once, used <B>heroin or opium</B>, such as Big H, Black Tar, Chiva, Hell Dust, Horse, Negra, and Thunder? This includes smoking, sniffing, snorting, and injecting heroin.

1 Yes

2 No

DON'T KNOW

REFUSED

BACAS25

[If BACAS24=1]

How old were you the <B>first</B> time you used heroin?

[RANGE – 0 – 99]

BACAS26

[If BACAS24=1]

Did you use heroin in the 30 days before this incarceration?

1 Yes

2 No

DON'T KNOW

REFUSED

BACAS27

Please look at Showcard 16.

Have you ever, even once, used other drugs? This includes <B>synthetic marijuana</B>, such as Spice or K2; <B>club drugs</B>, including Ecstasy, Molly, MDMA, GHB, or Rohypnol; <B>hallucinogens</B> such as LSD, acid, PCP, angel dust, peyote; mescaline; magic mushrooms, or psilocybin; <B>inhalants</B> such as amyl nitrite, "poppers," "rush," correction fluid, lighter fluid, glue, toluene, halothane, paint solvents, butane or propane, nitrous oxide or "whippets," magic markers, spray paints, and other aerosol sprays such as non-stick cooking spray, hair spray, asthma spray, or air fresheners ; or <B>other drugs</B>, such as Khat, Salvia, DXM, bath salts, DMT, 2C, or BZP?

1 Yes

2 No

DON'T KNOW

REFUSED

BACAS28

[If BACAS24=1]

How old were you the <B>first</B> time you used any of these other drugs?

[RANGE – 0 – 99]

BACAS29

[if BACAS24=1]

Did you use any of these other drugs in the 30 days before this incarceration?

1 Yes

2 No

DON'T KNOW

REFUSED

BACAS30

The next questions ask about the 12 months before you were incarcerated. Please look at the reference calendar to think about what was happening in your life during this time period. During the 12 months before you were incarcerated, did you use larger amounts of drugs or use them for a longer time than you planned or intended?

1 Yes

2 No

DON'T KNOW

REFUSED

BACAS31

Did you try to cut down on your drug use but were unable to do it?

1 Yes

2 No

DON'T KNOW

REFUSED

BACAS32

Did you spend a lot of time getting drugs, using them, or recovering from their use?

1 Yes

2 No

DON'T KNOW

REFUSED

BACAS33

Did you get so high or sick from drugs that it kept you from doing work, going to school, or caring for children?

1 Yes

2 No

DON'T KNOW

REFUSED

BACAS34

Did you get so high or sick from drugs that it caused an accident or put you or others in danger?

1 Yes

2 No

DON'T KNOW

REFUSED

BACAS35

Did you spend less time at work, school, or with friends so that you could use drugs?

1 Yes

2 No

DON'T KNOW

REFUSED

BACAS36

Did your drug use cause emotional or psychological problems?

1 Yes

2 No

DON'T KNOW

REFUSED

BACAS37

Did your drug use cause problems with family, friends, work or police?

1 Yes

2 No

DON'T KNOW

REFUSED

BACAS38

Did your drug use cause physical health or medical problems?

1 Yes

2 No

DON'T KNOW

REFUSED

BACAS39

Did you increase the amount of a drug you were taking so that you could get the same effects as before?

1 Yes

2 No

DON'T KNOW

REFUSED

BACAS40

Did you ever keep taking a drug to avoid withdrawal symptoms or keep from getting sick?

1 Yes

2 No

DON'T KNOW

REFUSED

BACAS41

Did you get sick or have withdrawal symptoms when you quit or missed taking a drug?

1 Yes

2 No

DON'T KNOW

REFUSED

BACAS42

Next, I'd like to ask about physical violence you may have experienced during the six months prior to your incarceration this time. It may be helpful to look at the reference calendar to remember what was going on in your life during this time. During the six months prior to your incarceration, how often . . .

...were you threatened with being hit by a fist or anything else that could hurt you?

1 Never

2 Once or twice

3 Three or more times

DON'T KNOW

REFUSED

BACAS43

...did you have anything thrown at you that could hurt you?

- 1 Never
- 2 Once or twice
- 3 Three or more times

DON'T KNOW

REFUSED

BACAS44

...were you pushed, grabbed, or shoved?

- 1 Never
- 2 Once or twice
- 3 Three or more times

DON'T KNOW

REFUSED

BACAS45

...were you slapped, kicked, bitten, or hit with a fist?

- 1 Never
- 2 Once or twice
- 3 Three or more times

DON'T KNOW

REFUSED

BACAS46

...were you threatened with a weapon or was a weapon used on you?

- 1 Never
- 2 Once or twice
- 3 Three or more times

DON'T KNOW

REFUSED

BACAS47

...did you require medical attention for violent acts directed at you by others?

- 1 Never
- 2 Once or twice
- 3 Three or more times

DON'T KNOW

REFUSED

BACAS48

During the six months prior to your incarceration this time, how often did . . .

...<B>you</B> threaten to hit someone with a fist or anything else that could hurt them?

- 1 Never
- 2 Once or twice
- 3 Three or more times
- DON'T KNOW
- REFUSED

BACAS49

...<B>you</B> throw anything at someone that could hurt them?

- 1 Never
- 2 Once or twice
- 3 Three or more times
- DON'T KNOW
- REFUSED

BACAS50

...<B>you</B> push, grab, or shove someone?

- 1 Never
- 2 Once or twice
- 3 Three or more times
- DON'T KNOW
- REFUSED

BACAS51

...<B>you</B> slap, kick, bite, or hit someone with a fist?

- 1 Never
- 2 Once or twice
- 3 Three or more times
- DON'T KNOW
- REFUSED

BACAS52

...<B>you</B> threaten to use or use a weapon on someone?

- 1 Never
- 2 Once or twice
- 3 Three or more times
- DON'T KNOW
- REFUSED

BACAS53

Are you a member of a gang now?

1 Yes

2 No

DON'T KNOW

REFUSED

BACAS54

[if BACAS153=1]

Please tell me how much you agree or disagree with these next couple of statements. You would like to get out of your gang. Do you strongly agree, agree, disagree, or strongly disagree with that statement?

1 Strongly agree

2 Agree

3 Disagree

4 Strongly disagree

DON'T KNOW

REFUSED

BACAS55

[If BACAS153=1]

You would be able to leave your gang if you wanted to.

1 Strongly agree

2 Agree

3 Disagree

4 Strongly disagree

DON'T KNOW

REFUSED

BACAS56

Thinking back to the six months before you were incarcerated this time, had anyone you were living with at that time ever been in jail, prison, or some other correctional institution?

1 Yes

2 No

DON'T KNOW

REFUSED

BACAS57

Did anyone you were living with during the six months before your incarceration use illegal drugs?

1 Yes

2 No

DON'T KNOW

REFUSED

BACAS58

During the six months before your incarceration, did you support yourself at all with illegal income?

1 Yes

2 No

DON'T KNOW

REFUSED

BACAS59

[IF BACAS58 = 1]

How much of your income during those six months came from illegal activity?

1. All

2. About three-fourths

3. About one half

4. About one-quarter

5. None

DON'T KNOW

REFUSED

BACAS60

Please think about the people you spent the most time with during the 6 months before your incarceration, other than family members. How many of those people were employed?

1. None

2. Few

3. Half

4. Most

DON'T KNOW

REFUSED

BACAS61

How many of them have ever served time in a correctional facility, such as a jail, prison, or juvenile correctional facility?

1. None

2. Few

3. Half

4. Most

DON'T KNOW

REFUSED

BACAS62

How many were taking illegal drugs regularly?

1. None

2. Few

3. Half

4. Most

DON'T KNOW

REFUSED

BACAS63

How many were gang members?

1. None
  2. Few
  3. Half
  4. Most
- DON'T KNOW  
REFUSED

BACAS64

How often did these people convince you to do things you know you should not do?

1. Never
  2. Sometimes
  3. Often
- DON'T KNOW  
REFUSED

BACAS65

Other than yourself, has anyone in your family ever been convicted of a crime?

- 1 Yes
  - 2 No
- DON'T KNOW  
REFUSED

BACAS66

Other than any problems you may have had, has anyone in your family ever had problems with drugs or alcohol?

- 1 Yes
  - 2 No
- DON'T KNOW  
REFUSED

BACAS67

Has anyone in your family ever been in a gang?

- 1 Yes
  - 2 No
- DON'T KNOW  
REFUSED

BACAS68

Now think about the family members you spent the most time with during the 6 months before your incarceration. Have any of these family members ever been convicted of a crime?

- 1 Yes
  - 2 No
- DON'T KNOW  
REFUSED

BACAS69

Have any of these family members ever had problems with drugs or alcohol?

- 1 Yes
- 2 No
- DON'T KNOW
- REFUSED

BACAS70

Have any of these family members ever been in a gang?

- 1 Yes
- 2 No
- DON'T KNOW
- REFUSED

BACAS71

During the 6 months before your incarceration, how often did these family members convince you to do something you knew you shouldn't do?

- 1. Never
- 2. Sometimes
- 3. Often
- DON'T KNOW
- REFUSED

BACAS72

These next statements describe how you may **currently** feel about your relationships with your family. Please answer about the family members that you spent the most time with during the 6 months before your incarceration. Please tell me whether you strongly agree, agree, disagree, or strongly disagree with the following statements.

You feel close to your family.

- 1 Strongly agree
- 2 Agree
- 3 Disagree
- 4 Strongly disagree
- DON'T KNOW
- REFUSED

BACAS73

You want your family to be involved in your life.

- 1 Strongly agree
- 2 Agree
- 3 Disagree
- 4 Strongly disagree
- DON'T KNOW
- REFUSED

BACAS74

You consider yourself a source of support for your family.

- 1 Strongly agree
- 2 Agree
- 3 Disagree
- 4 Strongly disagree
- DON'T KNOW
- REFUSED

BACAS75

You fight a lot with your family members.

- 1 Strongly agree
- 2 Agree
- 3 Disagree
- 4 Strongly disagree
- DON'T KNOW
- REFUSED

BACAS76

You often feel like you disappoint your family.

- 1 Strongly agree
- 2 Agree
- 3 Disagree
- 4 Strongly disagree
- DON'T KNOW
- REFUSED

BACAS77

You are criticized a lot by your family.

- 1 Strongly agree
- 2 Agree
- 3 Disagree
- 4 Strongly disagree
- DON'T KNOW
- REFUSED

BACAS78

You have someone in your family to talk to about yourself or your problems.

- 1 Strongly agree
- 2 Agree
- 3 Disagree
- 4 Strongly disagree
- DON'T KNOW
- REFUSED

BACAS79

You have someone in your family to turn to for suggestions about how to deal with a personal problem.

- 1 Strongly agree
- 2 Agree
- 3 Disagree
- 4 Strongly disagree
- DON'T KNOW
- REFUSED

BACAS80

You have someone in your family who understands your problems.

- 1 Strongly agree
- 2 Agree
- 3 Disagree
- 4 Strongly disagree
- DON'T KNOW
- REFUSED

BACAS81

You have someone in your family to love you and make you feel wanted.

- 1 Strongly agree
- 2 Agree
- 3 Disagree
- 4 Strongly disagree
- DON'T KNOW
- REFUSED

BACAS82

For the next set of questions, please indicate how well this describes your current thinking. When you want something, you expect people to deliver.

- 1 Strongly agree
- 2 Agree
- 3 Disagree
- 4 Strongly disagree
- DON'T KNOW
- REFUSED

BACAS83

Bad childhood experiences are partly to blame for your current situation.

- 1 Strongly agree
- 2 Agree
- 3 Disagree
- 4 STRONGLY DISAGREE
- DON'T KNOW
- REFUSED

BACAS84

The future is unpredictable and there is no point planning for it.

1 Strongly agree

2 Agree

3 Disagree

4 Strongly disagree

DON'T KNOW

REFUSED

BACAS85

Your crimes did not really harm anyone.

1 Strongly agree

2 Agree

3 Disagree

4 Strongly disagree

DON'T KNOW

REFUSED

BACAS86

You feel like what happens in your life is mostly determined by powerful people.

1 Strongly agree

2 Agree

3 Disagree

4 Strongly disagree

DON'T KNOW

REFUSED

BACAS87

You will never be satisfied until you get all that you deserve.

1 Strongly agree

2 Agree

3 Disagree

4 Strongly disagree

DON'T KNOW

REFUSED

BACAS88

A theft is all right as long as the victim is not physically injured.

1 Strongly agree

2 Agree

3 Disagree

4 Strongly disagree

DON'T KNOW

REFUSED

BACAS89

Even though you got caught, it was still worth the risk.

1 Strongly agree

2 Agree

3 Disagree

4 Strongly disagree

DON'T KNOW

REFUSED

BACAS90

Because of your history you get blamed for a lot of things you did not do.

1 Strongly agree

2 Agree

3 Disagree

4 Strongly disagree

DON'T KNOW

REFUSED

BACAS91

Most of the laws are good.

1 Strongly agree

2 Agree

3 Disagree

4 Strongly disagree

DON'T KNOW

REFUSED

BACAS92

Victims of crime usually get over it with time.

1 Strongly agree 2 Agree

3 Disagree

4 Strongly disagree

DON'T KNOW

REFUSED

BACAS93

When you commit a crime the only one affected is the victim.

1 Strongly agree

2 Agree

3 Disagree

4 Strongly disagree

DON'T KNOW

REFUSED

BACAS94

Most police officers and guards abuse their power.

1 Strongly agree

2 Agree

3 Disagree

4 Strongly disagree

DON'T KNOW

REFUSED

BACAS95

Society makes too big of a deal about your crimes.

1 Strongly agree

2 Agree

3 Disagree

4 Strongly disagree

DON'T KNOW

REFUSED

BACAS96

Sometimes you cannot control yourself.

1 Strongly agree

2 Agree

3 Disagree

4 Strongly disagree

DON'T KNOW

REFUSED

BACAS97

You expect people to treat you better than other people.

1 Strongly agree

2 Agree

3 Disagree

4 Strongly disagree

DON'T KNOW

REFUSED

BACAS98

People in authority are usually looking out for your best interest.

1 Strongly agree

2 Agree

3 Disagree

4 Strongly disagree

DON'T KNOW

REFUSED

BACAS99

Why plan to save for something if you can have it now.

- 1 Strongly agree
  - 2 Agree
  - 3 Disagree
  - 4 Strongly disagree
- DON'T KNOW  
REFUSED

BACAS100

You insist on getting the respect that is due you.

- 1 Strongly agree
- 2 Agree
- 3 Disagree
- 4 Strongly disagree

DON'T KNOW  
REFUSED

BACAS101

If a police officer or guard tells you to do something, there's usually a good reason for it.

- 1 Strongly agree
  - 2 Agree
  - 3 Disagree
  - 4 Strongly disagree
- DON'T KNOW  
REFUSED

BACAS102

People in positions of authority generally take advantage of others.

- 1 Strongly agree
  - 2 Agree
  - 3 Disagree
  - 4 Strongly disagree
- DON'T KNOW  
REFUSED

BACAS103

You are just a "born criminal."

- 1 Strongly agree
- 2 Agree
- 3 Disagree
- 4 Strongly disagree

DON'T KNOW  
REFUSED

BACAS104

You deserve more than other people.

- 1 Strongly agree
- 2 Agree
- 3 Disagree
- 4 Strongly disagree
- DON'T KNOW
- REFUSED

BACAS105

You think it is better to enjoy today than worry about tomorrow.

- 1 Strongly agree
- 2 Agree
- 3 Disagree
- 4 Strongly disagree
- DON'T KNOW
- REFUSED

BACAS106

You do not like to be tied down to a regular work schedule.

- 1 Strongly agree
- 2 Agree
- 3 Disagree
- 4 Strongly disagree
- DON'T KNOW
- REFUSED

BACAS107

How important are your **family ties** to your self-identity, your sense of who you are?

- 1. Very important
- 2. Somewhat important
- 3. Not very important
- 4. Not at all important
- DON'T KNOW
- REFUSED

BACAS108

In 10 years, how important do you think your **family ties** will be to your self-identity?

- 1. Very important
- 2. Somewhat important
- 3. Not very important
- 4. Not at all important
- DON'T KNOW
- REFUSED

BACAS109

How important is your **spirituality or religion** to your self-identity, your sense of who you are?

1. Very important
2. Somewhat important
3. Not very important
4. Not at all important

DON'T KNOW

REFUSED

BACAS110

In 10 years, how important do you think your **spirituality or religion** will be to your self-identity?

1. Very important
2. Somewhat important
3. Not very important
4. Not at all important

DON'T KNOW

REFUSED

BACAS111

How important is your **work or occupation** to your self-identity, your sense of who you are?

1. Very important
2. Somewhat important
3. Not very important
4. Not at all important

DON'T KNOW

REFUSED

BACAS112

In 10 years, how important do you think your **work or occupation** will be to your self-identity?

1. Very important
2. Somewhat important
3. Not very important
4. Not at all important

DON'T KNOW

REFUSED

BACAS113

How important is **being clean and sober** to your self-identity, your sense of who you are?

1. Very important
2. Somewhat important
3. Not very important
4. Not at all important

DON'T KNOW

REFUSED

BACAS114

In 10 years, how important do you think **being clean and sober** will be to your self-identity?

1. Very important
2. Somewhat important
3. Not very important
4. Not at all important

DON'T KNOW

REFUSED

BACAS115

How important are your **community ties** to your self-identity, your sense of who you are?

1. Very important
2. Somewhat important
3. Not very important
4. Not at all important

DON'T KNOW

REFUSED

BACAS116

In 10 years, how important do you think your **community ties** will be to your self-identity?

1. Very important
2. Somewhat important
3. Not very important
4. Not at all important

DON'T KNOW

REFUSED

BACAS117

How important are your **friendships** to your self-identity, your sense of who you are?

1. Very important
2. Somewhat important
3. Not very important
4. Not at all important

DON'T KNOW

REFUSED

BACAS118

In 10 years, how important do you think your **friendships** will be to your self-identity?

1. Very important
2. Somewhat important
3. Not very important
4. Not at all important

DON'T KNOW

REFUSED

BACAS119

How important is **obeying the law** to your self-identity, your sense of who you are?

1. Very important
2. Somewhat important
3. Not very important
4. Not at all important

DON'T KNOW

REFUSED

BACAS120

In 10 years, how important do you think **obeying the law** will be to your self-identity?

1. Very important
2. Somewhat important
3. Not very important
4. Not at all important

DON'T KNOW

REFUSED

BACAS121

Which three aspects of your identity do you feel are the most important to who you are at this time?

(Check 3: family ties, spirituality or religion, work or occupation, being clean and sober, community ties, friendships, obeying the law)

1. Family ties
2. Spirituality or religion
3. Work or occupation
4. Being clean and sober
5. Community ties
6. Friendships
7. Obeying the law

DON'T KNOW

REFUSED

[DO NOT PERMIT RESPONDENT TO PICK OVER 3 (UNDER 3 IS PERMITTED); DO NOT ALLOW DK OR RE IN COMBINATION WITH ANOTHER ANSWER]

BACAS122

The final questions ask about what you think your life will be like after your release from this incarceration. How easy or hard will it be for you to get a decent job after your release?

1. Very easy
2. Pretty easy
3. Pretty hard
4. Very hard

DON'T KNOW

REFUSED

BACAS123

How easy or hard will it be for you to **keep** a job once you get one?

1. Very easy
  2. Pretty easy
  3. Pretty hard
  4. Very hard
- DON'T KNOW  
REFUSED

BACAS124

How easy or hard will it be for you to stay clean and sober after your release?

1. Very easy
  2. Pretty easy
  3. Pretty hard
  4. Very hard
- DON'T KNOW  
REFUSED

BACAS125

How easy or hard will it be for you to deal with pressure and stress you may face?

1. Very easy
  2. Pretty easy
  3. Pretty hard
  4. Very hard
- DON'T KNOW  
REFUSED

BACAS126

How easy or hard will it be for you to stay away from friends or hangouts that get you into trouble?

1. Very easy
  2. Pretty easy
  3. Pretty hard
  4. Very hard
- DON'T KNOW  
REFUSED

BACAS127

How easy or hard will it be for you to get services and programs to help you after your release?

1. Very easy
  2. Pretty easy
  3. Pretty hard
  4. Very hard
- DON'T KNOW  
REFUSED

BACAS128

How easy or hard will it be for you to get support from your family to help you stay away from drugs or alcohol?

1. Very easy
  2. Pretty easy
  3. Pretty hard
  4. Very hard
- DON'T KNOW  
REFUSED

BACAS129

How easy or hard will it be for you to get support from your friends to help you stay away from drugs or alcohol?

1. Very easy
  2. Pretty easy
  3. Pretty hard
  4. Very hard
- DON'T KNOW  
REFUSED

BACAS130

How easy or hard will it be for you to get someone in your family to give you rides to work, appointments, or meetings?

1. Very easy
  2. Pretty easy
  3. Pretty hard
  4. Very hard
- DON'T KNOW  
REFUSED

BACAS131

How easy or hard will it be for you to get a friend to give you rides to work, appointments, or meetings?

1. Very easy
  2. Pretty easy
  3. Pretty hard
  4. Very hard
- DON'T KNOW  
REFUSED

BACAS132

How easy or hard will it be for you to get someone in your family to let you live with them if you need a place to stay?

1. Very easy
  2. Pretty easy
  3. Pretty hard
  4. Very hard
- DON'T KNOW  
REFUSED

BACAS133

How easy or hard will it be for you to get a friend to let you live with them if you need a place to stay?

1. Very easy
  2. Pretty easy
  3. Pretty hard
  4. Very hard
- DON'T KNOW  
REFUSED

BACAS134

How easy or hard will it be for you to comply with all of your supervision requirements. If you are not going to be on parole or probation when you are released, please answer "not applicable".

1. Very easy
  2. Pretty easy
  3. Pretty hard
  4. Very hard
  5. Not applicable
- DON'T KNOW  
REFUSED

BACAS135

How easy or hard will it be for you obey the law?

1. Very easy
  2. Pretty easy
  3. Pretty hard
  4. Very hard
- DON'T KNOW  
REFUSED

BACAS136

How easy or hard will it be for you to stay out of prison or jail?

1. Very easy
  2. Pretty easy
  3. Pretty hard
  4. Very hard
- DON'T KNOW  
REFUSED

BACAS137

How easy or hard will it be for you to make enough money to support yourself?

1. Very easy
2. Pretty easy
3. Pretty hard
4. Very hard

DON'T KNOW

REFUSED

BACAS138

What sources of financial support do you expect to have in the first month after your release? Select all that apply.

1. None
2. Pay from a job
3. Your savings
4. Money from other family members
5. Money from your friends
6. Public assistance
7. Money from illegal sources

DON'T KNOW

REFUSED

[DO NOT ALLOW DK OR RE IF AN ANSWER 1-7 IS SELECTED]

BACAS139

Please tell me how likely you are to do the following after your release. How likely are you to accept a minimum wage job if you can't find something better within a few months?

1. Very likely
2. Somewhat likely
3. Not very likely
4. Not at all likely

DON'T KNOW

REFUSED

BACAS140

If you are working a job you really don't like, how likely are you to quit the job without having another job lined up?

1. Very likely
2. Somewhat likely
3. Not very likely
4. Not at all likely

DON'T KNOW

REFUSED

BACAS141

How likely are you to give up friends that get you into trouble?

1. Very likely
2. Somewhat likely
3. Not very likely
4. Not at all likely

DON'T KNOW

REFUSED

BACAS142

How likely are you to participate in programs and services that will help you stay clean, get a job, or improve yourself?

1. Very likely
2. Somewhat likely
3. Not very likely
4. Not at all likely

DON'T KNOW

REFUSED

BACAS143

If you are living with people who could get you into trouble, how likely are you to find another place to live?

1. Very likely
2. Somewhat likely
3. Not very likely
4. Not at all likely

DON'T KNOW

REFUSED

BACAS144

If you are tempted to use drugs, how likely are you to take steps to avoid using?

1. Very likely
2. Somewhat likely
3. Not very likely
4. Not at all likely

DON'T KNOW

REFUSED

BACAS145

How likely are you to go out and have fun, even if you might get into trouble?

1. Very likely
2. Somewhat likely
3. Not very likely
4. Not at all likely

DON'T KNOW

REFUSED

Thank you. Please tell the interviewer that you are done with your part of the interview.

**DOMAIN 11: LOCATOR QUESTIONS**

**BLOC1**

We're almost done with the interview. We would like to re-contact you for a follow-up interview in the future. We want to ask for some information that could help us locate you once you are released. Like all the information you have provided, it would be kept strictly confidential.

**BLOC2**

Where did you live prior to incarceration?

RECORD ADDRESS INCLUDING CITY/STATE

**BLOC2a**

Where do you think you will be living after your release?

RECORD ADDRESS INCLUDING CITY/STATE

IF SAME AS BLOC2, CHECK BOX

SAME AS PRIOR OT INCARCERATION

**BLOC3**

What is the telephone number at that address?

( ) -

**BLOC4**

Do you have a cell phone number or any alternative number that we could call if we were unable to reach you otherwise?

1 YES – GO TO CELL\_2

2 NO

**BLOC5**

RECORD CELL PHONE, WORK PHONE, OR OTHER NUMBER. SPECIFY WHAT KIND OF NUMBER

( ) - Type of Phone: (CHECK ONE): Cell

Work

Other

BLOC6

Do you have an e-mail address where we could contact you if we were unable to reach you otherwise?

1 YES – GO TO E-MAIL

2 NO

E-MAIL

ENTER RESPONDENT'S E-MAIL ADDRESS AND REPEAT BACK TO CONFIRM. MAKE SURE E-MAIL ADDRESS IS RECORDED IN THE FORMAT: [USERNAME@DOMAIN.COM](#) (NO SPACES) OTHER POSSIBLE SUFFIXES ARE .NET, .EDU AND .ORG

\_\_\_\_\_@\_\_\_\_\_.

BLOC7

Could you tell me the name and phone number of 2 people who are not living with you, such as a close friend or relative, who would know how to reach you? We would only contact that person if we were unable to reach you otherwise.

1 YES – GO TO CONTACT1\_NAME

2 NO – GO TO CLOSE

BLOC8\_

NAME ENTER CONTACT'S FIRST AND LAST NAME. CONFIRM SPELLING

CONTACT1\_PHONE ENTER AREA CODE AND PREFIX. CONFIRM NUMBER

BLOC9

IS A SECOND CONTACT AVAILABLE?

1 YES – GO TO CONTACT2\_NAME

2 NO – GO TO CLOSE

BLOC10\_NAME

ENTER CONTACT'S FIRST AND LAST NAME. CONFIRM SPELLING

CONTACT2\_PHONE

ENTER AREA CODE AND PREFIX. CONFIRM NUMBER

CLOSE

Thank you for your help. We look forward to speaking to you in the future.

GO TO DEBRIEFING QUESTIONS

**DOMAIN 12: FI OBSERVATIONS**

INTERVIEWER: COMPLETE THESE QUESTIONS AFTER THE RESPONDENT HAS LEFT.

DEB\_1

Did the respondent ask any questions during the consent process?

1 YES – GO TO DEB\_2

2 NO – GO TO DEB\_3

DEB\_2

What questions did the respondent ask? (code all that apply)

- 1 How long will this take
- 2 How was I chosen
- 3 What's in it for me
- 4 Do I have to do it
- 5 Other (specify)

DEB\_5

Estimate the respondent's overall understanding of the questions asked in the interview.

- 1 Understood questions without difficulty
- 2 Some difficulty understanding questions
- 3 Great difficulty understanding questions

DEB\_6

In which sections of the interview, if any, did the respondent have trouble answering questions? (code all that apply)

- 1 REFERENCE CALENDAR
- 2 DEMOGRAPHICS
- 3 FAMILY AND PEERS
- 4 HOUSING
- 5 EMPLOYMENT
- 6 INCARCERATION CHARACTERISTICS AND CRIMINAL HISTORY

- 7 PROGRAM OPERATIONS AND SERVICES
- 8 PHYSICAL AND MENTAL HEALTH
- 9 ACASI
- 10 LOCATOR
- 11 NONE

DEB\_7

How truthful do you think the respondent's answers were?

- 1 Very truthful
- 2 Somewhat truthful
- 3 Not at all truthful

DEB\_8

PLEASE PROVIDE ANY OTHER COMMENTS THAT WOULD BE HELPFUL FOR THE PROJECT TEAM TO KNOW.

*AORDP 6 month follow-up instrument***DOMAIN 1: PRIVACY DOCUMENTATION/CONSENT**

## SCON1

INTERVIEWER: LOOK AROUND YOU IN ALL DIRECTIONS. MAKE SURE THAT YOU ARE OUT OF EARSHOT OF OTHER PEOPLE, INCLUDING PEOPLE WHO MAY BE IN AN ADJACENT ROOM OR OUTSIDE. FOR AN INTERVIEW SETTING TO BE CONSIDERED PRIVATE, YOU MUST BE CERTAIN THAT THE QUESTIONS YOU READ AND THE RESPONDENT'S ANSWERS CANNOT BE:

- (1) OVERHEARD OR
- (2) ASCERTAINED BY SOMEONE LOOKING THROUGH A WINDOW.

ARE YOU CONFIDENT THE INTERVIEW SETTING IS PRIVATE?

- 3 YES
- 4 NO – DO NOT CONTINUE UNLESS YOU ARE COMFORTABLE THAT THE SETTING IS PRIVATE

## SCON2

[IF SCON1 = 2, ASK]

INTERVIEWER: BECAUSE YOU HAVE INDICATED THAT THE INTERVIEW SETTING IS NOT PRIVATE, YOU CANNOT PROCEED WITH THE INTERVIEW. YOU WILL NEED TO BREAK OFF THE INTERVIEW AND RESCHEDULE FOR A TIME WHEN YOU CAN CONDUCT THE INTERVIEW IN PRIVATE.

[DO NOT ALLOW INTERVIEWER TO CONTINUE PAST THIS POINT]→ROUTE TO REVIEW SCREEN, CODE 1295, BREAKOFF, APPOINTMENT MADE, HAVE CAPI GO THROUGH APPOINTMENT SCREENS

## SCON3

[IF SCON1=1, ASK]

INTERVIEWER: HAVE YOU READ THE CONSENT FORM TO THE RESPONDENT?

- 3 YES
- 4 NO – HARD STOP – You must get consent before beginning the interview.

## SCON4

[IF SCON3=2, ASK]

INTERVIEWER: STOP AND READ CONSENT FORM TO RESPONDENT. YOU CANNOT PROCEED UNTIL THIS HAS BEEN DONE.

[NOTE TO PROGRAMMER – INTERVIEWER SHOULD NOT BE ABLE TO START INTERVIEW UNLESS BCON3 = 1]

## SCON5

[IF SCOM3=1]

INTERVIEWER: DID RESPONDENT CONSENT TO INTERVIEW?

- 1 YES – [BEGIN INTERVIEW]
- 2 NO – [HARD STOP – YOU CANNOT INTERVIEW THIS PERSON WITHOUT CONSENT]→CODE 2405, HARD REFUSAL BY SUBJECT; ROUTE TO END OF INTERVIEW

**DOMAIN 2: REFERENCE CALENDAR**

SCAL1

I'm going to mark a few dates on this calendar for us to use during the interview. First, I'm going to circle today's date.

[DISPLAY CURRENT DATE]

INTERVIEWER – USING A BLANK CALENDAR PAGE, CIRCLE TODAY'S DATE USING YOUR **BLUE PEN**. WRITE THE YEAR AT THE TOP OF THE PAGE.

Now I'm going to mark the date that was 30 days ago: [DISPLAY -- CALCULATE TODAY'S DATE – 30 DAYS]

INTERVIEWER – CIRCLE THE DATE THAT WAS 30 DAYS AGO USING YOUR **BLUE PEN**

We'll look at the calendar at those dates for several questions in the interview.

SREF1A

[IMPORT BL INTERVIEW DATE AND IMPORT BREF2 FROM BL INTERVIEW.]

We last interviewed you on BLINTVDATE. At that point you were incarcerated and had been incarcerated since approximately BREF2.

SREF1B

I'm going to circle the date of your last interview. Some of the questions in this interview ask about things that have happened since your last interview.

INTERVIEWER – **USE YOUR BLACK PEN** TO CIRCLE THE DATE OF THE BASELINE INTERVIEW [BLINTVDATE] ON THE REFERENCE CALENDAR.

SREF1C

Next, I'd like to know the date that you were released from the incarceration when we last interviewed you. Please tell me the date you were released from that incarceration.

(mm/dd/yyyy)

[MONTH RANGE = 1-12, DK, RE]

[DAY RANGE = 1-31, DK, RE]

[YEAR RANGE = 2014-2015, DK, RE]

IF RESPONDENT CAN'T REMEMBER THE DAY, ENTER 15.

IF RESPONDENT CAN'T REMEMBER MONTH, ASK IF IT WAS EARLY IN THE YEAR OR LATE IN THE YEAR. IF EARLY, ENTER 03 FOR MONTH; IF LATE, ENTER 10 FOR MONTH. IF RESPONDENT CAN'T REMEMBER AT ALL, ENTER 06 FOR MONTH.

[CALCULATE RELDATE BASED ON THE ANSWER TO SREF1B. THIS DATE WILL BE USED THROUGHOUT THE INTERVIEW.]

INTERVIEWER –**USE YOUR RED PEN** TO CIRCLE THE RELEASE DATE ON THE CORRECT MONTH.

Many of the questions in this interview will ask about things that have happened since this release date.

A few questions in the interview ask about programs and services you may have received *during* that incarceration, so I am going to highlight the dates of that incarceration on this reference calendar.

INTERVIEWER –HIGHLIGHT THE DATES OF THE BASELINE INCARCERATION (WHICH ARE [BREF2] TO [RELDATE]) **USING YOUR YELLOW HIGHLIGHTER.**

SREF1D

IS RESPONDENT INCARCERATED?

- 3 YES
- 4 NO

SREF1E

**INTERVIEWER: IF RESPONDENT IS INCARCERATED, DO NOT READ THIS QUESTION. ANSWER YES**

At any point since [RELDATE], have you been incarcerated in a jail or prison for more than 24 hours at one time?

- 1 YES
- 2 NO

[IF NO TO SREF1E, SKIP TO SDEM5.]

[INSERT SOFT CHECK: IF NO TO SREF1E AND YES TO SREF1D, MUST CHANGE ANSWER TO EITHER SREF1E OR SREF1D]

SREF1F

[ASK IF YES TO SREF1E]

Since [RELDATE], how many **separate** times have you been booked into or admitted into a jail or prison? (1-30)

SREF1G

[ASK IF YES TO SREF1E] Since [RELDATE], how many **total** days have you spent in jail or prison? (0-240)

SREF1

[ASK IF SREF1D=YES]

IN WHAT TYPE OF FACILITY ARE YOU INTERVIEWING?†

- 5 JAIL
- 6 PRISON
- 7 OTHER CORRECTIONAL FACILITY
- 8 OTHER NON-CORRECTIONAL FACILITY

SREF2

[IF SREF1D=YES] Please tell me the date you entered incarceration this time.

IF RESPONDENT CAN'T REMEMBER THE DAY, ENTER 15.

IF RESPONDENT CAN'T REMEMBER MONTH, ASK IF IT WAS EARLY IN THE YEAR OR LATE IN THE YEAR. IF EARLY, ENTER 03 FOR MONTH; IF LATE, ENTER 10 FOR MONTH. IF RESPONDENT CAN'T REMEMBER AT ALL, ENTER 06 FOR MONTH.

(mm/dd/yyyy)

[MONTH RANGE = 1-12, DK, RE]

[DAY RANGE = 1-31, DK, RE]

[YEAR RANGE = 2014-2015, DK, RE]

[NOTE TO PROGRAMMER: CALCULATE THE NUMBER OF DAYS THE RESPONDENT HAS BEEN INCARCERATED. THIS INFORMATION WILL BE USED IN SCAS4 AND SEVERAL OTHER QUESTIONS IN THAT SECTION.]

SREF3

[IF SREF1D=YES]

Just to confirm, have you spent at least 24 hours **out** of jail since [RELDATE]?

1 YES

2 NO

DON'T KNOW

REFUSED

SREF4

[IF SREF1E=YES]

Some of the questions in this interview ask about things that have happened since your release on [RELDATE] while you were living in the community. This means the days that you were not incarcerated.

SINCAR7

[ASK IF SREF1D=YES. IF SREF1E=NO, SKIP TO SDEM5.]

I'd like to ask a few questions about your current incarceration. Are you currently serving time for a parole violation?

1 YES

2 NO

DON'T KNOW

REFUSED

SINCAR8

[IF SINCAR7=1]

Was the parole violation for a technical violation, like failing to report, a new crime, or both?

1 TECHNICAL VIOLATION

2 NEW CRIME

3 BOTH

DON'T KNOW

REFUSED

SINCAR9

[IF SINCAR7=2 OR SINCAR8=2 OR 3]

Please look at Showcard 1. What crimes were you convicted of for this term of incarceration?

Select all that apply...

	YES	NO
A Homicide	1	2
B Rape	1	2
C Other sex offense (not rape)	1	2
D Robbery	1	2
E Assault	1	2
F Burglary	1	2
G Theft	1	2
H Car theft	1	2
I Fraud or forgery	1	2
J Weapons offense	1	2
K Drug dealing	1	2
L Drug possession	1	2
M DWI or DUI	1	2
N SOME OTHER OFFENSE	1	2

[DON'T KNOW AND REFUSED SHOULD BE ALLOWED FOR ANY ITEM]

SINCAR9A

[IF SINCAR9=14]

SPECIFY OTHER OFFENSE

[50 CHARACTERS]

SINCAR10

When do you expect to be released from this term of incarceration—the term you're serving right now?  
(MM/DD/YYYY)

[RANGE – MONTH – 01 – 12, DK, RE]

[RANGE – DAY – 01 – 31, DK, RE]

[RANGE – YEAR – 2014 – 2100]

[EDIT CHECK – DATE IN SINCAR10 MUST BE LATER THAN CURRENT DATE.]

**DOMAIN 3: DEMOGRAPHICS**

SDEM5

REFER TO BASELINE INTERVIEW DATE, [BLINTVDATE], CIRCLED IN BLACK, ON REFERENCE CALENDAR

Since your last interview on [BLINTVDATE], have you served in the Armed Forces, including the Guard or Reserves?

1 YES

2 NO

DON'T KNOW

REFUSED

SDEM6

SHOWCARD 2

What is the <b>highest </b> grade or level of school you have completed?

1 NONE

2 8<sup>TH</sup> GRADE OR LESS

3 SOME HIGH SCHOOL

4 GED

5 HIGH SCHOOL DIPLOMA

6 VOCATIONAL/TECHNICAL/BUSINESS CERTIFICATE OR DIPLOMA

7 SOME COLLEGE

8 ASSOCIATE'S DEGREE (AA, AS)

9 BACHELOR'S DEGREE (BA, BS)

10 GRADUATE/PROFESSIONAL DEGREE (MA, MS, PhD, EDD, MEDICINE/MD, DENTISTRY/DDS,  
LAW/JJ/LLB, ETC)

DON'T KNOW

REFUSED

[DK AND RE SHOULD NOT BE ALLOWED IF THE INTERVIEWER PICKS ANY OTHER RESPONSE CATEGORY]

SDEM7

[REFER TO BLINTVDATE, CIRCLED IN BLACK, ON REFERENCE CALENDAR]

Since your last interview, have you gotten any vocational or technology certifications or licenses? By that we mean things like automotive service and repair, Commercial Driver's License, Microsoft Certified IT Professional, HVACR certification.

1 YES

2 NO

DON'T KNOW

REFUSED

SDEM8

[If BDEM7=1]

What certifications or licenses do you have?

INTERVIEWER: ONCE FINISHED, HIT ENTER TO MOVE TO NEXT SCREEN

[ALLOW UP TO 5 ENTRIES]

SDEM9

Are you currently taking any school courses, such as GED, vocational, or college courses?

1 YES

2 NO

DON'T KNOW

REFUSED

SDEM10

[SDEM9=1]

Are you currently taking....

(CODE ALL THAT APPLY)

1 High school courses,

2 A GED course,

3 Vocational training,

4 College courses,

5 Some other type of schooling

DON'T KNOW

REFUSED

**DOMAIN 4: FAMILY AND PEERS**

SFAM1

Are you...

1 Married,

2 Separated,

3 Divorced,

4 Widowed, or

5 Never married?

DON'T KNOW

REFUSED

SFAM2

[If SFAM1 NE 1]

Are you currently involved in a steady intimate relationship?

1 YES

2 NO

DON'T KNOW

REFUSED

SFAM4

How many children under the age of 18 do you have? Please count all children that you consider yourself to be a parent of.

[RANGE 0-25]

DON'T KNOW

REFUSED

SFAM5

[If SFAM4 GE1]

REFER TO RELEASE DATE, [RELDATE], CIRCLED IN RED, ON REFERENCE CALENDAR

Since your release on [RELDATE], how many of your children under the age of 18 have lived with you?

[RANGE 1-25]

DON'T KNOW

REFUSED

[EDIT CHECK – SFAM5 CANNOT BE LARGER THAN SFAM4]

SFAM6

[If SFAM4 GE1]

Of your children under the age of 18, how many have you financially supported in any way since your release?

[RANGE 1-25]

[EDIT CHECK – SFAM5 CANNOT BE LARGER THAN SFAM4]

SFAM7

[If SFAM4 GE1]

Are you currently required by a court to pay child support for any of your children under the age of 18?

1 YES

2 NO

DON'T KNOW

REFUSED

SFAM9

[If SFAM7=1]

Are you currently making any child support payments?

1 YES

2 NO

DON'T KNOW

REFUSED

**DOMAIN 4A: SUPERVISION STATUS**

SSUP1a

REFER TO RELEASE DATE, [RELDATE], CIRCLED IN RED, ON REFERENCE CALENDAR.

At any point since your release on [RELDATE], have you been on parole, probation, or some other type of community supervision?

1 YES

2 NO

DON'T KNOW

REFUSED

[IF NO TO SSUP1a OR IF SREF3=NO, SKIP TO SFIRST1]

SSUP1

Are you currently on parole or probation?

1 YES

2 NO

DON'T KNOW

REFUSED

[IF NO TO SSUP1, SKIP TO SSUP3]

SSUP2

[IF YES TO SSUP1] How much more of your supervision term do you have left to serve? Please tell me how many months you have left to serve. (1-100)

SSUP3

[IF YES TO SSUP1a] On average, since your release on [RELDATE], how often have you met with your parole or probation officer **in person**? [IF SSUP1=NO, PLEASE ADD "Please think about the time while you were under supervision".]

- 1 Not at all
- 2 Once or twice
- 3 About once a month
- 4 Two or three times a month
- 5 Once a week
- 6 Several times a week
- 7 Every day or almost every day

DON'T KNOW

REFUSED

SSUP4

[IF SSUP3 GE 2] On average, how long do your typical in-person meetings with your parole or probation officer last? [IF SSUP1=NO, PLEASE CHANGE TO "On average, how long did your typical in person meeting with your parole or probation officer last?"]

- 1 Less than 5 minutes
- 2 Five to 30 minutes
- 3 31 minutes to 1 hour
- 4 More than 1 hour

DON'T KNOW

REFUSED

SSUP5

On average, since your release, how often have you spoken with your parole or probation officer **on the phone**? [IF SSUP1=NO, PLEASE ADD "Please think about the time while you were under supervision".]

- 1 Not at all
- 2 Once or twice
- 3 About once a month
- 4 Two or three times a month
- 5 Once a week
- 6 Several times a week
- 7 Every day or almost every day

DON'T KNOW

REFUSED

SSUP6

On average, since your release, how often has your parole or probation officer visited you at the place you live?

- 1 Not at all
- 2 Once or twice
- 3 About once a month
- 4 Two or three times a month
- 5 Once a week
- 6 Several times a week
- 7 Every day or almost every day
- DON'T KNOW
- REFUSED

**DOMAIN 4B: FIRST 24 HOURS**

SFIRST1

I'd like to ask some questions about the first 24 hours after your release, on [RELDATE], so please take a look at this calendar and think about what happened during that time period. On the day that you were released, did anyone come to the institution to meet you?

REFER TO RELEASE DATE, [RELDATE], CIRCLED IN RED, ON REFERENCE CALENDAR.

- 1 YES
- 2 NO
- DON'T KNOW
- REFUSED

SFIRST2

[IF YES TO SFIRST1] Who was there to meet you?

	YES	NO	NOT APPLICABLE
A. Your spouse or intimate partner	1	2	NA
B. Your children	1	2	NA
C. Any other family members such as parents, grandparents, siblings, cousins, or other relatives	1	2	NA
D. Your friends	1	2	NA
E. A parole or probation officer	1	2	NA
F. A case worker or service provider	1	2	NA

[DON'T KNOW OR REFUSED IS ALLOWED FOR ALL OF THE ABOVE]

SFIRST3

Did you receive a supply of any medications that you were taking during incarceration?

- 1 YES
- 2 NO
- 3 NOT TAKING MEDICATIONS PRE-RELEASE
- DON'T KNOW
- REFUSED

SFIRST4

Did you receive a referral or other type of connection to a mental health provider in the community?

1 YES

2 NO

DON'T KNOW

REFUSED

SFIRST5

Did you receive a referral or other type of connection to substance abuse treatment provider in the community?

1 YES

2 NO

DON'T KNOW

REFUSED

SIRST6

Were you given a release packet when you left the institution?

1 YES

2 NO

DON'T KNOW

REFUSED

SFIRST7

On the day you were released, did you report to a service agency or a supervision agency?

1 YES

2 NO

DON'T KNOW

REFUSED

SFIRST8

Where did you sleep the first night out of incarceration?

1 In your own house or apartment, meaning your name was on the title, mortgage, or lease;

2 In someone else's house or apartment, including your parents' place;

3 In a residential treatment facility;

4 In a transitional housing facility or halfway house;

5 In a shelter;

6 On the street;

7 In some other place or situation?

DON'T KNOW

REFUSED

[DK AND RE SHOULD NOT BE ALLOWED IF THE INTERVIEWER PICKS ANY OTHER RESPONSE CATEGORY]

SFIRST9

Overall, in the first 24 hours after your release, how prepared did you feel to live on the outside?

1 Very prepared

2 Prepared

3 Unprepared

4 Very unprepared

DON'T KNOW

REFUSED

[IF SREF3=NO, SKIP TO SPOS1A IN DOMAIN 8]

**DOMAIN 5: HOUSING**

[THIS DOMAIN WILL BE SKIPPED FOR SREF3=NO]

SHOU1

SHOWCARD 3

The next questions ask about your housing situation since your release on [RELDATE]. [IF SREF1E=YES, PLEASE ADD "Please think about places you were living in the community, not the time you were in a correctional facility". ] Since your release, have you lived <B>mostly</B>...

1 In your own house or apartment, meaning your name is on the title, mortgage, or lease;

2 In someone else's house or apartment, including your parents' place;

3 In a residential treatment facility;

4 In a transitional housing facility or halfway house;

5 In a shelter;

6 On the street or you were homeless;

7 In no set place or you moved around a lot;

8 In some other place or situation?

DON'T KNOW

REFUSED

[DK AND RE SHOULD NOT BE ALLOWED IF THE INTERVIEWER PICKS ANY OTHER RESPONSE CATEGORY]

SHOU2

Since your release, have you been paying any rent or mortgage?

1 YES

2 NO

DON'T KNOW

REFUSED

SHOU3

Since your release, has any program helped you pay rent, such as through a special program, public housing, or Section 8, or a Housing Choice voucher?

1 YES

2 NO

DON'T KNOW

REFUSED

## SHOU4

Since your release, how many different places have you lived? [IF SREF1E=YES, ADD "Please do not include any correctional facilities."]

- 5. 1
- 6. 2 or 3
- 7. 4 or 5
- 8. More than 5
- DON'T KNOW
- REFUSED

## SHOU5

Who have you lived with since your release? Please tell me everyone you have lived with.

	YES	NO	NOT APPLICABLE
A. Your spouse or intimate partner	1	2	NA
B. Your children	1	2	NA
C. Any other family members such as parents, grandparents, siblings, cousins, or other relatives	1	2	NA
D. Your friends	1	2	NA

[DON'T KNOW OR REFUSED IS ALLOWED FOR ALL OF THE ABOVE]

**DOMAIN 6: EMPLOYMENT**

[THIS DOMAIN WILL BE SKIPPED FOR SREF3=NO]

## SEMP2

At any point since your release on [RELDATE], have you had a job? [IF SREF1E=YES, PLEASE ADD "As you answer these questions about employment, please think about the time while you were living in the community, not the time while you were incarcerated". ]

- 1 YES
- 2 NO
- DON'T KNOW
- REFUSED

[IF SEMP2=2, GO TO SEMP3]

## SEMP2A

[IF SEMP2=1] Since your release, how many months have you worked?

IF LESS THAN 1, ENTER 1

[RANGE 0-8]

DON'T KNOW

REFUSED

SEMP2B

[ASK if SEMP2=YES and SREF1D=NO]. Do you currently have a job?

1 YES

2 NO

DON'T KNOW

REFUSED

SEMP3

Please tell me all the ways that you have supported yourself since your release on [RELDATE]?

	YES	NO
A A job	1	2
B Support from your family	1	2
C Support from your friends	1	2
D A government program or public assistance	1	2
E Illegal income	1	2
F Some other type of support	1	2

[DK AND RE SHOULD BE ALLOWED FOR EACH ITEM]

SEMP4

[ASK ONLY IF SEMP2=2]

SHOWCARD 4

What are the **main** reasons you have not worked? Please select all that apply. You...

[CODE ALL THAT APPLY]

- 1 Were ill or disabled and unable to work,
- 2 Were retired,
- 3 Were taking care of home or family,
- 4 Were going to school,
- 5 Could not find work,
- 6 Could not get transportation,
- 7 Did not want to work,
- 8 Were incarcerated,
- 9 Were too young to obtain a work permit,
- 10 Had some other reason?

DON'T KNOW

REFUSED

[DK AND RE SHOULD NOT BE ALLOWED IF THE INTERVIEWER PICKS ANY OTHER RESPONSE CATEGORY]

SEMP4A

Since your release, how many employers have you contacted?

- 1 1
- 2 2 or 3
- 3 4 or 5
- 4 6 -10
- 5 11-20
- 6 More than 20
- 7 None
- DON'T KNOW
- REFUSED

SEMP4b

Since your release, how many job interviews have you had?

- 1 1
- 2 2 or 3
- 3 4 or 5
- 4 6 -10
- 5 11-20
- 6 More than 20
- 7 None
- DON'T KNOW
- REFUSED

SEMP5

[ASK ONLY IF SEMP2=1] How many different jobs have you had since your release on [RELDATE]?  
REFER TO RELEASE DATE, [RELDATE], CIRCLED IN RED ON REFERENCE CALENDAR.

- 1. 1
- 2. 2 or 3
- 3. 4 or 5
- 4. More than 5
- DON'T KNOW
- REFUSED

SEMP6

[ASK ONLY IF SEMP5 >1]

Have you worked more than 1 job at the same time?

- 1 YES
- 2 NO
- DON'T KNOW
- REFUSED

SEMP7

[ASK ONLY IF SEMP2=1]

The next questions are about your current job or the most recent job you have had since your release on [RELDATE]. On average, since your release, how many hours a week do you usually work? [IF SEMP5 >1] If you have more than one job, please count hours from all of your jobs

[RANGE – 1 – 140]

DON'T KNOW

REFUSED

SEMP8

[ASK ONLY IF SEMP2=1]

(Thinking about your current job or the most recent job you have had since your release...)

How much do you earn per month **before** taxes, but including any tips, bonuses, or commissions? [IF SEMP5 > 1] If you have more than one job, please include income from all of your jobs.

[RANGE – 1-999999] \$

SEMP9

[ASK ONLY IF SEMP2=1]

(Thinking about your current job or the most recent job you have had since your release...)

For your job, do you receive...

[IF SEMP5 > 1] If you have more than one job, please answer for your main job

1 Formal pay, where you receive a pay stub;

2 Casual pay, where your pay was 'under the table' or 'off the books';

3 You were self-employed?

DON'T KNOW

REFUSED

SEMP10

[ASK ONLY IF SEMP2=1]

(Thinking about your current job or the most recent job you have had since your release...)

Does your job provide health insurance coverage? [IF SBEMP5 > 1] If you have more than one job, please answer for your main job.

1 YES

2 NO

DON'T KNOW

REFUSED

SEMP11

[ASK ONLY IF SEMP2=1]

(Thinking about your current job or the most recent job you have had since your release...)

Does your job provide any fully paid leave, such as sick leave or vacation leave? [IF SEMP5 > 1] If you have more than one job, please answer for your main job.

1 YES

2 NO

DON'T KNOW

REFUSED

**DOMAIN 8: PROGRAM OPERATIONS AND SERVICES**

SPOS1a

Next, I'd like to ask about programs and services you received. First, I'm going to ask about a few services you may have received during the term of incarceration where we last interviewed you. This is the incarceration from which you were released on [RELDATE]. POINT TO BASELINE INCARCERATION DATES HIGHLIGHTED IN YELLOW ON REFERENCE CALENDAR, WHICH ARE [BREF2] TO [RELDATE]. During that term of incarceration, did you receive any reentry planning or case management? This would have included someone meeting with you to figure out what services or programs you needed, trying to get you into programs or services, or otherwise helping you plan for your release.

1 YES

2 NO

DON'T KNOW

REFUSED

SPOS1b

During that term of incarceration, did you receive help arranging for public healthcare assistance after your release, such as Medicare or Medicaid?

1 YES

2 NO

DON'T KNOW

REFUSED

SPOS1c

During that term of incarceration, did you received help with finding or keeping a place to live for after your release?

1 YES

2 NO

DON'T KNOW

REFUSED

SPOS1d

Did you receive mental health treatment or health care for emotional problems?

1 YES

2 NO

DON'T KNOW

REFUSED

SPOS1e

Did you receive any professional treatment for drugs or alcohol, such as treatment in a residential facility, group therapy, or individual counseling?

1 YES

2 NO

DON'T KNOW

REFUSED

SPOS1

Next, I'd like to ask about programs and services you may have received since you were released from that incarceration. REFER TO RELEASE DATE, [RELDATE], CIRCLED IN RED, ON CALENDAR. Since you were released on [RELDATE], have you received a needs assessment? A needs assessment is where staff ask you questions to figure out what kinds of services or programs could help you, such as drug treatment, counseling, health care, vocational training, or education.

1 YES

2 NO

DON'T KNOW

REFUSED

SPOS1aa

[If SPOS1=YES and (SREF1E=YES and SREF3 NE NO)]

Did you receive this service while you were living in the community, while you were reincarcerated, or both?

1 LIVING IN THE COMMUNITY

2 WHILE REINCARCERATED

3 BOTH

DON'T KNOW

REFUSED

SPOS2

Since your release on [RELDATE], have you met with a specific person who talks with you about issues or needs you have, tries to get you into services or programs, helps you get benefits or assistance, and monitors your progress? These services are called case management and the person who provides them could be called a social worker, case manager, or case worker, or it could be your parole or probation officer.

1 YES

2 NO

DON'T KNOW

REFUSED

## SPOS2a

[If SPOS2=YES and (SREF1E=YES and SREF3 NE NO)]

Did you receive this service while you were living in the community, while you were reincarcerated, or both?

1 LIVING IN THE COMMUNITY

2 WHILE REINCARCERATED

3 BOTH

DON'T KNOW

REFUSED

## SPOS3a-c

[If SPOS2=1]

Who has provided you with case management since your release?

(SELECT ALL THAT APPLY):

	YES	NO
A A parole or probation officer from within the correctional facility	1	2
B A parole or probation officer from <b>outside</b> the correctional facility	1	2
C A social worker, case manager, or case worker who is not a parole or probation officer	1	2

[DON'T KNOW AND REFUSED SHOULD BE ALLOWED FOR ANY ITEM]

## SPOS4

[If SPOS2=1]

Is a staff member following up to make sure you actually get the services that you were referred to, or to monitor your progress in the programs or services that you are receiving?

1 YES

2 NO

DON'T KNOW

REFUSED

## SPOS11

[If SFAM7=1]

Since your release, have you received help with modifying any child support you owe?

1 YES

2 NO

DON'T KNOW

REFUSED

## SPOS11a

[If SPOS11=YES and (SREF1E=YES and SREF3 NE NO)]

Did you receive this service while you were living in the community, while you were reincarcerated, or both?

1 LIVING IN THE COMMUNITY

2 WHILE REINCARCERATED

3 BOTH

DON'T KNOW

REFUSED

SPOS12

[If SFAM4 GE 1]

Since your release, have you received help with modifying custody arrangements for your children?

1 YES

2 NO

DON'T KNOW

REFUSED

SPOS12a

[If SPOS12=YES and (SREF1E=YES and SREF3 NE NO)]

Did you receive this service while you were living in the community, while you were reincarcerated, or both?

1 LIVING IN THE COMMUNITY

2 WHILE REINCARCERATED

3 BOTH

DON'T KNOW

REFUSED

SPOS13

Have you received help arranging for public financial assistance, such as disability benefits or welfare?

1 YES

2 NO

DON'T KNOW

REFUSED

SPOS13a

[If SPOS13=YES and (SREF1E=YES and SREF3 NE NO)]

Did you receive this service while you were living in the community, while you were reincarcerated, or both?

1 LIVING IN THE COMMUNITY

2 WHILE REINCARCERATED

3 BOTH

DON'T KNOW

REFUSED

SPOS14

Have you received help arranging for public healthcare assistance, such as Medicare or Medicaid?

1 YES

2 NO

DON'T KNOW

REFUSED

SPOS14a

[If SPOS14=YES and (SREF1E=YES and SREF3 NE NO)]

Did you receive this service while you were living in the community, while you were reincarcerated, or both?

1 LIVING IN THE COMMUNITY

2 WHILE REINCARCERATED

3 BOTH

DON'T KNOW

REFUSED

SPOS15

Have you received legal assistance?

1 YES

2 NO

DON'T KNOW

REFUSED

SPOS15a

[If SPOS15=YES and (SREF1E=YES and SREF3 NE NO)]

Did you receive this service while you were living in the community, while you were reincarcerated, or both?

1 LIVING IN THE COMMUNITY

2 WHILE REINCARCERATED

3 BOTH

DON'T KNOW

REFUSED

SPOS16

Have you received spiritual, religious, or emotional support from faith-based providers? Remember, we are still talking about services since your release on [RELDATE].

1 YES

2 NO

DON'T KNOW

REFUSED

SPOS16a

[If SPOS16=YES and (SREF1E=YES and SREF3 NE NO)]

Did you receive this service while you were living in the community, while you were reincarcerated, or both?

1 LIVING IN THE COMMUNITY

2 WHILE REINCARCERATED

3 BOTH

DON'T KNOW

REFUSED

SPOS17

Have you been connected with a mentor from the faith-based community?

1 YES

2 NO

DON'T KNOW

REFUSED

SPOS17a

[If SPOS17=YES and (SREF1E=YES and SREF3 NE NO)]

Did you receive this service while you were living in the community, while you were reincarcerated, or both?

1 LIVING IN THE COMMUNITY

2 WHILE REINCARCERATED

3 BOTH

DON'T KNOW

REFUSED

SPO18

Have you received other services from faith-based providers? For example, faith-based providers may provide services that are not religious or spiritual services and could include things like housing or employment assistance.

1 YES

2 NO

DON'T KNOW

REFUSED

SPOS18a

[If SPOS18=YES and (SREF1E=YES and SREF3 NE NO)]

Did you receive this service while you were living in the community, while you were reincarcerated, or both?

1 LIVING IN THE COMMUNITY

2 WHILE REINCARCERATED

3 BOTH

DON'T KNOW

REFUSED

SPOS19

Have you received help getting documents necessary for employment, such as your birth certificate, social security card, or photo identification card?

1 YES

2 NO

DON'T KNOW

REFUSED

SPOS19a

[If SPOS19=YES and (SREF1E=YES and SREF3 NE NO)]

Did you receive this service while you were living in the community, while you were reincarcerated, or both?

1 LIVING IN THE COMMUNITY

2 WHILE REINCARCERATED

3 BOTH

DON'T KNOW

REFUSED

SPOS20

Have you received help developing money management skills, such as financial literacy classes?

1 YES

2 NO

DON'T KNOW

REFUSED

SPOS20a

[If SPOS20=YES and (SREF1E=YES and SREF3 NE NO)]

Did you receive this service while you were living in the community, while you were reincarcerated, or both?

1 LIVING IN THE COMMUNITY

2 WHILE REINCARCERATED

3 BOTH

DON'T KNOW

REFUSED

SPOS21

Have you received help with other life skills?

1 YES

2 NO

DON'T KNOW

REFUSED

SPOS21a

[If SPOS21=YES and (SREF1E=YES and SREF3 NE NO)]

Did you receive this service while you were living in the community, while you were reincarcerated, or both?

1 LIVING IN THE COMMUNITY

2 WHILE REINCARCERATED

3 BOTH

DON'T KNOW

REFUSED

SPOS22

Have you received help with working on personal relationships?

1 YES

2 NO

DON'T KNOW

REFUSED

SPOS22a

[If SPOS22=YES and (SREF1E=YES and SREF3 NE NO)]

Did you receive this service while you were living in the community, while you were reincarcerated, or both?

1 LIVING IN THE COMMUNITY

2 WHILE REINCARCERATED

3 BOTH

DON'T KNOW

REFUSED

SPOS23

Have you received training on how to change your attitudes related to criminal thinking?

1 YES

2 NO

DON'T KNOW

REFUSED

SPOS23a

[If SPOS23=YES and (SREF1E=YES and SREF3 NE NO)]

Did you receive this service while you were living in the community, while you were reincarcerated, or both?

1 LIVING IN THE COMMUNITY

2 WHILE REINCARCERATED

3 BOTH

DON'T KNOW

REFUSED

SPOS24

Have you received any parenting classes? Remember, we are still talking about services since your release on RELDATE.

1 YES

2 NO

DON'T KNOW

REFUSED

SPOS24a

[If SPOS24=YES and (SREF1E=YES and SREF3 NE NO)]

Did you receive this service while you were living in the community, while you were reincarcerated, or both?

1 LIVING IN THE COMMUNITY

2 WHILE REINCARCERATED

3 BOTH

DON'T KNOW

REFUSED

SPOS48

Have you received any assistance with finding child care?

1 YES

2 NO

DON'T KNOW

REFUSED

SPOS48a

[If SPOS48a=YES and (SREF1E=YES and SREF3 NE NO)]

Did you receive this service while you were living in the community, while you were reincarcerated, or both?

1 LIVING IN THE COMMUNITY

2 WHILE REINCARCERATED

3 BOTH

DON'T KNOW

REFUSED

SPOS25

Have you participated in any services or programs for survivors of sexual or physical abuse?

1 YES

2 NO

DON'T KNOW

REFUSED

SPOS25a

[If SPOS25=YES and (SREF1E=YES and SREF3 NE NO)]

Did you receive this service while you were living in the community, while you were reincarcerated, or both?

1 LIVING IN THE COMMUNITY

2 WHILE REINCARCERATED

3 BOTH

DON'T KNOW

REFUSED

SPOS26

Have you received any mentoring services? Please don't count any mentoring from a faith-based community member.

1 YES

2 NO

DON'T KNOW

REFUSED

SPOS26a

[If SPOS26=YES and (SREF1E=YES and SREF3 NE NO)]

Did you receive this service while you were living in the community, while you were reincarcerated, or both?

1 LIVING IN THE COMMUNITY

2 WHILE REINCARCERATED

3 BOTH

DON'T KNOW

REFUSED

SPOS27

Have you participated in any anger management programs?

1 YES

2 NO

DON'T KNOW

REFUSED

SPOS27a

[If SPOS27=YES and (SREF1E=YES and SREF3 NE NO)]

Did you receive this service while you were living in the community, while you were reincarcerated, or both?

1 LIVING IN THE COMMUNITY

2 WHILE REINCARCERATED

3 BOTH

DON'T KNOW

REFUSED

SPOS28

Have you received any educational services, such as GED or basic education classes?

1 YES

2 NO

DON'T KNOW

REFUSED

SPOS28a

[If SPOS28=YES and (SREF1E=YES and SREF3 NE NO)]

Did you receive this service while you were living in the community, while you were reincarcerated, or both?

1 LIVING IN THE COMMUNITY

2 WHILE REINCARCERATED

3 BOTH

DON'T KNOW

REFUSED

SPOS29

Have you received help with finding or paying for transportation?

1 YES

2 NO

DON'T KNOW

REFUSED

SPOS29a

[If SPOS29=YES and (SREF1E=YES and SREF3 NE NO)]

Did you receive this service while you were living in the community, while you were reincarcerated, or both?

1 LIVING IN THE COMMUNITY

2 WHILE REINCARCERATED

3 BOTH

DON'T KNOW

REFUSED

SPOS30

Have you received help with finding or keeping a place to live?

1 YES

2 NO

DON'T KNOW

REFUSED

SPOS30a

[If SPOS30=YES and (SREF1E=YES and SREF3 NE NO)]

Did you receive this service while you were living in the community, while you were reincarcerated, or both?

1 LIVING IN THE COMMUNITY

2 WHILE REINCARCERATED

3 BOTH

DON'T KNOW

REFUSED

SPOS31

Have you received help getting a driver's license?

1 YES

2 NO

DON'T KNOW

REFUSED

SPOS31a

[If SPOS31=YES and (SREF1E=YES and SREF3 NE NO)]

Did you receive this service while you were living in the community, while you were reincarcerated, or both?

1 LIVING IN THE COMMUNITY

2 WHILE REINCARCERATED

3 BOTH

DON'T KNOW

REFUSED

SPOS32

Have you received help with accessing resources such as clothing banks and food pantries?

1 YES

2 NO

DON'T KNOW

REFUSED

SPOS32a

[If SPOS32=YES and (SREF1E=YES and SREF3 NE NO)]

Did you receive this service while you were living in the community, while you were reincarcerated, or both?

1 LIVING IN THE COMMUNITY

2 WHILE REINCARCERATED

3 BOTH

DON'T KNOW

REFUSED

SPOS33

Have you received any employment services or assistance with finding a job?

1 YES

2 NO

DON'T KNOW

REFUSED

SPOS33a

[If SPOS33=YES and (SREF1E=YES and SREF3 NE NO)]

Did you receive this service while you were living in the community, while you were reincarcerated, or both?

1 LIVING IN THE COMMUNITY

2 WHILE REINCARCERATED

3 BOTH

DON'T KNOW

REFUSED

SPOS34

Have you participated in any programs to help prepare you for employment, such as developing resumes or working on interviewing skills?

1 YES

2 NO

DON'T KNOW

REFUSED

SPOS34a

[If SPOS34=YES and (SREF1E=YES and SREF3 NE NO)]

Did you receive this service while you were living in the community, while you were reincarcerated, or both?

1 LIVING IN THE COMMUNITY

2 WHILE REINCARCERATED

3 BOTH

DON'T KNOW

REFUSED

SPOS34b

Have you been placed in a transitional job arranged by a program or had wages paid for by a program for a trial period?

1 YES

2 NO

DON'T KNOW

REFUSED

SPOS35

Have you participated in any trade or job training programs? Remember, we are still talking about services since your release on [RELDATE].

1 YES

2 NO

DON'T KNOW

REFUSED

SPOS35a

[If SPOS35=YES and (SREF1E=YES and SREF3 NE NO)]

Did you receive this service while you were living in the community, while you were reincarcerated, or both?

1 LIVING IN THE COMMUNITY

2 WHILE REINCARCERATED

3 BOTH

DON'T KNOW

REFUSED

SPOS36

Have you received any vocational and technical certifications or licenses?

1 YES

2 NO

DON'T KNOW

REFUSED

SPOS36a

[If SPOS36=YES and (SREF1E=YES and SREF3 NE NO)]

Did you receive this service while you were living in the community, while you were reincarcerated, or both?

1 LIVING IN THE COMMUNITY

2 WHILE REINCARCERATED

3 BOTH

DON'T KNOW

REFUSED

SPOS37

Have you received any medical treatment or physical health care?

1 YES

2 NO

DON'T KNOW

REFUSED

SPOS37a

[If SPOS37=YES and (SREF1E=YES and SREF3 NE NO)]

Did you receive this service while you were living in the community, while you were reincarcerated, or both?

1 LIVING IN THE COMMUNITY

2 WHILE REINCARCERATED

3 BOTH

DON'T KNOW

REFUSED

SPOS38

Have you received any **dental** services?

- 1 YES
- 2 NO
- DON'T KNOW
- REFUSED

SPOS38a

[If SPOS38=YES and (SREF1E=YES and SREF3 NE NO)]

Did you receive this service while you were living in the community, while you were reincarcerated, or both?

- 1 LIVING IN THE COMMUNITY
- 2 WHILE REINCARCERATED
- 3 BOTH
- DON'T KNOW
- REFUSED

SPOS39

Have you received any prescription medicine for a physical health condition you have had? If you do not have a physical health condition requiring prescription medicine, you can say "Not applicable"

- 1 YES
- 2 NO
- 3 NOT APPLICABLE – NO PHYSICAL HEALTH CONDITION
- DON'T KNOW
- REFUSED

SPOS39a

[If SPOS39=YES and (SREF1E=YES and SREF3 NE NO)]

Did you receive this service while you were living in the community, while you were reincarcerated, or both?

- 1 LIVING IN THE COMMUNITY
- 2 WHILE REINCARCERATED
- 3 BOTH
- DON'T KNOW
- REFUSED

SPOS40

Have you received mental health treatment or health care for emotional problems?

- 1 YES
- 2 NO
- DON'T KNOW
- REFUSED

SPOS40a

[If SPOS40=YES and (SREF1E=YES and SREF3 NE NO)]

Did you receive this service while you were living in the community, while you were reincarcerated, or both?

- 1 LIVING IN THE COMMUNITY
- 2 WHILE REINCARCERATED
- 3 BOTH
- DON'T KNOW
- REFUSED

SPOS41

Have you received any prescription medicine for a mental health condition you have had? If you do not have a mental health condition requiring prescription medicine, you can say "Not applicable"

- 1 YES
- 2 NO
- 3 NOT APPLICABLE – NO MENTAL HEALTH CONDITION
- DON'T KNOW
- REFUSED

SPOS41a

[If SPOS41=YES and (SREF1E=YES and SREF3 NE NO)]

Did you receive this service while you were living in the community, while you were reincarcerated, or both?

- 1 LIVING IN THE COMMUNITY
- 2 WHILE REINCARCERATED
- 3 BOTH
- DON'T KNOW
- REFUSED

SPOS43

SHOWCARD 5

Since your release, which of the following conditions have you received care for from a doctor, counselor, or other health professional? Please select all that apply.

	YES	NO
A. Alcohol abuse/dependence	1	2
B. Anxiety disorder (generalized anxiety)	1	2
C. Attention deficit/hyperactivity disorder (ADD/ADHD)	1	2
D. Bipolar disorder (manic depression)	1	2
E. Conduct disorder	1	2
F. Depression/dysthymia	1	2
G. Drug abuse/dependence	1	2
H. Obsessive compulsive disorder	1	2
I. Oppositional defiant disorder (ODD)	1	2
J. Post-traumatic stress disorder (PTSD)	1	2
K. Phobia (social or specific)	1	2
L. Schizophrenia	1	2
M. Some other problem/diagnosis	1	2

[DON'T KNOW AND REFUSED SHOULD BE ACCEPTED FOR ANY ITEM]

## SPOS44

[if any conditions in SPOS43 = 1. ASK ONLY FOR ITEMS ANSWERED 1]

Are you currently receiving treatment for these problems? If so, which ones?

	YES	NO
A. Alcohol abuse/dependence	1	2
B. Anxiety disorder (generalized anxiety)	1	2
C. Attention deficit/hyperactivity disorder (ADD/ADHD)	1	2
D. Bipolar disorder (manic depression)	1	2
E. Conduct disorder	1	2
F. Depression/dysthymia	1	2
G. Drug abuse/dependence	1	2
H. Obsessive compulsive disorder	1	2
I. Oppositional defiant disorder (ODD)	1	2
J. Post-traumatic stress disorder (PTSD)	1	2
K. Phobia (social or specific)	1	2
L. Schizophrenia	1	2
M. Some other problem/diagnosis	1	2

[DON'T KNOW AND REFUSED SHOULD BE ACCEPTED FOR ANY ITEM]

## SPOS45

Since your release, about how many days were you hospitalized or in an intensive outpatient program for emotional or psychological problems? REFER TO REFERENCE CALENDAR

NUMBER OF DAYS: (RANGE 0 – 180)

DON'T KNOW

REFUSED

## SPOS46

Now I'm going to ask about any drug or alcohol services you may have received. Since your release, have you received any professional treatment for drugs or alcohol, such as treatment in a residential facility, group therapy, or individual counseling?

1 YES

2 NO

DON'T KNOW

REFUSED

## SPOS46a

[If SPOS46=YES and (SREF1E=YES and SREF3 NE NO)]

Did you receive this service while you were living in the community, while you were reincarcerated, or both?

1 LIVING IN THE COMMUNITY

2 WHILE REINCARCERATED

3 BOTH

DON'T KNOW

REFUSED

SPOS47

Since your release, have you received any other support or services for drugs or alcohol, such as Alcoholics Anonymous (AA), Narcotics Anonymous (NA), or drug education classes or programs?

- 1 YES
- 2 NO
- DON'T KNOW
- REFUSED

SPOS47a

[If SPOS47=YES and (SREF1E=YES and SREF3 NE NO)]

Did you receive this service while you were living in the community, while you were reincarcerated, or both?

- 1 LIVING IN THE COMMUNITY
- 2 WHILE REINCARCERATED
- 3 BOTH
- DON'T KNOW
- REFUSED

SPOS 50

Now I'd like to ask about areas of your life that you may need help with. Please tell me how much you agree with the following statements.

SHOWCARD 6

You would like more employment services, such as vocational training, job readiness programs, or certification programs. Would you say...

- 1 Strongly agree
- 2 Agree
- 3 Disagree
- 4 Strongly disagree
- DON'T KNOW
- REFUSED

SPOS 51

You would like more educational programs, such as GED, basic education, or higher education classes.

- 1 STRONGLY AGREE
- 2 AGREE
- 3 DISAGREE
- 4 STRONGLY DISAGREE
- DON'T KNOW
- REFUSED

SPOS 52

You would like more alcohol or drug treatment services.

- 1 STRONGLY AGREE
- 2 AGREE
- 3 DISAGREE
- 4 STRONGLY DISAGREE
- DON'T KNOW
- REFUSED

SPOS 53

You would like more mental health treatment or health care for emotional problems.

- 1 STRONGLY AGREE
- 2 AGREE
- 3 DISAGREE
- 4 STRONGLY DISAGREE
- DON'T KNOW
- REFUSED

SPOS 54

You would like more training on how to change attitudes related to criminal thinking.

- 1 STRONGLY AGREE
- 2 AGREE
- 3 DISAGREE
- 4 STRONGLY DISAGREE
- DON'T KNOW
- REFUSED

SPOS 55

You would like more help with housing and accessing resources like clothing banks and food pantries.

- 1 STRONGLY AGREE
- 2 AGREE
- 3 DISAGREE
- 4 STRONGLY DISAGREE
- DON'T KNOW
- REFUSED

**DOMAIN 9: PHYSICAL AND MENTAL HEALTH**

SPMH1a

The next questions ask about your health. Since your release on [RELDATE], have you been hospitalized or treated in an emergency room following an injury to your head or neck?

- 1 YES
- 2 NO
- DON'T KNOW
- REFUSED

SPHM1b

Since your release, have you injured your head or neck in a car accident or from crashing some other moving vehicle like a bicycle, motorcycle, or All-Terrain-Vehicle (ATV)?

- 1 YES
- 2 NO
- DON'T KNOW
- REFUSED

SPMH1c

Since your release, have you injured your head or neck in a fall or from being hit by something, for example, falling from a bike or horse, rollerblading, falling on ice, being hit by a rock, playing sports or on the playground?

- 1 YES
- 2 NO
- DON'T KNOW
- REFUSED

SPMH1d

Since your release, have you injured your head or neck in a fight, from being hit by someone, from being shaken violently, or being shot in the head?

- 1 YES
- 2 NO
- DON'T KNOW
- REFUSED

SPMH1e

Since your release, have you been nearby when an explosion or a blast occurred? Think about any military combat- or training-related incidents or prior work-related incidents, such as construction.

- 1 YES
- 2 NO
- DON'T KNOW
- REFUSED

SPMH1

[if SPMH1a, 1b, 1c, 1d, or 1e = YES]

**How many times have you had one of these head or neck injuries since your release on [RELDATE]?**

[RANGE - 0-99 times]

SPMH4

[if SPMH1a, 1b, 1c, 1d, or 1e = YES]

**For how many of these head or neck injuries did you receive medical attention, including being treated in an emergency department, doctor's office, or clinic?**

[RANGE - 0-99]

SPMH5

[if SPMH1a, 1b, 1c, 1d, or 1e = YES]

Were you knocked out or did you lose consciousness from any of the head or neck injuries you reported just now?

- 1 YES
- 2 NO
- DON'T KNOW
- REFUSED

SPMH6

[if SPMH5 = 1 (YES)]

What is the longest time you were knocked out or unconscious?

- 1 Less than 30 minutes
- 2 Between 30 minutes and 24 hours
- 3 For more than 24 hours
- DON'T KNOW
- REFUSED

SPMH7

[IF SPMH1a, 1b, 1c, 1d OR 1e = YES]

Were you dazed or confused after any of the head or neck injuries that you reported just now, even if you were not knocked out or did not lose consciousness from any of them?

- 1 YES
- 2 NO
- DON'T KNOW
- REFUSED

SPMH7a

Since your release, have you had a period of time in which you experienced multiple, repeated impacts to your head? For example, a history of abuse, contact sports, or during military duty?

- 1 YES
- 2 NO
- DON'T KNOW
- REFUSED

SPMH8

Now I'm going to ask you some questions about your current health. Would you say that in general your health is excellent, very good, good, fair, or poor?

- 1 EXCELLENT
- 2 VERY GOOD
- 3 GOOD
- 4 FAIR
- 5 POOR
- DON'T KNOW
- REFUSED

SPMH9

The next questions ask about the past 30 days. REFER TO DATE CIRCLED IN BLUE ON REFERENCE CALENDAR.

Now thinking about your physical health, which includes physical illness and injury, for how many days during the past 30 days was your physical health not good?

[RANGE -0-30]

SPMH10

Now thinking about your mental health, which includes stress, depression, and problems with emotions, for how many days during the past 30 days was your mental health not good?

[RANGE -0-30]

SPMH11

During the past 30 days, for about how many days did poor physical or mental health keep you from doing your usual activities, such as self-care, work, or recreation?

[RANGE -0-30]

SPMH12

These next questions are about physical, mental, or emotional problems or limitations you may have in your daily life. Are you **limited** in any way in any activities because of any impairment or health problem?

1 YES

2 NO

DON'T KNOW

REFUSED

SPMH13

[IF SPMH12=1]

What is the <B>major</B> impairment or health problem that limits your activities?

FI: DO NOT READ. CODE ONLY ONE CATEGORY.

1 ARTHRITIS/RHEUMATISM

2 BACK OR NECK PROBLEM

3 FRACTURES, BONE/JOINT INJURY

4 WALKING PROBLEM

5 LUNG/BREATHING PROBLEM

6 HEARING PROBLEM

7 EYE/VISION PROBLEM

8 HEART PROBLEM

9 STROKE PROBLEM

10 HYPERTENSION/HIGH BLOOD PRESSURE

11 DIABETES

12 CANCER

13 DEPRESSION/ANXIETY/EMOTIONAL PROBLEM

14 OTHER IMPAIRMENT/PROBLEM

DON'T KNOW

REFUSED

SPMH14

[IF SPMH12=1]

For <B> how long< /B> have your activities been limited because of your major impairment or health problem?

NUMBER:

SPECIFY THE UNIT OF TIME

1 DAYS

2 WEEKS

3 MONTHS

4 YEARS

SPMH15

[IF SPMH12=1]

Because of any impairment or health problem, do you need the help of other persons with your <B>personal care</B> needs, such as eating, bathing, dressing, or getting around the house?

1 YES

2 NO

DON'T KNOW

REFUSED

SPMH16

[IF SPMH12=1]

Because of any impairment or health problem, do you need the help of other persons in handling your <B>routine</B> needs, such as everyday household chores, doing necessary business, shopping, or getting around for other purposes?

1 YES

2 NO

DON'T KNOW

REFUSED

SPMH17

During the past 30 days, for about how many days did <B>pain</B> make it hard for you to do your usual activities, such as self-care, work, or recreation?

[RANGE - 0-30]

SPMH18

During the past 30 days, for about how many days have you felt <B>sad, blue, or depressed</B>?

[RANGE - 0-30]

SPMH19

During the past 30 days, for about how many days have you felt <B>worried, tense, or anxious</B>?

[RANGE - 0-30]

SPMH20

During the past 30 days, for about how many days have you felt you did <B>not </B> get <B>enough rest or sleep</B>?

[RANGE - 0-30]

SPMH21

During the past 30 days, for about how many days have you felt <B>very healthy and full of energy</B>?  
(0-30)

[RANGE – 0 – 30]

SPMH22

In your life, have you ever had any experience that was so frightening, horrible, or upsetting, that, **in the past month, you...**

have had nightmares about it or thought about it when you did not want to?

1 YES

2 NO

DON'T KNOW

REFUSED

SPMH23

(In your life, have you ever had any experience that was so frightening, horrible, or upsetting, that, **in the past month, you...**)

tried hard not to think about it or went out of your way to avoid situations that reminded you of it?

1 YES

2 NO

DON'T KNOW

REFUSED

SPMH24

(In your life, have you ever had any experience that was so frightening, horrible, or upsetting, that, **in the past month, you...**)

were constantly on guard, watchful, or easily startled?

1 YES

2 NO

DON'T KNOW

REFUSED

SPMH25

(In your life, have you ever had any experience that was so frightening, horrible, or upsetting, that, **in the past month, you...**)

felt numb or detached from others, activities, or your surroundings?

1 YES

2 NO

DON'T KNOW

REFUSED

SINC1

[IF SREF1D=YES, SKIP TO ACASI1. IF SREF1D=NO, ASK SINC1.]

Before we get to the part of the interview where you take the computer and answer the questions yourself, we have one more thing to ask you. FI INSTRUCTION: TAKE OUT ORAL FLUIDS CONSENT FORM AND READ FORM.

PRESS 1 TO CONTINUE

SINC2

DID RESPONDENT AGREE TO PROVIDE AN ORAL FLUIDS SAMPLE?

1 YES

2 NO

[IF SINC2=1, "Thank you for agreeing to provide an oral fluids sample. At this time, I'd like to ask that you please remove any gum, and not eat or drink anything for the next 10 minutes. That will allow us to obtain a clean sample. We will continue with the interview now, and then after this section we will go over how to collect the oral fluids sample."]

[IF SINC2 NE 1, "Thank you for taking the time to read over that. We will finish the interview now."]

**DOMAIN 10: ACASI**

**ACASI Tutorial**

ACASI1

[NO AUDIO REQUIRED]

You will complete the rest of this interview on your own using the computer and headphones. Before you start, we'll go through a short practice session together so you can learn how to use this computer to answer the interview questions. After this introduction, I will move away from the computer and will not be able to see your answers so that you can take the interview in privacy.

MOVE COMPUTER SO RESPONDENT CAN SEE THE SCREEN.

For each question, the answers will appear on the screen. The answer will correspond to a number. To choose an answer you will need to press the number.

PRESS **ENTER** BUTTON.

After you choose your answer, you must touch the **ENTER** button on the right side of the keyboard. The ENTER button is the large button with a left hand arrow on it. PRESS THE **ENTER** BUTTON.

**ACASI2**

[NO AUDIO REQUIRED]

If you want to go back to the previous question, use the up arrow on your keyboard.

You can use the up arrow to go back to the previous question and change the answer.

You can also use the up arrow to see your previous answer without changing it.

If you don't know the answer to the question, press the [F3] key and you will go on to the next question. POINT OUT AND PRESS THE [F3] KEY.

**ACAS13**

[NO AUDIO REQUIRED]

If you don't want to answer the question, you can press the [F4] key [POINT TO THE F4 KEY] and you will go on to the next question. PRESS **[F4]** KEY.

**ACAS14**

[NO AUDIO REQUIRED]

If you want the computer to read the question again, you can press the [F10] button [POINT TO [F10] BUTTON].

**ACAS15**

[NO AUDIO REQUIRED]

You can adjust the volume here [DEMONSTRATE VOLUME ADJUSTMENT, ON THE HEADPHONE CORD]. Or if you want to turn the volume off you can adjust it on your headphones or take your headphones off.

Please put on your headphones. When you are ready, let me know.

MOVE COMPUTER SO RESPONDENT CAN USE IT. ONCE RESPONDENT HAS HEADPHONES ON, PRESS THE **ENTER** BUTTON SO RESPONDENT CAN BEGIN PRACTICE SESSION.

**PLAY AUDIO FOR ALL FOLLOWING SCREENS**

**ACAS16**

This screen will play while you adjust the volume in your headphones. When you have adjusted the volume to a level that is comfortable to you, touch the **ENTER** button to continue with the practice session.

**ACAS17**

Welcome to RTI's self-interviewing system, which lets you control the interview and answer in complete privacy. In this system, you can read the questions on the computer screen and hear them read through the headphones.

First, you will learn how to use the system and complete some practice questions. You will learn how to enter answers and how to back-up if you make a mistake and want to change an answer.

If you would like to just see the questions on the screen, you can turn off the voice on your headphones or take them off.

Touch the large **ENTER** button. The ENTER button is the one with an arrow pointing to the left.

**ACAS18**

After you hear the question, you will hear the possible answers. To answer the question, you simply pick the number associated with your answer and then press the ENTER button.

Do you like ice cream?

*For Yes, press 1*

*For No, press 2*

**ACASI9**

The last question was a Yes-No question. Other questions will have more answers to choose from, and you will pick your answer from a list.

I like pepperoni pizza. Would you say you strongly agree, agree, disagree or strongly disagree? Pick the number that best fits you and press the ENTER button.

*For Strongly agree, press 1*

*For Agree, press 2*

*For Disagree, press 3*

*For Strongly Disagree, press 4*

**ACASI10**

For some questions you will enter your answer using the number keys on the keyboard. Try using the number keys to answer the question below. If you need to change your answer press the delete key to remove what you have already entered and then put in a new answer.

How old were you the first time you were arrested?

NUMBER: \_\_\_\_\_ [RANGE: 0 – 999]

**ACASI11**

You can tell the computer to repeat a question by touching the **[F10]** button. Try this now.

How many times did you listen to this question?

*I have listened to this screen more than once.*

*I have only listened to this screen one time*

**ACASI12**

Some questions will ask about the past 30 days. Remember that you can use your reference calendar if you want to.

PRESS THE ENTER KEY TO CONTINUE.

**ACASI13**

If you have any questions, ask your interviewer now. If not, tell the interviewer you are ready to begin and he or she will move away from the computer. Press the ENTER key when you are ready to begin.

SACAS2

[IF SREF3=NO, SKIP TO SACAS177]

Now I'm going to ask you about your use of alcohol and other drugs since your release date, shown on the screen below. Remember that your answers will be kept completely confidential. Our data security procedures will prevent anyone outside the study from finding out what your answers were. Since your release, on the date shown below, have you had a drink of any type of alcoholic beverage?

RELEASE DATE: [DISPLAY [RELDATE]]

1 Yes

2 No

DON'T KNOW

REFUSED

SACAS4

[if SACAS2=1 AND (SREF1D=NO OR INCARCERATION DATE IN SREF2 IS LESS THAN 30 DAYS AGO)]

Have you drunk alcohol in the past 30 days, that is, since the date shown below? It may be helpful to look at the reference calendar for this question.

[DISPLAY DATE 30 DAYS AGO]

1 Yes

2 No

DON'T KNOW

REFUSED

SACAS5

[SACAS4=1 AND (SREF1D=NO OR INCARCERATION DATE IN SREF2 IS LESS THAN 30 DAYS AGO)]

Have you drunk alcohol to the point of being drunk in the past 30 days?

1 Yes

2 No

DON'T KNOW

REFUSED

SACAS6

Now I'm going to ask about your use of prescription drugs. We are interested in knowing whether you have used the following medicines without a prescription or for other reasons than were prescribed, or in larger amounts, or more often than your doctor ordered.

Look at Showcard 7

Since your release on the date below, have you used any prescription <B>stimulants</B>, such as Ritalin, Dexedrine, Adderall, diet pills, or Benzedrine, without a prescription or for other reasons than were prescribed, or in larger amounts, or more often than your doctor ordered?

RELEASE DATE: [DISPLAY [RELDATE]]

1 Yes

2 No

DON'T KNOW

REFUSED

SACAS8

[if SACAS6=1 AND (SREF1D=NO OR INCARCERATION DATE IN SREF2 IS LESS THAN 30 DAYS AGO)]

Have you used stimulants in the past 30 days?

1 Yes

2 No

DON'T KNOW

REFUSED

SACAS9

Please look at Showcard 8

Since your release, have you used any prescription<b> pain relievers</b>, including opioids and morphine derivatives such as Vicodin, OxyContin, codeine, morphine, without a prescription or for other reasons than were prescribed, or in larger amounts, or more often than your doctor ordered?

1 Yes

2 No

DON'T KNOW

REFUSED

SACAS11

[if SAAS9=1 AND (SREF1D=NO OR INCARCERATION DATE IN SREF2 IS LESS THAN 30 DAYS AGO)]

Have you used pain relievers or opiates in the past 30 days?

1 Yes

2 No

DON'T KNOW

REFUSED

SACAS12

Please look at Showcard 9.

Now I'm going to ask about your use of other prescription drugs that you have used without a prescription or for other reasons than were prescribed, or in larger amounts, or more often than your doctor ordered. This includes **sedatives**, such as barbiturates, sleeping pills, qualudes, or Phenobarbital; **tranquilizers**, such as Xanax, Valium, nerve pills, or tranks; or **methadone**, such as Street Methodone or Amidone . Since your release, have you used any of these other prescription drugs without a prescription or for other reasons than were prescribed, or in larger amounts, or more often than your doctor ordered?

1 Yes

2 No

DON'T KNOW

REFUSED

SACAS14

[If SACAS12=1 AND (SREF1D=NO OR INCARCERATION DATE IN SREF2 IS LESS THAN 30 DAYS AGO)]

Have you used any of these other prescription drugs in the past 30 days?

1 Yes

2 No

DON'T KNOW

REFUSED

SACAS15

Please look at Showcard 10.

Now I am going to ask about your recreational use of other drugs. I will be asking about marijuana, cocaine, heroin, amphetamines, and other drugs. Since your release, have you used **marijuana or hashish**? Marijuana is also called pot, grass, or hash. Please do not count synthetic marijuana, like Spice, here.

1 Yes

2 No

DON'T KNOW

REFUSED

SACAS17

[if SACAS15=1 AND (SREF1D=NO OR INCARCERATION DATE IN SREF2 IS LESS THAN 30 DAYS AGO)]

Have you used marijuana or hashish in the past 30 days?

1 Yes

2 No

DON'T KNOW

REFUSED

SACAS18

Please look at Showcard 11.

Since your release, have you used any non-prescription <B>amphetamines or methamphetamine</B>? This includes speed, meth, crystal meth, ice, and chalk.

1 Yes

2 No

DON'T KNOW

REFUSED

SACAS20

[If SACAS18=1 AND (SREF1D=NO OR INCARCERATION DATE IN SREF2 IS LESS THAN 30 DAYS AGO)]

Have you used non-prescription amphetamines or methamphetamine in the past 30 days?

1 Yes

2 No

DON'T KNOW

REFUSED

SACAS21

Please look at Showcard 12.

Since your release, have you used <B>cocaine</B>? This includes cocaine in all forms, such as powder cocaine, crack cocaine, free base, or coco paste.

1 Yes

2 No

DON'T KNOW

REFUSED

SACAS23

[If SACAS21=1 AND (SREF1D=NO OR INCARCERATION DATE IN SREF2 IS LESS THAN 30 DAYS AGO)]

Have you used cocaine in the past 30 days?

1 Yes

2 No

DON'T KNOW

REFUSED

SACAS24

Please look at Showcard 13.

Since your release, have you used <B>heroin or opium</B>, such as Big H, Black Tar, Chiva, Hell Dust, Horse, Negra, and Thunder? This includes smoking, sniffing, snorting, and injecting heroin.

1 Yes

2 No

DON'T KNOW

REFUSED

SACAS26

[If SACAS24=1 AND (SREF1D=NO OR INCARCERATION DATE IN SREF2 IS LESS THAN 30 DAYS AGO)]

Have you used heroin in the past 30 days?

1 Yes

2 No

DON'T KNOW

REFUSED

SACAS27

Please look at Showcard 14.

Since your release, have you used any other drugs? This includes <B>synthetic marijuana</B>, such as Spice or K2; <B>club drugs</B>, including Ecstasy, Molly, MDMA, GHB, or Rohypnol; <B>hallucinogens</B> such as LSD, acid, PCP, angel dust, peyote; mescaline; magic mushrooms, or psilocybin; <B>inhalants</B> such as amyl nitrite, "poppers," "rush," correction fluid, lighter fluid, glue, toluene, halothane, paint solvents, butane or propane, nitrous oxide or "whippets," magic markers, spray paints, and other aerosol sprays such as non-stick cooking spray, hair spray, asthma spray, or air fresheners ; or <B>other drugs</B>, such as Khat, Salvia, DXM, bath salts, DMT, 2C, or BZP?

1 Yes

2 No

DON'T KNOW

REFUSED

SACAS29

[if SACAS24=1 AND (SREF1D=NO OR INCARCERATION DATE IN SREF2 IS LESS THAN 30 DAYS AGO)]

Have you used any of these other drugs in the past 30 days?

1 Yes

2 No

DON'T KNOW

REFUSED

SACAS30

Since your release, have you used larger amounts of drugs or used them for a longer time than you planned or intended?

1 Yes

2 No

DON'T KNOW

REFUSED

SACAS31

Have you tried to cut down on your drug use but were unable to do it?

1 Yes

2 No

DON'T KNOW

REFUSED

SACAS32

Have you spent a lot of time getting drugs, using them, or recovering from their use?

1 Yes

2 No

DON'T KNOW

REFUSED

SACAS33

Have you gotten so high or sick from drugs that it kept you from doing work, going to school, or caring for children?

1 Yes

2 No

DON'T KNOW

REFUSED

SACAS34

Since your release, have you gotten so high or sick from drugs that it caused an accident or put you or others in danger?

1 Yes

2 No

DON'T KNOW

REFUSED

SACAS35

Have you spent less time at work, school, or with friends so that you could use drugs?

1 Yes

2 No

DON'T KNOW

REFUSED

SACAS36

Has your drug use caused emotional or psychological problems?

1 Yes

2 No

DON'T KNOW

REFUSED

SACAS37

Has your drug use caused problems with family, friends, work or police?

1 Yes

2 No

DON'T KNOW

REFUSED

SACAS38

Since your release, has your drug use caused physical health or medical problems?

1 Yes

2 No

DON'T KNOW

REFUSED

SACAS39

Have you increased the amount of a drug you were taking so that you could get the same effects as before?

1 Yes

2 No

DON'T KNOW

REFUSED

SACAS40

Have you kept taking a drug to avoid withdrawal symptoms or keep from getting sick?

1 Yes

2 No

DON'T KNOW

REFUSED

SACAS41

Have you gotten sick or had withdrawal symptoms when you quit or missed taking a drug?

1 Yes

2 No

DON'T KNOW

REFUSED

SACAS42

Next, I'd like to ask about physical violence you may have experienced since your release, on the date shown below. It may be helpful to look at the reference calendar to remember what was going on in your life during this time.

Release date: [DISPLAY [RELDATE]]

Since your release, how often have you been threatened with being hit by a fist or anything else that could hurt you?

1 Never

2 Once or twice

3 Three or more times

DON'T KNOW

REFUSED

SACAS43

... have you had anything thrown at you that could hurt you?

- 1 Never
- 2 Once or twice
- 3 Three or more times

DON'T KNOW

REFUSED

SACAS44

...have you been pushed, grabbed, or shoved?

- 1 Never
- 2 Once or twice
- 3 Three or more times

DON'T KNOW

REFUSED

SACAS45

...have you been slapped, kicked, bitten, or hit with a fist?

- 1 Never
- 2 Once or twice
- 3 Three or more times

DON'T KNOW

REFUSED

SACAS46

...have you been threatened with a weapon or had a weapon used on you?

- 1 Never
- 2 Once or twice
- 3 Three or more times

DON'T KNOW

REFUSED

SACAS47

...have you required medical attention for violent acts directed at you by others?

- 1 Never
- 2 Once or twice
- 3 Three or more times

DON'T KNOW

REFUSED

SACAS48

Since your release, how often have . . .

...<B>you</B> threatened to hit someone with a fist or anything else that could hurt them?

- 1 Never
- 2 Once or twice
- 3 Three or more times
- DON'T KNOW
- REFUSED

SACAS49

...<B>you</B> thrown anything at someone that could hurt them?

- 1 Never
- 2 Once or twice
- 3 Three or more times
- DON'T KNOW
- REFUSED

SACAS50

...<B>you</B> pushed, grabbed, or shoved someone?

- 1 Never
- 2 Once or twice
- 3 Three or more times
- DON'T KNOW
- REFUSED

SACAS51

...<B>you</B> slapped, kicked, bitten, or hit someone with a fist?

- 1 Never
- 2 Once or twice
- 3 Three or more times
- DON'T KNOW
- REFUSED

SACAS52

...<B>you</B> threatened to use or use a weapon on someone?

- 1 Never
- 2 Once or twice
- 3 Three or more times
- DON'T KNOW
- REFUSED

SACAS146

[ASK IF SSUP1a=1. IF SSUP1a=2, SKIP TO SACAS167]

The next questions ask about your experiences under supervision, such as parole or probation, since your release on the date shown below.

Release date: [DISPLAY [RELDATE]]

Since your release, during the time that you were on supervision, have you ever failed to comply with any conditions of your supervision?

1 Yes

2 No

DON'T KNOW

REFUSED

SACAS147

Since your release, during the time that you were on supervision, have you tested positive for drug use at least once?

1 Yes

2 No

DON'T KNOW

REFUSED

SACAS148

Sometimes people under supervision receive sanctions or punishments for noncompliance. Since your release, during the time that you were on supervision, have you been placed on house arrest or community control?

1 Yes

2 No

DON'T KNOW

REFUSED

SACAS149

(Since your release, during the time that you were on supervision) ...have you been required to spend time in jail as a sanction or punishment for noncompliance?

1 Yes

2 No

DON'T KNOW

REFUSED

SACAS150

(Since your release, during the time that you were on supervision) ...have you received a formal violation? A formal violation is where a judge violates someone's probation or parole because the person did not follow the terms or conditions of supervision.

1 Yes

2 No

DON'T KNOW

REFUSED

SACAS151

If your supervision officer thought that you were using drugs or not complying with other supervision conditions, how likely to you think it is that you would get some jail time?

1. Very likely
  2. Somewhat likely
  3. Not very likely
  4. Not at all likely
- DON'T KNOW  
REFUSED

SACAS152

(If your supervision officer thought that you were using drugs or not complying with other supervision conditions, how likely to you think it is that) ...you would be violated (given a violation)?

1. Very likely
  2. Somewhat likely
  3. Not very likely
  4. Not at all likely
- DON'T KNOW  
REFUSED

SACAS153

(If your supervision officer thought that you were using drugs or not complying with other supervision conditions, how likely to you think it is that) ...you would be revoked and end up in jail or prison?

1. Very likely
  2. Somewhat likely
  3. Not very likely
  4. Not at all likely
- DON'T KNOW  
REFUSED

SACAS 154

Please tell me if you strongly agree, agree, disagree, or strongly disagree with the following statements about your parole or probation officer during the most recent time that you were under supervision. Your parole or probation officer has been helpful with your transition back to the community.

1. Strongly agree
  2. Agree
  3. Disagree
  4. Strongly disagree
- DON'T KNOW  
REFUSED

SACAS155

Your parole or probation officer seems trustworthy.

1. Strongly agree
2. Agree
3. Disagree
4. Strongly disagree

DON'T KNOW

REFUSED

SACAS156

Your parole or probation officer gives you correct information.

1. Strongly agree
2. Agree
3. Disagree
4. Strongly disagree

DON'T KNOW

REFUSED

SACAS157

Your parole or probation officer acts too busy to help you.

1. Strongly agree
2. Agree
3. Disagree
4. Strongly disagree

DON'T KNOW

REFUSED

SACAS158

Your parole or probation officer treats you with respect.

1. Strongly agree
2. Agree
3. Disagree
4. Strongly disagree

DON'T KNOW

REFUSED

SACAS159

Your parole or probation officer acts in a professional way.

1. Strongly agree
2. Agree
3. Disagree
4. Strongly disagree

DON'T KNOW

REFUSED

SACAS160

Your parole or probation officer doesn't listen to you.

1. Strongly agree
2. Agree
3. Disagree
4. Strongly disagree

DON'T KNOW

REFUSED

SACAS161

Your parole or probation officer calls you back or talks to you right away when you have a problem.

1. Strongly agree
2. Agree
3. Disagree
4. Strongly disagree

DON'T KNOW

REFUSED

SACAS162

Your parole or probation officer is knowledgeable about your case.

1. Strongly agree
2. Agree
3. Disagree
4. Strongly disagree

DON'T KNOW

REFUSED

SACAS163

Your parole or probation officer helps you to succeed.

1. Strongly agree
2. Agree
3. Disagree
4. Strongly disagree

DON'T KNOW

REFUSED

SACAS164

Your parole or probation officer gives you a chance to tell your side of the story.

1. Strongly agree
2. Agree
3. Disagree
4. Strongly disagree

DON'T KNOW

REFUSED

SACAS165

Your parole or probation officer treats you fairly.

1. Strongly agree
2. Agree
3. Disagree
4. Strongly disagree

DON'T KNOW

REFUSED

SACAS166

Your parole or probation officer assists you in getting the services you need.

1. Strongly agree
2. Agree
3. Disagree
4. Strongly disagree

DON'T KNOW

REFUSED

SACAS167

Now I'm going to ask about various crimes you may have committed since your release on the date below, regardless of whether or not you were caught. Remember, your answers will be kept completely confidential and **no one** except the people working on the study will be able to find out how you've answered.

Release date: [DISPLAY [RELDATE]]

Since your release, have you committed any violent crimes, **regardless** of whether or not you were caught? By violent crimes, we mean things like physical or sexual assault, rape, robbery, manslaughter, attempted murder, murder, vehicular manslaughter, or vehicular homicide, and it doesn't matter whether you did or did not know the person.

- 1 Yes
  - 2 No
- DON'T KNOW
- REFUSED

SACAS168

Since your release, have you committed any other crimes against people, **regardless** of whether or not you were caught? Crimes against people include things like hit and run, child neglect, or harassment.

- 1 Yes
  - 2 No
- DON'T KNOW
- REFUSED

SACAS169

Since your release, have you carried a gun, knife, or other weapon, **regardless** of whether or not you were caught?

1 Yes

2 No

DON'T KNOW

REFUSED

SACAS170

Since your release, have you used or possessed either drugs or drug paraphernalia, **regardless** of whether or not you were caught?

1 Yes

2 No

DON'T KNOW

REFUSED

SACAS171

Since your release, have you sold any drugs, **regardless** of whether or not you were caught?

1 Yes

2 No

DON'T KNOW

REFUSED

SACAS172

Since your release, have you committed any prescription drug crimes, such as forging prescriptions, stealing, or selling prescription drugs, **regardless** of whether or not you were caught?

1 Yes

2 No

DON'T KNOW

REFUSED

SACAS173

Since your release, have you committed any other drug crimes, such as manufacturing or trafficking, **regardless** of whether or not you were caught?

1 Yes

2 No

DON'T KNOW

REFUSED

SACAS174

Since your release, have you driven while intoxicated or under the influence, **regardless** of whether or not you were caught?

1 Yes

2 No

DON'T KNOW

REFUSED

SACAS175

Since your release, have you committed any property crimes, **regardless** of whether or not you were caught? Property crimes include things like burglary, larceny, auto theft, bad checks, fraud, forgery, or grand theft.

1 Yes

2 No

DON'T KNOW

REFUSED

SACAS176

Since your release, have you committed any other crimes such as prostitution, soliciting, shoplifting, or disorderly conduct, **regardless** of whether or not you were caught? Do not include any procedural violations you may have committed.

1 Yes

2 No

DON'T KNOW

REFUSED

SACAS122

The next questions ask more about how your life has been since your release from the incarceration where we first interviewed you. How easy or hard has it been for you to get a decent job since your release?

1. Very easy

2. Pretty easy

3. Pretty hard

4. Very hard

DON'T KNOW

REFUSED

SACAS123

[ASK IF SEMP2=YES]

How easy or hard has it been for you to **keep** a job once you got one?

1. Very easy

2. Pretty easy

3. Pretty hard

4. Very hard

DON'T KNOW

REFUSED

SACAS124

How easy or hard has it been for you to stay clean and sober?

1. Very easy

2. Pretty easy

3. Pretty hard

4. Very hard

DON'T KNOW

REFUSED

SACAS125

How easy or hard has it been for you to deal with pressure and stress you have faced?

1. Very easy
  2. Pretty easy
  3. Pretty hard
  4. Very hard
- DON'T KNOW  
REFUSED

SACAS126

How easy or hard has it been for you to stay away from friends or hangouts that get you into trouble?

1. Very easy
  2. Pretty easy
  3. Pretty hard
  4. Very hard
- DON'T KNOW  
REFUSED

SACAS127

How easy or hard has it been for you to get services and programs to help you?

1. Very easy
  2. Pretty easy
  3. Pretty hard
  4. Very hard
- DON'T KNOW  
REFUSED

SACAS128

How easy or hard has it been for you to get support from your family to help you stay away from drugs or alcohol?

1. Very easy
  2. Pretty easy
  3. Pretty hard
  4. Very hard
- DON'T KNOW  
REFUSED

SACAS129

How easy or hard has it been for you to get support from your friends to help you stay away from drugs or alcohol?

1. Very easy
  2. Pretty easy
  3. Pretty hard
  4. Very hard
- DON'T KNOW  
REFUSED

SACAS130

How easy or hard has it been for you to get someone in your family to give you rides to work, appointments, or meetings?

1. Very easy
  2. Pretty easy
  3. Pretty hard
  4. Very hard
- DON'T KNOW  
REFUSED

SACAS131

How easy or hard has it been for you to get a friend to give you rides to work, appointments, or meetings?

1. Very easy
  2. Pretty easy
  3. Pretty hard
  4. Very hard
- DON'T KNOW  
REFUSED

SACAS132

How easy or hard has it been for you to get someone in your family to let you live with them if you need a place to stay? If you haven't needed it, please answer 5.

1. Very easy
  2. Pretty easy
  3. Pretty hard
  4. Very hard
  5. Haven't needed it
- DON'T KNOW  
REFUSED

SACAS133

How easy or hard has it been for you to get a friend to let you live with them if you need a place to stay? If you haven't needed it, please answer 5.

1. Very easy
  2. Pretty easy
  3. Pretty hard
  4. Very hard
  5. Haven't needed it
- DON'T KNOW  
REFUSED

SACAS134

[IF SSUP1A=YES]

How easy or hard has it been for you to comply with all of your supervision requirements?

1. Very easy
  2. Pretty easy
  3. Pretty hard
  4. Very hard
- DON'T KNOW  
REFUSED

SACAS135

How easy or hard has it been for you obey the law?

1. Very easy
  2. Pretty easy
  3. Pretty hard
  4. Very hard
- DON'T KNOW  
REFUSED

SACAS136

How easy or hard has it been for you to stay out of prison or jail?

1. Very easy
  2. Pretty easy
  3. Pretty hard
  4. Very hard
- DON'T KNOW  
REFUSED

SACAS137

How easy or hard has it been for you to make enough money to support yourself?

1. Very easy
  2. Pretty easy
  3. Pretty hard
  4. Very hard
- DON'T KNOW  
REFUSED

SHOWCARD 15

SACAS177

[ASK IF SREF1E=YES]

What would you say are the **three main** reasons that you ended up back in a correctional setting?

CHOOSE UP TO 3:

1. You could not find a good job
2. You did not have enough money
3. You experienced problems with your family
4. You associated with friends that pulled you back into crime
5. You could not find a place to live
6. You lived in a neighborhood where it was easy to get pulled back into crime
7. You didn't have transportation to get to a job or take care of other needs
8. You were using drugs or alcohol
9. You couldn't get the services you needed.
10. Your probation or parole officer was not helpful
11. You were under too much stress or pressure
12. You didn't care whether or not you were put back in prison
13. You found doing crimes exciting and challenging
14. You felt safer in the facility than out on the streets
15. You receive more services in a correctional setting than in the community
16. You ended up back in a correctional setting for some other reason)

[ALLOW UP TO 3 ANSWERS; DK AND RE SHOULD NOT BE ALLOWED IF THE INTERVIEWER PICKS ANY OTHER RESPONSE CATEGORY]

SHOWCARD 16

SACAS178

[ASK IF SREF1E=NO]

What **three** things have made the **most** difference in terms of keeping you out of trouble since being released from incarceration?

CHOOSE UP TO 3:

1. You found a good job
2. Your family is supportive
3. You stopped associating with friends that could get you into trouble
4. You found a stable or good place to live
5. You live in a safe neighborhood away from crime
6. You have adequate transportation
7. You stopped using drugs or alcohol
8. You got the services you needed
9. Your probation or parole officer was or is helpful
10. You learned how to deal with the stress or pressure in your life
11. You want to change for your children's sake
12. You are really committed to not going back to prison
13. Specific reentry programs have helped or are helping you
14. Your reentry case manager was or is helpful
15. Your religion or spirituality was or is helping you
16. You have stayed out of trouble for some other reason)

[ALLOW UP TO 3 ANSWERS; DK AND RE SHOULD NOT BE ALLOWED IF THE INTERVIEWER PICKS ANY OTHER RESPONSE CATEGORY]

SACAS53

Are you a member of a gang now?

1 Yes

2 No

DON'T KNOW

REFUSED

SACAS54

[if SACAS153=1]

Please tell me how much you agree or disagree with these next couple of statements. You would like to get out of your gang.

Do you strongly agree, agree, disagree, or strongly disagree with that statement?

1 Strongly agree

2 Agree

3 Disagree

4 Strongly disagree

DON'T KNOW

REFUSED

SACAS55

[If SACAS153=1]

You would be able to leave your gang if you wanted to.

- 1 Strongly agree
  - 2 Agree
  - 3 Disagree
  - 4 Strongly disagree
- DON'T KNOW  
REFUSED

SACAS56

[IF SREF3=NO, SKIP TO SACAS72]

Has anyone you have lived with since your release on the date shown below [IF SREF1E=YES, ADD "while you were in the community"] ever been in jail, prison, or some other correctional institution?

[RELDATE]

- 1 Yes
  - 2 No
- DON'T KNOW  
REFUSED

SACAS57

Does anyone you have lived with since your release use illegal drugs?

- 1 Yes
  - 2 No
- DON'T KNOW  
REFUSED

SACAS58

Since your release, have you supported yourself at all with illegal income?

- 1 Yes
  - 2 No
- DON'T KNOW  
REFUSED

SACAS59

[IF SACAS58 = 1]

Since your release, about how much of your income has come from illegal activity?

- 1. All
  - 2. About three-fourths
  - 3. About one half
  - 4. About one-quarter
  - 5. None
- DON'T KNOW  
REFUSED

SACAS138

What sources of financial support did you have in the first month after your release on the date shown below? For this question, it might be helpful to refer to the reference calendar. Select all that apply.

[RELDATE]

1. None
2. Pay from a job
3. Your savings
4. Money from other family members
5. Money from your friends
6. Public assistance
7. Money from illegal sources

DON'T KNOW

REFUSED

[DO NOT ALLOW DK OR RE IF AN ANSWER 1-7 IS SELECTED]

SACAS60

Please think about the people **other than family members** that you have spent the most time with since your release [IF SREF1E=YES, ADD "and while you were living in the community"]. How many of those people are employed?

1. None
2. Few
3. Half
4. Most

DON'T KNOW

REFUSED

SACAS61

How many of them have ever served time in a correctional facility, such as a jail, prison, or juvenile correctional facility?

1. None
2. Few
3. Half
4. Most

DON'T KNOW

REFUSED

SACAS62

How many are taking illegal drugs regularly?

1. None
2. Few
3. Half
4. Most

DON'T KNOW

REFUSED

SACAS63

How many are gang members?

1. None
2. Few
3. Half
4. Most

DON'T KNOW

REFUSED

SACAS64

How often do these people convince you to do things you know you should not do?

1. Never
2. Sometimes
3. Often

DON'T KNOW

REFUSED

SACAS68

Now think about the **family members** you have spent the most time with since your release [IF SREF1E=YES, ADD "and while you were living in the community"]. Have any of these family members ever been convicted of a crime?

- 1 Yes
- 2 No

DON'T KNOW

REFUSED

SACAS69

Have any of these family members ever had problems with drugs or alcohol?

- 1 Yes
- 2 No

DON'T KNOW

REFUSED

SACAS70

Have any of these family members ever been in a gang?

- 1 Yes
- 2 No

DON'T KNOW

REFUSED

SACAS71

Since your release, how often have these family members convinced you to do something you knew you shouldn't do?

1. Never
  2. Sometimes
  3. Often
- DON'T KNOW  
REFUSED

SACAS72

These next statements describe how you may **currently** feel about your relationships with your family. Please answer about the family members that you have spent the most time with since your release. Please tell me whether you strongly agree, agree, disagree, or strongly disagree with the following statements.

You feel close to your family.

- 1 Strongly agree
  - 2 Agree
  - 3 Disagree
  - 4 Strongly disagree
- DON'T KNOW  
REFUSED

SACAS73

You want your family to be involved in your life.

- 1 Strongly agree
  - 2 Agree
  - 3 Disagree
  - 4 Strongly disagree
- DON'T KNOW  
REFUSED

SACAS74

You consider yourself a source of support for your family.

- 1 Strongly agree
  - 2 Agree
  - 3 Disagree
  - 4 Strongly disagree
- DON'T KNOW  
REFUSED

SACAS75

You fight a lot with your family members.

- 1 Strongly agree
- 2 Agree
- 3 Disagree
- 4 Strongly disagree
- DON'T KNOW
- REFUSED

SACAS76

You often feel like you disappoint your family.

- 1 Strongly agree
- 2 Agree
- 3 Disagree
- 4 Strongly disagree
- DON'T KNOW
- REFUSED

SACAS77

You are criticized a lot by your family.

- 1 Strongly agree
- 2 Agree
- 3 Disagree
- 4 Strongly disagree
- DON'T KNOW
- REFUSED

SACAS78

You have someone in your family to talk to about yourself or your problems.

- 1 Strongly agree
- 2 Agree
- 3 Disagree
- 4 Strongly disagree
- DON'T KNOW
- REFUSED

SACAS79

You have someone in your family to turn to for suggestions about how to deal with a personal problem.

- 1 Strongly agree
- 2 Agree
- 3 Disagree
- 4 Strongly disagree
- DON'T KNOW
- REFUSED

SACAS80

You have someone in your family who understands your problems.

- 1 Strongly agree
- 2 Agree
- 3 Disagree
- 4 Strongly disagree
- DON'T KNOW
- REFUSED

SACAS81

You have someone in your family to love you and make you feel wanted.

- 1 Strongly agree
- 2 Agree
- 3 Disagree
- 4 Strongly disagree
- DON'T KNOW
- REFUSED

SACAS82

For the next set of questions, please indicate how well this describes your current thinking. When you want something, you expect people to deliver.

- 1 Strongly agree
- 2 Agree
- 3 Disagree
- 4 Strongly disagree
- DON'T KNOW
- REFUSED

SACAS83

Bad childhood experiences are partly to blame for your current situation.

- 1 Strongly agree
- 2 Agree
- 3 Disagree
- 4 STRONGLY DISAGREE
- DON'T KNOW
- REFUSED

SACAS84

The future is unpredictable and there is no point planning for it.

- 1 Strongly agree
- 2 Agree
- 3 Disagree
- 4 Strongly disagree
- DON'T KNOW
- REFUSED

SACAS85

Your crimes did not really harm anyone.

- 1 Strongly agree
- 2 Agree
- 3 Disagree
- 4 Strongly disagree
- DON'T KNOW
- REFUSED

SACAS86

You feel like what happens in your life is mostly determined by powerful people.

- 1 Strongly agree
- 2 Agree
- 3 Disagree
- 4 Strongly disagree
- DON'T KNOW
- REFUSED

SACAS87

You will never be satisfied until you get all that you deserve.

- 1 Strongly agree
- 2 Agree
- 3 Disagree
- 4 Strongly disagree
- DON'T KNOW
- REFUSED

SACAS88

A theft is all right as long as the victim is not physically injured.

- 1 Strongly agree
- 2 Agree
- 3 Disagree
- 4 Strongly disagree
- DON'T KNOW
- REFUSED

SACAS89

Even though you got caught, it was still worth the risk.

- 1 Strongly agree
- 2 Agree
- 3 Disagree
- 4 Strongly disagree
- DON'T KNOW
- REFUSED

SACAS90

Because of your history you get blamed for a lot of things you did not do.

1 Strongly agree

2 Agree

3 Disagree

4 Strongly disagree

DON'T KNOW

REFUSED

SACAS91

Most of the laws are good.

1 Strongly agree

2 Agree

3 Disagree

4 Strongly disagree

DON'T KNOW

REFUSED

SACAS92

Victims of crime usually get over it with time.

1 Strongly agree

2 Agree

3 Disagree

4 Strongly disagree

DON'T KNOW

REFUSED

SACAS93

When you commit a crime the only one affected is the victim.

1 Strongly agree

2 Agree

3 Disagree

4 Strongly disagree

DON'T KNOW

REFUSED

SACAS94

Most police officers and guards abuse their power.

1 Strongly agree

2 Agree

3 Disagree

4 Strongly disagree

DON'T KNOW

REFUSED

SACAS95

Society makes too big of a deal about your crimes.

- 1 Strongly agree
- 2 Agree
- 3 Disagree
- 4 Strongly disagree
- DON'T KNOW
- REFUSED

SACAS96

Sometimes you cannot control yourself.

- 1 Strongly agree
- 2 Agree
- 3 Disagree
- 4 Strongly disagree
- DON'T KNOW
- REFUSED

SACAS97

You expect people to treat you better than other people.

- 1 Strongly agree
- 2 Agree
- 3 Disagree
- 4 Strongly disagree
- DON'T KNOW
- REFUSED

SACAS98

People in authority are usually looking out for your best interest.

- 1 Strongly agree
- 2 Agree
- 3 Disagree
- 4 Strongly disagree
- DON'T KNOW
- REFUSED

SACAS99

Why plan to save for something if you can have it now.

- 1 Strongly agree
- 2 Agree
- 3 Disagree
- 4 Strongly disagree
- DON'T KNOW
- REFUSED

SACAS100

You insist on getting the respect that is due you.

- 1 Strongly agree
- 2 Agree
- 3 Disagree
- 4 Strongly disagree
- DON'T KNOW
- REFUSED

SACAS101

If a police officer or guard tells you to do something, there's usually a good reason for it.

- 1 Strongly agree
- 2 Agree
- 3 Disagree
- 4 Strongly disagree
- DON'T KNOW
- REFUSED

SACAS102

People in positions of authority generally take advantage of others.

- 1 Strongly agree
- 2 Agree
- 3 Disagree
- 4 Strongly disagree
- DON'T KNOW
- REFUSED

SACAS103

You are just a "born criminal."

- 1 Strongly agree
- 2 Agree
- 3 Disagree
- 4 Strongly disagree
- DON'T KNOW
- REFUSED

SACAS104

You deserve more than other people.

- 1 Strongly agree
- 2 Agree
- 3 Disagree
- 4 Strongly disagree
- DON'T KNOW
- REFUSED

SACAS105

You think it is better to enjoy today than worry about tomorrow.

- 1 Strongly agree
- 2 Agree
- 3 Disagree
- 4 Strongly disagree
- DON'T KNOW
- REFUSED

SACAS106

You do not like to be tied down to a regular work schedule.

- 1 Strongly agree
- 2 Agree
- 3 Disagree
- 4 Strongly disagree
- DON'T KNOW
- REFUSED

SACAS107

How important are your **family ties** to your self-identity, your sense of who you are?

- 1. Very important
- 2. Somewhat important
- 3. Not very important
- 4. Not at all important
- DON'T KNOW
- REFUSED

SACAS108

In 10 years, how important do you think your **family ties** will be to your self-identity?

- 1. Very important
- 2. Somewhat important
- 3. Not very important
- 4. Not at all important
- DON'T KNOW
- REFUSED

SACAS109

How important is your **spirituality or religion** to your self-identity, your sense of who you are?

- 1. Very important
- 2. Somewhat important
- 3. Not very important
- 4. Not at all important
- DON'T KNOW
- REFUSED

SACAS110

In 10 years, how important do you think your **spirituality or religion** will be to your self-identity?

1. Very important
2. Somewhat important
3. Not very important
4. Not at all important

DON'T KNOW

REFUSED

SACAS111

How important is your **work or occupation** to your self-identity, your sense of who you are?

1. Very important
2. Somewhat important
3. Not very important
4. Not at all important

DON'T KNOW

REFUSED

SACAS112

In 10 years, how important do you think your **work or occupation** will be to your self-identity?

1. Very important
2. Somewhat important
3. Not very important
4. Not at all important

DON'T KNOW

REFUSED

SACAS113

How important is **being clean and sober** to your self-identity, your sense of who you are?

1. Very important
2. Somewhat important
3. Not very important
4. Not at all important

DON'T KNOW

REFUSED

SACAS114

In 10 years, how important do you think **being clean and sober** will be to your self-identity?

1. Very important
2. Somewhat important
3. Not very important
4. Not at all important

DON'T KNOW

REFUSED

SACAS115

How important are your **community ties** to your self-identity, your sense of who you are?

1. Very important
2. Somewhat important
3. Not very important
4. Not at all important

DON'T KNOW

REFUSED

SACAS116

In 10 years, how important do you think your **community ties** will be to your self-identity?

1. Very important
2. Somewhat important
3. Not very important
4. Not at all important

DON'T KNOW

REFUSED

SACAS117

How important are your **friendships** to your self-identity, your sense of who you are?

1. Very important
2. Somewhat important
3. Not very important
4. Not at all important

DON'T KNOW

REFUSED

SACAS118

In 10 years, how important do you think your **friendships** will be to your self-identity?

1. Very important
2. Somewhat important
3. Not very important
4. Not at all important

DON'T KNOW

REFUSED

SACAS119

How important is **obeying the law** to your self-identity, your sense of who you are?

1. Very important
2. Somewhat important
3. Not very important
4. Not at all important

DON'T KNOW

REFUSED

SACAS120

In 10 years, how important do you think **obeying the law** will be to your self-identity?

1. Very important
2. Somewhat important
3. Not very important
4. Not at all important

DON'T KNOW

REFUSED

SACAS121

Which three aspects of your identity do you feel are the most important to who you are at this time?

(Check 3: family ties, spirituality or religion, work or occupation, being clean and sober, community ties, friendships, obeying the law)

1. Family ties
2. Spirituality or religion
3. Work or occupation
4. Being clean and sober
5. Community ties
6. Friendships
7. Obeying the law

DON'T KNOW

REFUSED

[DO NOT PERMIT RESPONDENT TO PICK OVER 3 (UNDER 3 IS PERMITTED); DO NOT ALLOW DK OR RE IN COMBINATION WITH ANOTHER ANSWER]

SACAS139

The final questions ask about the future. Please tell me how likely you are to do the following within the next 6 months. How likely are you to accept a minimum wage job if you can't find something better within a few months?

1. Very likely
2. Somewhat likely
3. Not very likely
4. Not at all likely

DON'T KNOW

REFUSED

SACAS140

If you are working a job you really don't like, how likely are you to quit the job without having another job lined up?

1. Very likely
2. Somewhat likely
3. Not very likely
4. Not at all likely

DON'T KNOW

REFUSED

SACAS141

How likely are you to give up friends that get you into trouble?

1. Very likely
2. Somewhat likely
3. Not very likely
4. Not at all likely

DON'T KNOW

REFUSED

SACAS142

How likely are you to participate in programs and services that will help you stay clean, get a job, or improve yourself?

1. Very likely
2. Somewhat likely
3. Not very likely
4. Not at all likely

DON'T KNOW

REFUSED

SACAS143

If you are living with people who could get you into trouble, how likely are you to find another place to live?

1. Very likely
2. Somewhat likely
3. Not very likely
4. Not at all likely

DON'T KNOW

REFUSED

SACAS144

If you are tempted to use drugs, how likely are you to take steps to avoid using?

1. Very likely
2. Somewhat likely
3. Not very likely
4. Not at all likely

DON'T KNOW

REFUSED

SACAS145

How likely are you to go out and have fun, even if you might get into trouble?

1. Very likely
2. Somewhat likely
3. Not very likely
4. Not at all likely

DON'T KNOW

REFUSED

Thank you. Please tell the interviewer that you are done with your part of the interview.

**DOMAIN 11: LOCATOR QUESTIONS**

SLOC1

We're almost done with the interview. We would like to re-contact you for a follow-up interview in the future. We want to ask for some information that could help us locate you once you are released. Like all the information you have provided, it would be kept strictly confidential.

SLOC2a

[ASK IF SREF1D=YES]

Where do you think you will be living after your release?

RECORD ADDRESS INCLUDING CITY/STATE

SLOC2b

[ASK IF SREF1D=NO]

Do you think you'll still be living at the same place 6 months from now?

YES – SKIP TO SLOC2c

NO

(IF NO)

Where do you think you'll be living?

SLOC2c

ENTER PHYSICAL ADDRESS AND REPEAT BACK TO CONFIRM.

Address Line 1: \_\_\_\_\_

Address Line 2 (if needed): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_ ZIP Code: \_\_\_\_\_

SLOC3

[ASK OF EVERYONE]

What is the telephone number at that address?

(\_\_\_) \_\_\_-\_\_\_\_

SLOC4

Do you have a cell phone number or any alternative number that we could call if we were unable to reach you otherwise?

1 YES – GO TO CELL\_2

2 NO

SLOC5

RECORD CELL PHONE, WORK PHONE, OR OTHER NUMBER. SPECIFY WHAT KIND OF NUMBER

(\_\_\_) \_\_\_ - \_\_\_ Type of Phone: (CHECK ONE): Cell

Work

Other

SLOC6

Do you have an e-mail address where we could contact you if we were unable to reach you otherwise?

1 YES – GO TO E-MAIL

2 NO

E-MAIL

ENTER RESPONDENT'S E-MAIL ADDRESS AND REPEAT BACK TO CONFIRM. MAKE SURE E-MAIL ADDRESS IS RECORDED IN THE FORMAT: [USERNAME@DOMAIN.COM](#) (NO SPACES) OTHER POSSIBLE SUFFIXES ARE .NET, .EDU AND .ORG

\_\_\_\_\_@\_\_\_\_\_.

SLOC7

Could you tell me the name, phone number, email, and address of someone who is not living with you, such as a close friend or relative, who would know how to reach you? We would only contact that person if we were unable to reach you otherwise.

1 YES – GO TO SLOC8\_

2 NO – GO TO CLOSE

SLOC8\_

ENTER CONTACT'S FIRST AND LAST NAME. CONFIRM SPELLING

CONTACT'S RELATIONSHIP TO RESPONDENT: \_\_\_\_\_

CONTACT1\_PHONE ENTER AREA CODE AND PREFIX. CONFIRM NUMBER

( ) -

CONTACT1\_EMAIL

ENTER CONTACT'S E-MAIL ADDRESS AND REPEAT BACK TO CONFIRM. MAKE SURE E-MAIL ADDRESS IS RECORDED IN THE FORMAT: [USERNAME@DOMAIN.COM](#) (NO SPACES) OTHER POSSIBLE SUFFIXES ARE .NET, .EDU AND .ORG

\_\_\_\_\_@\_\_\_\_\_.

CONTACT1\_ADDRESS

ENTER CONTACT'S PHYSICAL ADDRESS AND REPEAT BACK TO CONFIRM ADDRESS.

Address Line 1: \_\_\_\_\_

Address Line 2 (if needed): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_ ZIP Code: \_\_\_\_\_

SLOC9

Is there a second person who would know how to reach you?

1 YES – GO TO SLOC10\_NAME

2 NO – GO TO CLOSE

SLOC10\_NAME

ENTER CONTACT'S FIRST AND LAST NAME. CONFIRM SPELLING

CONTACT'S RELATIONSHIP TO RESPONDENT: \_\_\_\_\_

CONTACT2\_PHONE

ENTER AREA CODE AND PREFIX. CONFIRM NUMBER

( ) -

CONTACT2\_EMAIL

ENTER CONTACT'S E-MAIL ADDRESS AND REPEAT BACK TO CONFIRM. MAKE SURE E-MAIL ADDRESS IS RECORDED IN THE FORMAT: [USERNAME@DOMAIN.COM](#) (NO SPACES) OTHER POSSIBLE SUFFIXES ARE .NET, .EDU AND .ORG

\_\_\_\_\_@\_\_\_\_\_.

CONTACT2\_ADDRESS

ENTER CONTACT'S PHYSICAL ADDRESS AND REPEAT BACK TO CONFIRM ADDRESS.

Address Line 1: \_\_\_\_\_

Address Line 2 (if needed): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_ ZIP Code: \_\_\_\_\_

SLOC11

Is there a third person who would know how to reach you?

1 YES – GO TO SLOC12\_NAME

2 NO – GO TO CLOSE

SLOC12\_NAME

ENTER CONTACT'S FIRST AND LAST NAME. CONFIRM SPELLING

CONTACT'S RELATIONSHIP TO RESPONDENT: \_\_\_\_\_

CONTACT3\_PHONE

ENTER AREA CODE AND PREFIX. CONFIRM NUMBER

( ) -

CONTACT3\_EMAIL

ENTER CONTACT'S E-MAIL ADDRESS AND REPEAT BACK TO CONFIRM. MAKE SURE E-MAIL ADDRESS IS RECORDED IN THE FORMAT: [USERNAME@DOMAIN.COM](#) (NO SPACES) OTHER POSSIBLE SUFFIXES ARE .NET, .EDU AND .ORG

\_\_\_\_\_@\_\_\_\_\_.

CONTACT3\_ADDRESS

ENTER CONTACT'S PHYSICAL ADDRESS AND REPEAT BACK TO CONFIRM ADDRESS.

Address Line 1: \_\_\_\_\_

Address Line 2 (if needed): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_ ZIP Code: \_\_\_\_\_

CLOSE

Thank you for your help. We look forward to speaking to you in the future.

GO TO DOMAIN 13

### **DOMAIN13: ORAL FLUIDS TESTING AND INCENTIVE DOCUMENTATION**

SINC3

[IF SINC2=NO OR SINC2 IS MISSING, SKIP TO SINC4. IF SINC2=YES, ASK SINC3.]FI INSTRUCTION: OBTAIN ORAL FLUIDS SAMPLE

NOTE: BEFORE STARTING COLLECTION, CONFIRM THAT THE DONOR HAS NOT HAD ANYTHING IN HIS/HER MOUTH FOR 10 MINUTES PRIOR TO PROVIDING THE SAMPLE.

#### **STEP 1: PREPARE FOR COLLECTION**

- CHECK EXPIRATION DATE ON THE COLLECTION DEVICE PACKAGING AND OPEN OUTER PACKAGING CONTAINING THE COLLECTION PAD AND THE ORAL SPECIMEN VIAL.
- THEN PLACE THE SPECIMEN VIAL ON A FLAT SURFACE IN VIEW OF THE DONOR.
- HAVE THE DONOR REMOVE THE COLLECTION DEVICE FROM THE PACKAGING SLEEVE.

#### **STEP 2: COLLECT FLUID.**

- INSTRUCT THE DONOR TO PLACE THE COLLECTION PAD BETWEEN THE LOWER CHEEK AND GUM, THEN GENTLY RUB THE PAD BACK AND FORTH ALONG THE GUM LINE UNTIL THE PAD IS MOIST.
- ONCE MOIST, LEAVE COLLECTION PAD BETWEEN CHEEK AND GUM FOR 5 MINUTES.
- THEN HAVE THE DONOR OPEN THE SPECIMEN VIAL IN AN **UPRIGHT** POSITION, WITH THE **TIP POINTED DOWNWARD**, BY GENTLY ROCKING THE CAP BACK AND FORTH TO AVOID SPILLING THE CONTENTS.

#### **STEP 3: SEAL**

- INSTRUCT THE DONOR TO PUSH THE COLLECTION PAD INTO THE SPECIMEN VIAL AS FAR AS IT WILL GO AND SNAP THE COLLECTION WAND AT THE SCORED LINE AGAINST THE SIDE OF THE VIAL.
- INSTRUCT THE DONOR NOT TO TILT THE VIAL OR SPILL THE FLUID INSIDE.

**STEP 4: CAP AND PACKAGE**

- INSTRUCT THE DONOR TO PLACE THE CAP ONTO THE VIAL UNTIL IT SNAPS TO ENSURE A SECURE FIT.
- HAVE DONOR PLACE A TAMPER-EVIDENT SEAL ACROSS THE TOP OF THE SPECIMEN VIAL AND DOWN THE SIDES, THEN DATE THE SEAL.
- PLACE THE INTERCEPT SPECIMEN VIAL AND COMPLETED CHAIN OF CUSTODY FORM INTO THE SPECIMEN BAG.
- PLACE THE SPECIMEN BAG INTO THE OVERNIGHT SHIPPING PACKAGE AND SEND THE SPECIMEN TO THE LAB FOR TESTING.

PRESS 1 TO CONTINUE

ORAL1

INTERVIEWER: WAS AN ORAL SWAB SAMPLE COLLECTED?

1 YES

2 NO (R CHANGED MIND/RAN OUT OF TIME)

3 R TRIED TO PROVIDE SAMPLE BUT COULD NOT

[DISABLE DK/REF]

PRESS 1 TO CONTINUE

SINC4

IS RESPONDENT ELIGIBLE TO RECEIVE AN INCENTIVE FOR THE INTERVIEW – I.E., IS NOT A FLORIDA PROBATIONER UNDER DOC SUPERVISION, IS NOT INCARCERATED OR IS INCARCERATED IN A FACILITY THAT ALLOWS A MONEY ORDER TO BE DEPOSITED?

1 YES

2 NO

[IF SINC4=NO, SKIP TO FI OBSERVATIONS. IF SINC4=YES, GO TO SINC5]

[DISABLE DK/REF]

SINC5

[ASK IF SINC4=YES.IS RESPONDENT ELIGIBLE FOR THE \$5 BONUS FOR CALLING AHEAD? (FI: YOU SHOULD HAVE THIS INFORMATION FROM YOUR FS)

1 YES

2 NO

[DISABLE DK/REF]

SINC6

[ASK IF SINC4=YES]

FI INSTRUCTION: RESPONDENT’S INCENTIVE AMOUNT SHOULD BE [FILL AMOUNT BELOW]. PAY INCENTIVE TO RESPONDENT. IF INCARCERATED, FOLLOW DOCUMENTED PROCEDURES TO DEPOSIT MONEY ORDER INTO RESPONDENT’S ACCOUNT.

PRESS 1 TO CONTINUE

INCENTIVE AMOUNT TO BE FILLED ABOVE: [IF SINC4=YES AND (ORAL1=YES OR ORAL1= 3 AND SINC5=YES, FILL WITH \$50. IF SINC4=YES AND (ORAL1=YES OR ORAL1= 3) AND SINC5=NO, FILL WITH \$45. IF SINC4=YES AND (ORAL1=NO OR ORAL1=MISSING) AND SINC5=YES, FILL WITH \$40. IF SINC4=YES AND (ORAL1=NO OR ORAL1=MISSING) AND SINC5=NO, FILL WITH \$35.].

SINC7

[ASK IF SINC4=YES]

WAS THE INCENTIVE PAID TO THE RESPONDENT? (FOR INCARCERATED RESPONDENTS, ANSWER YES IF THE MONEY WILL BE DEPOSITED IN THEIR MONEY ORDER ACCOUNT)?

1 YES

2 NO

**DOMAIN 12: FI OBSERVATIONS**

INTERVIEWER: COMPLETE THESE QUESTIONS AFTER LEAVING THE HOME OR PRIVATELY IN THE HOME..

DEB\_1

DID THE RESPONDENT ASK ANY QUESTIONS DURING THE CONSENT PROCESS?

1 YES – GO TO DEB\_2

2 NO – GO TO DEB\_3

DEB\_2

WHAT QUESTIONS DID THE RESPONDENT ASK? (CODE ALL THAT APPLY)

- 1 How long will this take
- 2 How was I chosen
- 3 What's in it for me
- 4 Do I have to do it
- 5 Other (specify)

DEB\_5

ESTIMATE THE RESPONDENT'S OVERALL UNDERSTANDING OF THE QUESTIONS ASKED IN THE INTERVIEW.

- 1 Understood questions without difficulty
- 2 Some difficulty understanding questions
- 3 Great difficulty understanding questions

DEB\_6

IN WHICH SECTIONS OF THE INTERVIEW, IF ANY, DID THE RESPONDENT HAVE TROUBLE ANSWERING QUESTIONS? (CODE ALL THAT APPLY)

- 1 REFERENCE CALENDAR
- 2 DEMOGRAPHICS
- 3 FAMILY AND PEERS
- 4 HOUSING
- 5 EMPLOYMENT
- 6 INCARCERATION CHARACTERISTICS AND CRIMINAL HISTORY
- 7 PROGRAM OPERATIONS AND SERVICES
- 8 PHYSICAL AND MENTAL HEALTH
- 9 ACASI
- 10 LOCATOR
- 11 NONE

DEB\_7

HOW TRUTHFUL DO YOU THINK THE RESPONDENT'S ANSWERS WERE?

- 1 Very truthful
- 2 Somewhat truthful
- 3 Not at all truthful

ORAL\_2

[ASK IF SINC2=1 AND ORAL1=2]

PLEASE EXPLAIN WHY AN ORAL SWAB WAS NOT COLLECTED SUCCESSFULLY. (CODE ALL THAT APPLY)

1. RESPONDENT CHANGED MIND
2. INSUFFICIENT SALIVA
3. SOMETHING INTERRUPTED THE INTERVIEW
4. OTHER (SPECIFY)

TRACING\_1

DID YOU NEED TO CONDUCT FIELD TRACING TO LOCATE THIS RESPONDENT?

1. YES
2. NO, THE RESPONDENT CALLED IN (RESPONDED TO THE LEAD LETTER)

TRACING\_2

HOW USEFUL WAS THE CONTACT INFORMATION PROVIDED AT BASELINE?

1. VERY
2. SOMEWHAT
3. NOT VERY USEFUL
4. NOT AT ALL

TRACING\_3

HOW DID YOU ULTIMATELY LOCATE THIS RESPONDENT?

1. Preloaded contact information
2. Online through a Department of Corrections website or similar
3. Current/last known address
4. Through friends or family
5. Directory Assistance
6. DMV
7. Local church
8. Public records search
9. Other, specify

DEB\_8

PLEASE PROVIDE ANY OTHER COMMENTS THAT WOULD BE HELPFUL FOR THE PROJECT TEAM TO KNOW.



**AORDP 12-Month Follow-Up Instrument****DOMAIN 1: PRIVACY DOCUMENTATION/CONSENT**

## TCON1

INTERVIEWER: LOOK AROUND YOU IN ALL DIRECTIONS. MAKE SURE THAT YOU ARE OUT OF EARSHOT OF OTHER PEOPLE, INCLUDING PEOPLE WHO MAY BE IN AN ADJACENT ROOM OR OUTSIDE. FOR AN INTERVIEW SETTING TO BE CONSIDERED PRIVATE, YOU MUST BE CERTAIN THAT THE QUESTIONS YOU READ AND THE RESPONDENT'S ANSWERS CANNOT BE:

- (1) OVERHEARD OR
- (2) ASCERTAINED BY SOMEONE LOOKING THROUGH A WINDOW.

ARE YOU CONFIDENT THE INTERVIEW SETTING IS PRIVATE?

- 5 YES
- 6 NO – DO NOT CONTINUE UNLESS YOU ARE COMFORTABLE THAT THE SETTING IS PRIVATE

## TCON2

[IF TCON1 = 2, ASK]

INTERVIEWER: BECAUSE YOU HAVE INDICATED THAT THE INTERVIEW SETTING IS NOT PRIVATE, YOU CANNOT PROCEED WITH THE INTERVIEW. YOU WILL NEED TO BREAK OFF THE INTERVIEW AND RESCHEDULE FOR A TIME WHEN YOU CAN CONDUCT THE INTERVIEW IN PRIVATE.

[DO NOT ALLOW INTERVIEWER TO CONTINUE PAST THIS POINT]→ROUTE TO REVIEW SCREEN, CODE 1295, BREAKOFF, APPOINTMENT MADE, HAVE CAPI GO THROUGH APPOINTMENT SCREENS

## TCON3

[IF TCON1=1, ASK]

INTERVIEWER: HAVE YOU READ THE CONSENT FORM TO THE RESPONDENT?

- 5 YES
- 6 NO – HARD STOP – You must get consent before beginning the interview.

## TCON4

[IF TCON3=2, ASK]

INTERVIEWER: STOP AND READ CONSENT FORM TO RESPONDENT. YOU CANNOT PROCEED UNTIL THIS HAS BEEN DONE.

[NOTE TO PROGRAMMER – INTERVIEWER SHOULD NOT BE ABLE TO START INTERVIEW UNLESS BCON3 = 1]

## TCON5

[IF TCON3=1]

INTERVIEWER: DID RESPONDENT CONSENT TO INTERVIEW?

- 1 YES – [GO TO TCON6]
- 2 NO – [HARD STOP – YOU CANNOT INTERVIEW THIS PERSON WITHOUT CONSENT]→CODE 2405, HARD REFUSAL BY SUBJECT; ROUTE TO END OF INTERVIEW

TCON6

[IF TCON5=1]

INTERVIEWER: DID RESPONDENT CONSENT TO BEING AUDIO RECORDED?

- 1 YES – [BEGIN INTERVIEW WITH CARI ENABLED]
- 2 NO – [BEGIN INTERVIEW WITH CARI DISABLED]

**DOMAIN 2: REFERENCE CALENDAR**

TCAL1

I'm going to mark a few dates on this calendar for us to use during the interview. First, I'm going to circle today's date.

[DISPLAY CURRENT DATE]

INTERVIEWER – USING A BLANK CALENDAR PAGE, CIRCLE TODAY'S DATE USING YOUR **BLUE PEN**. WRITE THE YEAR AT THE TOP OF THE PAGE.

Now I'm going to mark the date that was 30 days ago: [DISPLAY -- CALCULATE TODAY'S DATE – 30 DAYS]

INTERVIEWER – CIRCLE THE DATE THAT WAS 30 DAYS AGO USING YOUR **BLUE PEN**

We'll look at the calendar at those dates for several questions in the interview.

TREF1B

I'm going to circle the date that was six months ago. Many of the questions in this interview ask about things that have happened within the past six months.

INTERVIEWER – **USE YOUR BLACK PEN** TO CIRCLE THE DATE 6 MONTHS AGO [6MDATE] ON THE REFERENCE CALENDAR.

TREF1D

IS RESPONDENT INCARCERATED?

- 5 YES
- 6 NO

TREF1E

**INTERVIEWER: IF RESPONDENT IS INCARCERATED, DO NOT READ THIS QUESTION. ANSWER YES**

At any point since [6MDATE], have you been incarcerated in a jail or prison for more than 24 hours at one time?

- 1 YES
- 2 NO

[IF NO TO TREF1E, SKIP TO TDEM5.]

[INSERT SOFT CHECK: IF NO TO TREF1E AND YES TO TREF1D, MUST CHANGE ANSWER TO EITHER TREF1E OR TREF1D]

TREF1F

[ASK IF YES TO TREF1E]

Since [6MDATE], how many **separate** times have you been booked into or admitted into a jail or prison? (1-30)

TREF1G

[ASK IF YES TO TREF1E] Since [6MDATE], how many **total** days have you spent in jail or prison? (0-180)

TREF1

[ASK IF TREF1D=YES]

IN WHAT TYPE OF FACILITY ARE YOU INTERVIEWING?†

- 9 JAIL
- 10 PRISON
- 11 OTHER CORRECTIONAL FACILITY
- 12 OTHER NON-CORRECTIONAL FACILITY

TREF2

[IF TREF1D=YES] Please tell me the date you entered incarceration this time.

IF RESPONDENT CAN'T REMEMBER MONTH, ASK IF IT WAS EARLY IN THE YEAR OR LATE IN THE YEAR. IF EARLY, ENTER 03 FOR MONTH; IF LATE, ENTER 10 FOR MONTH. IF RESPONDENT CAN'T REMEMBER AT ALL, ENTER 06 FOR MONTH.

(mm/dd/yyyy)

[MONTH RANGE = 1-12, DK, RE]

[DAY RANGE = 1-31, DK, RE]

IF RESPONDENT CAN'T REMEMBER THE DAY, ENTER 15.

[YEAR RANGE = 2014-2015, DK, RE]

[NOTE TO PROGRAMMER: CALCULATE THE NUMBER OF DAYS THE RESPONDENT HAS BEEN INCARCERATED. THIS INFORMATION WILL BE USED IN TCAS4 AND SEVERAL OTHER QUESTIONS IN THAT SECTION.]

TREF3

[IF TREF1D=YES]

Just to confirm, have you spent at least 24 hours **out** of jail since [6MDATE]?

- 1 YES
- 2 NO
- DON'T KNOW
- REFUSED

[ASK IF TREF1D=YES. IF TREF1E=NO, SKIP TO TDEM5.]

I'd like to ask a few questions about your current incarceration. Are you currently serving time for a parole violation?

- 1 YES
- 2 NO
- DON'T KNOW
- REFUSED

TINCAR8

[IF TINCAR7=1]

Was the parole violation for a technical violation, like failing to report, a new crime, or both?

- 1 TECHNICAL VIOLATION
- 2 NEW CRIME
- 3 BOTH
- DON'T KNOW
- REFUSED

TINCAR9

[IF TINCAR7=2 OR TINCAR8=2 OR 3]

Please look at Showcard 1. What crimes were you convicted of for this term of incarceration? Select all that apply...

	YES	NO
A Homicide	1	2
B Rape	1	2
C Other sex offense (not rape)	1	2
D Robbery	1	2
E Assault	1	2
F Burglary	1	2
G Theft	1	2
H Car theft	1	2
I Fraud or forgery	1	2
J Weapons offense	1	2
K Drug dealing	1	2
L Drug possession	1	2
M DWI or DUI	1	2
N SOME OTHER OFFENSE	1	2

[DON'T KNOW AND REFUSED SHOULD BE ALLOWED FOR ANY ITEM]

TINCAR9A

[IF TINCAR9=14]

SPECIFY OTHER OFFENSE

[50 CHARACTERS]

TINCAR10

When do you expect to be released from this term of incarceration—the term you’re serving right now?  
(MM/DD/YYYY)

[RANGE – MONTH – 01 – 12, DK, RE]

[RANGE – DAY – 01 – 31, DK, RE]

[RANGE – YEAR – 2015 – 2100]

[EDIT CHECK – DATE IN TINCAR10 MUST BE LATER THAN CURRENT DATE.]

**DOMAIN 3: DEMOGRAPHICS**

TDEM5

REFER TO DATE 6 MONTHS AGO, [6MDATE], CIRCLED IN BLACK, ON REFERENCE CALENDAR

Since [6MDATE], have you served in the Armed Forces, including the Guard or Reserves?

1 YES

2 NO

DON'T KNOW

REFUSED

TDEM6

SHOWCARD 2

What is the <b>highest </b> grade or level of school you have completed?

1 NONE

2 8<sup>TH</sup> GRADE OR LESS

3 SOME HIGH SCHOOL

4 GED

5 HIGH SCHOOL DIPLOMA

6 VOCATIONAL/TECHNICAL/BUSINESS CERTIFICATE OR DIPLOMA

7 SOME COLLEGE

8 ASSOCIATE’S DEGREE (AA, AS)

9 BACHELOR’S DEGREE (BA, BS)

10 GRADUATE/PROFESSIONAL DEGREE (MA, MS, PhD, EDD, MEDICINE/MD, DENTISTRY/DDS,  
LAW/JJ/LLB, ETC)

DON'T KNOW

REFUSED

[DK AND RE SHOULD NOT BE ALLOWED IF THE INTERVIEWER PICKS ANY OTHER RESPONSE CATEGORY]

TDEM7

[REFER TO 6MDATE, CIRCLED IN BLACK, ON REFERENCE CALENDAR]

Since [6MDATE], have you gotten any vocational or technology certifications or licenses? By that we mean things like automotive service and repair, Commercial Driver’s License, Microsoft Certified IT Professional, HVACR certification.

1 YES

2 NO

DON'T KNOW

REFUSED

TDEM8

[If TDEM7=1]

What certifications or licenses do you have?

INTERVIEWER: ONCE FINISHED, HIT ENTER TO MOVE TO NEXT SCREEN

[ALLOW UP TO 5 ENTRIES]

TDEM9

Are you currently taking any school courses, such as GED, vocational, or college courses?

1 YES

2 NO

DON'T KNOW

REFUSED

TDEM10

[TDEM9=1]

Are you currently taking....

(CODE ALL THAT APPLY)

1 High school courses,

2 A GED course,

3 Vocational training,

4 College courses,

5 Some other type of schooling

DON'T KNOW

REFUSED

#### **DOMAIN 4: FAMILY AND PEERS**

TFAM1

Are you...

1 Married,

2 Separated,

3 Divorced,

4 Widowed, or

5 Never married?

DON'T KNOW

REFUSED

TFAM2

[If TFAM1 NE 1]

Are you currently involved in a steady intimate relationship?

1 YES

2 NO

DON'T KNOW

REFUSED

TFAM4

How many children under the age of 18 do you have? Please count all children that you consider yourself to be a parent of.

[RANGE 0-25]

DON'T KNOW

REFUSED

TFAM5

[If TFAM4 GE1]

Since [6MDATE], how many of your children under the age of 18 have lived with you?

[RANGE 1-25]

DON'T KNOW

REFUSED

[EDIT CHECK – TFAM5 CANNOT BE LARGER THAN TFAM4]

TFAM6

[If TFAM4 GE1]

Of your children under the age of 18, how many have you financially supported in any way since [6MDATE]?

[RANGE 1-25]

[EDIT CHECK – TFAM5 CANNOT BE LARGER THAN TFAM4]

TFAM7

[If TFAM4 GE1]

Are you currently required by a court to pay child support for any of your children under the age of 18?

1 YES

2 NO

DON'T KNOW

REFUSED

TFAM9

[If TFAM7=1]

Are you currently making any child support payments?

1 YES

2 NO

DON'T KNOW

REFUSED

**DOMAIN 4A: SUPERVISION STATUS**

TSUP1a

At any point within the past 6 months, that is, since [6MDATE], have you been on parole, probation, or some other type of community supervision?

- 1 YES
- 2 NO
- DON'T KNOW
- REFUSED

[IF NO TO TSUP1a OR IF TREF3=NO, SKIP TO LOGIC BEFORE THOU1]

TSUP1

Are you currently on parole or probation?

- 1 YES
- 2 NO
- DON'T KNOW
- REFUSED

[IF NO TO TSUP1, SKIP TO TSUP3]

TSUP2

[IF YES TO TSUP1] How much more of your supervision term do you have left to serve? Please tell me how many months you have left to serve. (1-100)

TSUP3

[IF YES TO TSUP1a] On average, within the past 6 months, how often have you met with your parole or probation officer **in person**? [IF TSUP1=NO, PLEASE ADD "Please think about the time while you were under supervision".]

- 1 Not at all
- 2 Once or twice
- 3 About once a month
- 4 Two or three times a month
- 5 Once a week
- 6 Several times a week
- 7 Every day or almost every day
- DON'T KNOW
- REFUSED

TSUP4

[IF TSUP3 GE 2] On average, how long do your typical in-person meetings with your parole or probation officer last? [IF TSUP1=NO, PLEASE CHANGE TO "On average, how long did your typical in person meeting with your parole or probation officer last?"]

- 1 Less than 5 minutes
  - 2 Five to 30 minutes
  - 3 31 minutes to 1 hour
  - 4 More than 1 hour
- DON'T KNOW  
REFUSED

TSUP5

On average, within the past 6 months, how often have you spoken with your parole or probation officer **on the phone**? [IF TSUP1=NO, PLEASE ADD "Please think about the time while you were under supervision".]

- 1 Not at all
  - 2 Once or twice
  - 3 About once a month
  - 4 Two or three times a month
  - 5 Once a week
  - 6 Several times a week
  - 7 Every day or almost every day
- DON'T KNOW  
REFUSED

TSUP6

On average, within the past 6 months, how often has your parole or probation officer visited you at the place you live?

- 1 Not at all
  - 2 Once or twice
  - 3 About once a month
  - 4 Two or three times a month
  - 5 Once a week
  - 6 Several times a week
  - 7 Every day or almost every day
- DON'T KNOW  
REFUSED

**DOMAIN 5: HOUSING**

[THIS DOMAIN WILL BE SKIPPED FOR TREF3=NO]

THOU1

SHOWCARD 3

The next questions ask about your housing situation since [6MDATE]. [IF TREF1E=YES, PLEASE ADD "Please think about places you were living in the community, not the time you were in a correctional facility".] In the past 6 months, have you lived <B>mostly</B>...

1 In your own house or apartment, meaning your name is on the title, mortgage, or lease;

2 In someone else's house or apartment, including your parents' place;

3 In a residential treatment facility;

4 In a transitional housing facility or halfway house;

5 In a shelter;

6 On the street or you were homeless;

7 In no set place or you moved around a lot;

8 In some other place or situation?

DON'T KNOW

REFUSED

[DK AND RE SHOULD NOT BE ALLOWED IF THE INTERVIEWER PICKS ANY OTHER RESPONSE CATEGORY]

THOU2

In the past 6 months, have you been paying any rent or mortgage?

1 YES

2 NO

DON'T KNOW

REFUSED

THOU3

Since [6MDATE], has any program helped you pay rent, such as through a special program, public housing, or Section 8, or a Housing Choice voucher?

1 YES

2 NO

DON'T KNOW

REFUSED

THOU4

Since [6MDATE], how many different places have you lived? [IF TREF1E=YES, ADD "Please do not include any correctional facilities."]

9. 1

10. 2 or 3

11. 4 or 5

12. More than 5

DON'T KNOW

REFUSED

## THOU5

Who have you lived with since [6MDATE]? Please tell me everyone you have lived with.

	YES	NO	NOT APPLICABLE
A. Your spouse or intimate partner	1	2	NA
B. Your children	1	2	NA
C. Any other family members such as parents, grandparents, siblings, cousins, or other relatives	1	2	NA
D. Your friends	1	2	NA

[DON'T KNOW OR REFUSED IS ALLOWED FOR ALL OF THE ABOVE]

**Domain 6: Employment**

[THIS DOMAIN WILL BE SKIPPED FOR TREF3=NO]

## TEMP2

At any point since [6MDATE], have you had a job? [IF TREF1E=YES, PLEASE ADD "As you answer these questions about employment, please think about the time while you were living in the community, not the time while you were incarcerated".]

1 YES

2 NO

DON'T KNOW

REFUSED

[IF TEMP2=2, GO TO TEMP3]

## TEMP2A

[IF TEMP2=1] Since [6MDATE], how many months have you worked?

IF LESS THAN 1, ENTER 1

[RANGE 0-8]

DON'T KNOW

REFUSED

## TEMP2B

[ASK if TEMP2=YES and TREF1D=NO]. Do you currently have a job?

1 YES

2 NO

DON'T KNOW

REFUSED

## TEMP3

Please tell me all the ways that you have supported yourself in the past 6 months?

	YES	NO
A A job	1	2
B Support from your family	1	2
C Support from your friends	1	2
D A government program or public assistance	1	2
E Illegal income	1	2
F Some other type of support	1	2

[DK AND RE SHOULD BE ALLOWED FOR EACH ITEM]

TEMP4

[ASK ONLY IF TEMP2=2]

SHOWCARD 4

What are the **main** reasons you have not worked? Please select all that apply. You...

[CODE ALL THAT APPLY]

- 1 Were ill or disabled and unable to work,
- 2 Were retired,
- 3 Were taking care of home or family,
- 4 Were going to school,
- 5 Could not find work,
- 6 Could not get transportation,
- 7 Did not want to work,
- 8 Were incarcerated,
- 9 Were too young to obtain a work permit,
- 10 Had some other reason?

DON'T KNOW

REFUSED

[DK AND RE SHOULD NOT BE ALLOWED IF THE INTERVIEWER PICKS ANY OTHER RESPONSE CATEGORY]

TEMP4A

Since [6MDATE], how many employers have you contacted?

- 8 1
  - 9 2 or 3
  - 10 4 or 5
  - 11 6 -10
  - 12 11-20
  - 13 More than 20
  - 14 None
- DON'T KNOW  
REFUSED

TEMP4b

Since [6MDATE], how many job interviews have you had?

- 8 1
  - 9 2 or 3
  - 10 4 or 5
  - 11 6 -10
  - 12 11-20
  - 13 More than 20
  - 14 None
- DON'T KNOW  
REFUSED

TEMP5

[ASK ONLY IF TEMP2=1] How many different jobs have you had since [6MDATE]?

- 5. 1
- 6. 2 or 3
- 7. 4 or 5
- 8. More than 5
- DON'T KNOW
- REFUSED

TEMP6

[ASK ONLY IF TEMP5 >1]

Have you worked more than 1 job at the same time?

- 1 YES
- 2 NO
- DON'T KNOW
- REFUSED

TEMP7

[ASK ONLY IF TEMP2=1]

The next questions are about your current job or the most recent job you have had since [6MDATE]. On average, in the past 6 months, how many hours a week do you usually work? [IF TEMP5 >1] If you have more than one job, please count hours from all of your jobs

[RANGE – 1 – 140]

- DON'T KNOW
- REFUSED

TEMP8

[ASK ONLY IF TEMP2=1]

(Thinking about your current job or the most recent job you have had in the past 6 months...)

How much do you earn per month **before** taxes, but including any tips, bonuses, or commissions? [IF TEMP5 > 1]If you have more than one job, please include income from all of your jobs.

[RANGE – 1-999999] \$

TEMP9

[ASK ONLY IF TEMP2=1]

(Thinking about your current job or the most recent job you have had in the past 6 months...)

For your job, do you receive...

[IF TEMP5 > 1]If you have more than one job, please answer for your main job

- 1 Formal pay, where you receive a pay stub;
- 2 Casual pay, where your pay was 'under the table' or 'off the books';
- 3 You were self-employed?

- DON'T KNOW
- REFUSED

TEMP10

[ASK ONLY IF TEMP2=1]

(Thinking about your current job or the most recent job you have had in the past 6 months...)

Does your job provide health insurance coverage? [IF TEMP5 > 1] If you have more than one job, please answer for your main job.

1 YES

2 NO

DON'T KNOW

REFUSED

TEMP11

[ASK ONLY IF TEMP2=1]

(Thinking about your current job or the most recent job you have had in the past 6 months...)

Does your job provide any fully paid leave, such as sick leave or vacation leave? [IF TEMP5 > 1] If you have more than one job, please answer for your main job.

1 YES

2 NO

DON'T KNOW

REFUSED

## **DOMAIN 8: PROGRAM OPERATIONS AND SERVICES**

TPOS1

Next, I'd like to ask about programs and services you may have received within the past 6 months. Since [6MDATE], have you received a needs assessment? A needs assessment is where staff ask you questions to figure out what kinds of services or programs could help you, such as drug treatment, counseling, health care, vocational training, or education.

1 YES

2 NO

DON'T KNOW

REFUSED

TPOS1aa

[If TPOS1=YES and (TREF1E=YES and TREF3 NE NO)]

Did you receive this service while you were living in the community, while you were reincarcerated, or both?

1 LIVING IN THE COMMUNITY

2 WHILE REINCARCERATED

3 BOTH

DON'T KNOW

REFUSED

## TPOS2

Since [6MDATE], have you met with a specific person who talks with you about issues or needs you have, tries to get you into services or programs, helps you get benefits or assistance, and monitors your progress? These services are called case management and the person who provides them could be called a social worker, case manager, or case worker, or it could be your parole or probation officer.

- 1 YES
- 2 NO
- DON'T KNOW
- REFUSED

## TPOS2a

[If TPOS2=YES and (TREF1E=YES and TREF3 NE NO)]

Did you receive this service while you were living in the community, while you were reincarcerated, or both?

- 1 LIVING IN THE COMMUNITY
- 2 WHILE REINCARCERATED
- 3 BOTH
- DON'T KNOW
- REFUSED

## TPOS3a-c

[If TPOS2=1]

Who has provided you with case management since [6MDATE]?

(SELECT ALL THAT APPLY):

	YES	NO
A A parole or probation officer from within the correctional facility	1	2
B A parole or probation officer from <b>outside</b> the correctional facility	1	2
C A social worker, case manager, or case worker who is not a parole or probation officer	1	2

[DON'T KNOW AND REFUSED SHOULD BE ALLOWED FOR ANY ITEM]

## TPOS4

[If TPOS2=1]

Is a staff member following up to make sure you actually get the services that you were referred to, or to monitor your progress in the programs or services that you are receiving?

- 1 YES
- 2 NO
- DON'T KNOW
- REFUSED

## TPOS11

[If TFAM7=1]

Since [6MDATE], have you received help with modifying any child support you owe?

- 1 YES
- 2 NO
- DON'T KNOW
- REFUSED

TPOS11a

[If TPOS11=YES and (TREF1E=YES and TREF3 NE NO)]

Did you receive this service while you were living in the community, while you were reincarcerated, or both?

1 LIVING IN THE COMMUNITY

2 WHILE REINCARCERATED

3 BOTH

DON'T KNOW

REFUSED

TPOS12

[If TFAM4 GE 1]

Since [6MDATE], have you received help with modifying custody arrangements for your children?

1 YES

2 NO

DON'T KNOW

REFUSED

TPOS12a

[If TPOS12=YES and (TREF1E=YES and TREF3 NE NO)]

Did you receive this service while you were living in the community, while you were reincarcerated, or both?

1 LIVING IN THE COMMUNITY

2 WHILE REINCARCERATED

3 BOTH

DON'T KNOW

REFUSED

TPOS13

Have you received help arranging for public financial assistance, such as disability benefits or welfare?

1 YES

2 NO

DON'T KNOW

REFUSED

TPOS13a

[If TPOS13=YES and (TREF1E=YES and TREF3 NE NO)]

Did you receive this service while you were living in the community, while you were reincarcerated, or both?

1 LIVING IN THE COMMUNITY

2 WHILE REINCARCERATED

3 BOTH

DON'T KNOW

REFUSED

TPOS14

Have you received help arranging for public healthcare assistance, such as Medicare or Medicaid?

- 1 YES
- 2 NO
- DON'T KNOW
- REFUSED

TPOS14a

[If TPOS14=YES and (TREF1E=YES and TREF3 NE NO)]

Did you receive this service while you were living in the community, while you were reincarcerated, or both?

- 1 LIVING IN THE COMMUNITY
- 2 WHILE REINCARCERATED
- 3 BOTH
- DON'T KNOW
- REFUSED

TPOS15

Have you received legal assistance?

- 1 YES
- 2 NO
- DON'T KNOW
- REFUSED

TPOS15a

[If TPOS15=YES and (TREF1E=YES and TREF3 NE NO)]

Did you receive this service while you were living in the community, while you were reincarcerated, or both?

- 1 LIVING IN THE COMMUNITY
- 2 WHILE REINCARCERATED
- 3 BOTH
- DON'T KNOW
- REFUSED

TPOS16

Have you received spiritual, religious, or emotional support from faith-based providers? Remember, we are still talking about services since [6MDATE].

- 1 YES
- 2 NO
- DON'T KNOW
- REFUSED

TPOS16a

[If TPOS16=YES and (TREF1E=YES and TREF3 NE NO)]

Did you receive this service while you were living in the community, while you were reincarcerated, or both?

1 LIVING IN THE COMMUNITY

2 WHILE REINCARCERATED

3 BOTH

DON'T KNOW

REFUSED

TPOS17

Have you been connected with a mentor from the faith-based community?

1 YES

2 NO

DON'T KNOW

REFUSED

TPOS17a

[If TPOS17=YES and (TREF1E=YES and TREF3 NE NO)]

Did you receive this service while you were living in the community, while you were reincarcerated, or both?

1 LIVING IN THE COMMUNITY

2 WHILE REINCARCERATED

3 BOTH

DON'T KNOW

REFUSED

TPOS18

Have you received other services from faith-based providers? For example, faith-based providers may provide services that are not religious or spiritual services and could include things like housing or employment assistance.

1 YES

2 NO

DON'T KNOW

REFUSED

TPOS18a

[If TPOS18=YES and (TREF1E=YES and TREF3 NE NO)]

Did you receive this service while you were living in the community, while you were reincarcerated, or both?

1 LIVING IN THE COMMUNITY

2 WHILE REINCARCERATED

3 BOTH

DON'T KNOW

REFUSED

TPOS19

Have you received help getting documents necessary for employment, such as your birth certificate, social security card, or photo identification card?

- 1 YES
- 2 NO
- DON'T KNOW
- REFUSED

TPOS19a

[If TPOS19=YES and (TREF1E=YES and TREF3 NE NO)]

Did you receive this service while you were living in the community, while you were reincarcerated, or both?

- 1 LIVING IN THE COMMUNITY
- 2 WHILE REINCARCERATED
- 3 BOTH
- DON'T KNOW
- REFUSED

TPOS20

Have you received help developing money management skills, such as financial literacy classes?

- 1 YES
- 2 NO
- DON'T KNOW
- REFUSED

TPOS20a

[If TPOS20=YES and (TREF1E=YES and TREF3 NE NO)]

Did you receive this service while you were living in the community, while you were reincarcerated, or both?

- 1 LIVING IN THE COMMUNITY
- 2 WHILE REINCARCERATED
- 3 BOTH
- DON'T KNOW
- REFUSED

TPOS21

Have you received help with other life skills?

- 1 YES
- 2 NO
- DON'T KNOW
- REFUSED

TPOS21a

[If TPOS21=YES and (TREF1E=YES and TREF3 NE NO)]

Did you receive this service while you were living in the community, while you were reincarcerated, or both?

1 LIVING IN THE COMMUNITY

2 WHILE REINCARCERATED

3 BOTH

DON'T KNOW

REFUSED

TPOS22

Have you received help with working on personal relationships?

1 YES

2 NO

DON'T KNOW

REFUSED

TPOS22a

[If TPOS22=YES and (TREF1E=YES and TREF3 NE NO)]

Did you receive this service while you were living in the community, while you were reincarcerated, or both?

1 LIVING IN THE COMMUNITY

2 WHILE REINCARCERATED

3 BOTH

DON'T KNOW

REFUSED

TPOS23

Have you received training on how to change your attitudes related to criminal thinking?

1 YES

2 NO

DON'T KNOW

REFUSED

TPOS23a

[If TPOS23=YES and (TREF1E=YES and TREF3 NE NO)]

Did you receive this service while you were living in the community, while you were reincarcerated, or both?

1 LIVING IN THE COMMUNITY

2 WHILE REINCARCERATED

3 BOTH

DON'T KNOW

REFUSED

TPOS24

Have you received any parenting classes? Remember, we are still talking about services since [6MDATE].

- 1 YES
- 2 NO
- DON'T KNOW
- REFUSED

TPOS24a

[If TPOS24=YES and (TREF1E=YES and TREF3 NE NO)]

Did you receive this service while you were living in the community, while you were reincarcerated, or both?

- 1 LIVING IN THE COMMUNITY
- 2 WHILE REINCARCERATED
- 3 BOTH
- DON'T KNOW
- REFUSED

TPOS48

Have you received any assistance with finding child care?

- 1 YES
- 2 NO
- DON'T KNOW
- REFUSED

TPOS48a

[If TPOS48a=YES and (TREF1E=YES and TREF3 NE NO)]

Did you receive this service while you were living in the community, while you were reincarcerated, or both?

- 1 LIVING IN THE COMMUNITY
- 2 WHILE REINCARCERATED
- 3 BOTH
- DON'T KNOW
- REFUSED

TPOS25

Have you participated in any services or programs for survivors of sexual or physical abuse?

- 1 YES
- 2 NO
- DON'T KNOW
- REFUSED

TPOS25a

[If TPOS25=YES and (TREF1E=YES and TREF3 NE NO)]

Did you receive this service while you were living in the community, while you were reincarcerated, or both?

1 LIVING IN THE COMMUNITY

2 WHILE REINCARCERATED

3 BOTH

DON'T KNOW

REFUSED

TPOS26

Have you received any mentoring services? Please don't count any mentoring from a faith-based community member.

1 YES

2 NO

DON'T KNOW

REFUSED

TPOS26a

[If TPOS26=YES and (TREF1E=YES and TREF3 NE NO)]

Did you receive this service while you were living in the community, while you were reincarcerated, or both?

1 LIVING IN THE COMMUNITY

2 WHILE REINCARCERATED

3 BOTH

DON'T KNOW

REFUSED

TPOS27

Have you participated in any anger management programs?

1 YES

2 NO

DON'T KNOW

REFUSED

TPOS27a

[If TPOS27=YES and (TREF1E=YES and TREF3 NE NO)]

Did you receive this service while you were living in the community, while you were reincarcerated, or both?

1 LIVING IN THE COMMUNITY

2 WHILE REINCARCERATED

3 BOTH

DON'T KNOW

REFUSED

TPOS28

Have you received any educational services, such as GED or basic education classes?

- 1 YES
- 2 NO
- DON'T KNOW
- REFUSED

TPOS28a

[If TPOS28=YES and (TREF1E=YES and TREF3 NE NO)]

Did you receive this service while you were living in the community, while you were reincarcerated, or both?

- 1 LIVING IN THE COMMUNITY
- 2 WHILE REINCARCERATED
- 3 BOTH
- DON'T KNOW
- REFUSED

TPOS29

Have you received help with finding or paying for transportation?

- 1 YES
- 2 NO
- DON'T KNOW
- REFUSED

TPOS29a

[If TPOS29=YES and (TREF1E=YES and TREF3 NE NO)]

Did you receive this service while you were living in the community, while you were reincarcerated, or both?

- 1 LIVING IN THE COMMUNITY
- 2 WHILE REINCARCERATED
- 3 BOTH
- DON'T KNOW
- REFUSED

TPOS30

Have you received help with finding or keeping a place to live?

- 1 YES
- 2 NO
- DON'T KNOW
- REFUSED

TPOS30a

[If TPOS30=YES and (TREF1E=YES and TREF3 NE NO)]

Did you receive this service while you were living in the community, while you were reincarcerated, or both?

1 LIVING IN THE COMMUNITY

2 WHILE REINCARCERATED

3 BOTH

DON'T KNOW

REFUSED

TPOS31

Have you received help getting a driver's license?

1 YES

2 NO

DON'T KNOW

REFUSED

TPOS31a

[If TPOS31=YES and (TREF1E=YES and TREF3 NE NO)]

Did you receive this service while you were living in the community, while you were reincarcerated, or both?

1 LIVING IN THE COMMUNITY

2 WHILE REINCARCERATED

3 BOTH

DON'T KNOW

REFUSED

TPOS32

Have you received help with accessing resources such as clothing banks and food pantries?

1 YES

2 NO

DON'T KNOW

REFUSED

TPOS32a

[If TPOS32=YES and (TREF1E=YES and TREF3 NE NO)]

Did you receive this service while you were living in the community, while you were reincarcerated, or both?

1 LIVING IN THE COMMUNITY

2 WHILE REINCARCERATED

3 BOTH

DON'T KNOW

REFUSED

TPOS33

Have you received any employment services or assistance with finding a job?

- 1 YES
- 2 NO
- DON'T KNOW
- REFUSED

TPOS33a

[If TPOS33=YES and (TREF1E=YES and TREF3 NE NO)]

Did you receive this service while you were living in the community, while you were reincarcerated, or both?

- 1 LIVING IN THE COMMUNITY
- 2 WHILE REINCARCERATED
- 3 BOTH
- DON'T KNOW
- REFUSED

TPOS34

Have you participated in any programs to help prepare you for employment, such as developing resumes or working on interviewing skills?

- 1 YES
- 2 NO
- DON'T KNOW
- REFUSED

TPOS34a

[If TPOS34=YES and (TREF1E=YES and TREF3 NE NO)]

Did you receive this service while you were living in the community, while you were reincarcerated, or both?

- 1 LIVING IN THE COMMUNITY
- 2 WHILE REINCARCERATED
- 3 BOTH
- DON'T KNOW
- REFUSED

TPOS34b

Have you been placed in a transitional job arranged by a program or had wages paid for by a program for a trial period?

- 1 YES
- 2 NO
- DON'T KNOW
- REFUSED

TPOS35

Have you participated in any trade or job training programs? Remember, we are still talking about services since [6MDATE].

- 1 YES
- 2 NO
- DON'T KNOW
- REFUSED

TPOS35a

[If TPOS35=YES and (TREF1E=YES and TREF3 NE NO)]

Did you receive this service while you were living in the community, while you were reincarcerated, or both?

- 1 LIVING IN THE COMMUNITY
- 2 WHILE REINCARCERATED
- 3 BOTH
- DON'T KNOW
- REFUSED

TPOS36

Have you received any vocational and technical certifications or licenses?

- 1 YES
- 2 NO
- DON'T KNOW
- REFUSED

TPOS36a

[If TPOS36=YES and (TREF1E=YES and TREF3 NE NO)]

Did you receive this service while you were living in the community, while you were reincarcerated, or both?

- 1 LIVING IN THE COMMUNITY
- 2 WHILE REINCARCERATED
- 3 BOTH
- DON'T KNOW
- REFUSED

TPOS37

Have you received any medical treatment or physical health care?

- 1 YES
- 2 NO
- DON'T KNOW
- REFUSED

TPOS37a

[If TPOS37=YES and (TREF1E=YES and TREF3 NE NO)]

Did you receive this service while you were living in the community, while you were reincarcerated, or both?

1 LIVING IN THE COMMUNITY

2 WHILE REINCARCERATED

3 BOTH

DON'T KNOW

REFUSED

TPOS38

Have you received any **dental** services?

1 YES

2 NO

DON'T KNOW

REFUSED

TPOS38a

[If TPOS38=YES and (TREF1E=YES and TREF3 NE NO)]

Did you receive this service while you were living in the community, while you were reincarcerated, or both?

1 LIVING IN THE COMMUNITY

2 WHILE REINCARCERATED

3 BOTH

DON'T KNOW

REFUSED

TPOS39

Have you received any prescription medicine for a physical health condition you have had? If you do not have a physical health condition requiring prescription medicine, you can say "Not applicable"

1 YES

2 NO

3 NOT APPLICABLE – NO PHYSICAL HEALTH CONDITION

DON'T KNOW

REFUSED

TPOS39a

[If TPOS39=YES and (TREF1E=YES and TREF3 NE NO)]

Did you receive this service while you were living in the community, while you were reincarcerated, or both?

1 LIVING IN THE COMMUNITY

2 WHILE REINCARCERATED

3 BOTH

DON'T KNOW

REFUSED

TPOS40

Have you received mental health treatment or health care for emotional problems?

1 YES

2 NO

DON'T KNOW

REFUSED

TPOS40a

[If TPOS40=YES and (TREF1E=YES and TREF3 NE NO)]

Did you receive this service while you were living in the community, while you were reincarcerated, or both?

1 LIVING IN THE COMMUNITY

2 WHILE REINCARCERATED

3 BOTH

DON'T KNOW

REFUSED

TPOS41

Have you received any prescription medicine for a mental health condition you have had? If you do not have a mental health condition requiring prescription medicine, you can say "Not applicable"

1 YES

2 NO

3 NOT APPLICABLE – NO MENTAL HEALTH CONDITION

DON'T KNOW

REFUSED

TPOS41a

[If TPOS41=YES and (TREF1E=YES and TREF3 NE NO)]

Did you receive this service while you were living in the community, while you were reincarcerated, or both?

1 LIVING IN THE COMMUNITY

2 WHILE REINCARCERATED

3 BOTH

DON'T KNOW

REFUSED

## TPOS43

## SHOWCARD 5

Since [6MDATE], which of the following conditions have you received care for from a doctor, counselor, or other health professional? Please select all that apply.

	YES	NO
A. Alcohol abuse/dependence	1	2
B. Anxiety disorder (generalized anxiety)	1	2
C. Attention deficit/hyperactivity disorder (ADD/ADHD)	1	2
D. Bipolar disorder (manic depression)	1	2
E. Conduct disorder	1	2
F. Depression/dysthymia	1	2
G. Drug abuse/dependence	1	2
H. Obsessive compulsive disorder	1	2
I. Oppositional defiant disorder (ODD)	1	2
J. Post-traumatic stress disorder (PTSD)	1	2
K. Phobia (social or specific)	1	2
L. Schizophrenia	1	2
M. Some other problem/diagnosis	1	2
[DON'T KNOW AND REFUSED SHOULD BE ACCEPTED FOR ANY ITEM]		

## TPOS44

[if any conditions in TPOS43 = 1. ASK ONLY FOR ITEMS ANSWERED 1]

Are you currently receiving treatment for these problems? If so, which ones?

	YES	NO
A. Alcohol abuse/dependence	1	2
B. Anxiety disorder (generalized anxiety)	1	2
C. Attention deficit/hyperactivity disorder (ADD/ADHD)	1	2
D. Bipolar disorder (manic depression)	1	2
E. Conduct disorder	1	2
F. Depression/dysthymia	1	2
G. Drug abuse/dependence	1	2
H. Obsessive compulsive disorder	1	2
I. Oppositional defiant disorder (ODD)	1	2
J. Post-traumatic stress disorder (PTSD)	1	2
K. Phobia (social or specific)	1	2
L. Schizophrenia	1	2
M. Some other problem/diagnosis	1	2
[DON'T KNOW AND REFUSED SHOULD BE ACCEPTED FOR ANY ITEM]		

## TPOS45

Since [6MDATE], about how many days were you hospitalized or in an intensive outpatient program for emotional or psychological problems? REFER TO REFERENCE CALENDAR

NUMBER OF DAYS: (RANGE 0 – 180)

DON'T KNOW

REFUSED

TPOS46

Now I'm going to ask about any drug or alcohol services you may have received. Since [6MDATE], have you received any professional treatment for drugs or alcohol, such as treatment in a residential facility, group therapy, or individual counseling?

1 YES

2 NO

DON'T KNOW

REFUSED

TPOS46a

[If TPOS46=YES and (TREF1E=YES and TREF3 NE NO)]

Did you receive this service while you were living in the community, while you were reincarcerated, or both?

1 LIVING IN THE COMMUNITY

2 WHILE REINCARCERATED

3 BOTH

DON'T KNOW

REFUSED

TPOS47

Since [6MDATE], have you received any other support or services for drugs or alcohol, such as Alcoholics Anonymous (AA), Narcotics Anonymous (NA), or drug education classes or programs?

1 YES

2 NO

DON'T KNOW

REFUSED

TPOS47a

[If TPOS47=YES and (TREF1E=YES and TREF3 NE NO)]

Did you receive this service while you were living in the community, while you were reincarcerated, or both?

1 LIVING IN THE COMMUNITY

2 WHILE REINCARCERATED

3 BOTH

DON'T KNOW

REFUSED

TPOS50

Now I'd like to ask about areas of your life that you may need help with. Please tell me how much you agree with the following statements.

SHOWCARD 6

You would like more employment services, such as vocational training, job readiness programs, or certification programs. Would you say...

- 1 Strongly agree
- 2 Agree
- 3 Disagree
- 4 Strongly disagree
- DON'T KNOW
- REFUSED

TPOS51

You would like more educational programs, such as GED, basic education, or higher education classes.

- 1 STRONGLY AGREE
- 2 AGREE
- 3 DISAGREE
- 4 STRONGLY DISAGREE
- DON'T KNOW
- REFUSED

TPOS52

You would like more alcohol or drug treatment services.

- 1 STRONGLY AGREE
- 2 AGREE
- 3 DISAGREE
- 4 STRONGLY DISAGREE
- DON'T KNOW
- REFUSED

TPOS53

You would like more mental health treatment or health care for emotional problems.

- 1 STRONGLY AGREE
- 2 AGREE
- 3 DISAGREE
- 4 STRONGLY DISAGREE
- DON'T KNOW
- REFUSED

TPOS54

You would like more training on how to change attitudes related to criminal thinking.

- 1 STRONGLY AGREE
- 2 AGREE
- 3 DISAGREE
- 4 STRONGLY DISAGREE
- DON'T KNOW
- REFUSED

TPOS55

You would like more help with housing and accessing resources like clothing banks and food pantries.

1 STRONGLY AGREE

2 AGREE

3 DISAGREE

4 STRONGLY DISAGREE

DON'T KNOW

REFUSED

**DOMAIN 9: PHYSICAL AND MENTAL HEALTH**

TPMH1a

The next questions ask about your health. Since [6MDATE], have you been hospitalized or treated in an emergency room following an injury to your head or neck?

3 YES

4 NO

DON'T KNOW

REFUSED

TPMH1b

Since [6MDATE], have you injured your head or neck in a car accident or from crashing some other moving vehicle like a bicycle, motorcycle, or All-Terrain-Vehicle (ATV)?

3 YES

4 NO

DON'T KNOW

REFUSED

TPMH1c

Since [6MDATE], have you injured your head or neck in a fall or from being hit by something, for example, falling from a bike or horse, rollerblading, falling on ice, being hit by a rock, playing sports or on the playground?

3 YES

4 NO

DON'T KNOW

REFUSED

TPMH1d

Since [6MDATE], have you injured your head or neck in a fight, from being hit by someone, from being shaken violently, or being shot in the head?

3 YES

4 NO

DON'T KNOW

REFUSED

## TPMH1e

Since [6MDATE], have you been nearby when an explosion or a blast occurred? Think about any military combat- or training-related incidents or prior work-related incidents, such as construction.

- 3 YES
- 4 NO
- DON'T KNOW
- REFUSED

## TPMH1

[if TPMH1a, 1b, 1c, 1d, or 1e = YES]

How many times have you had one of these head or neck injuries since [6MDATE]?

[RANGE - 0-99 times]

## TPMH4

[if TPMH1a, 1b, 1c, 1d, or 1e = YES]

For how many of these head or neck injuries did you receive medical attention, including being treated in an emergency department, doctor's office, or clinic?

[RANGE - 0-99]

## TPMH5

[if TPMH1a, 1b, 1c, 1d, or 1e = YES]

Were you knocked out or did you lose consciousness from any of the head or neck injuries you reported just now?

- 1 YES
- 2 NO
- DON'T KNOW
- REFUSED

## TPMH6

[if TPMH5 = 1 (YES)]

What is the longest time you were knocked out or unconscious?

- 4 Less than 30 minutes
- 5 Between 30 minutes and 24 hours
- 6 For more than 24 hours
- DON'T KNOW
- REFUSED

## TPMH7

[IF TPMH1a, 1b, 1c, 1d OR 1e = YES]

Were you dazed or confused after any of the head or neck injuries that you reported just now, even if you were not knocked out or did not lose consciousness from any of them?

- 1 YES
- 2 NO
- DON'T KNOW
- REFUSED

TPMH7a

Since [6MDATE], have you had a period of time in which you experienced multiple, repeated impacts to your head? For example, a history of abuse, contact sports, or during military duty?

- 1 YES
- 2 NO
- DON'T KNOW
- REFUSED

TPMH8

Now I'm going to ask you some questions about your current health. Would you say that in general your health is excellent, very good, good, fair, or poor?

- 1 EXCELLENT
- 2 VERY GOOD
- 3 GOOD
- 4 FAIR
- 5 POOR
- DON'T KNOW
- REFUSED

TPMH9

The next questions ask about the past 30 days. REFER TO DATE CIRCLED IN BLUE ON REFERENCE CALENDAR.

Now thinking about your physical health, which includes physical illness and injury, for how many days during the past 30 days was your physical health not good?

[RANGE -0-30]

TPMH10

Now thinking about your mental health, which includes stress, depression, and problems with emotions, for how many days during the past 30 days was your mental health not good?

[RANGE -0-30]

TPMH11

During the past 30 days, for about how many days did poor physical or mental health keep you from doing your usual activities, such as self-care, work, or recreation?

[RANGE -0-30]

TPMH12

These next questions are about physical, mental, or emotional problems or limitations you may have in your daily life. Are you **limited** in any way in any activities because of any impairment or health problem?

- 1 YES
- 2 NO
- DON'T KNOW
- REFUSED

TPMH13

[IF TPMH12=1]

What is the <B>major</B> impairment or health problem that limits your activities?

FI: DO NOT READ. CODE ONLY ONE CATEGORY.

- 1 ARTHRITIS/RHEUMATISM
- 2 BACK OR NECK PROBLEM
- 3 FRACTURES, BONE/JOINT INJURY
- 4 WALKING PROBLEM
- 5 LUNG/BREATHING PROBLEM
- 6 HEARING PROBLEM
- 7 EYE/VISION PROBLEM
- 8 HEART PROBLEM
- 9 STROKE PROBLEM
- 10 HYPERTENSION/HIGH BLOOD PRESSURE
- 11 DIABETES
- 12 CANCER
- 13 DEPRESSION/ANXIETY/EMOTIONAL PROBLEM
- 14 OTHER IMPAIRMENT/PROBLEM
- DON'T KNOW
- REFUSED

TPMH14

[IF TPMH12=1]

For <B> how long</B> have your activities been limited because of your major impairment or health problem?

NUMBER:

SPECIFY THE UNIT OF TIME

- 1 DAYS
- 2 WEEKS
- 3 MONTHS
- 4 YEARS

TPMH15

[IF TPMH12=1]

Because of any impairment or health problem, do you need the help of other persons with your <B>personal care</B> needs, such as eating, bathing, dressing, or getting around the house?

- 1 YES
- 2 NO
- DON'T KNOW
- REFUSED

TPMH16

[IF TPMH12=1]

Because of any impairment or health problem, do you need the help of other persons in handling your <B>routine</B> needs, such as everyday household chores, doing necessary business, shopping, or getting around for other purposes?

1 YES

2 NO

DON'T KNOW

REFUSED

TPMH17

During the past 30 days, for about how many days did <B>pain</B> make it hard for you to do your usual activities, such as self-care, work, or recreation?

[RANGE - 0-30]

TPMH18

During the past 30 days, for about how many days have you felt <B>sad, blue, or depressed</B>?

[RANGE - 0-30]

TPMH19

During the past 30 days, for about how many days have you felt <B>worried, tense, or anxious</B>?

[RANGE - 0-30]

TPMH20

During the past 30 days, for about how many days have you felt you did <B>not </B> get <B>enough rest or sleep</B>?

[RANGE - 0-30]

TPMH21

During the past 30 days, for about how many days have you felt <B>very healthy and full of energy</B>?  
(0-30)

[RANGE - 0 - 30]

TPMH22

In your life, have you ever had any experience that was so frightening, horrible, or upsetting, that, **in the past month, you...**

have had nightmares about it or thought about it when you did not want to?

1 YES

2 NO

DON'T KNOW

REFUSED

TPMH23

(In your life, have you ever had any experience that was so frightening, horrible, or upsetting, that, **in the past month, you...)**

tried hard not to think about it or went out of your way to avoid situations that reminded you of it?

1 YES

2 NO

DON'T KNOW

REFUSED

TPMH24

(In your life, have you ever had any experience that was so frightening, horrible, or upsetting, that, **in the past month, you...**)

were constantly on guard, watchful, or easily startled?

1 YES

2 NO

DON'T KNOW

REFUSED

TPMH25

(In your life, have you ever had any experience that was so frightening, horrible, or upsetting, that, **in the past month, you...**)

felt numb or detached from others, activities, or your surroundings?

1 YES

2 NO

DON'T KNOW

REFUSED

TINC1

[IF TREF1D=YES, SKIP TO ACASI1. IF TREF1D=NO, ASK TINC1.]

Before we get to the part of the interview where you take the computer and answer the questions yourself, we have one more thing to ask you. FI INSTRUCTION: TAKE OUT ORAL FLUIDS CONSENT FORM AND READ FORM.

PRESS 1 TO CONTINUE

TINC2

DID RESPONDENT AGREE TO PROVIDE AN ORAL FLUIDS SAMPLE?

1 YES

2 NO

[IF TINC2=1, "Thank you for agreeing to provide an oral fluids sample. At this time, I'd like to ask that you please remove any gum, and not eat or drink anything for the next 10 minutes. That will allow us to obtain a clean sample. We will continue with the interview now, and then after this section we will go over how to collect the oral fluids sample."]

[IF TINC2 NE 1, "Thank you for taking the time to read over that. We will finish the interview now."]

## **DOMAIN 10: ACASI**

### **ACASI Tutorial**

#### **ACASI1**

[NO AUDIO REQUIRED]

You will complete the rest of this interview on your own using the computer and headphones. Before you start, we'll go through a short practice session together so you can learn how to use this computer to answer the interview questions. After this introduction, I will move away from the computer and will not be able to see your answers so that you can take the interview in privacy.

MOVE COMPUTER SO RESPONDENT CAN SEE THE SCREEN.

For each question, the answers will appear on the screen. The answer will correspond to a number. To choose an answer you will need to press the number key.

**PRESS THE NUMBER 1 KEY.**

After you choose your answer, you must touch the **ENTER** button on the right side of the keyboard. The ENTER button is the large button with a left hand arrow on it. **PRESS THE ENTER BUTTON.**

#### **ACASI2**

[NO AUDIO REQUIRED]

If you want to go back to the previous question, use the up arrow on your keyboard. You can use the up arrow to go back to the previous question and change the answer. You can also use the up arrow to see your previous answer without changing it.

If you don't know the answer to the question, press the [F3] key and you will go on to the next question. **POINT OUT AND PRESS THE [F3] KEY.**

#### **ACASI3**

[NO AUDIO REQUIRED]

If you don't want to answer the question, you can press the [F4] key [POINT TO THE F4 KEY] and you will go on to the next question. **PRESS [F4] KEY.**

#### **ACASI4**

[NO AUDIO REQUIRED]

If you want the computer to read the question again, you can press the [F10] button [POINT TO [F10] BUTTON].

#### **ACASI5**

[NO AUDIO REQUIRED]

You can adjust the volume here [DEMONSTRATE VOLUME ADJUSTMENT, ON THE HEADPHONE CORD]. Or if you want to turn the volume off you can adjust it on your headphones or take your headphones off.

Please put on your headphones. When you are ready, let me know.

MOVE COMPUTER SO RESPONDENT CAN USE IT. ONCE RESPONDENT HAS HEADPHONES ON, **PRESS THE ENTER BUTTON SO RESPONDENT CAN BEGIN PRACTICE SESSION.**

**PLAY AUDIO FOR ALL FOLLOWING SCREENS**

**ACASI6**

This screen will play while you adjust the volume in your headphones. When you have adjusted the volume to a level that is comfortable to you, touch the **ENTER** button to continue with the practice session.

**ACASI7**

Welcome to RTI's self-interviewing system, which lets you control the interview and answer in complete privacy. In this system, you can read the questions on the computer screen and hear them read through the headphones.

First, you will learn how to use the system and complete some practice questions. You will learn how to enter answers and how to back-up if you make a mistake and want to change an answer.

If you would like to just see the questions on the screen, you can turn off the voice on your headphones or take them off.

Touch the large **ENTER** button. The ENTER button is the one with an arrow pointing to the left.

**ACASI8**

After you hear the question, you will hear the possible answers. To answer the question, you simply pick the number associated with your answer and then press the ENTER button.

Do you like ice cream?

*For Yes, press 1*

*For No, press 2*

**ACASI9**

The last question was a Yes-No question. Other questions will have more answers to choose from, and you will pick your answer from a list.

I like pepperoni pizza. Would you say you strongly agree, agree, disagree or strongly disagree? Pick the number that best fits you and press the ENTER button.

*For Strongly agree, press 1*

*For Agree, press 2*

*For Disagree, press 3*

*For Strongly Disagree, press 4*

**ACASI10**

For some questions you will enter your answer using the number keys on the keyboard. Try using the number keys to answer the question below. If you need to change your answer press the delete key to remove what you have already entered and then put in a new answer.

How old were you the first time you were arrested?

NUMBER: \_\_\_\_\_ [RANGE: 0 – 999]

**ACASI11** You can tell the computer to repeat a question by touching the **[F10]** button. Try this now.

How many times did you listen to this question?

*I have listened to this screen more than once.*

*I have only listened to this screen one time*

**ACASI12** Some questions will ask about the past 30 days. Remember that you can use your reference calendar if you want to.

PRESS THE ENTER KEY TO CONTINUE.

**ACASI13** If you have any questions, ask your interviewer now. If not, tell the interviewer you are ready to begin and he or she will move away from the computer. Press the ENTER key when you are ready to begin.

TACAS2

[IF TREF3=NO, SKIP TO TACAS177]

Now I'm going to ask you about your use of alcohol and other drugs within the past 6 months, since the date shown on the screen below. Remember that your answers will be kept completely confidential. Our data security procedures will prevent anyone outside the study from finding out what your answers were. In the past 6 months, have you had a drink of any type of alcoholic beverage?

[DISPLAY [6MDATE]]

1 Yes

2 No

DON'T KNOW

REFUSED

TACAS4

[if TACAS2=1 AND (TREF1D=NO OR INCARCERATION DATE IN TREF2 IS LESS THAN 30 DAYS AGO)]

Have you drunk alcohol in the past 30 days, that is, since the date shown below? It may be helpful to look at the reference calendar for this question.

[DISPLAY DATE 30 DAYS AGO]

1 Yes

2 No

DON'T KNOW

REFUSED

TACAS5

[TACAS4=1 AND (TREF1D=NO OR INCARCERATION DATE IN TREF2 IS LESS THAN 30 DAYS AGO)]

Have you drunk alcohol to the point of being drunk in the past 30 days?

1 Yes

2 No

DON'T KNOW

REFUSED

TACAS6

Now I'm going to ask about your use of prescription drugs. We are interested in knowing whether you have used the following medicines without a prescription or for other reasons than were prescribed, or in larger amounts, or more often than your doctor ordered.

Look at Showcard 7

In the past 6 months, have you used any prescription <B>stimulants</B>, such as Ritalin, Dexedrine, Adderall, diet pills, or Benzedrine, without a prescription or for other reasons than were prescribed, or in larger amounts, or more often than your doctor ordered?

[DISPLAY [6MDATE]]

1 Yes

2 No

DON'T KNOW

REFUSED

TACAS8

[if TACAS6=1 AND (TREF1D=NO OR INCARCERATION DATE IN TREF2 IS LESS THAN 30 DAYS AGO)]

Have you used stimulants in the past 30 days?

1 Yes

2 No

DON'T KNOW

REFUSED

TACAS9

Please look at Showcard 8

In the past 6 months, have you used any prescription<b> pain relievers</b>, including opioids and morphine derivatives such as Vicodin, OxyContin, codeine, morphine, without a prescription or for other reasons than were prescribed, or in larger amounts, or more often than your doctor ordered?

1 Yes

2 No

DON'T KNOW

REFUSED

TACAS11

[if SAAS9=1 AND (TREF1D=NO OR INCARCERATION DATE IN TREF2 IS LESS THAN 30 DAYS AGO)]

Have you used pain relievers or opiates in the past 30 days?

1 Yes

2 No

DON'T KNOW

REFUSED

TACAS12

Please look at Showcard 9.

Now I'm going to ask about your use of other prescription drugs that you have used without a prescription or for other reasons than were prescribed, or in larger amounts, or more often than your doctor ordered. This includes **sedatives**, such as barbiturates, sleeping pills, qualudes, or Phenobarbital; **tranquilizers**, such as Xanax, Valium, nerve pills, or tranks; or **methadone**, such as Street Methodone or Amidone . In the past 6 months, have you used any of these other prescription drugs without a prescription or for other reasons than were prescribed, or in larger amounts, or more often than your doctor ordered?

1 Yes

2 No

DON'T KNOW

REFUSED

TACAS14

[If TACAS12=1 AND (TREF1D=NO OR INCARCERATION DATE IN TREF2 IS LESS THAN 30 DAYS AGO)]

Have you used any of these other prescription drugs in the past 30 days?

1 Yes

2 No

DON'T KNOW

REFUSED

TACAS15

Please look at Showcard 10.

Now I am going to ask about your recreational use of other drugs. I will be asking about marijuana, cocaine, heroin, amphetamines, and other drugs. In the past 6 months, have you used **marijuana or hashish**? Marijuana is also called pot, grass, or hash. Please do not count synthetic marijuana, like Spice, here.

1 Yes

2 No

DON'T KNOW

REFUSED

TACAS17

[if TACAS15=1 AND (TREF1D=NO OR INCARCERATION DATE IN TREF2 IS LESS THAN 30 DAYS AGO)]

Have you used marijuana or hashish in the past 30 days?

1 Yes

2 No

DON'T KNOW

REFUSED

TACAS18

Please look at Showcard 11.

In the past 6 months, have you used any non-prescription <B>amphetamines or methamphetamine</B>? This includes speed, meth, crystal meth, ice, and chalk.

1 Yes

2 No

DON'T KNOW

REFUSED

TACAS20

[If TACAS18=1 AND (TREF1D=NO OR INCARCERATION DATE IN TREF2 IS LESS THAN 30 DAYS AGO)]

Have you used non-prescription amphetamines or methamphetamine in the past 30 days?

1 Yes

2 No

DON'T KNOW

REFUSED

TACAS21

Please look at Showcard 12.

In the past 6 months, have you used <B> cocaine</B>? This includes cocaine in all forms, such as powder cocaine, crack cocaine, free base, or coco paste.

1 Yes

2 No

DON'T KNOW

REFUSED

TACAS23

[If TACAS21=1 AND (TREF1D=NO OR INCARCERATION DATE IN TREF2 IS LESS THAN 30 DAYS AGO)]

Have you used cocaine in the past 30 days?

1 Yes

2 No

DON'T KNOW

REFUSED

TACAS24

Please look at Showcard 13.

In the past 6 months, have you used <B>heroin or opium</B>, such as Big H, Black Tar, Chiva, Hell Dust, Horse, Negra, or Thunder? This includes smoking, sniffing, snorting, and injecting heroin.

1 Yes

2 No

DON'T KNOW

REFUSED

TACAS26

[If TACAS24=1 AND (TREF1D=NO OR INCARCERATION DATE IN TREF2 IS LESS THAN 30 DAYS AGO)]

Have you used heroin in the past 30 days?

1 Yes

2 No

DON'T KNOW

REFUSED

TACAS27

Please look at Showcard 14.

In the past 6 months, have you used any other drugs? This includes <B>synthetic marijuana</B>, such as Spice or K2; <B>club drugs</B>, including Ecstasy, Molly, MDMA, GHB, or Rohypnol; <B>hallucinogens</B> such as LSD, acid, PCP, angel dust, peyote; mescaline; magic mushrooms, or psilocybin; <B>inhalants</B> such as amyl nitrite, "poppers," "rush," correction fluid, lighter fluid, glue, toluene, halothane, paint solvents, butane or propane, nitrous oxide or "whippets," magic markers, spray paints, and other aerosol sprays such as non-stick cooking spray, hair spray, asthma spray, or air fresheners ; or <B>other drugs</B>, such as Khat, Salvia, DXM, bath salts, DMT, 2C, or BZP?

1 Yes

2 No

DON'T KNOW

REFUSED

TACAS29

[if TACAS24=1 AND (TREF1D=NO OR INCARCERATION DATE IN TREF2 IS LESS THAN 30 DAYS AGO)]

Have you used any of these other drugs in the past 30 days?

1 Yes

2 No

DON'T KNOW

REFUSED

TACAS30

In the past 6 months, have you used larger amounts of drugs or used them for a longer time than you planned or intended?

[DISPLAY [6MDATE]]

1 Yes

2 No

DON'T KNOW

REFUSED

TACAS31

Have you tried to cut down on your drug use but were unable to do it?

[DISPLAY [6MDATE]]

1 Yes  
2 No  
DON'T KNOW  
REFUSED

TACAS32

Have you spent a lot of time getting drugs, using them, or recovering from their use?  
[DISPLAY [6MDATE]]

1 Yes  
2 No  
DON'T KNOW  
REFUSED

TACAS33

Have you gotten so high or sick from drugs that it kept you from doing work, going to school, or caring for children?  
[DISPLAY [6MDATE]]

1 Yes  
2 No  
DON'T KNOW  
REFUSED

TACAS34

In the past 6 months, have you gotten so high or sick from drugs that it caused an accident or put you or others in danger?  
[DISPLAY [6MDATE]]

1 Yes  
2 No  
DON'T KNOW  
REFUSED

TACAS35

Have you spent less time at work, school, or with friends so that you could use drugs?  
[DISPLAY [6MDATE]]

1 Yes  
2 No  
DON'T KNOW  
REFUSED

TACAS36

Has your drug use caused emotional or psychological problems?  
[DISPLAY [6MDATE]]

1 Yes  
2 No  
DON'T KNOW  
REFUSED

TACAS37

Has your drug use caused problems with family, friends, work or police?  
[DISPLAY [6MDATE]]

1 Yes  
2 No  
DON'T KNOW  
REFUSED

TACAS38

In the past 6 months, has your drug use caused physical health or medical problems?  
[DISPLAY [6MDATE]]

1 Yes  
2 No  
DON'T KNOW  
REFUSED

TACAS39

Have you increased the amount of a drug you were taking so that you could get the same effects as before?  
[DISPLAY [6MDATE]]

1 Yes  
2 No  
DON'T KNOW  
REFUSED

TACAS40

Have you kept taking a drug to avoid withdrawal symptoms or keep from getting sick?  
[DISPLAY [6MDATE]]

1 Yes  
2 No  
DON'T KNOW  
REFUSED

TACAS41

Have you gotten sick or had withdrawal symptoms when you quit or missed taking a drug?  
[DISPLAY [6MDATE]]

- 1 Yes
- 2 No
- DON'T KNOW
- REFUSED

TACAS42

Next, I'd like to ask about physical violence you may have experienced in the past 6 months, since the date shown below. It may be helpful to look at the reference calendar to remember what was going on in your life during this time.

[DISPLAY [6MDATE]]

In the past 6 months, how often have you been threatened with being hit by a fist or anything else that could hurt you?

- 1 Never
- 2 Once or twice
- 3 Three or more times
- DON'T KNOW
- REFUSED

TACAS43

... have you had anything thrown at you that could hurt you?

[DISPLAY [6MDATE]]

- 1 Never
- 2 Once or twice
- 3 Three or more times
- DON'T KNOW
- REFUSED

TACAS44

...have you been pushed, grabbed, or shoved?

[DISPLAY [6MDATE]]

- 1 Never
- 2 Once or twice
- 3 Three or more times
- DON'T KNOW
- REFUSED

TACAS45

...have you been slapped, kicked, bitten, or hit with a fist?

[DISPLAY [6MDATE]]

1 Never  
2 Once or twice  
3 Three or more times  
DON'T KNOW  
REFUSED

TACAS46  
...have you been threatened with a weapon or had a weapon used on you?  
[DISPLAY [6MDATE]]

1 Never  
2 Once or twice  
3 Three or more times  
DON'T KNOW  
REFUSED

TACAS47  
...have you required medical attention for violent acts directed at you by others?  
[DISPLAY [6MDATE]]

1 Never  
2 Once or twice  
3 Three or more times  
DON'T KNOW  
REFUSED

TACAS48  
In the past 6 months, how often have . . .

...<B>you</B> threatened to hit someone with a fist or anything else that could hurt them?  
[DISPLAY [6MDATE]]

1 Never  
2 Once or twice  
3 Three or more times  
DON'T KNOW  
REFUSED

TACAS49  
...<B>you</B> thrown anything at someone that could hurt them?  
[DISPLAY [6MDATE]]

1 Never  
2 Once or twice  
3 Three or more times  
DON'T KNOW  
REFUSED

TACAS50

...<B>you</B> pushed, grabbed, or shoved someone?  
[DISPLAY [6MDATE]]

- 1 Never
- 2 Once or twice
- 3 Three or more times
- DON'T KNOW
- REFUSED

TACAS51

...<B>you</B> slapped, kicked, bitten, or hit someone with a fist?  
[DISPLAY [6MDATE]]

- 1 Never
- 2 Once or twice
- 3 Three or more times
- DON'T KNOW
- REFUSED

TACAS52

...<B>you</B> threatened to use or use a weapon on someone?  
[DISPLAY [6MDATE]]

- 1 Never
- 2 Once or twice
- 3 Three or more times
- DON'T KNOW
- REFUSED

TACAS146

[ASK IF TSUP1a=1. IF TSUP1a=2, SKIP TO TACAS167]

The next questions ask about your experiences under supervision, such as parole or probation, within the past 6 months, since the date shown below.

[DISPLAY [6MDATE]]

In the past 6 months, during the time that you were on supervision, have you ever failed to comply with any conditions of your supervision?

- 1 Yes
- 2 No
- DON'T KNOW
- REFUSED

TACAS147

In the past 6 months, during the time that you were on supervision, have you tested positive for drug use at least once?

[DISPLAY [6MDATE]]

1 Yes

2 No

DON'T KNOW

REFUSED

TACAS148

Sometimes people under supervision receive sanctions or punishments for noncompliance. In the past 6 months, during the time that you were on supervision, have you been placed on house arrest or community control?

[DISPLAY [6MDATE]]

1 Yes

2 No

DON'T KNOW

REFUSED

TACAS149

(In the past 6 months, during the time that you were on supervision) ...have you been required to spend time in jail as a sanction or punishment for noncompliance?

[DISPLAY [6MDATE]]

1 Yes

2 No

DON'T KNOW

REFUSED

TACAS150

(In the past 6 months, during the time that you were on supervision) ...have you received a formal violation? A formal violation is where a judge violates someone's probation or parole because the person did not follow the terms or conditions of supervision.

[DISPLAY [6MDATE]]

1 Yes

2 No

DON'T KNOW

REFUSED

TACAS151

If your supervision officer thought that you were using drugs or not complying with other supervision conditions, how likely to you think it is that you would get some jail time?

1. Very likely
  2. Somewhat likely
  3. Not very likely
  4. Not at all likely
- DON'T KNOW  
REFUSED

TACAS152

(If your supervision officer thought that you were using drugs or not complying with other supervision conditions, how likely to you think it is that) ...you would be violated (given a violation)?

1. Very likely
  2. Somewhat likely
  3. Not very likely
  4. Not at all likely
- DON'T KNOW  
REFUSED

TACAS153

(If your supervision officer thought that you were using drugs or not complying with other supervision conditions, how likely to you think it is that) ...you would be revoked and end up in jail or prison?

1. Very likely
  2. Somewhat likely
  3. Not very likely
  4. Not at all likely
- DON'T KNOW  
REFUSED

TACAS154

Please tell me if you strongly agree, agree, disagree, or strongly disagree with the following statements about your parole or probation officer during the most recent time that you were under supervision. Your parole or probation officer has been helpful with your transition back to the community.

1. Strongly agree
  2. Agree
  3. Disagree
  4. Strongly disagree
- DON'T KNOW  
REFUSED

TACAS155

Your parole or probation officer seems trustworthy.

1. Strongly agree
2. Agree
3. Disagree
4. Strongly disagree

DON'T KNOW

REFUSED

TACAS156

Your parole or probation officer gives you correct information.

1. Strongly agree
2. Agree
3. Disagree
4. Strongly disagree

DON'T KNOW

REFUSED

TACAS157

Your parole or probation officer acts too busy to help you.

1. Strongly agree
2. Agree
3. Disagree
4. Strongly disagree

DON'T KNOW

REFUSED

TACAS158

Your parole or probation officer treats you with respect.

1. Strongly agree
2. Agree
3. Disagree
4. Strongly disagree

DON'T KNOW

REFUSED

TACAS159

Your parole or probation officer acts in a professional way.

1. Strongly agree
2. Agree
3. Disagree
4. Strongly disagree

DON'T KNOW

REFUSED

TACAS160

Your parole or probation officer doesn't listen to you.

1. Strongly agree
2. Agree
3. Disagree
4. Strongly disagree

DON'T KNOW

REFUSED

TACAS161

Your parole or probation officer calls you back or talks to you right away when you have a problem.

1. Strongly agree
2. Agree
3. Disagree
4. Strongly disagree

DON'T KNOW

REFUSED

TACAS162

Your parole or probation officer is knowledgeable about your case.

1. Strongly agree
2. Agree
3. Disagree
4. Strongly disagree

DON'T KNOW

REFUSED

TACAS163

Your parole or probation officer helps you to succeed.

1. Strongly agree
2. Agree
3. Disagree
4. Strongly disagree

DON'T KNOW

REFUSED

TACAS164

Your parole or probation officer gives you a chance to tell your side of the story.

1. Strongly agree
2. Agree
3. Disagree
4. Strongly disagree

DON'T KNOW

REFUSED

TACAS165

Your parole or probation officer treats you fairly.

1. Strongly agree
2. Agree
3. Disagree
4. Strongly disagree

DON'T KNOW

REFUSED

TACAS166

Your parole or probation officer assists you in getting the services you need.

1. Strongly agree
2. Agree
3. Disagree
4. Strongly disagree

DON'T KNOW

REFUSED

TACAS167

This section asks about various crimes you may have committed within the past 6 months, since the date below, regardless of whether or not you were caught. Remember, your answers will be kept completely confidential and **no one** except the people working on the study will be able to find out how you've answered.

date: [DISPLAY [6MRELDATE]]

In the past 6 months, have you committed any violent crimes, **regardless** of whether or not you were caught? By violent crimes, we mean things like physical or sexual assault, rape, robbery, manslaughter, attempted murder, murder, vehicular manslaughter, or vehicular homicide, and it doesn't matter whether you did or did not know the person.

- 1 Yes
  - 2 No
- DON'T KNOW  
REFUSED

TACAS168

In the past 6 months, have you committed any other crimes against people, **regardless** of whether or not you were caught? Crimes against people include things like hit and run, child neglect, or harassment.

[DISPLAY [6MDATE]]

- 1 Yes
  - 2 No
- DON'T KNOW  
REFUSED

TACAS169

In the past 6 months, have you carried a gun, knife, or other weapon, **regardless** of whether or not you were caught?

[DISPLAY [6MDATE]]

1 Yes

2 No

DON'T KNOW

REFUSED

TACAS170

In the past 6 months, have you used or possessed either drugs or drug paraphernalia, **regardless** of whether or not you were caught?

[DISPLAY [6MDATE]]

1 Yes

2 No

DON'T KNOW

REFUSED

TACAS171

In the past 6 months, have you sold any drugs, **regardless** of whether or not you were caught?

[DISPLAY [6MDATE]]

1 Yes

2 No

DON'T KNOW

REFUSED

TACAS172

In the past 6 months, have you committed any prescription drug crimes, such as forging prescriptions, stealing, or selling prescription drugs, **regardless** of whether or not you were caught?

[DISPLAY [6MDATE]]

1 Yes

2 No

DON'T KNOW

REFUSED

TACAS173

In the past 6 months, have you committed any other drug crimes, such as manufacturing or trafficking, **regardless** of whether or not you were caught?

[DISPLAY [6MDATE]]

1 Yes

2 No

DON'T KNOW

REFUSED

TACAS174

In the past 6 months, have you driven while intoxicated or under the influence, **regardless** of whether or not you were caught?

[DISPLAY [6MDATE]]

1 Yes

2 No

DON'T KNOW

REFUSED

TACAS175

In the past 6 months, have you committed any property crimes, **regardless** of whether or not you were caught? Property crimes include things like burglary, larceny, auto theft, bad checks, fraud, forgery, or grand theft.

[DISPLAY [6MDATE]]

1 Yes

2 No

DON'T KNOW

REFUSED

TACAS176

In the past 6 months, have you committed any other crimes such as prostitution, soliciting, shoplifting, or disorderly conduct, **regardless** of whether or not you were caught? Do not include any procedural violations you may have committed.

[DISPLAY [6MDATE]]

1 Yes

2 No

DON'T KNOW

REFUSED

TACAS122

The next questions ask more about how your life has been in the past 6 months. How easy or hard has it been for you to get a decent job in the past 6 months?

[DISPLAY [6MDATE]]

1. Very easy

2. Pretty easy

3. Pretty hard

4. Very hard

DON'T KNOW

REFUSED

TACAS123

[ASK IF TEMP2=YES]

How easy or hard has it been for you to **keep** a job once you got one?

[DISPLAY [6MDATE]]

1. Very easy
  2. Pretty easy
  3. Pretty hard
  4. Very hard
- DON'T KNOW  
REFUSED

TACAS124

How easy or hard has it been for you to stay clean and sober?

[DISPLAY [6MDATE]]

1. Very easy
  2. Pretty easy
  3. Pretty hard
  4. Very hard
- DON'T KNOW  
REFUSED

TACAS125

How easy or hard has it been for you to deal with pressure and stress you have faced?

[DISPLAY [6MDATE]]

1. Very easy
  2. Pretty easy
  3. Pretty hard
  4. Very hard
- DON'T KNOW  
REFUSED

TACAS126

How easy or hard has it been for you to stay away from friends or hangouts that get you into trouble?

[DISPLAY [6MDATE]]

1. Very easy
  2. Pretty easy
  3. Pretty hard
  4. Very hard
- DON'T KNOW  
REFUSED

TACAS127

How easy or hard has it been for you to get services and programs to help you?

[DISPLAY [6MDATE]]

1. Very easy
  2. Pretty easy
  3. Pretty hard
  4. Very hard
- DON'T KNOW  
REFUSED

TACAS128

How easy or hard has it been for you to get support from your family to help you stay away from drugs or alcohol?

[DISPLAY [6MDATE]]

1. Very easy
  2. Pretty easy
  3. Pretty hard
  4. Very hard
- DON'T KNOW  
REFUSED

TACAS129

How easy or hard has it been for you to get support from your friends to help you stay away from drugs or alcohol?

[DISPLAY [6MDATE]]

1. Very easy
  2. Pretty easy
  3. Pretty hard
  4. Very hard
- DON'T KNOW  
REFUSED

TACAS130

How easy or hard has it been for you to get someone in your family to give you rides to work, appointments, or meetings?

[DISPLAY [6MDATE]]

1. Very easy
  2. Pretty easy
  3. Pretty hard
  4. Very hard
- DON'T KNOW  
REFUSED

TACAS131

How easy or hard has it been for you to get a friend to give you rides to work, appointments, or meetings?

[DISPLAY [6MDATE]]

1. Very easy
  2. Pretty easy
  3. Pretty hard
  4. Very hard
- DON'T KNOW  
REFUSED

TACAS132

How easy or hard has it been for you to get someone in your family to let you live with them if you need a place to stay? If you haven't needed it, please answer 5.

[DISPLAY [6MDATE]]

1. Very easy
  2. Pretty easy
  3. Pretty hard
  4. Very hard
  5. Haven't needed it
- DON'T KNOW  
REFUSED

TACAS133

How easy or hard has it been for you to get a friend to let you live with them if you need a place to stay? If you haven't needed it, please answer 5.

[DISPLAY [6MDATE]]

1. Very easy
  2. Pretty easy
  3. Pretty hard
  4. Very hard
  5. Haven't needed it
- DON'T KNOW  
REFUSED

TACAS134

[IF TSUP1A=YES]

How easy or hard has it been for you to comply with all of your supervision requirements?

[DISPLAY [6MDATE]]

1. Very easy
  2. Pretty easy
  3. Pretty hard
  4. Very hard
- DON'T KNOW  
REFUSED

TACAS135

How easy or hard has it been for you obey the law?

[DISPLAY [6MDATE]]

1. Very easy
  2. Pretty easy
  3. Pretty hard
  4. Very hard
- DON'T KNOW  
REFUSED

TACAS136

How easy or hard has it been for you to stay out of prison or jail?

[DISPLAY [6MDATE]]

1. Very easy
  2. Pretty easy
  3. Pretty hard
  4. Very hard
- DON'T KNOW  
REFUSED

TACAS137

How easy or hard has it been for you to make enough money to support yourself?

[DISPLAY [6MDATE]]

1. Very easy
  2. Pretty easy
  3. Pretty hard
  4. Very hard
- DON'T KNOW  
REFUSED

SHOWCARD 15

TACAS177

[ASK IF TREF1E=YES]

What would you say are the **three main** reasons that you ended up back in a correctional setting?

CHOOSE UP TO 3:

1. You could not find a good job
2. You did not have enough money
3. You experienced problems with your family
4. You associated with friends that pulled you back into crime
5. You could not find a place to live
6. You lived in a neighborhood where it was easy to get pulled back into crime
7. You didn't have transportation to get to a job or take care of other needs
8. You were using drugs or alcohol
9. You couldn't get the services you needed.
10. Your probation or parole officer was not helpful
11. You were under too much stress or pressure
12. You didn't care whether or not you were put back in prison
13. You found doing crimes exciting and challenging
14. You felt safer in the facility than out on the streets
15. You receive more services in a correctional setting than in the community
16. You ended up back in a correctional setting for some other reason)

[ALLOW UP TO 3 ANSWERS; DK AND RE SHOULD NOT BE ALLOWED IF THE INTERVIEWER PICKS ANY OTHER RESPONSE CATEGORY]

SHOWCARD 16

TACAS178

[ASK IF TREF1E=NO]

What **three** things have made the **most** difference in terms of keeping you out of trouble in the past 6 months?

CHOOSE UP TO 3:

1. You found a good job
2. Your family is supportive
3. You stopped associating with friends that could get you into trouble
4. You found a stable or good place to live
5. You live in a safe neighborhood away from crime
6. You have adequate transportation
7. You stopped using drugs or alcohol
8. You got the services you needed
9. Your probation or parole officer was or is helpful
10. You learned how to deal with the stress or pressure in your life
11. You want to change for your children's sake
12. You are really committed to not going back to prison
13. Specific reentry programs have helped or are helping you
14. Your reentry case manager was or is helpful
15. Your religion or spirituality was or is helping you
16. You have stayed out of trouble for some other reason)

[ALLOW UP TO 3 ANSWERS; DK AND RE SHOULD NOT BE ALLOWED IF THE INTERVIEWER PICKS ANY OTHER RESPONSE CATEGORY]

TACAS53

Are you a member of a gang now?

1 Yes

2 No

DON'T KNOW

REFUSED

TACAS54

[if TACAS153=1]

Please tell me how much you agree or disagree with these next couple of statements. You would like to get out of your gang.

Do you strongly agree, agree, disagree, or strongly disagree with that statement?

1 Strongly agree

2 Agree

3 Disagree

4 Strongly disagree

DON'T KNOW

REFUSED

TACAS55

[If TACAS153=1]

You would be able to leave your gang if you wanted to.

1 Strongly agree

2 Agree

3 Disagree

4 Strongly disagree

DON'T KNOW

REFUSED

TACAS56

[IF TREF3=NO, SKIP TO TACAS72]

Has anyone you have lived with in the past 6 months [IF TREF1E=YES, ADD "while you were in the community"] ever been in jail, prison, or some other correctional institution?

[6MDATE]

1 Yes

2 No

DON'T KNOW

REFUSED

TACAS57

Does anyone you have lived with in the past 6 months use illegal drugs?

1 Yes

2 No

DON'T KNOW

REFUSED

TACAS58

In the past 6 months, have you supported yourself at all with illegal income?

1 Yes

2 No

DON'T KNOW

REFUSED

TACAS59

[IF TACAS58 = 1]

In the past 6 months, about how much of your income has come from illegal activity?

1. All

2. About three-fourths

3. About one half

4. About one-quarter

5. None

DON'T KNOW

REFUSED

TACAS60

Please think about the people **other than family members** that you have spent the most time with in the past 6 months [IF TREF1E=YES, ADD "and while you were living in the community"]. How many of those people are employed?

1. None

2. Few

3. Half

4. Most

DON'T KNOW

REFUSED

TACAS61

How many of them have ever served time in a correctional facility, such as a jail, prison, or juvenile correctional facility?

1. None

2. Few

3. Half

4. Most

DON'T KNOW

REFUSED

TACAS62

How many are taking illegal drugs regularly?

1. None
  2. Few
  3. Half
  4. Most
- DON'T KNOW  
REFUSED

TACAS63

How many are gang members?

1. None
  2. Few
  3. Half
  4. Most
- DON'T KNOW  
REFUSED

TACAS64

How often do these people convince you to do things you know you should not do?

1. Never
  2. Sometimes
  3. Often
- DON'T KNOW  
REFUSED

TACAS68

Now think about the **family members** you have spent the most time with in the past 6 months [IF TREF1E=YES, ADD "and while you were living in the community"]. Have any of these family members ever been convicted of a crime?

- 1 Yes
  - 2 No
- DON'T KNOW  
REFUSED

TACAS69

Have any of these family members ever had problems with drugs or alcohol?

- 1 Yes
  - 2 No
- DON'T KNOW  
REFUSED

TACAS70

Have any of these family members ever been in a gang?

- 1 Yes
  - 2 No
- DON'T KNOW  
REFUSED

TACAS71

In the past 6 months, how often have these family members convinced you to do something you knew you shouldn't do?

1. Never
  2. Sometimes
  3. Often
- DON'T KNOW  
REFUSED

TACAS72

These next statements describe how you may **currently** feel about your relationships with your family. Please answer about the family members that you have spent the most time with in the past 6 months. Please tell me whether you strongly agree, agree, disagree, or strongly disagree with the following statements.

You feel close to your family.

- 1 Strongly agree
  - 2 Agree
  - 3 Disagree
  - 4 Strongly disagree
- DON'T KNOW  
REFUSED

TACAS73

You want your family to be involved in your life.

- 1 Strongly agree
  - 2 Agree
  - 3 Disagree
  - 4 Strongly disagree
- DON'T KNOW  
REFUSED

TACAS74

You consider yourself a source of support for your family.

- 1 Strongly agree
  - 2 Agree
  - 3 Disagree
  - 4 Strongly disagree
- DON'T KNOW  
REFUSED

TACAS75

You fight a lot with your family members.

1 Strongly agree

2 Agree

3 Disagree

4 Strongly disagree

DON'T KNOW

REFUSED

TACAS76

You often feel like you disappoint your family.

1 Strongly agree

2 Agree

3 Disagree

4 Strongly disagree

DON'T KNOW

REFUSED

TACAS77

You are criticized a lot by your family.

1 Strongly agree

2 Agree

3 Disagree

4 Strongly disagree

DON'T KNOW

REFUSED

TACAS78

You have someone in your family to talk to about yourself or your problems.

1 Strongly agree

2 Agree

3 Disagree

4 Strongly disagree

DON'T KNOW

REFUSED

TACAS79

You have someone in your family to turn to for suggestions about how to deal with a personal problem.

1 Strongly agree

2 Agree

3 Disagree

4 Strongly disagree

DON'T KNOW

REFUSED

TACAS80

You have someone in your family who understands your problems.

- 1 Strongly agree
  - 2 Agree
  - 3 Disagree
  - 4 Strongly disagree
- DON'T KNOW  
REFUSED

TACAS81

You have someone in your family to love you and make you feel wanted.

- 1 Strongly agree
  - 2 Agree
  - 3 Disagree
  - 4 Strongly disagree
- DON'T KNOW  
REFUSED

TACAS82

For the next set of questions, please indicate how well this describes your current thinking. When you want something, you expect people to deliver.

- 1 Strongly agree
  - 2 Agree
  - 3 Disagree
  - 4 Strongly disagree
- DON'T KNOW  
REFUSED

TACAS83

Bad childhood experiences are partly to blame for your current situation.

- 1 Strongly agree
  - 2 Agree
  - 3 Disagree
  - 4 STRONGLY DISAGREE
- DON'T KNOW  
REFUSED

TACAS84

The future is unpredictable and there is no point planning for it.

- 1 Strongly agree
  - 2 Agree
  - 3 Disagree
  - 4 Strongly disagree
- DON'T KNOW  
REFUSED

TACAS85

Your crimes did not really harm anyone.

1 Strongly agree

2 Agree

3 Disagree

4 Strongly disagree

DON'T KNOW

REFUSED

TACAS86

You feel like what happens in your life is mostly determined by powerful people.

1 Strongly agree

2 Agree

3 Disagree

4 Strongly disagree

DON'T KNOW

REFUSED

TACAS87

You will never be satisfied until you get all that you deserve.

1 Strongly agree

2 Agree

3 Disagree

4 Strongly disagree

DON'T KNOW

REFUSED

TACAS88

A theft is all right as long as the victim is not physically injured.

1 Strongly agree

2 Agree

3 Disagree

4 Strongly disagree

DON'T KNOW

REFUSED

TACAS89

Even though you got caught, it was still worth the risk.

1 Strongly agree

2 Agree

3 Disagree

4 Strongly disagree

DON'T KNOW

REFUSED

TACAS90

Because of your history you get blamed for a lot of things you did not do.

- 1 Strongly agree
- 2 Agree
- 3 Disagree
- 4 Strongly disagree
- DON'T KNOW
- REFUSED

TACAS91

Most of the laws are good.

- 1 Strongly agree
- 2 Agree
- 3 Disagree
- 4 Strongly disagree
- DON'T KNOW
- REFUSED

TACAS92

Victims of crime usually get over it with time.

- 1 Strongly agree
- 2 Agree
- 3 Disagree
- 4 Strongly disagree
- DON'T KNOW
- REFUSED

TACAS93

When you commit a crime the only one affected is the victim.

- 1 Strongly agree
- 2 Agree
- 3 Disagree
- 4 Strongly disagree
- DON'T KNOW
- REFUSED

TACAS94

Most police officers and guards abuse their power.

- 1 Strongly agree
- 2 Agree
- 3 Disagree
- 4 Strongly disagree
- DON'T KNOW
- REFUSED

TACAS95

Society makes too big of a deal about your crimes.

1 Strongly agree

2 Agree

3 Disagree

4 Strongly disagree

DON'T KNOW

REFUSED

TACAS96

Sometimes you cannot control yourself.

1 Strongly agree

2 Agree

3 Disagree

4 Strongly disagree

DON'T KNOW

REFUSED

TACAS97

You expect people to treat you better than other people.

1 Strongly agree

2 Agree

3 Disagree

4 Strongly disagree

DON'T KNOW

REFUSED

TACAS98

People in authority are usually looking out for your best interest.

1 Strongly agree

2 Agree

3 Disagree

4 Strongly disagree

DON'T KNOW

REFUSED

TACAS99

Why plan to save for something if you can have it now.

1 Strongly agree

2 Agree

3 Disagree

4 Strongly disagree

DON'T KNOW

REFUSED

TACAS100

You insist on getting the respect that is due you.

- 1 Strongly agree
- 2 Agree
- 3 Disagree
- 4 Strongly disagree
- DON'T KNOW
- REFUSED

TACAS101

If a police officer or guard tells you to do something, there's usually a good reason for it.

- 1 Strongly agree
- 2 Agree
- 3 Disagree
- 4 Strongly disagree
- DON'T KNOW
- REFUSED

TACAS102

People in positions of authority generally take advantage of others.

- 1 Strongly agree
- 2 Agree
- 3 Disagree
- 4 Strongly disagree
- DON'T KNOW
- REFUSED

TACAS103

You are just a "born criminal."

- 1 Strongly agree
- 2 Agree
- 3 Disagree
- 4 Strongly disagree
- DON'T KNOW
- REFUSED

TACAS104

You deserve more than other people.

- 1 Strongly agree
- 2 Agree
- 3 Disagree
- 4 Strongly disagree
- DON'T KNOW
- REFUSED

TACAS105

You think it is better to enjoy today than worry about tomorrow.

- 1 Strongly agree
- 2 Agree
- 3 Disagree
- 4 Strongly disagree
- DON'T KNOW
- REFUSED

TACAS106

You do not like to be tied down to a regular work schedule.

- 1 Strongly agree
- 2 Agree
- 3 Disagree
- 4 Strongly disagree
- DON'T KNOW
- REFUSED

TACAS107

How important are your **family ties** to your self-identity, your sense of who you are?

- 1. Very important
- 2. Somewhat important
- 3. Not very important
- 4. Not at all important
- DON'T KNOW
- REFUSED

TACAS108

In 10 years, how important do you think your **family ties** will be to your self-identity?

- 1. Very important
- 2. Somewhat important
- 3. Not very important
- 4. Not at all important
- DON'T KNOW
- REFUSED

TACAS109

How important is your **spirituality or religion** to your self-identity, your sense of who you are?

- 1. Very important
- 2. Somewhat important
- 3. Not very important
- 4. Not at all important
- DON'T KNOW
- REFUSED

TACAS110

In 10 years, how important do you think your **spirituality or religion** will be to your self-identity?

1. Very important
2. Somewhat important
3. Not very important
4. Not at all important

DON'T KNOW

REFUSED

TACAS111

How important is your **work or occupation** to your self-identity, your sense of who you are?

1. Very important
2. Somewhat important
3. Not very important
4. Not at all important

DON'T KNOW

REFUSED

TACAS112

In 10 years, how important do you think your **work or occupation** will be to your self-identity?

1. Very important
2. Somewhat important
3. Not very important
4. Not at all important

DON'T KNOW

REFUSED

TACAS113

How important is **being clean and sober** to your self-identity, your sense of who you are?

1. Very important
2. Somewhat important
3. Not very important
4. Not at all important

DON'T KNOW

REFUSED

TACAS114

In 10 years, how important do you think **being clean and sober** will be to your self-identity?

1. Very important
2. Somewhat important
3. Not very important
4. Not at all important

DON'T KNOW

REFUSED

TACAS115

How important are your **community ties** to your self-identity, your sense of who you are?

1. Very important
2. Somewhat important
3. Not very important
4. Not at all important

DON'T KNOW

REFUSED

TACAS116

In 10 years, how important do you think your **community ties** will be to your self-identity?

1. Very important
2. Somewhat important
3. Not very important
4. Not at all important

DON'T KNOW

REFUSED

TACAS117

How important are your **friendships** to your self-identity, your sense of who you are?

1. Very important
2. Somewhat important
3. Not very important
4. Not at all important

DON'T KNOW

REFUSED

TACAS118

In 10 years, how important do you think your **friendships** will be to your self-identity?

1. Very important
2. Somewhat important
3. Not very important
4. Not at all important

DON'T KNOW

REFUSED

TACAS119

How important is **obeying the law** to your self-identity, your sense of who you are?

1. Very important
2. Somewhat important
3. Not very important
4. Not at all important

DON'T KNOW

REFUSED

TACAS120

In 10 years, how important do you think **obeying the law** will be to your self-identity?

1. Very important
2. Somewhat important
3. Not very important
4. Not at all important

DON'T KNOW

REFUSED

TACAS121

Which three aspects of your identity do you feel are the most important to who you are at this time?

(Check 3: family ties, spirituality or religion, work or occupation, being clean and sober, community ties, friendships, obeying the law)

1. Family ties
2. Spirituality or religion
3. Work or occupation
4. Being clean and sober
5. Community ties
6. Friendships
7. Obeying the law

DON'T KNOW

REFUSED

[DO NOT PERMIT RESPONDENT TO PICK OVER 3 (UNDER 3 IS PERMITTED); DO NOT ALLOW DK OR RE IN COMBINATION WITH ANOTHER ANSWER]

TACAS139

The final questions ask about the future. Please tell me how likely you are to do the following within the next 6 months. How likely are you to accept a minimum wage job if you can't find something better within a few months?

1. Very likely
2. Somewhat likely
3. Not very likely
4. Not at all likely

DON'T KNOW

REFUSED

TACAS140

If you are working a job you really don't like, how likely are you to quit the job without having another job lined up?

1. Very likely
2. Somewhat likely
3. Not very likely
4. Not at all likely

DON'T KNOW

REFUSED

TACAS141

How likely are you to give up friends that get you into trouble?

1. Very likely
2. Somewhat likely
3. Not very likely
4. Not at all likely

DON'T KNOW

REFUSED

TACAS142

How likely are you to participate in programs and services that will help you stay clean, get a job, or improve yourself?

1. Very likely
2. Somewhat likely
3. Not very likely
4. Not at all likely

DON'T KNOW

REFUSED

TACAS143

If you are living with people who could get you into trouble, how likely are you to find another place to live?

1. Very likely
2. Somewhat likely
3. Not very likely
4. Not at all likely

DON'T KNOW

REFUSED

TACAS144

If you are tempted to use drugs, how likely are you to take steps to avoid using?

1. Very likely
2. Somewhat likely
3. Not very likely
4. Not at all likely

DON'T KNOW

REFUSED

TACAS145

How likely are you to go out and have fun, even if you might get into trouble?

1. Very likely
2. Somewhat likely
3. Not very likely
4. Not at all likely

DON'T KNOW

REFUSED

Thank you. Please tell the interviewer that you are done with your part of the interview.

**DOMAIN 11: LOCATOR QUESTIONS**

TLOC1

We're almost done with the interview. In case we ever need to re-contact you for a follow-up interview in the future, we want to ask for some information that could help us locate you. Like all the information you have provided, it would be kept strictly confidential.

TLOC2a

[ASK IF TREF1D=YES]

Where do you think you will be living after your release?

RECORD ADDRESS INCLUDING CITY/STATE

TLOC2b

[ASK IF TREF1D=NO]

Do you think you'll still be living at the same place 6 months from now?

ENTER PHYSICAL ADDRESS AND REPEAT BACK TO CONFIRM.

Address Line 1: \_\_\_\_\_

Address Line 2 (if needed): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_ ZIP Code: \_\_\_\_\_

YES – SKIP TO TLOC3

NO

TLOC2c

[ASK IF TLOC2b=NO]

Where do you think you'll be living?

TLOC3

[ASK OF EVERYONE]

What is the telephone number at that address?

( ) \_\_\_\_-\_\_\_\_\_

TLOC4

Do you have a cell phone number or any alternative number that we could call if we were unable to reach you otherwise?

1 YES – GO TO CELL\_2

2 NO

TLOC5

RECORD CELL PHONE, WORK PHONE, OR OTHER NUMBER. SPECIFY WHAT KIND OF NUMBER

( ) \_\_\_\_-\_\_\_\_\_ Type of Phone: (CHECK ONE): Cell

Work  
Other

TLOC6

Do you have an e-mail address where we could contact you if we were unable to reach you otherwise?

- 1 YES – GO TO E-MAIL
- 2 NO

E-MAIL

ENTER RESPONDENT'S E-MAIL ADDRESS AND REPEAT BACK TO CONFIRM. MAKE SURE E-MAIL ADDRESS IS RECORDED IN THE FORMAT: [USERNAME@DOMAIN.COM](#) (NO SPACES) OTHER POSSIBLE SUFFIXES ARE .NET, .EDU AND .ORG

\_\_\_\_\_@\_\_\_\_\_.

TLOC7

Could you tell me the name, phone number, email, and address of someone who is not living with you, such as a close friend or relative, who would know how to reach you? We would only contact that person if we were unable to reach you otherwise.

- 1 YES – GO TO CONTACT1\_NAME
- 2 NO – GO TO CLOSE

TLOC8\_NAME

ENTER CONTACT'S FIRST AND LAST NAME. CONFIRM SPELLING  
CONTACT'S RELATIONSHIP TO RESPONDENT: \_\_\_\_\_

CONTACT1\_PHONE

ENTER AREA CODE AND PREFIX. CONFIRM NUMBER

(\_\_\_\_) \_\_\_\_-\_\_\_\_\_

CONTACT1\_EMAIL

ENTER CONTACT'S E-MAIL ADDRESS AND REPEAT BACK TO CONFIRM. MAKE SURE E-MAIL ADDRESS IS RECORDED IN THE FORMAT: [USERNAME@DOMAIN.COM](#) (NO SPACES) OTHER POSSIBLE SUFFIXES ARE .NET, .EDU AND .ORG

\_\_\_\_\_@\_\_\_\_\_.

CONTACT1\_ADDRESS

ENTER CONTACT'S PHYSICAL ADDRESS AND REPEAT BACK TO CONFIRM ADDRESS.

Address Line 1: \_\_\_\_\_

Address Line 2 (if needed): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_ ZIP Code: \_\_\_\_\_

TLOC9

Is there a second person who would know how to reach you?

- 1 YES – GO TO TLOC10\_NAME
- 2 NO – GO TO CLOSE

TLOC10\_NAME

ENTER CONTACT'S FIRST AND LAST NAME. CONFIRM SPELLING  
CONTACT'S RELATIONSHIP TO RESPONDENT: \_\_\_\_\_

CONTACT2\_PHONE

ENTER AREA CODE AND PREFIX. CONFIRM NUMBER

(\_\_\_\_) \_\_\_\_-\_\_\_\_\_

CONTACT2\_EMAIL

ENTER CONTACT'S E-MAIL ADDRESS AND REPEAT BACK TO CONFIRM. MAKE SURE E-MAIL ADDRESS IS RECORDED IN THE FORMAT: [USERNAME@DOMAIN.COM](mailto:USERNAME@DOMAIN.COM) (NO SPACES) OTHER POSSIBLE SUFFIXES ARE .NET, .EDU AND .ORG

\_\_\_\_\_@\_\_\_\_\_.

CONTACT2\_ADDRESS

ENTER CONTACT'S PHYSICAL ADDRESS AND REPEAT BACK TO CONFIRM ADDRESS.

Address Line 1: \_\_\_\_\_

Address Line 2 (if needed): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_ ZIP Code: \_\_\_\_\_

TLOC11

Is there a third person who would know how to reach you?

?

1 YES – GO TO TLOC11\_NAME

2 NO – GO TO CLOSE

TLOC11\_NAME

ENTER CONTACT'S FIRST AND LAST NAME. CONFIRM SPELLING

CONTACT'S RELATIONSHIP TO RESPONDENT: \_\_\_\_\_

CONTACT3\_PHONE

ENTER AREA CODE AND PREFIX. CONFIRM NUMBER

(\_\_\_\_) \_\_\_\_-\_\_\_\_\_

CONTACT3\_EMAIL

ENTER CONTACT'S E-MAIL ADDRESS AND REPEAT BACK TO CONFIRM. MAKE SURE E-MAIL ADDRESS IS RECORDED IN THE FORMAT: [USERNAME@DOMAIN.COM](mailto:USERNAME@DOMAIN.COM) (NO SPACES) OTHER POSSIBLE SUFFIXES ARE .NET, .EDU AND .ORG

\_\_\_\_\_@\_\_\_\_\_.

CONTACT3\_ADDRESS

ENTER CONTACT'S PHYSICAL ADDRESS AND REPEAT BACK TO CONFIRM ADDRESS.

Address Line 1: \_\_\_\_\_

Address Line 2 (if needed): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_ ZIP Code: \_\_\_\_\_

CLOSE

Thank you for your help. We look forward to speaking to you in the future.

GO TO DOMAIN 13

### **DOMAIN13: ORAL FLUIDS TESTING AND INCENTIVE DOCUMENTATION**

TINC3A

[IF TINC2=NO OR TINC2 IS MISSING, SKIP TO TINC4. IF TINC2=YES, ASK TINC3.]FI INSTRUCTION: OBTAIN ORAL FLUIDS SAMPLE

NOTE: BEFORE STARTING COLLECTION, CONFIRM THAT THE DONOR HAS NOT HAD ANYTHING IN HIS/HER MOUTH FOR 10 MINUTES PRIOR TO PROVIDING THE SAMPLE.

**STEP 1: PREPARE FOR COLLECTION**

- CHECK EXPIRATION DATE ON THE COLLECTION DEVICE PACKAGING AND OPEN OUTER PACKAGING CONTAINING THE COLLECTION PAD AND THE ORAL SPECIMEN VIAL.
- THEN PLACE THE SPECIMEN VIAL ON A FLAT SURFACE IN VIEW OF THE DONOR.
- HAVE THE DONOR REMOVE THE COLLECTION DEVICE FROM THE PACKAGING SLEEVE.

TINC3b

**STEP 2: COLLECT FLUID.**

- INSTRUCT THE DONOR TO PLACE THE COLLECTION PAD BETWEEN THE LOWER CHEEK AND GUM, THEN GENTLY RUB THE PAD BACK AND FORTH ALONG THE GUM LINE UNTIL THE PAD IS MOIST.
- ONCE MOIST, LEAVE COLLECTION PAD BETWEEN CHEEK AND GUM FOR 5 MINUTES.
- THEN HAVE THE DONOR OPEN THE SPECIMEN VIAL IN AN **UPRIGHT** POSITION, WITH THE **TIP POINTED DOWNWARD**, BY GENTLY ROCKING THE CAP BACK AND FORTH TO AVOID SPILLING THE CONTENTS.

TINC3c

**STEP 3: SEAL**

- INSTRUCT THE DONOR TO PUSH THE COLLECTION PAD INTO THE SPECIMEN VIAL AS FAR AS IT WILL GO AND SNAP THE COLLECTION WAND AT THE SCORED LINE AGAINST THE SIDE OF THE VIAL.
- INSTRUCT THE DONOR NOT TO TILT THE VIAL OR SPILL THE FLUID INSIDE.

TINC3d

**STEP 4: CAP AND PACKAGE**

- INSTRUCT THE DONOR TO PLACE THE CAP ONTO THE VIAL UNTIL IT SNAPS TO ENSURE A SECURE FIT.
- HAVE DONOR PLACE A TAMPER-EVIDENT SEAL ACROSS THE TOP OF THE SPECIMEN VIAL AND DOWN THE SIDES, THEN DATE THE SEAL.
- PLACE THE INTERCEPT SPECIMEN VIAL AND COMPLETED CHAIN OF CUSTODY FORM INTO THE SPECIMEN BAG.
- PLACE THE SPECIMEN BAG INTO THE OVERNIGHT SHIPPING PACKAGE AND SEND THE SPECIMEN TO THE LAB FOR TESTING.

PRESS 1 TO CONTINUE

TORAL1

INTERVIEWER: WAS AN ORAL SWAB SAMPLE COLLECTED?

1 YES

2 NO (R CHANGED MIND/RAN OUT OF TIME)

3 R TRIED TO PROVIDE SAMPLE BUT COULD NOT

[DISABLE DK/REF]

TINC4

IS RESPONDENT ELIGIBLE TO RECEIVE AN INCENTIVE FOR THE INTERVIEW – I.E., IS NOT A FLORIDA PROBATIONER UNDER DOC SUPERVISION, IS NOT INCARCERATED OR IS INCARCERATED IN A FACILITY THAT ALLOWS A MONEY ORDER TO BE DEPOSITED?

- 1 YES
- 2 NO

[IF TINC4=NO, SKIP TO FI OBSERVATIONS. IF TINC4=YES, GO TO TINC5]  
[DISABLE DK/REF]

TINC5

[ASK IF TINC4=YES.IS RESPONDENT ELIGIBLE FOR THE \$5 BONUS FOR CALLING AHEAD? (FI: YOU SHOULD HAVE THIS INFORMATION FROM YOUR FS)

- 1 YES
- 2 NO

[DISABLE DK/REF]

TINC6

[ASK IF TINC4=YES]

FI INSTRUCTION: RESPONDENT’S INCENTIVE AMOUNT SHOULD BE [FILL AMOUNT BELOW]. PAY INCENTIVE TO RESPONDENT. IF INCARCERATED, FOLLOW DOCUMENTED PROCEDURES TO DEPOSIT MONEY ORDER INTO RESPONDENT’S ACCOUNT.

PRESS 1 TO CONTINUE

INCENTIVE AMOUNT TO BE FILLED ABOVE: [IF TINC4=YES AND (ORAL1=YES OR ORAL1= 3 AND TINC5=YES, FILL WITH \$50. IF TINC4=YES AND (ORAL1=YES OR ORAL1= 3) AND TINC5=NO, FILL WITH \$45. IF TINC4=YES AND (ORAL1=NO OR ORAL1=MISSING) AND TINC5=YES, FILL WITH \$40. IF TINC4=YES AND (ORAL1=NO OR ORAL1=MISSING) AND TINC5=NO, FILL WITH \$35.].

TINC7

[ASK IF TINC4=YES]

WAS THE INCENTIVE PAID TO THE RESPONDENT? (FOR INCARCERATED RESPONDENTS, ANSWER YES IF THE MONEY WILL BE DEPOSITED IN THEIR MONEY ORDER ACCOUNT)?

- 1 YES
- 2 NO

**DOMAIN 12: FI OBSERVATIONS**

INTERVIEWER: COMPLETE THESE QUESTIONS AFTER LEAVING THE HOME OR PRIVATELY IN THE HOME.

DEB\_1

DID THE RESPONDENT ASK ANY QUESTIONS DURING THE CONSENT PROCESS?

- 1 YES – GO TO DEB\_2
- 2 NO – GO TO DEB\_3

DEB\_2

WHAT QUESTIONS DID THE RESPONDENT ASK? (CODE ALL THAT APPLY)

- 6 How long will this take
- 7 How was I chosen
- 8 What's in it for me
- 9 Do I have to do it
- 10 Other (specify)

DEB\_5

ESTIMATE THE RESPONDENT'S OVERALL UNDERSTANDING OF THE QUESTIONS ASKED IN THE INTERVIEW.

- 4 Understood questions without difficulty
- 5 Some difficulty understanding questions
- 6 Great difficulty understanding questions

DEB\_6

IN WHICH SECTIONS OF THE INTERVIEW, IF ANY, DID THE RESPONDENT HAVE TROUBLE ANSWERING QUESTIONS? (CODE ALL THAT APPLY)

- 12 REFERENCE CALENDAR
- 13 DEMOGRAPHICS
- 14 FAMILY AND PEERS
- 15 HOUSING
- 16 EMPLOYMENT
- 17 INCARCERATION CHARACTERISTICS AND CRIMINAL HISTORY
- 18 PROGRAM OPERATIONS AND SERVICES
- 19 PHYSICAL AND MENTAL HEALTH
- 20 ACASI
- 21 LOCATOR
- 22 NONE

DEB\_7

HOW TRUTHFUL DO YOU THINK THE RESPONDENT'S ANSWERS WERE?

- 4 Very truthful
- 5 Somewhat truthful
- 6 Not at all truthful

ORAL\_2

[ASK IF TINC2=1 AND ORAL1=2]

PLEASE EXPLAIN WHY AN ORAL SWAB WAS NOT COLLECTED SUCCESSFULLY. (CODE ALL THAT APPLY)

- 5. RESPONDENT CHANGED MIND
- 6. INSUFFICIENT SALIVA
- 7. SOMETHING INTERRUPTED THE INTERVIEW
- 8. OTHER (SPECIFY)

TRACING\_1

DID YOU NEED TO CONDUCT FIELD TRACING TO LOCATE THIS RESPONDENT?

- 3. YES
- 4. NO, THE RESPONDENT CALLED IN (RESPONDED TO THE LEAD LETTER)

TRACING\_2

HOW USEFUL WAS THE CONTACT INFORMATION PROVIDED AT BASELINE?

5. VERY
6. SOMEWHAT
7. NOT VERY USEFUL
8. NOT AT ALL

TRACING\_3

HOW DID YOU ULTIMATELY LOCATE THIS RESPONDENT?

10. Preloaded contact information
11. Online through a Department of Corrections website or similar
12. Current/last known address
13. Through friends or family
14. Directory Assistance
15. DMV
16. Local church
17. Public records search
18. Other, specify

DEB\_8

PLEASE PROVIDE ANY OTHER COMMENTS THAT WOULD BE HELPFUL FOR THE PROJECT TEAM TO KNOW.