

Pullmann, M. D., Kerbs, J., Koroloff, N., Veatch-White, E., Gaylor, R., & Sieler, D. (2006). Juvenile offenders with mental health needs: Reducing recidivism using wraparound. *Crime and Delinquency*, 52(3), 375-397.

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According to the authors, there are twice as many youth in juvenile justice with emotional and behavioral problems than there are in the general population (20% and 10% respectively). Other studies validate these high rates. For example, “children receiving public mental health services in King County, Washington, were nearly three times more likely to be referred to juvenile justice than similar youth” (p. 376). Youth with emotional and behavioral problems often “end up” in juvenile detention because there are no other places to house such youth. “Yet the juvenile justice systems are “ill-equipped to handle youth with co-occurring delinquent behaviors and mental health problems” (p. 376). This article reports on the ability of one system-of-care site, Connections, to reduce recidivism among youth with serious emotional and behavioral problems involved in the juvenile justice system through the use of wraparound. Compared to a control group, results revealed that youth from Connections were “significantly less likely to recidivate at all, less likely to recidivate with a felony offense, and served less detention time” (p. 375).

Connections is located in Clark County, Washington, and since October, 2001, has been serving youth with mental health needs involved with the juvenile justice system. To be eligible for connections youth must: (a) have been referred by any juvenile justice staff person; (b) have six months or more of probation left; (c) have a diagnosed or diagnosable behavioral or emotional disorder; (d) be receiving services in more than one system, and; (d) have scored at high risk for recidivism on the Washington State Juvenile Court Assessment. There were 98 youth in the comparison group, and 106 youth in the Connections program. Youth in the comparison group received traditional juvenile justice and mental health services, while Connections youth received wraparound services in a system of care.

The comparison group originally included 110 youth who had received services in juvenile justice and mental health. “Of this group, 98 youth did not become part of Connections because they had aged out of services, were discharged from probation, moved out of the country, or had other significant changes during the 21 months between identification and program development. This group of 98 youth makes up the historical comparison group” (p. 383)

Table 1 outlines the characteristics of these youth. The variable for race was dichotomized, as most youth were white. As shown in Table 1, the two groups were compared on five variables and were found to be similar on four of those variables. The groups differed on the number of offenses prior to identification, where youth in the Connections group had, on average, one more offense than youth in the comparison group.

	Connections n = 106		Comparison n = 98		<i>t</i>	<i>p</i>
	M	SD	M	SD		
Age at identification	15.4	1.41	15.0	1.2	2.1	.038
Age of first offense	13.2	1.5	13.5	1.5	-1.2	.249
Number of offenses prior to identification	4.2	2.6	3.2	2.7	2.7	.008
	<i>n</i>	%	<i>n</i>	%	$\chi^2$	<i>p</i>
Race (White)	93	88	87	89	.05	.82
Gender (male)	76	72	65	66	.69	.41

*Continued...*

At Connections, staff receive three days training and monthly follow-up training; consultations are available, with feedback provided by supervisory staff members and colleagues. There also is a staff clinical psychologist available for 20 hours per week; he or she performs evaluations and counsels youth. A mental health professional serves as core coordinator, and facilitates the Team meetings. At minimum, other members include: the child and family, a family assistance specialist, a probation counselor, and a juvenile services associate. Working with the caregiver, the family assistant (a paid family support worker) provides emotional and practical support, such as “accompanying [the family] through court proceedings” (p. 381). This position, along with that of the core coordinator, is available to the youth and family around the clock. The probationary counselor oversees court order compliance and works closely with the youth in terms of his or her treatment plan and its completion; the probationary counselor also serves as a mentor, “often accompanying youth in the community to activities” (p. 381). Team meetings occur within one month of intake, and youth are typically discharged from Connections when their court-ordered probationary period is up. Finally, “transition out of Connections begins three months prior to discharge to ensure youth and families are connected with community service providers and other necessary sources” (p. 382).

Results revealed that intervention group and gender were significant predictors of future offenses, both for “any offence,” and for “felony” offense. Youth who recidivated did so less often if they were in the Connections program, and regardless of intervention program, girls were less likely to recidivate than boys. However, “youth in the comparison group were three times more likely to commit a felony offense than youth in Connections” (p. 387). Less than half of those in the Connections program committed any felony offense at all, when compared to the comparison group.

Among youth in the Connections program, 72% served detention “at some point in the 790 day post identification window” (p. 388), while all youth in the comparison group served detention. And of youth in the Connections program who did serve detention, they did so significantly less often than their peers. Connections youth also took three times longer to recidivate than those in the comparison group. According to the authors, a previous study by Pullman and colleagues showed “significant improvement on standardized measures of behavioral and emotional problems, increases in behavioral and emotional strengths, and improved functioning at home at school, and in the community” (p. 388) among Connections youth.

On the one hand, groups were not randomly assigned, so the equivalency of the two groups is questionable. The results of the study, therefore, may be attributable to differences in the subject(s) not to the differences in services they received. Furthermore, the amount and types of therapy and services delivered to both groups was not well documented (e.g., no wraparound fidelity form was collected so it is difficult to understand the active ingredients operating in the study). The results of this study should be interpreted with these limitations in mind.

On the other hand, it is encouraging to see this article published in *Crime and Delinquency*, a long-time leader for policy change in the field of juvenile justice, and it is certainly encouraging to see the support that this research provides for the use of a wraparound approach. The article also offers a wealth of information on building and maintaining a wraparound program within a system of care for youth involved with juvenile justice. For example, the authors provide plenty of background information on Connections’ wraparound and on other successful wraparound programs (e.g., Wraparound Milwaukee, the Juvenile Delinquency Task Force Implementation Committee, and the Dawn Project), citing their strengths, challenges, and limitations.