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Middle School Violence - Keeping Students Safe

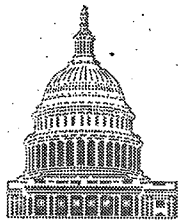
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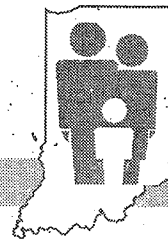
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Family Impact Seminars



Indiana

Middle School Violence— Keeping Students Safe

Briefing Report

January 2000

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Middle School Violence Keeping Students Safe

Indiana Family Impact Seminars Briefing Report

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January 2000

Sponsoring Organizations

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Purpose, Presenters and Publications

Family Impact Seminars have been well-received by federal policymakers in Washington, DC, and Indiana is one of a handful of states to sponsor such seminars for state policymakers. Family Impact Seminars provide state-of-the-art research on current family issues for state legislators and their aides, Governor's Office staff, state agency representatives, educators, and service providers. Based on a growing realization that one of the best ways to help individuals is by strengthening their families, Family Impact Seminars analyze the consequences an issue, policy or program may have for families.

The seminars provide objective nonpartisan information on current issues and do not lobby for particular policies. Seminar participants discuss policy options and identify common ground where it exists.

Middle School Violence—Keeping Students Safe is the second in a continuing series designed to bring a family focus to policymaking. This seminar featured the following speakers:

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Each seminar is accompanied by an in-depth briefing report that summarizes the latest research on a topic and identifies policy options from across the political spectrum. Copies may be obtained from The Center for Families at Purdue University, (765) 494-9878.

Checklist for Assessing the Impact of Policies on Families

The first step in developing family-friendly policies is to ask the right questions:

- What can government and community institutions do to enhance the family's capacity to help itself and others?
- What effect does (or will) this program (or proposed policy) have for families? Will it help or hurt, strengthen or weaken family life?

These questions sound simple, but they can be difficult to answer.

The Family Criteria (Ad Hoc) Task Force developed a checklist to assess the intended and unintended consequences of policies and programs on family stability, family relationships, and family responsibilities. The checklist includes six basic principles about families that serve as the measure of how sensitive to and supportive of families policies and programs are. Each principle is accompanied by a series of family impact questions.

The criteria and questions are not rank ordered (Ooms & Preister, 1988). Sometimes these criteria conflict with each other, requiring trade-offs. Cost effectiveness also must be considered. Some questions are value-neutral. Others incorporate specific values. People may not always agree on these values, so sometimes the questions will require rephrasing. However, this tool reflects a broad, nonpartisan consensus, and it can be useful to people across the political spectrum.

Checklist: A Tool for Analysis

Check all that apply. Record the impact on family well-being.

- 1 Family support and responsibilities.** Policies and programs should aim to support and supplement family functioning and provide substitute services only as a last resort.
 - ☐ How does the proposal (or existing program) support and supplement parents' and other family members' ability to carry out their responsibilities?
 - ☐ Does it provide incentives for other persons to take over family functioning when doing so may not be necessary?
 - ☐ What effects does it have on adult children's ties to their elderly parents?
 - ☐ To what extent does the policy or program enforce absent parents' obligations to provide financial support for their children?
 - ☐ Does the policy or program build on informal social support networks (such as community/neighborhood organizations, churches) that are so essential to families' daily lives?

2 Family membership and stability. Policies and programs should aim to support and supplement family functioning and provide substitute services only as a last resort. Whenever possible, policies and programs should encourage and reinforce marital, parental, and family commitment and stability, especially when children are involved. Intervention in family membership and living arrangements is usually justified only to protect family members from serious harm or at the request of the family itself.

- ☐ What incentives or disincentives does the policy or program provide to marry, separate or divorce?
- ☐ What incentives or disincentives are provided to give birth to, foster or adopt children?
- ☐ What effects does it have on marital commitment or parental obligations?
- ☐ How does the policy or program enhance or diminish parental competence?
- ☐ What criteria are used to justify removal of a child or adult from the family?
- ☐ What resources are allocated to help keep the family together when this is the appropriate goal?
- ☐ How does the policy or program recognize that major changes in family relations such as divorce or adoption are processes that extend over time and require continuing support and attention?

3 Family involvement and interdependence. Policies and programs must recognize the interdependence of family relationships, the strength and persistence of family ties and obligations, and the wealth of resources that families can mobilize to help their members.

- ☐ To what extent does the policy or program recognize the influence of the family and family members upon individual needs or problems?
- ☐ To what extent does it involve immediate and extended family members in working toward a solution?
- ☐ To what extent does it acknowledge the power and persistence of family ties, especially when they are problematic or destructive?
- ☐ How does it assess and balance the competing needs, rights, and interests of various members of a family? In these situations, what principles guide decisions (i.e., the best interests of the child)?

4 Family partnership and empowerment. Policies and programs must encourage individuals and their close family members to collaborate as partners with program professionals in delivery of services to an individual. In addition, parent and family representatives are an essential resource in policy development, program planning and evaluation.

- ☐ In what specific ways does the proposed or existing program provide full information and a range of choices to families?
- ☐ In what ways do program professionals work in collaboration with the families of their clients, patients or students?
- ☐ In what ways does the policy or program involve parents and family representatives in policy and program development, implementation and evaluation?
- ☐ In what ways is the policy or program sensitive to the family's need to coordinate the multiple services they may require?

5 Family diversity. Families come in many forms and configurations, and policies and programs must take into account their different effects on different types of families. Policies and programs must acknowledge and value the diversity of family life and not discriminate against or penalize families solely for the reasons of structure, roles, cultural values or life stage.

- ☐ How does the proposal or program affect various types of families?
- ☐ If the proposed or existing program targets only certain families, for example, only employed parents or single parents, what is the justification? Does it discriminate against or penalize other types of families for insufficient reason?
- ☐ How does it identify and respect the different values, attitudes and behavior of families from various racial, ethnic, religious, cultural and geographic backgrounds that are relevant to program effectiveness?

6 Targeting vulnerable families. Families in greatest economic and social need, as well as those determined to be most vulnerable to breakdown, should have first priority in government policies and programs.

- ☐ Does the proposed or existing program identify and target publicly supported services for families in the most extreme economic or social need?
- ☐ Does it give priority to families who are most vulnerable to breakdown and have the fewest supports?
- ☐ Are efforts and resources targeted on preventing family problems before they become serious crises or chronic situations?

Adapted from T. Ooms & S. Preister (Eds.) (1988). In *A strategy for strengthening families: Using family criteria in policymaking and program evaluation*. Washington, DC: Family Impact Seminar.

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What Youth Need to Succeed: The Roots of Resiliency

Karen Bogenschneider

Adolescence is an age of promise, but also a time of risk (Lerner, 1995; McCord, 1990; Newcomb, Maddahian, & Bentler, 1986). Almost half of America's youth aged 10 to 17 are estimated to abuse alcohol and other substances, fail in school, commit crimes, or engage in early unprotected intercourse (Dryfoos, 1990a). Yet some youth who face many risks are remarkably resilient. They do well despite seemingly insurmountable odds. This paper describes two promising models for preventing problems and promoting resiliency in youth. Based on the merits of both models, I propose a dual focus on reducing risk factors and enhancing protective factors. Using the example of juvenile crime, I illustrate how the model can be used to design prevention programs. The paper identifies 28 scientifically substantiated risk and protective factors and concludes with several implications for developing effective prevention programs and policies.

What Models Hold Promise for Preventing Problems and Building Resiliency in Youth?

In the last 20 to 30 years, we've tried a variety of approaches to preventing problem behaviors. As a result, our scientific knowledge of how to prevent youth problems has reached an all-time high. We have learned that certain types of programs don't work: providing "information only"; using scare tactics; building self-esteem (Dryfoos, 1990a; Higgins, 1988a); teaching values clarification or decision-making skills to children too young to grasp the concepts (Howard, 1988); and bringing together high-risk kids, which actually reinforced risky behaviors (Dishion, Andrews, Kavanagh, & Soberman, 1996). Two theoretical models that recently emerged, the risk-focused model and the protective-focused model, hold promise as the bases for programs and policies that build resiliency.

Risk-focused Model

One of the most successful prevention models in the last three decades emerged from medical epidemiology, which investigates the causes of disease in populations (Hawkins, Catalano, & Miller, 1992). This model addresses factors that increase risk. For example, in heart disease these risks are a family history of heart disease, smoking, too little exercise and too much dietary fat. Informing people about these risks and encouraging lifestyle changes actually reduced the incidence of heart disease.

This approach can also work in human development. One of the most important advances in the field of child development (Garbarino, 1994) is the recognition that human development, like heart disease, is influenced not by just one risk, but by multiple risks. Taking steps to reduce or eliminate these risks holds promise for preventing youth problems (Hawkins et al., 1992; Segal, 1983).

Protective-focused Model

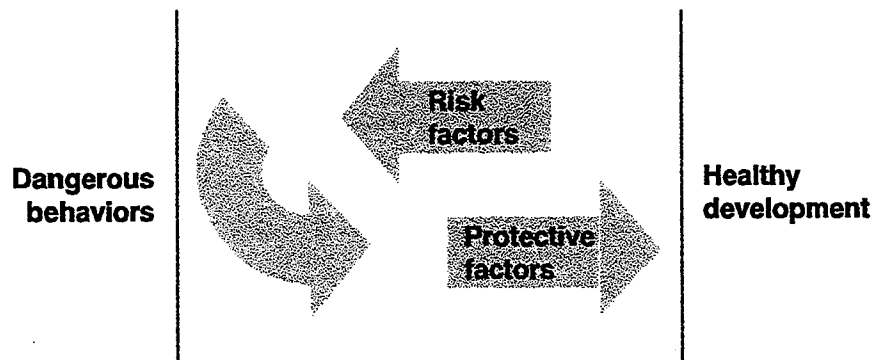
A second model emerged from studies of children who did well despite facing overwhelming odds in their lives such as mental illness, physical disabilities, parental neglect and abuse, parental alcoholism, poverty or war. Researchers asked: What is right with these children? What protects them? (Garmezy, 1983; Rutter, 1979, 1983, 1987; Werner, 1990; Werner & Smith, 1982). Even with glaring disadvantages and the most adverse conditions, it was unusual for more than a third (Werner, 1992) to a half of children (Rutter, 1985) to display serious disabilities or disorders. These findings suggest that it is important to focus on the characteristics of the children and the circumstances that protect children and foster resiliency and competence.

Although it is tempting to choose one model over the other to guide prevention professionals and policymakers, I argue that both have some validity and neither alone fully captures the reality of the diverse youth population (Bogenschneider, 1996a). For building resiliency in youth, I propose a risk/protective model combining both approaches.

The Risk/Protective Model

The core of this risk/protective approach is simple. As illustrated in Figure 1, to prevent youth problems and promote resiliency, you must identify what factors increase the risk of the problem and then eliminate the factor or reduce its effects. Alternatively, you can identify factors that protect against problems and support or enhance those factors.

Figure 1. The Risk/Protective Model



Recently, some resiliency proponents have argued that the risk and protective models are incompatible and that the protective model is more valuable (Benard 1993; Johnson, 1993; Morse, 1993). Focusing only on protective factors to help youth negotiate a risky environment seems shortsighted if one does not simultaneously work to reduce the number of risks they face. Otherwise it is like encouraging smokers to exercise without encouraging them to quit smoking (Hawkins, Catalano, & Haggerty, 1993). I propose working on both risk and protective factors because reducing risk curtails the number of protective factors youth need, and bolstering protection enables youth to deal with more risks.

Risks are hazards in the individual or the environment that increase the likelihood of a problem occurring. The presence of a risk does not guarantee a negative developmental outcome, but it increases the odds of one occurring. Just as a high-fat diet doesn't

guarantee a person will get heart disease, a single risk seldom places a child in jeopardy. Risks accumulate, like lead poisoning (Cowen, 1983). The more risk factors, the greater the danger.

Protective factors are safeguards in the individual or the environment that enhance youngsters' ability to resist problems and deal with life's stresses. The more protective factors, the more likely a young person will avoid hazards. In this paper, resiliency implies characteristics of individuals that enable them to overcome severe problems, whereas protective factors denote aspects of both individuals and their environments.

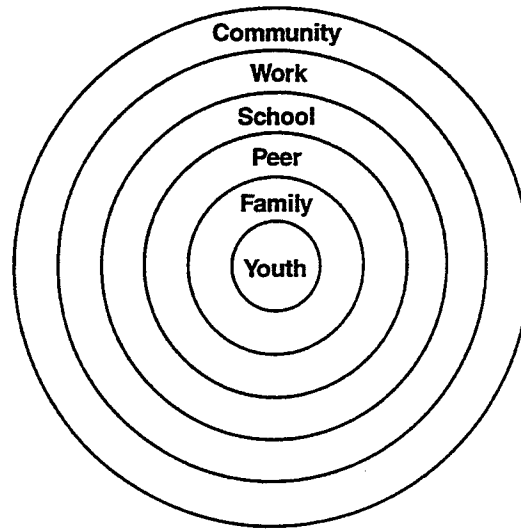
Risk and protective factors are not just opposite sides of the same coin, however. For example, if long work hours is a risk factor, short work hours is not necessarily a protective factor. Risk and protective factors emerge from different kinds of studies. Risk factors, for example, lead directly to a negative developmental outcome for most youth. Protective factors, however, emerge from studies of youth who succeed despite adverse conditions such as parental alcoholism, neglect, poverty and war.

Thus, protective factors exert their benefits only when a risk is present (Rutter, 1987). That is, in families without discord a good relationship with at least one parent made little difference in predicting conduct problems. For children growing up in families with discord, however, a good relationship protected children; only one-fourth of those who had a good relationship with one parent showed a conduct problem, compared with three-fourths of children who lacked such a relationship (Rutter, 1983). Thus, processes that protect youth from risk under conditions of stressful life events do not necessarily predict better outcomes for children whose lives are relatively stress-free (Rutter, 1987; Werner & Smith, 1982). In statistical terms, risk processes are main effects and protective processes are interactions (Garmezy, Masten, & Tellegen, 1984; Zimmerman & Arunkumar, 1994).

What Risk and Protective Factors Have Emerged from Scientific Studies?

The next section of this paper summarizes risk and protective factors related to the well-being of youth. They are reviewed beginning at the individual level and proceeding to the family, peer, school, work and community settings (see Figure 2). These factors are illustrated with data from a study of 1,200 adolescents and their parents in rural, suburban and urban school districts in Wisconsin (Bogenschneider, Raffaelli, Wu, & Tsay, in press). At the end I draw some implications of this approach for developing effective prevention programs and policies.

Figure 2. Levels of Influence on Youth Development



Individual risk factors

Antisocial behavior. Boys who are aggressive at ages 5, 6 and 7 are more apt to abuse drugs and commit delinquent acts as teenagers (Hawkins, Lishner, & Catalano, 1987). About 40 of 100 kids who are aggressive in the early elementary grades go on to exhibit serious behavior problems in adolescence. As summarized in Wisconsin Family Impact Seminar Briefing Report No. 4 (Bogenschneider, 1994a), seven programs for preventing early aggressiveness and juvenile crime have proven promising: parent management training, early childhood intervention and family support, functional family therapy, teaching problem-solving skills, social perspective-taking training, community-based programs, and broad-based intervention programs (Kazdin, 1987; Zigler, Taussig, & Black, 1992).

Alienation or rebelliousness. Kids who rebel or who feel alienated from their family, school or community are more apt to abuse drugs and become depressed (Hawkins, Lishner, & Catalano, 1987).

Early involvement. The earlier experimentation begins, the less likely young people will have the maturity to avoid negative consequences. For example, the younger the age at which intercourse occurs, the less likely that contraception will be used (Higgins, 1988b). Similarly, when substance use begins before the age of 15, the risk of later drug dependency increases by six to 10 times (Robins & Przybeck, 1987).

Individual protective factors

Well-developed problem-solving skills and intellectual abilities. Resilient youth are not necessarily intellectually gifted, but they possess good problem-solving skills. These intellectual abilities help them control their impulses and concentrate, even when other parts of their lives are chaotic (Werner & Smith, 1982).

Self-esteem and personal responsibility. For kids who face many risks, the belief that one can impact one's own fate is a safeguard (Rutter, 1985, 1987). Self-esteem, however, protects youth in some cases, whereas in other cases it does not. No evidence exists that working on self-esteem alone will reduce risky behaviors.

Well-developed social and interpersonal skills. Resilient youth have personalities that attract and maintain supportive relationships (Werner, 1990). Teaching social skills—specifically, teaching teens how to recognize and resist peer pressure to engage in risky behaviors—has proven effective in reducing early sexual activity, smoking and marijuana use (Ellickson, 1997; Howard & McCabe, 1990).

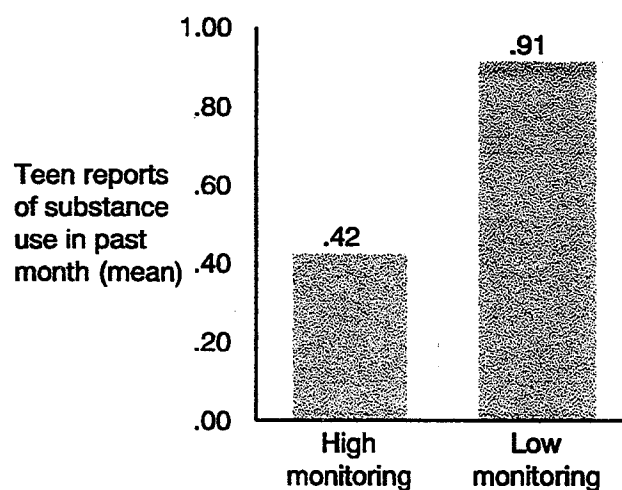
Religious commitment. Regardless of denomination, faith equips youth with a sense of security, a belief that their lives have meaning and confidence that things will work out despite hard times (Hawkins, Lishner, Jenson, & Catalano, 1987; Higgins, 1988a, 1988b; Werner, 1990).

Family risk factors

Poor parental monitoring. Youth problems are more likely when parents fail to monitor or supervise their children (Lamborn, Mounts, Steinberg, & Dornbusch, 1991; Patterson & Stouthamer-Loeber, 1984). Knowing where children are, who they are with and what they are doing is one of the most powerful means of avoiding virtually any risky behavior. Importantly, parent educators have been able to teach parents to more closely monitor their children's activities and whereabouts through parent education classes (Patterson, 1986) and through instructional newsletters for parents (Bogenschneider & Stone, 1997).

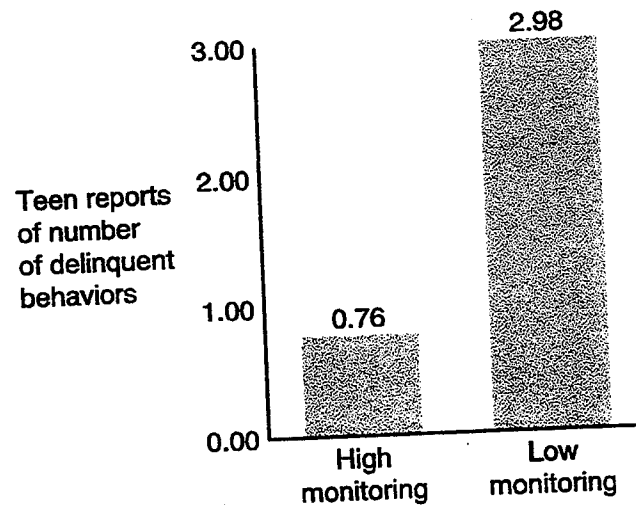
In my studies, parental monitoring is a potent influence on teen substance use and delinquent behaviors. As shown in Figure 3, teen use of substances such as tobacco, alcohol and marijuana was over twice as high among teens who reported low monitoring by their fathers as among those who reported high monitoring. Similarly, in Figure 4, teens' reports of delinquent behaviors, including belonging to a gang; being suspended from school; and being involved in shoplifting, vandalism or a physical fight, were almost four times higher among those who reported low levels of monitoring by their mother, compared with teens who reported high monitoring. In these analyses, as in those that follow, these effects are above and beyond any influences of parent education, family structure and child gender.

Figure 3. Does Father's Monitoring Affect Teen Substance Use?



Note. $F(4,217) = 31.96, p = .00$. Analyses control for father's education, family structure and child gender.

Figure 4. Does Mother's Monitoring Affect Delinquent Teen Behaviors?

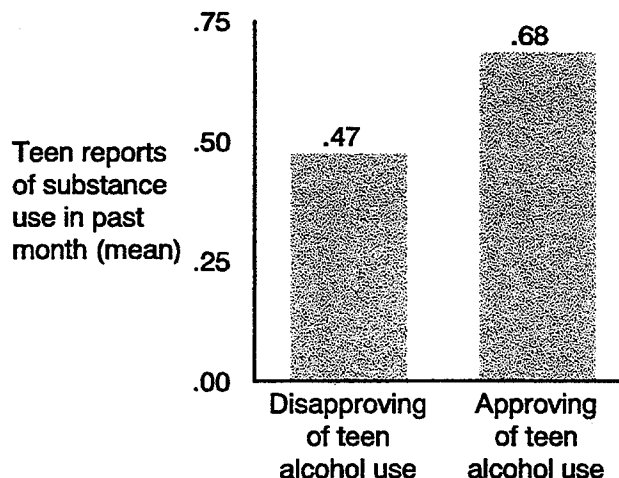


Note. $F(4,281) = 114.43, p = .00$. Analyses control for mother's education, family structure and child gender.

Distant, uninvolved and inconsistent parenting. An authoritative parenting style is associated with fewer youth problems than parenting that is too strict, too permissive or uninvolved (Steinberg, 1991). Authoritative parents are warm and responsive, while still providing firm, consistent rules and standards for youth behavior. In the past two decades, home visiting has emerged as one of the most effective methods for promoting more competent parenting (Olds, Henderson, Chamberlain, & Tatelbaum, 1986; Riley, 1994). It has also proven effective in preventing child abuse, increasing child IQ and establishing secure parent-child attachments.

Unclear family rules, expectations, and rewards. Problems are less likely when families communicate clear positions on issues such as drinking and sexual involvement, and establish consequences if rules are broken (Hawkins, 1989). With substances, for example, permissive parental values about teen alcohol use are a strong predictor of teen substance use, stronger even than parents' own alcohol use (Ary, Tildesley, Hops, Lichtenstein, & Andrews, n.d.; Barnes & Welte, 1986; Kandel & Andrews, 1987). As shown in Figure 5, substance use was significantly higher among teens with mothers who were the most approving of teen alcohol use, compared with those who were the most disapproving.

Figure 5. Do Mother's Values Regarding Teen Drinking Affect Teen Substance Use?



Note. $F(4,360) = 15.39, p = .00$. Analyses control for mother's education, family structure and child gender.

Low parental involvement in school. Parents who are involved in their children's school activities, such as attending parent-teacher conferences, helping with homework when asked and watching their children in sports or activities, have children who perform better academically, even children as old as high school students (Bogenschneider, 1997). When parents were uninvolved in such activities, children reported lower grades, a greater likelihood of dropping out of school and poorer homework habits (Baker & Stevenson, 1986; Epstein, 1982, 1985; Rumberger, Ghatak, Poulos, Ritter, & Dornbusch, 1990). Parental involvement in schooling was a potent predictor of school success regardless of ethnicity, parent education, family structure and parent or child gender (Bogenschneider, 1997). Moreover, parent educators have been able to teach parents of elementary and high school students to become more involved in the schooling of their children (Simich-Dudgeon, 1993; Smith, 1968).

Marital conflict. Marital conflict contributes to youth problems, specifically hostile behavior directed toward others (Crockenberg & Covey, 1991; Mann & MacKenzie, 1996). Marital conflict influences children primarily by interfering with competent parenting, even among children as old as adolescents (Davies & Cummings, 1994; Miller, Cowan, Cowan, Hetherington, & Clingempeel, 1993).

Family protective factors

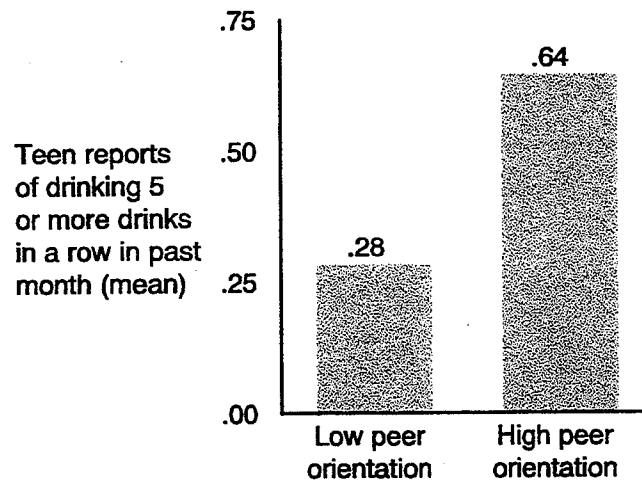
A close relationship with one person. One good relationship can do much to offset the effects of bad relationships (Rutter, 1985). Among high risk families this close relationship often occurs with a grandparent or other relative, but it can also be a teacher or neighbor who takes a special interest in the child (Werner, 1990).

Peer risk factors

Association with peers who engage in problem behaviors. Hanging around with deviant peers increases the odds that youth will get involved in risky behaviors (Barnes, Farrell, & Banerjee, 1994; Newcomb & Bentler, 1989; Small & Luster, 1994). With teen substance use, for example, peer influence is estimated to be four times more

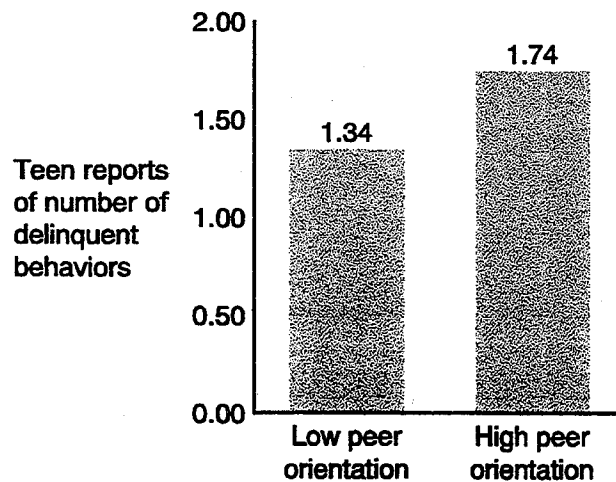
important than parental influence (Kandel & Andrews, 1987). Among teens who reported a high orientation to peers, the average frequency of getting drunk (five or more drinks in a row) in the past month was over twice as high as the average for those who reported low orientation to peers (Figure 6). In Figure 7, teens who reported a high orientation to peers committed nearly one-third more delinquent acts than teens who were less oriented to peers.

Figure 6. Does Peer Orientation Affect Whether Teens Get Drunk?



Note. $F(4,285) = 8.89, p = .00$. Analyses control for mother's education, family structure and child gender.

Figure 7. Does Peer Orientation Affect Delinquent Teen Behaviors?



Note. $F(4,281) = 13.51, p = .02$. Analyses control for father's education, family structure and child gender.

Parents, however, still remain an important influence and can restrain their children's peer orientation by being responsive in such ways as expressing love or praise, being available when needed, and engaging in give-and-take discussions (Bogenschneider, Raffaelli, Wu, & Tsay, 1997).

Peer protective factors

A close friend. Kids who have one close friend are more likely to adapt to stressful situations successfully (Werner, 1990).

School risk factors

School transitions. If you wanted to invent a social institution to mess up kids, you couldn't invent anything better than a junior high school (Price, 1989). Compared with students who make only one school transition from eighth grade to high school, students in school systems with middle schools or junior highs must make two transitions. And these transitions occur just as they are experiencing a whole host of changes in their physical appearance, thinking and social relationships. When students move into a middle school or a junior high, alcohol and drug abuse are more apt to increase, while academic achievement, extracurricular participation and psychological well-being are more apt to decline (Carnegie Council, 1989; Simmons, 1987; Steinberg, 1991). Younger students are more likely to be affected, as are borderline students, those who lose friends during the move, or those who begin dating at this time (Simmons, 1987; Simmons, Blyth, Van Cleave, & Busch, 1979; Simmons, Burgeson, Carlton-Ford & Blyth, 1987).

Academic failure. Failing in school increases the risk of youth problems, just as youth problems increase the risk of school failure (Brooks-Gunn & Furstenberg, 1989; Hawkins, 1989; Hawkins, Lishner, & Catalano, 1987). For example, youth who fail in grades 4, 5 and 6 are more apt to abuse alcohol in high school (Hawkins, 1989; Hawkins, Lishner, & Catalano, 1987).

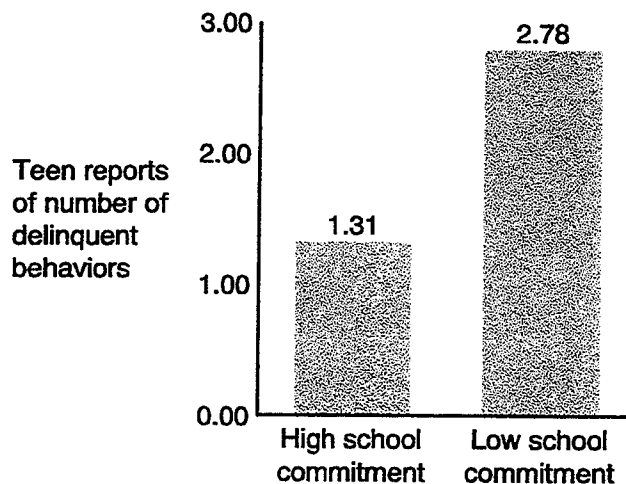
Low commitment to school. Students who hate school, who see little value in education, and attend only so they can smoke cigarettes or hang out with their friends are at higher risk for problems (Hawkins, 1989).

Large high schools. According to Garbarino (1994), if he could do only one thing for American teenagers, he would ensure that no child attends a high school larger than 500. Large high schools produce more alienation, more antisocial behavior and higher dropout rates. In small high schools extracurricular participation is twice that in large schools, and borderline students feel a sense of involvement and obligation equal to that of better students (Barker & Gump, 1964).

School protective factors

Positive school experiences. Positive school experiences are not limited to academic achievement; school success can occur in art, music or sports (Rutter, 1987; Werner, 1990). A special relationship with a teacher or the opportunity to take positions of responsibility can also be beneficial. In Figure 8 students who reported a high commitment to school reported less than half as many delinquent behaviors as students who reported a low commitment to school.

Figure 8. Does School Commitment Affect Delinquent Teen Behaviors?

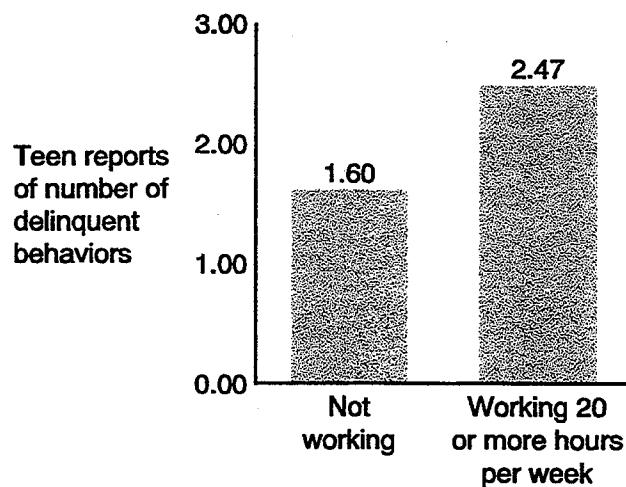


Note. $F(4,135) = 11.66, p = .00$. Analyses control for mother's education, family structure and child gender.

Work setting risk factors

Long work hours. Among inner-city populations, adolescents who work are no more likely to engage in delinquent behaviors than nonworkers. In other samples, however, high school freshman and sophomores who work more than 15 hours weekly are at higher risk for alcohol and drug use, delinquency and school failure; for juniors and seniors, working more than 20 hours a week is problematic (Steinberg, 1991). As shown in Figure 9, teens who worked 20 or more hours per week reported significantly more delinquent behaviors than those who did not work.

Figure 9. Do Long Work Hours Affect Delinquent Teen Behaviors?



Note. $F(4,88) = 5.16, p = .03$. Analyses control for mother's education, family structure and child gender.

Work setting protective factors

Required helpfulness. Work benefits youth if their work makes an important contribution to the family; for example, if children are needed to bring in extra income or help manage the home, work provides a meaningful role for youth (Werner, 1990).

Community risk factors

Low socioeconomic status. Risk factors occur in bunches; being poor increases the number of risk factors and magnifies their damage (Hawkins, Lishner, Jenson, et al., 1987; Werner & Smith, 1982).

Complacent or permissive community laws and norms. Policies that are unwritten, unclear or unenforced increase youth involvement in risky behaviors. Teens are more apt to drink, for example, when adults drink and the community doesn't mind if teens drink (Baumrind, 1987). Clear community messages, like higher taxes on liquor, decrease the rate of alcohol use among both light and heavy users (Hawkins, 1989; Higgins, 1988a). Raising the drinking age from 18 to 21 reduces alcohol use, but is less effective among heavy users.

Low neighborhood attachment and high mobility. Youth problems are more likely when neighbors don't know each other; parents have few opportunities to talk with one another; and no community standards exist regarding curfews, drinking and dating (Hawkins, 1989).

Media influences. The link between television viewing and aggression in children is firmly established (Eron, 1982; Huesmann, Lagerspetz, & Eron, 1984). The connection between TV viewing and either drinking or sexual activity is not as clear-cut; yet alcohol manufacturers target an estimated \$2 billion of advertising annually toward youth (Higgins, 1988b).

Community protective factors

Belonging to a supportive community. Resilient youth rely on a greater number of people such as neighbors, teachers and clergy than youth who do not cope as well (Garmezy, 1983; Werner, 1990; Werner & Smith, 1982). Mothers are also warmer and more stable when there are more adults around to help. For example, social isolation is one of the best predictors of a child-abusing family (Werner & Smith, 1982).

Bonding to family, school and other social institutions. Youngsters who feel emotional ties to their family, school or community are more apt to accept values and behaviors society deems desirable (Hawkins, Lishner, & Catalano, 1987). To build these ties, kids need opportunities for involvement, the skills to be successful and rewards for their accomplishments (Hawkins, 1989).

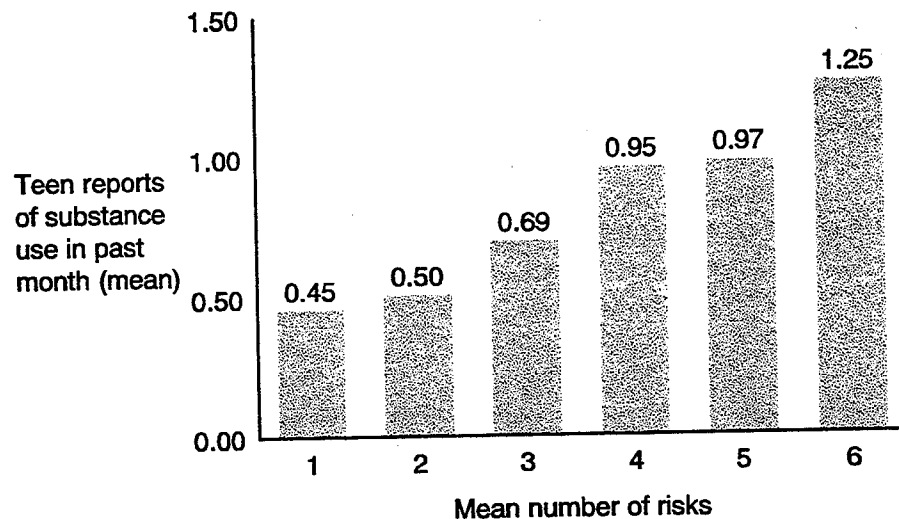
Cumulative Risk

In one study of 10-year-old children, the presence of one risk factor wasn't much more likely to be associated with psychiatric disorder than when no risk factors were present; with two risk factors, there was four times the chance of problem behaviors; and with four risk factors, the risk increased as much as 20 times (Rutter, 1979). In my study, I examined whether the number of risks (e.g., low parental monitoring, negative peer pressure and academic failure) affected teen substance use and delinquent behaviors. In

Figures 10 and 11, as the number of risks increases so does the likelihood that the teen will use substances or commit delinquent acts.

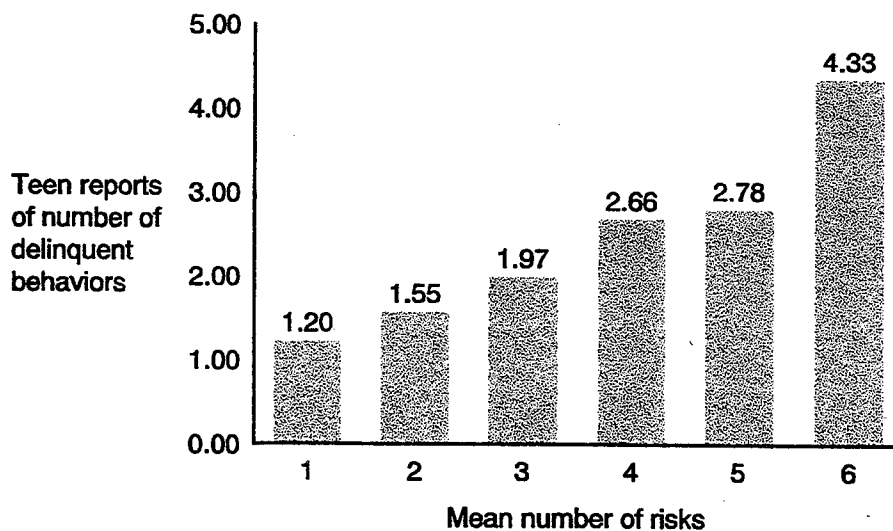
The bottom line is that if we are serious about supporting youth, we need to address as many of these risk and protective factors as possible. As illustrated in Figure 12, if a community decides to address alcohol use and abuse, they may need a multidimensional approach. Parent education may be needed, schools can be reorganized, programs can teach refusal skills and so forth. Model programs exist to address many of these risk and protective factors.

Figure 10. Do the Number of Risks Affect Teen Substance Use?



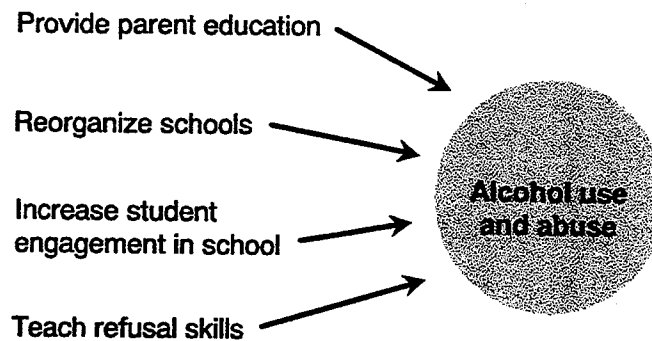
Note. $F(9,634) = 11.44, p = .00$. Analyses control for mother's education, family structure and child gender.

Figure 11. Do the Number of Risks Affect Delinquent Teen Behaviors?



Note. $F(9,622) = 9.09, p = .00$. Analyses control for mother's education, family structure and child gender.

Figure 12. A Multidimensional Risk/Protective Focus



Are some risk and protective factors more important for some risky behaviors than others?

The short answer is yes. One limitation of the risk/protective model is that not all risk and protective factors are equally important. Some factors may be more important for one child than another, in one period of development than another and in one setting than another. Moreover, some risk factors are more important for some youth problems than others. For example, the availability of contraceptives may not be relevant to substance use, but is central to preventing teenage pregnancy.

Even for a single risky behavior, such as juvenile crime, are some risk and protective factors more important for some juvenile offenders than others?

Assuming that all teenagers who commit crimes are psychologically similar is wrong (Moffitt, 1993), and can thwart efforts to develop effective policies and programs. Over 80 percent of all adolescents report having committed a chargeable offense at one time or another, but most of these “normal” adolescents do so infrequently (Moffitt & Harrington, in press; Steinberg, 1989). A small proportion of youth are responsible for most juvenile offenses (Hawkins, Lishner, Jenson, & Catalano, 1987). An estimated 5 to 8 percent of youth are responsible for 40 percent of all police contacts and two-thirds to three-fourths of all offenses (Patterson, 1994; Yoshikawa, 1994). A growing body of studies by such researchers as Terri Moffitt at UW-Madison and Gerald Patterson and his colleagues at the Oregon Social Learning Center reveal that not all delinquents are the same. Instead of one grand explanation for delinquency, it may be more accurate to think of one explanation for those who begin their criminal careers at a later age and one for those who begin their criminal careers earlier (Patterson & Yoerger, 1993).

Youth who begin delinquent activity at age 15 or later are more apt to stop their delinquent behavior as they mature. In fact, by age 28, almost 85 percent of former delinquents have stopped committing crimes (Moffitt, 1993).

Those who begin their criminal careers early get started on the wrong foot and are more likely to become frequent offenders, commit violent crimes and continue criminal activity as adults. Not only is their antisocial behavior consistent over time, but also across settings; for example, early-occurring delinquents “lie at home, steal from shops, cheat at school, fight in bars, and embezzle at work” (Moffitt & Harrington, in press, p. 8).

What leads to late-blooming delinquency?

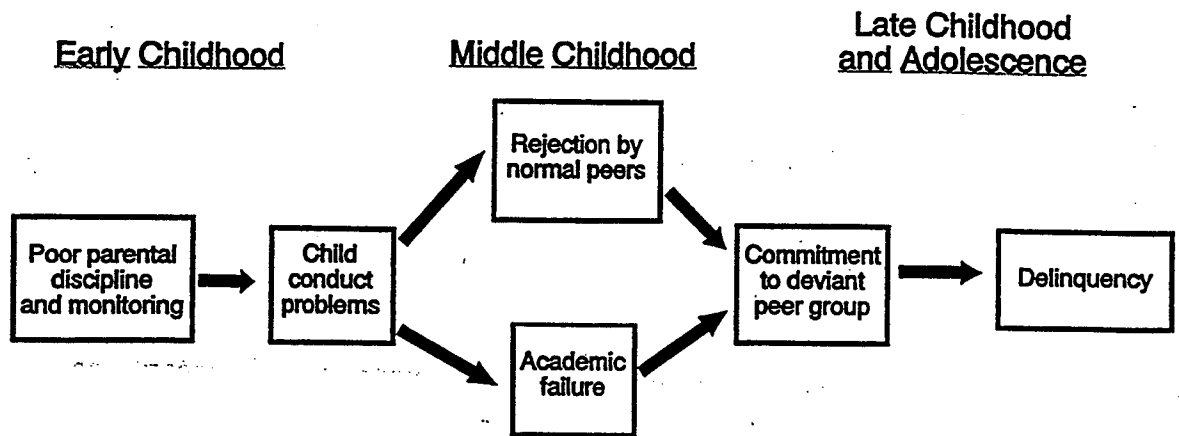
Late bloomers who commit their first offense at age 15 or later comprise the majority of delinquents. Psychologically, this type of delinquent appears to be quite normal: socially skilled, popular with peers and with no history of previous problems. Late-blooming adolescents can be found in most communities, their families appear to be less disadvantaged than those of early-occurring delinquents, and the parents appear more skillful in family management practices (Steinberg, 1987). They are influenced primarily by factors such as knowledge of their friends' and peers' delinquent acts; susceptibility to antisocial peer pressure (Steinberg, 1987); poor parental monitoring or supervision (Steinberg, 1987); and limited opportunities to demonstrate their maturity other than through delinquency.

What leads to early-occurring delinquency?

Early starters—those who begin criminal activities before age 15—are more apt to become frequent offenders, commit violent crimes, and continue criminal activity as adults. Their families tend to be low socioeconomic status, frequently unemployed and oftentimes divorced (Patterson & Yoerger, 1993; Steinberg, 1987). Early starters often are antisocial, aggressive and lacking in self-control as preschoolers.

Researchers at the Oregon Social Learning Center have concluded that 30 to 40 percent of the antisocial behavior of these early offenders can be tied to harsh, inconsistent parenting during the preschool years (Patterson, 1986; Patterson & Yoerger, 1993). Parents of these early offenders threaten, nag and scold but seldom follow through (Patterson, 1986). This teaches children to resolve conflict through coercion—specifically whining, yelling, temper tantrums or physical attacks (Patterson, 1994). This aggressive behavior leads to rejection by prosocial peers, trouble with teachers, and poor school performance (Patterson, Debaryshe, & Ramsey, 1989). Negative consequences snowball, and these youngsters, who are poorly monitored by their parents, drift into deviant peer groups (Dishion, Patterson, & Griesler, 1994) and increase their use of illegal substances as shown in Figure 13 (Dishion, French, & Patterson, 1995). Over time, they fail to develop the skills for stable work or marriages that might enable them to drop out of crime as an adult (Caspi, Elder, & Bem, 1987; Patterson & Yoerger, 1993).

Figure 13. A Developmental Progression for Antisocial Behavior

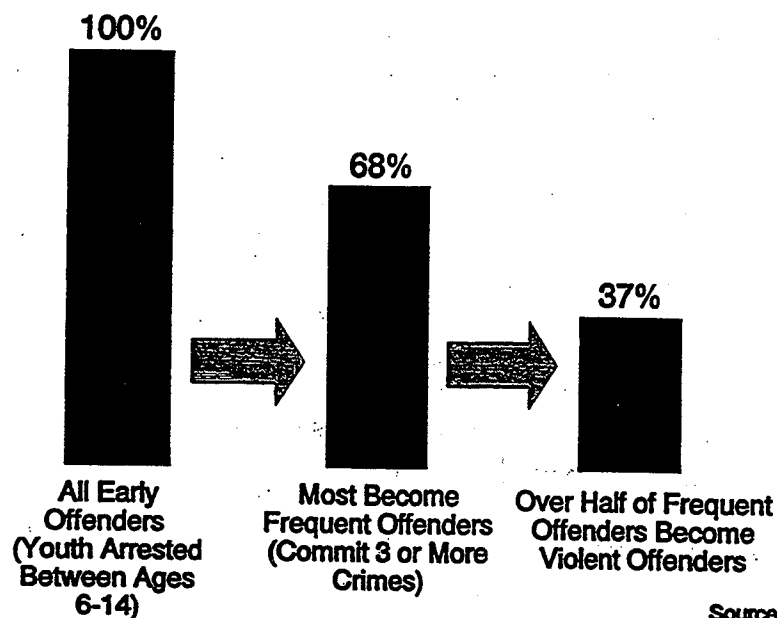


Source: Patterson, DeBaryshe, & Ramsey, 1989

What leads to violent juvenile crime?

The best predictors of who will become violent offenders are youth who commit their first crime at an early age and continue their criminal careers. No special explanation for violent crime is needed. If you can determine who starts early, you can predict frequent offenders, and frequency appears to predict violent offenses (see Table 1).

Table 1. The Development of Frequent and Violent Juvenile Offenders



Source: Patterson, 1994

Using this risk/protective model, which approaches work best for preventing juvenile crime?

Based on the two types of juvenile delinquency, one set of prevention programs is needed to head off those children at risk of becoming early starters. Another set needs to begin after the age of 10 or 11 to focus on children at risk of becoming late bloomers.

For "late bloomers," broad-based programs are needed that address the individual, peer group, family and community. Adolescents should learn peer refusal skills and parents should learn the importance of monitoring their children more closely. Communities need to take steps to provide definite consequences for youth misbehavior, but avoid labelling first-time offenders as "delinquent." Communities can also take steps to support families, alleviate family stress and provide opportunities for youth to demonstrate their maturity in socially beneficial ways.

For "early starters," prevention programs that begin early hold the greatest promise, based on evidence that aggression is quite stable much like IQ. For example, those children whose classmates said they were the most aggressive in third grade, committed more serious crimes as adults. At age 30, these highly aggressive 8-year-old males were more likely to commit crimes, commit serious crimes, violate traffic laws, drive while drinking, severely punish their children, and view themselves as aggressive. Similarly, females who were highly aggressive at age 8, scored higher at age 30 on criminal convictions, severe punishment of their children, and self-reported aggression. There are virtually no antisocial adults who were not antisocial as children (Moffitt & Harrington, in press), yet most antisocial youth do not become antisocial adults (Moffitt, 1993).

Do these findings suggest that aggression is a stable trait that cannot be budged?

Quite to the contrary, studies suggest that prevention programs provided early, specifically before school entry, hold the greatest promise (Hawkins, et al., 1987; Reid, 1993); Yoshikawa, 1994). For example, The Oregon Social Learning Center's Parent Management Training reduces child aggression. Its success rate, however, is 63 percent for children 3 1/2 to 6 years old and only 27 percent with children 6 1/2 to 12 years old (Patterson, Dishion, & Chamberlain, 1993). After the child enters school, changing serious behavior problems is still possible, but becomes more difficult.

Prevention efforts that begin before school entry can focus almost exclusively on parents. Parents can be taught less harsh and more consistent discipline tactics. Prevention strategies that reduce stress on families (i.e., poverty, low social support, unemployment, frequent moves, divorce, single parenthood, violent media messages, and permissive laws and norms) can also help parents do their best. After school entry, however, prevention strategies must become much more comprehensive, targeting not only parenting skills and family support, but also academic failure and rejection by prosocial peers.

How can the risk/protective model guide prevention efforts?

This model was used as the basis for forming 22 community coalitions of parents, educators, community leaders and youth in Wisconsin, ranging from a small agricultural community of less than 700 people to a 12-block inner-city neighborhood in Milwaukee (see Bogenschneider, 1996a). These coalitions were successful in develop-

ing comprehensive plans to prevent risky behaviors such as alcohol use, depression and violence. They have reduced risk and strengthened protective factors through such comprehensive prevention strategies as providing parent education and family support; establishing parent networks and parent-teacher associations; developing consistent, clear laws and norms regarding youth involvement in risky behaviors; and providing meaningful roles to bond youth to the community.

At last count over 30 local policies had been changed, including reducing the number of liquor licenses, stiffening the penalties for selling alcohol to minors, increasing the penalties for underage drinking and reducing the supply of alcohol. To date we know that we were successful in reducing documented risks and bolstering proven protective processes. Effects on risky behaviors are currently being examined.

What implications does the model have for policymakers?

According to the risk/protective model, youth are more apt to make a successful transition into adulthood when they are supported by a loving family, close friends, good schools and caring communities. In this final section I turn to implications of the risk/protective approach for developing prevention programs and policies.

1. Focus on proven risk and protective processes. Despite little evidence that improving self-esteem reduces problem behaviors, "Selling self-esteem to children has become big business" (Dryfoos, 1991, p. 633). Policymakers and prevention programmers could benefit from a number of papers reviewing risk and protective factors in the areas of academic achievement (Higgins & Mueller, 1988; Sameroff, Seifer, Barocas, Zax, & Greenspan, 1987), child abuse (Belsky, 1990), depression (Bogenschneider, 1993a; Harn, 1991; Petersen, Compas, Brooks-Gunn, Stemmler, Ey, & Grant, 1993), drug and alcohol abuse (Bogenschneider 1993b; Hawkins et al., 1992), juvenile delinquency (Bogenschneider, 1994b; Hawkins, Lishner, Jenson, et al., 1987), suicide (Alcohol, Drug Abuse, and Mental Health Administration, 1989), and teenage pregnancy (Higgins, 1988b; Bogenschneider, 1996b; Small & Luster, 1994).

2. Develop comprehensive approaches. Like most diseases, risky behaviors in youth cannot be cured with one treatment (Dishion et al., 1996). Most problem behaviors have not one cause, but many. All too often we look for "magic bullets," quick solutions to complex problems, which result in piecemeal, Band-Aid approaches. Youth problems are much too complex and the solutions much too comprehensive for any single policy or program. The best approach may vary by personality, age and context. For example, in a disadvantaged inner-city neighborhood, the best approach may be to focus on protective factors to instill a sense of hope into a seemingly desperate situation. In a rural community or a middle-class suburb, the best approach may be one that jars complacency and overcomes denial by emphasizing the risks that even youth living behind white picket fences may face.

3. Involve parents for long-term success. In a longitudinal study that followed children from birth to age 32, the parenting that children received was a stronger predictor of their long-term outcomes than even the biological complications they may have faced during pregnancy, delivery and the early years of life (Werner, 1992). Mounting evidence suggests that parent education and family support improves parenting competence (Patterson, 1986; Powell, 1986; Wandersman, 1987; Weiss, 1988), which, in turn, is thought to benefit children (Bronfenbrenner, 1986; Zigler & Styfco, 1993). Changes in parenting practices continue to benefit children long after the formal program ends.

4. Invest in programs with evidence of effectiveness. Avoid Band-Aid solutions and the latest trendy approaches. Only good programs produce good results (Zigler & Styfco, 1993). We know what doesn't work—providing information only, using scare tactics, building self-esteem, teaching values clarification or decision-making skills to children who are too young, and bringing together only high-risk youth. This paper notes some of the prevention strategies that we know work, such as teaching parents specific parenting practices and ways to become involved in their children's schooling, and teaching youth social perspective-taking and refusal skills. We also know some methods that work, such as home visiting, parent education classes, instructional newsletters and broad-based community approaches.

5. Intervene early and continuously. There are no magical periods of development (Zigler & Styfco, 1993). Programs provided early, however, hold the greatest promise (Reid, 1993; Yoshikawa, 1994). For example, Patterson's parent education program reduced early child aggressiveness with a success rate of 63% for children aged 3 to 6 and only 27% with children 6 to 12 (Patterson, Dishion, & Chamberlain, 1993). Prevention efforts that begin before school entry can focus more exclusively on parenting; after school entry more comprehensive strategies are needed to also target academic failure and problems with peers. Thus, for maximum effectiveness, programs need to begin early, preferably before problem behaviors develop, and they need to continue to ensure that healthy behaviors, once begun, are sustained (Dryfoos, 1990b). Expecting any short-term program to keep kids out of trouble is unrealistic. Programs that offer "boosters" throughout high school produce longer-lasting effects than one-time lessons (Ellickson, 1997).

6. Build on the supports that already exist in the community. Policies need to take steps to foster, not replace or weaken, naturally occurring sources of support for parents in the extended family, neighborhood and community. If parents are unavailable, other persons can play a supportive role: grandparents, older siblings, caring neighbors, ministers, Big Brothers and Big Sisters and youth workers in 4-H or YMCA/YWCA (Werner, 1992). Policies can create formal structures to encourage people to develop and rely on their own sources of social support, which in the future will render the formal programs obsolete (Bronfenbrenner & Weiss, 1983).

7. Remember the lesson of resiliency—the odds can be changed. From studies of parent education, we know that human beings possess the capacity for more competent parenting if given reliable information on how to do so and that social policies and programs can help parents become more competent. From studies of children who succeed against the odds springs the message of hope (Werner, 1992). Some things work, "if not for every vulnerable child, at least for many; if not all the time, at least some of the time; if not everywhere, at least in some places" (Werner, 1992, p. 112).



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- Bogensneider, K. (1994). *Do we know enough to prevent youth crime?* Paper presented at Wisconsin Family Impact Seminars: Promising Approaches for Addressing Juvenile Crime, 1994, Madison WI: University of Wisconsin-Madison.
- Bogensneider, K. (1996). An ecological risk/protective theory for building preven-

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Preventing Delinquency through Effective Parent Training and Adult Support

David W. Andrews

Problem behavior in children is not a disease that can be cured with one treatment. It depends on the situation, changing with the child's circumstances and development (Dishion, French, & Patterson, 1995). A variety of treatments and preventions are needed to meet the needs of individual children and families throughout childhood. Educational, mental health and juvenile corrections agencies need to examine the intervention strategies they employ in order to understand which ones help, which are benign and which actually have negative effects on youth.

This article discusses research on prevention programs for adolescent problem behavior such as drug use, delinquency, or risky sexual behavior. It describes the Adolescent Transitions Program (ATP), a program for high-risk youth and their parents. Offered and evaluated in both a community and a school setting, it showed that interventions with families produced somewhat improved youth behavior. However, there was an unexpected negative effect of grouping high-risk youth. The article concludes with implications and suggestions for improving intervention programs.

The Variables: Adolescent Characteristics and Antisocial Behaviors, Parenting, and Deviant Peer Groups

There are good reasons to offer preventive interventions in early adolescence, ages 10 to 13, before problem behaviors begin or worsen. Problem behaviors increase dramatically during this stage of development, and that is true among youth in all industrialized nations (Gottfredson & Hirschi, 1994). Just because such problems are statistically "normal," however, doesn't mean they will fade away if left alone.

Adolescent characteristics and antisocial behaviors

A clear focus is key to the prevention effort, with effectiveness being contingent on the fit between the approach used and characteristics of the adolescents being served. While the merits and challenges of identifying specific audiences are routinely debated by prevention scientists, most agree that there must be a distinction between *universal* and *targeted* approaches (Gordon, 1983).

Universal prevention efforts assume that the skills and information necessary to avoid adolescent problem behaviors are needed by everyone, and thus inoculate the entire population. Targeted prevention programs focus on youth who have exhibited high-risk behavior indicative of more serious problems, or those who are already active participants in delinquent or problem behaviors (Institute of Medicine, 1994).

If indeed there are characteristics that aid in defining a target for prevention programs, what are the criteria that should be used to classify those who require a specific inter-

vention strategy? The need to differentially implement programs based upon arrest records was articulated by early diversion programs. Some research supports the idea that programs should be differentially implemented based on the criminal status of the offending youth (Klein, 19974; Lipsey, Cordray, & Berger, 1981; Quay & Love, 1977); other research contends that criminal records had little correspondence with program effectiveness (Osgood, 1983). Rather than suggesting there is no need to consider participant profiles when implement programs, these inconsistent findings may well reflect the inaccuracy of arrest status in profiling antisocial and delinquent behavior. The existence of a youth's criminal record depends on many factors. The level of community policing, family financial resources and social class contribute to the incidence of arrest (Tolan, 1988). More accurate youth profiles and, thus, better decisions related to prevention programming will result by looking at other indicators of risk, such as the nature of the family environment: strained or coercive family relationships, broken homes or poor family cohesion (Tolan, 1988).

The concept of identifying "early" and "late" starters has been introduced (Moffit, 1993; Patterson, Capaldi, & Bank, 1991; Patterson, Reid, & Dishion, 1992) in an attempt to better predict antisocial and problem behaviors. Previously youth had been classified as either "offenders" or "nonoffenders." Inconsistent findings between prior criminal history and the effectiveness of diversion programs may well make the early/late classification system better suited, since arrest status has proven relatively inaccurate in profiling antisocial and delinquent behavior.

Researchers and juvenile correctional justice agencies investigating at-risk youth have often overlooked family variables, even though those variables have proven to be adequate predictors of problem behavior (Sampson and Laub, 1995). Early-starting antisocial children have a long family history of coercive and aggressive behavior that is reinforced within the context of family interactions (Patterson 1982, 1992). Thus prevention programs focusing on early starters should involve intensive parent training and should be implemented in early childhood.

Antisocial youth who have firmly entrenched problem behaviors require intensive interventions that focus on the multiple systems that impact them (Dryfoos, 1991). The labor-intensive needs of early starters require prevention efforts that include the participation of peers and other community members in addition to intensive parent training.

Late starters may benefit from less intensive prevention approaches. Primary prevention strategies such as community service, mentoring, structured participation in youth organization, and other options aimed at universal populations (Dryfoos, 1991) have proven effective when used with potential late-starting offenders prior to committing a criminal act.

Distinguishing between early and later starters has been performed effectively by both parents and teachers (Patterson & Bank, 1986). Chronic problem behavior reports by teachers have correlated highly with more objective measures of problems such as substance abuse, delinquency and antisocial behavior, and risky sexual behavior (Soberman, 1994). Parental reports of early childhood coercive behavior correlate with later indicators of problematic adolescent behavior (Reid, 1993). Parent and teacher reports may prove more useful in determining program options than previous arrest status.

Parenting

A substantial body of research shows poor parenting practices intensify antisocial behavior in children and adolescents (Dishion et al., 1995). As shown in Figure 1, violent behavior is rooted in harsh and inconsistent parenting during the preschool years (Patterson, 1986). Poor parenting leads to early aggressiveness. Early aggressiveness branches out to trouble with teachers, rejection by peers and poor school performance. Negative consequences snowball; poorly monitored by their parents, these youngsters drift into deviant peer groups (Dishion et al., 1991), which increases their odds of substance use and early police arrest (Dishion et al., 1995). Over time, these youth lack the skills to find stable work or marriages that might enable them to drop out of crime.

As the primary socializers of youth, parents can be very effective in modifying antisocial and inappropriate behavior. An evaluation of more than 500 family intervention programs by Kumpfer (1994) found no single program or approach to be most effective. In general, effective programs helped improve communication, problem solving and family management (limit setting, consistent and proactive discipline, and supervision). Effective programs were also likely to be

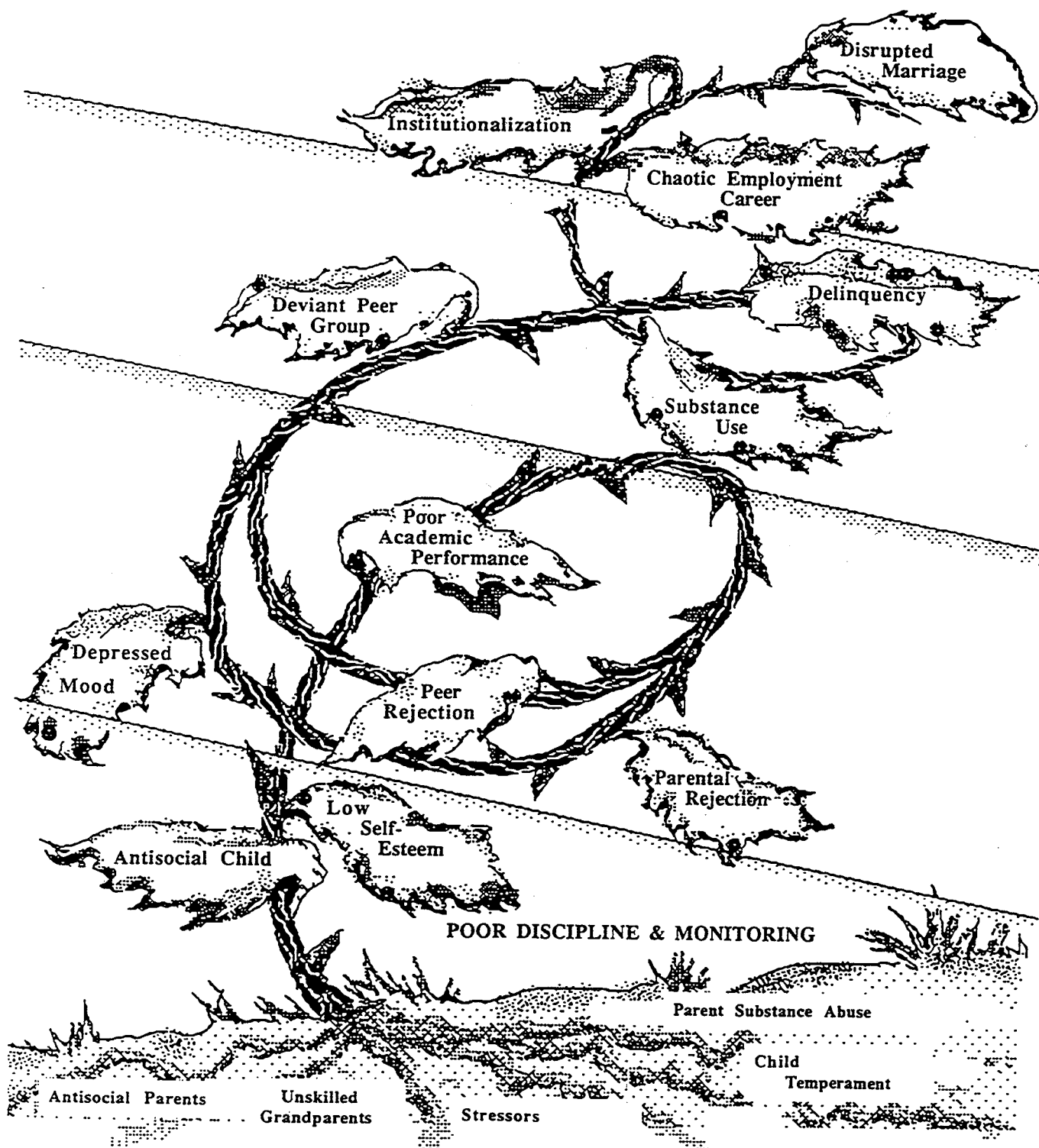
- comprehensive,
- focused on multiple family members,
- long term,
- intensively focused on risk factors,
- developmentally appropriate,
- tailored to a selected audience,
- initiated as early in the child's life as possible, and
- delivered by well-trained individuals.

Two noteworthy programs have been particularly successful. The Strengthening Families Program (Kumpfer, DeMarsh, & Child, 1989) was designed to reduce antisocial behavior in families. The 14-session parent training program teaches parents to set goals and reinforce behaviors consistent with these goals, to improve communication, and to solve problems more effectively. Parents and children practice problem-solving and communication skills in play situations, and there is a skill-building program for children. Research by Kumpfer and colleagues (1996) showed that the full program was most effective but that parent training alone effectively improved parenting skills and reduced problem behavior in children. The Adolescent Transitions Project described later in this article was effective in producing less negativity in families, fewer negative interactions among family members, and less antisocial and problematic behavior in the teens of participating parents (Dishion, Andrews, Kavanagh, & Soberman, 1995).

Community and school contexts

Antisocial behavior, parenting and peer groups do not operate in a vacuum. They are highly affected by community contexts (Patterson, Reid, & Dishion, 1992). This suggests that effective intervention programs must also address the people and organizations surrounding the youth (Dishion et al., 1995).

Figure 1. The Vile Weed: How Violent Behavior Is Rooted in Early Childhood



Note. From *A Social Learning Approach, Volume 4: Antisocial Boys*, by G. R. Patterson, J. B. Reid, & T. J. Dishion, 1992, Eugene, OR: Castalia. Adapted with permission.

School is a major element in the youth's life (Kellam, 1990). It is a convenient meeting place and training ground for deviant peer groups (Dishion, Patterson, & Griesler, 1994). School-parent communications are key to helping parents monitor their children, set limits and support academic progress (Reid, 1993). And, with most youth attending school through middle school, it is a good site for intervention (Trickett & Berman, 1989).

One school-based program, Fast Track, is state-of-the-art in identifying high-risk children in school and delivering interventions to them, their parents and peers (Conduct Problems Prevention Research Group, 1992). It successfully reduces antisocial and problematic behavior in first- and second-grade children (Bierman & Greenberg, 1996), helping them develop more appropriate social participation, prosocial behaviors and social problem solving.

Other successful programs address both the antisocial and aggressive behavior and the misperceptions and faulty reasoning that often accompany it (Kendall & Lochman, 1994). For older youth, the Coping Power Program (Lochman & Wells, 1996) addresses anger management, emphasizing goal setting, awareness of feelings, taking the perspective of others, and social problem solving. The Life Skills Training Program for adolescents (Botvin & Tortu, 1988) focuses primarily on drug use, but the self-management and social skills it offers effectively help reduce antisocial behavior.

Interventions can also target the school's strategy for communicating with parents. When parents regularly receive specific, neutral information on attendance, homework and class behavior, they are much better able to monitor and support their children's engagement with school (Heller & Fantuzzo, 1993).

Peer influences and effects

A number of longitudinal studies provide compelling evidence that the development of adolescent problem behavior is embedded within the peer group (Elliott, Huizinga, & Ageton, 1985; Gold, 1970; Hawkins, Catalano, & Miller, 1992; Short & Strodbeck, 1965). If growth in problem behaviors has a unique association with deviant peers in early adolescence (Patterson, 1993), what exactly is the peer influence process that supports that growth? (Dishion, McCord, & Poulin, 1999.)

Despite historical assumptions that credit beneficial effects of friendship to children's social development, such relationships can actually undermine healthy development (Hartup, 1996). Studies examining the powerful influence of deviant friendships on the development of problem behavior during adolescence were conducted using the Oregon Youth Study (OYS) (Capaldi & Patterson, 1987; Patterson, Reid, & Dishion, 1992). (Dishion, McCord, & Poulin, 1999.)

Coining the term "deviancy training" to describe the process of contingent positive reactions to rule-breaking discussions, researchers looked at how well deviancy training predicted future problem behavior by examining videotaped records of the boys' rule-breaking behavior and the reactions of their peers. The 206 boys were videotaped engaging in 25-minute problem-solving discussions at ages 13-14, 15-16 and 17-18. Findings (Dishion, Capaldi, Spracklen, & Li, 1995; Dishion, Spracklen, Andrews, & Patterson, 1996; Dishion, Eddy, Haas, Li, & Spracklen, 1997) revealed a statistically reliable increased probability of tobacco, alcohol and marijuana initiation by age 15-16 for boys who were abstinent at age 13-14, if the boys' friendships were characterized

by deviancy training. Deviancy training also accounted for increases in self-reported delinquency from ages 14 to 16. Finally, when controlled for the boys' histories of antisocial behavior and parental use of harsh, inconsistent and coercive discipline, deviancy training throughout adolescence was associated with violence. (Dishion, McCord, & Poulin, 1999.)

Recently the impact of the deviancy-training process on young-adult adjustment (as defined by sexual promiscuity, substance abuse, relationship problems and adult convictions), was analyzed by Patterson, Dishion, & Yoerger (1999), revealing that 35% of the variation in young-adult maladjustment five years later can be accounted for by the deviancy-training process. (Dishion, McCord, & Poulin, 1999.)

These data suggest that such adolescent friendships based on deviance provide a fertile context for the growth of problem behavior into adulthood, and yield a variety of implications for intervention programs targeting high-risk youth. Perhaps the powerful influence of peers could be harnessed for positive outcomes, leading to reductions in problem behaviors and increases in prosocial behaviors. Conversely, if group affiliations function as a support system for deviant behavior, then they should be avoided during the retraining period of high-risk youth.

Community activities also buffer against problem behavior. Adolescents spend about 42% of their time in discretionary activities (Timmer, Eccles, & O'Brien, 1985), much of it unsupervised. Unsupervised discretionary time not monitored by parents has been clearly associated with antisocial and delinquent behavior (Dishion et al., 1991). Unsupervised adolescents are also more likely to engage in early sexual intercourse and drug use, and are more susceptible to negative peer pressure. The majority of these activities take place between 3 and 7 p.m.

The literature on youth organizations suggests that youth who participate are at less risk than those who do not. However, nearly 29% of youth in the United States (approximately 5.5 million young adolescents) either do not have access to these programs or choose not to take advantage of them.

Communities with organized supervised activities have youth at lower risk than communities without such resources. Communities are best equipped to deliver prevention programs that are accessible and available to all youth. However, despite attempts to be inclusive, they have been only sporadically successful in reaching higher risk audiences (Carnegie Council, 1992).

Unsuccessful Youth Programs

Numerous other programs have been used directly with children and youth. The majority have not been evaluated systematically for effectiveness or have been found disappointing.

Programs using scare tactics have not reduced inappropriate behavior. These are programs like Scared Straight, in which hardened criminals lecture to young delinquents, and AIDS prevention programs designed to frighten youth into safer sexual behavior. In fact, gathering high-risk youth together for such interventions may glamorize inappropriate activity to the point that participants eagerly adopt it (Dishion & Andrews, 1995; Dryfoos, 1991).

Some prevention programs for substance abuse, like DARE and Just Say No, are popular and politically enticing, but prevention studies have repeatedly shown them to be largely ineffective (Dryfoos, 1991).

Peer-based prevention strategies should be used with caution. Older teens teaching refusal skills to younger teens has proven successful, yet there is little evidence that peer tutoring and peer counseling among same-age peers are effective in helping high-risk youth reduce their problematic behaviors.

Self-esteem programs designed to make young people "feel good about themselves" are trendy. However, low self-esteem, no matter how it is measured, has not emerged as a predictor of high-risk behavior. Thus, programs that report they have raised participants' self-esteem levels are not likely to be addressing underlying problems (Dryfoos, 1991).

Adolescent Transitions Program

The Adolescent Transitions Program study tests a theoretical model of adolescent problem behavior in which two developmental processes (parent and peer influences) are targeted in intervention trials (Dishion, Reid, & Patterson, 1988). ATP offers training for parents and youth, peer consultants and family consultation sessions.

Once a week for 12 weeks, small groups of parents gather to learn and practice techniques for problem solving, communication, limit setting, supervision, and discipline. The training is step by step and based on developing parenting skills shown to be effective in reducing problem behavior and increasing peer support for prosocial behavior (Kazdin, 1987, 1988; Lochman, 1985; McMahon & Wells, 1989; Patterson, Dishion, & Chamberlain, 1993). The parent curriculum parallels the youth program, and exercises frequently involve parent-child activities. Six 10-minute videotapes demonstrate relevant skills and practices (Dishion et al., 1995).

Programs for youth are designed to help them learn to self-regulate problem behavior. The program teaches at-risk adolescents to set realistic behavior change goals, develop appropriate small steps toward their attainment, develop and provide peer support for prosocial and abstinent behavior, set limits, and learn problem-solving skills. Goal setting is the first step, and the goal selected is negotiated with the parents and adolescents. Sessions address the adolescents' self-interest as much as possible.

Peer consultants for both parents and teens are a key feature of ATP. The consultants typically have completed the program or are experienced in successfully negotiating the problem behaviors. Consultants model appropriate parenting or self-regulation skills, offer support for successes, and suggest coping strategies for difficult situations.

Four consultations help fine-tune skills with each family. The sessions let families discuss their strengths and talk about what barriers keep them from implementing the new skills.

Evaluation of ATP in Community-Based Study

The research began with a community-based study of the four ATP components as compared with a control group. There were separate groups focused on just parents, just teens, parents and teens combined, and a self-directed study group. The control group participated in no programs. In a second phase, the ATP program was implemented in a school setting.

The researchers hypothesized that joint parent-teen programs would be most effective and that the school-based implementation would be more effective than the community-based one.

Using newspaper ads, school postings, and counseling services, the researchers recruited 158 high-risk families for the community-based study: 119 assigned to one of the four groups and 39 as controls. Parents first were interviewed by phone about the presence of 10 areas of early adolescent risk. Those reporting four or more as current concerns were accepted. The interview uses risk-factor research by Bry and colleagues (Bry, McKeon, & Pandina, 1982).

Study families were randomly assigned to one of four components: parent focus, teen focus, parent and teen focus, and self-directed materials only. Group sessions were generally well attended. Parents attended an average of 69% of the sessions; youth attended an average of 71% of the sessions. Retention was also high (90%); 143 of the original 158 families participated in the evaluation. These families generally liked the program, were engaged and were learning. This is important for the prevention effort to be effective.

How parents and youth interact while discussing and solving a problem is an important measure of the success of an intervention like ATP. Participants were filmed in a 25-minute problem-solving task, and their behavior was coded. Negative interactions declined significantly for those in the parent-focus-only and teen-focus-only groups, compared with those in the self-directed and control groups. Interestingly, in contrast to our hypothesis that working with the youth and parents together would produce better results, the combined parent-teen group showed the same reduction in negative interactions as the single-focus groups.

Youth problem behaviors at school were improved at the end of the program only for the parent-focus group as compared with the control group. However, one year later the teen-focus groups were actually smoking more and exhibiting worse problem behavior at school than the control group. Analysis showed that the smoking behavior was directly affected by participation in the teen-focus group. There was a modest but significant beneficial effect on smoking and marijuana use for youth whose parents received the parent-focus program, compared with the control group. No such effect occurred for the combined parent-teen group.

In summary, parent focus is the best intervention strategy for producing positive outcomes and minimizing the unintended negative effects of grouping high-risk youth together. Bringing high-risk youth together in groups can actually worsen substance use and problem behavior at school. Teens participating in the combined program showed neither an increase nor a decrease in problem behavior, suggesting that the two conditions were working against one another.

Evaluation of ATP in School-Based Program

The ATP program was implemented for sixth-graders in four middle schools located in neighborhoods with high rates of juvenile arrests. Teacher ratings, which have consistently proven accurate in other studies, helped identify families to involve in the study. The study compared 63 families randomly assigned to the school-based implementation of ATP and a community-based implementation. All families received both the teen-focus and parent-focus interventions because the study was planned before the negative results of teen grouping were known.

Recruitment

To counter the anticipated problem of getting parents involved, the researchers designed a very successful parent-driven recruitment system. A letter from the school principal to families of at-risk students used neutral language with phrases such as the following:

“As you know, the teenage years involve changes and challenges to both parents and teens.”

“I am pleased that this program is available to families in our community and believe that it will help your child be more successful at home and in school.”

“Your family will benefit from this free program.”

“Because of limited resources, only some families can be offered ATP this year.”

“Your family’s full involvement in the 12-week program will help prevent substance abuse, problem behavior, and emotional turmoil in your teenage son or daughter.”

More than 50% of the participating families volunteered within a week of receiving the letter. The remaining families were telephoned and invited to review the program during a home visit. At these visits the program was described in detail, and youth and parent concerns were addressed.

School liaisons and behavioral consultants

Two liaisons from each school, selected from volunteers by the principal, proved to be a valuable link between participants and the school. In addition to helping with details of space allocation, information gathering and teacher communication, liaisons met weekly with students, for whom they became advocates. They also attended parent groups, reporting weekly on each student’s academic and social behavior in school. Behavioral consultants, ultimately used for only three or four students during the study, helped teachers develop behavior change plans for students.

Integrating high-risk and low-risk youth

After the first 12 weeks of the program, students in the program were mixed with low-risk youth to create a video project on substance use and other pressures facing middle school students and families. Goals were to produce a video with an “anti-problem-behavior” message, to integrate high-risk youth into prosocial groups and activities, to

reinforce skills taught in the 12-week sessions, and to inform students of the risks of substance use and other problem behaviors.

Conclusion

The hypothesis that implementing ATP through schools would be superior to doing so through the community was not supported by a majority of the data. There was no reliable difference between the two.

Summary and Future Directions

Parent training and involvement in schools and communities were once again supported as effective strategies to improve behavior and slow increases in drug use. The basic components of ATP's parent and teen focus effectively engaged students and their parents and improved parent-child relations. The parent-focus curriculum had a short-term effect on reducing aggressive and delinquent behaviors in young teens.

The teen-focus curriculum improved parent-child relations but did not influence problem behavior in the short term. Further, we need to look closely at any effort to bring high-risk youth together because problem behavior escalated after they participated in these groups.

The school implementation of ATP demonstrates the need to alter the school environment to:

- further increase parent involvement and home-school communications, and
- develop more heterogeneous peer environments to help counter the effects of deviant peer groups.

Future work should concentrate on building on the parent training component of ATP.

The specific processes associated with escalating problem behavior (deviant peers, school failure and antisocial behavior) must be identified early and interrupted before they unfold. Interventions must be designed to maximize parent satisfaction and engagement. The first step is enhancing the motivation to change.

The authors propose regular, brief interventions, called family check-ups, to enhance at-risk parents' motivation to change. This is based on a study that showed a drinker's check-up reduced problem drinking as much as a 28-day inpatient program (Miller & Rollnick, 1991). The process involves improving motivation to change through a realistic appraisal of risk status in the company of a knowledgeable and supportive professional. It also enhances motivation to use appropriate intervention resources.

Comprehensive systems of prevention must focus on both families and communities. Effective parent training programs must be institutionalized for young parents and parents of challenging youth. Successful prevention is relevant to developmental stage and context and keeps parents and teens engaged in the process. Regular check-ups can be a useful, non-stigmatizing mechanism for prevention with families. Communities must continue to develop formal and informal organizations promoting overall development of their youth. This joint focus will result in the most significant and sustainable impacts.

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Alternatives in Juvenile Corrections

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The last decade of the twentieth century was ushered in through the nation's juvenile courts by an estimated 1.35 million delinquency and status offense cases (Snyder et al., 1993). This 1990 case rate, although it may include double counting of some individuals who appeared more than once during the year, represented about one out of every 20 juveniles in the country. By 1996, the most recent year for which such statistics are available, the number of delinquency cases had grown to nearly 1.76 million (Snyder & Sickmund, 1999). Because the number of juveniles in the population also increased during that period, the rate remained about the same: one in every 20. A one-day count of juveniles in custody who had been arrested for, charged with, adjudicated for, or convicted of a status offense, a delinquent offense, or a crime yielded nearly 100,000 out-of-home placements in public or private juvenile facilities, adult jails or prisons at the beginning of the decade (Krisberg & DeComo, 1993); this figure rose to approximately 120,000 in 1997 (Snider & Sickmund, 1999). Juvenile crime also soared between the late 1980s and mid 1990s, reaching a peak in 1994. Although it has declined rapidly since 1994, it is still higher than in previous decades (Snyder & Sickmund, 1999).

Juvenile corrections is the field charged with dealing with the many youths who are arrested for offenses ranging from murder, at one extreme, to truancy or other status offenses, at the other extreme. Responsibility for juvenile corrections may fall to state government agencies, county probate or juvenile courts, or private organizations, and the range of programs is equally as broad. Some programs, such as juveniles in adult jails, juvenile detention, and alternatives to secure detention, are pre-adjudication measures intended primarily for youths awaiting court hearings. Others, such as juvenile probation, day programs, community-based residential programs, institutional programs, parole and aftercare services are for juveniles following adjudication.

The juvenile justice system has come under increasing attack from many directions. On the one hand, a steep rise in the rate of juvenile crime between 1984 and 1994 suggested to many that the juvenile justice system was ineffective. Increasingly, many states turned to waivers and other mechanisms of transferring juveniles to adult court jurisdiction, under the assumption that many youths would receive tougher sanctions in that system. From another perspective, the juvenile justice system has been portrayed as caught in the middle of trying to do justice and rehabilitation at the same time, without the policies, resources or programs enabling it to do either adequately. Criticisms of the system range from perceived leniency to widespread inconsistency to over-representation of minority youths in juvenile courts and correctional programs. Some have even argued for the outright abolition of the juvenile court, preferring instead a single criminal court system in which all offenders would be processed, although sanctions would be moderated by a "youth discount" (Feld, 1999). Indiana, too, has struggled with juvenile justice issues in the last decade. The juvenile code has been altered to permit the transfer of more juveniles to the adult system.

Based on concerns that the juvenile system cannot hold adjudicated offenders beyond their 18th birthday, there is currently talk of developing a "three-tiered" system in which most offenders over the age of 15 would be processed in an intermediate system. This approach would allow confinement until an older age, perhaps 25, but in separate youth prisons rather than mingling the youths with adults.

Nationally and in Indiana, the "get tough" proposals are balanced somewhat by an increasing interest in creative alternatives, such as community-based diversion and correctional programs and, more fundamentally, the promotion of a "restorative justice" framework that stands in marked contrast to the current system (Bazemore & Walgrave, 1999).

What Should Be Done with Juvenile Justice Today?

Of course, prevention would be the ideal way to fix the system by rendering it unnecessary. A current resurgence in interest in positive youth development is welcome in this light. However, such efforts will never be completely successful; there will always be some young people who run afoul of the law. Beyond the rhetoric, what do we know that can help us fashion a more effective way of responding to youth crime? This paper attempts to bring together information about trends in juvenile crime and juvenile justice nationally, including research on what has and has not appeared to work in recent years. This paper also offers a framework for juvenile justice that tries to permit the emergence of some coherence and optimism in a field too often viewed as chaotic and hopeless.

Background

Concerns about juvenile justice and various reform attempts are not new. To place the current trends in context, let us begin with the past. The juvenile justice system was essentially born with the formation of the first juvenile court in Chicago in 1899 (Bernard, 1992). Since that time, a series of "reforms" has affected the way the system operates. Supreme court cases gradually defined a middle road between a *parens patriae* philosophy (i.e., the court was presumed to act in the best interests of the child) and an adversarial justice philosophy, as in the adult courts, that viewed children as having rights requiring due process protections (for an excellent summary of these cases, see Bernard, 1992).

A significant milestone occurred in 1974 when Congress passed the Juvenile Justice and Delinquency Prevention Act (JJDPA) to create a federal-state partnership with the goal of improving various aspects of juvenile justice. The amended act, after several reauthorizations, includes the following mandates:

- deinstitutionalization of status offenders;
- sight and sound separation between juveniles and adults held in the same facility;
- removal of all juveniles transferred to the adult court and against whom criminal felony charges have been filed;
- provision of funds for programs of Native American tribes that perform law enforcement functions and agree to attempt to comply with the above mandates; and

- efforts to reduce the proportion of minority juveniles detained or confined in secure facilities if the proportion exceeds the proportion of such groups in the general population.

Balancing the goals of juvenile justice

Maloney, Romig and Armstrong (1988) developed what they termed the “balanced approach” to juvenile probation in the late 1980s. This model recognizes three goals of juvenile corrections: community protection, accountability and competency development. Given the state of juvenile justice today, the balanced approach merits consideration for application throughout the broad program structure of juvenile corrections.

Community protection

Community protection refers to the expectation that youth corrections can protect public safety by identifying which youths require what degree of restrictive control and protect public safety by providing that control efficiently.

Accountability

Youth corrections can make youths aware of the consequences of their illegal behavior through elements of punishment and restoration in holding offenders accountable for the offenses, and to their victims through the equitable use of sanctions.

Competency development

Competency development incorporates earlier notions of rehabilitation by providing youths with the opportunity to develop skills and resources needed to function positively in mainstream society.

The key directive of the balanced approach is to strike a balance among these three goals through probation activities that result from individualized case management. Several jurisdictions, California and Florida among them, have officially adopted the balanced approach in their mission statements for juvenile probation (Bazemore, 1992).

Barton, Streit and Schwartz (1991) suggest extending the balanced approach to the entire juvenile justice system as the framework for a principled, comprehensive, system-wide reform. Recent research in juvenile corrections, reviewed below, highlights the potential value of this framework to organize what appears to work into a system that has a better chance of succeeding than the current one.

A Tour of Recent Research in Juvenile Corrections

Serious and violent offenders

Stories concerning violent crime committed by young people appear in the media daily. From media reports alone, one might think that we were faced with an ever increasing tide of juvenile violence and mayhem. The evidence, as most recently compiled by Snyder and Sickmund (1999) from the National Center for Juvenile Justice, reveals a more complicated pattern. The rate of juvenile arrests for serious violent crimes (murder, manslaughter, rape, robbery and aggravated assault) increased considerably between 1988 and 1994 after a decade of relative stability and has declined rapidly since then. The juvenile violent crime arrest rate during most of the 1980s stood at

about 300 per 100,000 juveniles aged 10-17; at its high point in 1994 the rate had jumped to more than 500 per 100,000. The rate has since shown a steady decline, falling to about 400 by 1997. It is important to realize that these crimes represent a relatively small proportion (about 5 percent) of all juvenile offenses. Murder, manslaughter and rape combined, however, account for less than 1 percent (Snyder & Sickmund, 1999).

Studies show that only a small proportion (about 5 to 15 percent) of juvenile offenders is responsible for most (66 to 75 percent) of the serious and violent crimes by juveniles (Hamparian, 1978; Schuster, 1990; Shannon, 1991; Wolfgang et al., 1972). Much of the pressure to "get tough" on juveniles is prompted by these violent offenders, resulting in calls for more secure beds, boot camps, longer sentences and more transfer of jurisdiction to the adult system. These policies affect large numbers of juveniles who do not fit the definition of serious and violent offenders, and are generally ineffective.

The Office of Juvenile Justice and Delinquency Prevention has responded with a comprehensive strategy for serious, violent and chronic juvenile offenders whose repeated offenses and failures in less-restrictive settings pose a high risk to public safety. This strategy emphasizes prevention, early intervention, community-based programs and secure confinement (including comprehensive treatment and rehabilitative services) (Wilson & Howell, 1993).

A recent meta-analysis of more than 200 evaluations of interventions for serious and violent juvenile offenders (SVJ) shows that the most effective ones involve interpersonal skills training, cognitive-behavioral treatment or teaching family home programs (Lipsey & Wilson, 1998). The "average" intervention program in their research was found to reduce subsequent reoffense rates by about 12 percent; the best programs, containing the elements mentioned above, however, reduced recidivism by as much as 40 percent (Lipsey & Wilson, 1998). As summarized by Farrington and Loeber, "interventions for SVJ offenders often have to be multimodal to address multiple problems, including law breaking, substance use and abuse, and academic and family problems" (1998, p. xxiii). They further note that alternatives to incarceration, even for SVJ offenders, are at least as effective as incarceration.

Juvenile detention

The passage of JJDPA prompted many jurisdictions to create facilities known as detention centers, juvenile halls, or youth homes specifically designed to hold juveniles who have been arrested and been determined to require confinement before their court appearances. The statutes of most states limit juvenile detention to the pretrial confinement of juveniles who are deemed a high risk either to commit additional offenses or to abscond before their court hearings. The use of secure detention as punishment, for administrative convenience or because of a lack of alternatives is explicitly forbidden by many statutes.

Characteristics of detained youths. Krisberg and Herrera (1991) in their analysis of the 1989 Children in Custody census reported that detained juveniles are predominantly male (82 percent of admissions; 86 percent of one-day count) and nonwhite (44 percent black, 16 percent Hispanic, 2 percent other, 38 percent white). Fewer than half (46 percent) were charged with serious offenses against persons or property (Krisberg & Herrera, 1991; Schwartz, Willis & Battle, 1991). These patterns have not changed much in recent years, except that black youth are even more over-represented. Snyder

and Sickmund (1999) report that black youths were nearly twice as likely to be detained as white youths, even after controlling for offense in 1996 (the most recent year for which data are available).

Issues. Frequently appalling conditions of confinement, such as overcrowding, injuries, inadequate health care, limited educational programming and isolation (Parent et al., 1994) are troubling, especially in light of evidence that many of the youths routinely held in secure detention facilities do not appear to be at high risk of absconding or committing new crimes before their court hearings. Several studies have shown that securely detained juveniles are more likely to receive subsequent out-of-home placements than those not detained, even after controlling for offense histories (Feld, 1988; Fitzharris, 1985; Frazier & Bishop, 1985; Krisberg & Schwartz, 1983; McCarthy, 1987).

Alternatives to secure detention. Less-restrictive alternatives to secure detention for non-violent offenders can adequately protect the community and ensure court appearances for many juveniles. Juveniles in home detention programs are essentially on "house arrest" and subject to frequent and unannounced visits by a home detention worker. The effectiveness of this approach has been proven in several jurisdictions. (Ball, Huff, & Lilly, 1988; Community Research Center, 1983; Schwartz, Barton, & Orlando, 1991; Steinhart, 1990). Electronic monitoring, usually used in conjunction with home detention, appears to be gaining favor in some locations. Monitoring approaches vary, employing technology that, in some fashion, confirms the presence of the offender.

Probation

Probation is the workhorse of the juvenile justice system. Of every 1000 delinquency cases referred to the juvenile courts in 1996, Snyder and Sickmund (1999) estimate that 441 were not petitioned. Of these, 140 were assigned to probation. Among the 559 petitioned cases, six were waived to the adult courts and 230 were not adjudicated (yet 46 were assigned to probation). Of the remaining 323 adjudicated cases, more than half (175) were placed on probation. Altogether, about 36 percent of all cases referred to the juvenile courts end up on probation, whereas 34 percent are dismissed, 10 percent are placed out of the home, and the remaining 20 percent receive other sanctions.

The probation officer typically performs roles of both "counselor"—attempting to develop a supportive relationship—and "cop"—monitoring compliance and initiating further court action when necessary. The amount of individual attention provided by a probation officer is limited by the demands of intake investigations, assessments and report preparation, yielding, at best, a moderate level of supervision.

Intensive supervision

While a moderate level of supervision may be adequate for many juvenile offenders, about one-third of all juvenile justice jurisdictions also operated intensive supervision programs by the mid-1980s, typically involving much smaller caseloads and more frequent contact (Krisberg, Rodriguez, Bakke, Neuenfeldt, & Steele, 1989). Development of these programs is, in large part, a response to reduced residential programs and the need to supervise more-serious offenders at lower cost to the community.

Juvenile intensive supervision is a viable alternative to residential placement for a number of juvenile offenders, including some relatively serious ones, but research

suggests that jurisdictions are inconsistent in defining target populations for these programs (Barton & Butts, 1990a, 1990b; Erwin, 1987; Krisberg, Bakke, Neuenfeldt, & Steele, 1989; Krisberg, Rodriguez, et al., 1989; Wiebush & Hamparian, 1991).

Summary of one intensive supervision study

A five-year evaluation of three home-based, intensive supervision programs for adjudicated delinquents in Wayne County, Michigan (a large, urban county that includes Detroit) looked at the effectiveness and lower cost of intensive, in-home supervision as compared to commitment to the state (Barton & Butts, 1990). The study employed a randomized design with a two-year follow-up period to compare youths assigned to three in-home programs with a control group who were committed to the state.

The development and implementation of these three experimental programs was precipitated by state-instituted limits on the number of commitments allowed. All three provided intensive probation services using small caseloads and frequent contact. Evaluation of effectiveness focused on the programs' ability to contain or reduce delinquent behavior to the extent that the clients could remain in the community instead of being placed in correctional institutions.

Over a two-year period (2/83-3/85) all Wayne County juveniles recommended for commitment were screened for eligibility. Those charged with very violent offenses, with documented history of psychiatric disturbance, and those with no potential home in the community were automatically excluded from the study. The study did not test the intensive supervision programs as an alternative to incarceration, but rather as an alternative to commitment to the state (where a variety of placement options were available). The majority of youths entered the study (78.1%) as a result of criminal charges, and half of those (51.3%) for charges that could be considered quite serious: larceny, breaking and entering, auto theft, burglary, assault. Thus, although the juveniles were relatively serious and chronic, they were not highly violent offenders.

All three programs restricted caseloads to between six and 10 youths per worker. Workers supervised the youths directly and either provided or arranged for the provision of whatever other services were necessary. The cases remained in the programs for about one year, unless recidivism necessitated their earlier removal. The three programs also utilized behavioral supervision and individual counseling with nearly every youth, and employed school placement assistance and social skills training.

Although the three programs emphasized the delivery of different services, they did not differ significantly from each other in case outcomes. The programs successfully graduated just under half of their cases (46.3%). Program youths graduated when the staff were satisfied with their continued cooperation and behavioral improvements.

During the two-year follow-up period the experimental and control group cases showed few differences in recidivism, either in official charges or by self-report, suggesting that in-home programs are a viable option for many youths who would otherwise be committed. If intensive supervision achieves the same long-term reduction in delinquency for one third the cost, the question becomes one of cost-effectiveness. A final indicator of program effectiveness is that the programs were able to maintain their successful cases in the community. One year of post program follow-up revealed that nearly 80% of program graduates were free of new charges after leaving the programs.

Restitution and community service

Restitution and community service can provide a level of offender accountability to victims and the community when used as components of regular or intensive supervision programs. Klein (1991) noted that such programs can provide victims with compensation, confront offenders with the consequences of their offenses, provide juveniles with useful skills, and possibly reduce recidivism. Although studies have shown restitution to have a modest effect on recidivism (Lipsey, 1992), some studies yield more-favorable results (Ervin & Schneider, 1990; Schneider, 1986). The merits of restitution and community service may lie more in their symbolism of accountability and victim restoration than in their effect on recidivism.

Day programs

Community programs that provide structured activities for juvenile offenders for several hours a day include alternative school settings for youths who cannot return to their regular schools, job training programs, and after-school and evening programs that may combine tutoring and other skill-building activities with recreation.

Community-based residential programs

Many juvenile offenders are placed out of the home when officials believe that their home situation is unsuitable, or to interrupt a pattern of offending behavior. Although some offenders are placed in large institutions, others may be placed in group or proctor homes, shelters, foster care, and other small programs that attempt to offer a more homelike environment.

Small group homes can, however, be just as isolated and institution-like as training schools. Coates, Miller and Ohlin (1976) developed a model for placing juvenile correctional programs on an institutionalization-normalization continuum. Programs at the normalization end of the continuum were characterized by a relatively open and non-authoritarian social climate and high-quality community linkages. Applying their continuum to a variety of programs in Massachusetts, Coates et al. found that nonresidential and foster care programs were the most "normal" settings, whereas secure juvenile facilities and jails were the most "institutional."

Public and private secure residential placements

Nearly all states currently have training schools, a form of public residential institution for juvenile offenders. Training schools represent the most restrictive sanction available within juvenile justice systems and are purportedly used for the most serious and chronic juvenile offenders. Public training schools are frequently supplemented with functionally equivalent private, secure residential facilities. Although size and design specifics vary, these public or private institutions typically house large numbers of juveniles in separate "cottages" or "modules" within a larger structure. They must provide educational programming and many also include vocational training and individual and group counseling.

Although secure institutions are supposed to be the last-resort placement for the most serious and chronic delinquents, many are not there as a result of a serious felony. As reported by Snyder & Sickmund (1999), in October of 1997, youths adjudicated for violent index crimes comprised 32 percent of the committed delinquents found in public institutions and 21 percent of those in private institutions. An additional 28 percent of the public and 32 percent of private facilities' populations showed an index property crime as their most serious offense.

Sampling reveals that states vary greatly in their use of these residential placements. For example, the 1997 custody rate of committed delinquents in Louisiana is 459 per 100,000 juveniles age 10 and older; comparable rates per 100,000 population are 386 in California, 307 in Georgia, 175 in Missouri, 110 in Massachusetts, and 44 in Vermont (Snyder & Sickmund, 1999).

Shock programs

A brief proliferation of specific deterrence programs based on the "Scared Straight" model in New Jersey (Parent, 1989) appeared in the 1970s. First-time juvenile offenders were brought to adult prisons where inmates described prison life in chilling detail. Evaluations of such programs in New Jersey (Finkenauer, 1982), Michigan (Homant, 1981), and California (Lewis, 1983) found no deterrent effect. Shock models of intervention for juveniles have consistently failed to reduce recidivism (Lipsey, 1992).

Boot camps

Boot camps, a variation of shock incarceration, have become increasingly popular. Resembling military basic training, boot camps focus on discipline, physical conditioning and authoritarian control. The popular appeal of boot camps satisfies the public's retributive desire. They appear to be "tough," cost less than traditional prisons or training schools, and purportedly instill positive values. Evidence is mounting that boot camps are ineffective and inappropriate for juveniles. One early summary of existing evaluations of boot camps for young adults in several states reported little evidence of effectiveness (Cullen, 1993). A more recent and thorough experimental study of juvenile boot camps in Cleveland, Mobile and Denver showed that boot camp graduates showed higher rates of recidivism and reoffended more quickly than comparable offenders receiving other sanctions (Peters, Thomas, & Zamberlan, 1997). Additionally, critics point to the potential for abuse of power and reinforcement of a distorted image of masculine aggressiveness (Morash & Rucker, 1990; Parent, 1989).

Adventure programs

Outward Bound programs, introduced in the United States in the 1960s, use physical challenges to help participants develop self-confidence, teamwork and personal growth. This model has been adapted for use with juvenile offenders in several jurisdictions. Although not conclusive, a number of studies have shown promising results, with recidivism rates considerably below those of most institutional programs (Kelly & Baer, 1971; Rollin & Sarri, 1992; Willman & Chun, 1973).

Research regarding juvenile correctional institutional settings

Research on juvenile correctional institutions has focused on three issues: (1) conditions of confinement, (2) "appropriateness" of placement decisions, and (3) effectiveness, in terms of recidivism reduction.

Conditions of confinement. Several studies have documented the confinement dangers found in many juvenile correctional institutions: (assaults, suicidal behaviors), negative subcultural processes (exploitation of vulnerable youths by tougher ones), and organizational goal conflicts (custody versus treatment) (Bartollas, Miller, & Dinitz, 1976; Breed, 1963; Cloward, 1960; Feld, 1977; Lerner, 1986; Parent et al., 1994; Street, Vinter, & Perrow, 1966; Sykes, 1965). Others have called attention to the prevalence of pseudofamily and lesbian relationships that develop in training schools for females (Gaillombardo, 1974; Propper, 1971; Sieverdes & Bartollas, 1981).

Appropriateness of placement decisions. Another group of studies has consistently noted that between 40 and 60 percent of youths held in training schools in several states do not appear to be serious or chronic offenders by most reasonable definitions (Barton, 1993; Butts & DeMuro, 1989, 1990; DeMuro & Butts, 1989, 1990; Krisberg, Freed, & Jones, 1991; Snyder & Sickmund, 1999; Van Vleet & Butts, 1990). Many have never committed a felony-level offense, but have had difficulties in various other placement settings, frustrating local probation officers and the courts.

Effectiveness. Effectiveness research has taken two forms: (1) comparisons of the recidivism of training school youths with that of youths assigned to less restrictive settings, and (2) assessments of the consequences of statewide deinstitutionalization attempts. The results have been mixed but generally suggest that community-based alternatives are less costly and no less effective than institutions (Barton & Butts, 1990b; Empey & Erickson, 1972; Empey & Lubeck, 1971; Loeber & Farrington, 1998; Murray & Cox, 1979). Other studies suggest that although some institutions are able to effect positive changes in their residents, these changes do not persist when the youths return to the communities from which they came (Cavior & Schmidt, 1978; Jesness, 1971; Jones, Weinrott, & Howard, 1971; Kirigin, Wolf, Braukmann, Fixsen, & Phillips, 1979; Whittaker & Pecora, 1984).

Research suggests that we can close training schools if we have a full array of alternatives. Early evaluation studies in Massachusetts, which closed its juvenile training schools in 1972 and replaced them with a regional network of community-based alternatives, revealed an overall higher recidivism rate, except in areas where a full array of alternatives were available (Coates, Miller, & Ohlin, 1978). A later reevaluation found that once a well-structured system of dispositional options had been developed in Massachusetts, results compared favorably in terms of recidivism outcomes with other states that relied more heavily on secure institutions (Krisberg, Austin, & Steele, 1989). Favorable results were also observed in Utah, Missouri, Pennsylvania and Florida (Blackmore, Brown, & Krisberg, 1988; Gorsuch, Steward, Van Vleet, & Schwartz, 1992; Krisberg, Austin, Joe, & Steele, 1987; Lerner, 1990).

A summary of evidence comparing institutional versus community-based intervention strategies was included by Gottfredson and Barton in a 1993 study that investigated the effects of closing a juvenile correctional institution in Maryland in 1988. While prior studies found community-based treatment programs to be a cost-effective alternative to institutionalization, little evidence existed to confirm rehabilitative effects for either alternative.

The results of studies that compare the effectiveness of community-based treatments with that of institutional or more restrictive residential placements are varied, but concur that institutionalization reduces crime during the period of incarceration relative to alternatives offering less supervision. The most rigorous studies suggest that community-based treatment involving intensive supervision can be at least as effective as traditional non-institutional residential alternatives in reducing post-release recidivism (Empey and Lubeck, 1971), and more (Empey and Erickson, 1972; G. Gottfredson, 1987) or equally as effective (Barton and Butts, 1990; Palmer, 1974; Lerman, 1975) as incarceration. Empey and Erickson (1972) suggest the advantage favoring community-based treatment may be due to the absence of incarceration rather than to the benefits of the treatment provided. The literature suggests that treatment program content and quality of implementation matter more than the setting in limiting recidivism.

Gottfredson and Barton's results accord with conclusions of prior reviews of treatment interventions, which suggest that neither institutional programs nor community-based programs are uniformly effective or ineffective. Design rather than location appears to be the critical component of intervention. Effective institutional and community-based programs require:

- careful engineering to ensure fidelity of the design to a plausible theory linking the program components to theoretical causes of delinquency;
- careful attention to the operation of the program to ensure faithful implementation; and
- a marriage of program development and evaluation efforts to link program evolution to information about what does and does not work.

The study authors conclude that deinstitutionalization is not enough, citing a need for a responsible policy that meshes community corrections with treatments that empirical research suggests will be effective.

Parole and aftercare services

Most juvenile offenders who are removed from the community and placed in residential institutions eventually return to the community, where gains produced by even the best institutions disappear. Thus, parole, or aftercare services, may be the most important component of the juvenile correctional system.

A promising model by Altschuler and Armstrong (1991), similar to intensive probation supervision, stresses flexible and intensive case management services in the community for several months after a juvenile's release from an institutional setting. A key element of this model is participation by the aftercare worker in case-planning activities from the start of a juvenile's residential placement, rather than just before release.

Waivers and transfers to adult court

Many states have procedures to transfer certain juveniles to the adult criminal courts for disposition and, in most cases, sentencing. Proponents argue that this tougher response to serious juvenile crime acts as both a specific and a general deterrent. States use one or more of three mechanisms to transfer juveniles to the adult system: judicial waivers, legislative waivers and prosecutorial waivers (Champion & Mays, 1991).

In judicial waivers, the presumption is that the juvenile court is the appropriate jurisdiction for a case unless a juvenile court judge determines that the burden of evidence suggests that the youth is not amenable to treatment and that all juvenile correctional options have been exhausted. Legislative waivers result from statutory definitions of certain age/crime combinations (such as youths in Illinois aged 13 and older charged with murder, and those 15 and older charged with certain other felonies) as falling within the jurisdiction of the adult system. Some states (most notably, Florida) permit prosecutors to make the transfer decision by filing a case directly in the adult court system. In contrast to judicial waivers, in statutory exclusions and prosecutorial waivers, the presumption is that the adult system is the appropriate jurisdiction, unless the youth appeals and a judge agrees, to reverse the transfer decision. Since 1990, the majority of states have made transfers to the adult system easier (Snyder & Sickmund, 1999). Most have adopted or expanded statutory exclusions.

Available evidence suggests that although transfer may be intended to impose a harsher penalty and act as a deterrent, it does neither. Instead transfer typically results in less-severe sentences than would likely have been imposed in the juvenile system (Champion, 1989; Gillespie & Norman, 1984; Polivka, 1987; Sagatun, McCullum, & Edwards, 1975; Speirs, 1989). The most likely explanation for this finding is that the transferred juveniles seem to be less serious offenders when compared with other adult offenders (Bortner, 1986; Champion & Mays, 1991), even though they are among the most serious juvenile offenders. Ironically, those youths who are sent to adult prisons often receive longer sentences than adults over the age of 18 convicted for similar offenses (Snyder & Sickmund, 1999).

Moreover, there is increasing evidence that transfer to the adult system does not have a deterrent effect. Studies show that transferred juveniles have higher subsequent rearrest rates, more serious rearrest offenses and shorter time to rearrest than comparable juvenile offenders who remain in the juvenile system (Bishop et al. 1996; Jensen & Metsger, 1994; Schiraldi & Ziedenberg, 1999; Singer & McDowall, 1988). In the words of Champion and Mays (1991), it appears that "waiver of jurisdiction is a policy devoid of substance."

A summary of what works and what doesn't

The research reviewed above suggests:

- Juvenile crime has decreased significantly in recent years, following a surge from the mid 1980s to mid 1990s. The volume of juvenile court cases has not shown a parallel decline.
- Many youths currently placed in secure detention or post-adjudication institutional settings do not seem to be the serious or chronic offenders such facilities are best suited for, but can be handled at least as effectively if not more so, and at less cost, in less restrictive alternatives.
- There will always be a need for some secure detention and institutional beds for the small proportion of juvenile offenders who are truly serious and chronic offenders. There are models of effective institutions, but even these will not succeed unless accompanied by a strong aftercare system.
- The evidence increasingly suggests that boot camps and other "shock incarceration" programs are not effective for juveniles.
- Transfer of juveniles to the adult system is not effective in most cases.
- Regardless of the setting, effective programs combine skilled staff and adequate resources to meet the developmental needs of the youths.
- The juvenile justice system continues to extensively over-represent minority youths at all levels, and increasingly so at the more restrictive levels.

Characteristics of an Effective Youth Corrections System

In the face of evidence that suggests a broader range of placement alternatives for youth corrections, many states continue to emphasize costly institutional placements. The apparent overuse of training schools and relative underuse of community-based programs is the result of several factors:

- a lack of clear goals for youth corrections;
- inadequate decision-making within the system;
- too few community-based alternatives; and
- an overall lack of coordination and accountability.

Barton, Streit and Schwartz (1991) suggest a list of essential principles, characteristics, guidelines and dimensional improvements modeled on the goals of the balanced approach (cited on page 40).

Principles of good public practice

Youth corrections should be guided by three basic principles to help a jurisdiction achieve balance.

Equity: protection of due process rights; decisions must be fair, consistent and subject to appeal.

Cost-efficiency: employment of the least costly means necessary to achieve the most effective outcomes.

Performance accountability: through monitoring and evaluation, at all levels to all constituent and client groups.

System characteristics

Coordination at both the system and individual case level is critical. Fragmentation can be reduced through interagency structures and agreements, while case managers can assume responsibility for assuring that individuals receive needed services.

Rational decision-making can be achieved through objective assessments to ensure that the right youths are assigned to appropriate levels of placement restrictiveness.

Array of services must include basic supervision and supports; special treatments for substance abuse, mental health problems and sexual deviance; alternative living arrangements, job training and placement services; and other services as needed.

Flexible funds can allow a creative combination of services distributed as the case manager sees fit based on a good assessment of individual youth needs.

Advocacy services must be made available through competent legal counsel. In addition to this due process protection, an effective advocate must be provided to ensure the availability of the full range of treatment options, the achievement of maximum intervention benefits, and protection from abusive and/or capricious agency practices.

Evaluation should focus on not only case outcomes and the quality of services provided but also on coordination, decision-making and other components of the system.

Aspects of the system that can be improved

In the following list of improvement recommendations, each is considered in the context of the three basic goals of youth corrections: accountability, community protection and competency development.

Classification and assessment

The *accountability and punishment* aspect of the balanced approach suggests that an offender should be punished in proportion to the harm caused by his or her behavior. This principle, usually called "just deserts" (Lerman 1977; von Hirsch 1985), requires that one who has committed a serious crime receive a more severe punishment than one who commits a minor offense, and that repeat offenders receive a more severe punishment than first offenders. The key is determining what level of punishment is proportional to the pattern of offending; the principle of efficiency would suggest that "secure" placements should be limited to seriously violent and chronic felony offenders.

The dimension of *public safety and risk control* is based on the likelihood that an offender will commit future offenses. There is a growing body of research that has identified factors that predict an individual's likelihood of reoffending (Baird 1984; Gottfredson and Gottfredson 1988). In addition to a youth's offense history, factors include prior placement history, age at first offense, substance abuse, school adjustment, peer relationships and the ability of parents to provide adequate control.

Since not all delinquent youths are the same, *competency development* services based on a thorough assessment of individual needs are more likely to enhance competency development. A comprehensive assessment will aid in structuring the acquisition of case information, and make that information translatable into an intervention plan.

Importance of dispositional guidelines

Dispositional guidelines introduce rationality and consistency into a juvenile justice system that has often been described as a series of decision points: arrest, petition, detention, adjudication, disposition and release. Law enforcement and court personnel have wide discretion in making decisions about how to respond to particular juveniles. As a result, decisions often appear to be inconsistent across jurisdictions and based on a variety of criteria.

Some jurisdictions have tried to develop objective criteria, especially for decision points that could result in the secure confinement of juveniles. Developing criteria for admission to juvenile detention or dispositional placement should emphasize characteristics of a youth's current and previous offense record along with factors, known or believed to be related to recidivism, such as indications of substance abuse and previous out-of-home placements.

Some criteria reflect a "risk-assessment" approach, linking decisions to empirically derived predictions of the likelihood of future offending. But even the best risk-prediction instruments are far from perfect and produce many false-positive and false-negative results. Only about 20 percent of the variance in future offending is explained by risk predictors (Baird, 1974). Questions exist about the appropriateness of basing a "deprivation-of-liberty" decision on what an individual may do in the future, especially when the accuracy of the prediction is so low. Other criteria reflect the "just deserts" approach, where deprivation of liberty decisions are made based on holding individuals

accountable for behaviors they have already committed. In practice, decision schemes based on risk prediction and "just deserts" use many of the same factors.

Juvenile justice officials are often reluctant to adopt objective decision-making criteria or guidelines, perhaps due to resentment about limitations on their discretion (Barton, 1995; Bazemore, 1994). This resentment may be related to a sense that their experience is sufficient for them to make appropriate decisions. Additionally, there may be resentment due to the fact that the use of criteria usually leads to fewer decisions to place juveniles in secure settings, when a sufficient range of alternatives does not exist in many jurisdictions. Thus, objective decision-making criteria must be introduced as part of an overall plan that includes the development of sufficient and appropriate alternative placements.

Characteristics of the offenders, decision makers and offenses may also affect dispositional decisions. Tonry (1996) argues persuasively that justice involves a tension between the prescriptions to "treat like cases alike ... and different cases differently." While one generally should expect individuals committing similar offenses to receive similar sanctions, one should also expect dispositions tailored to the specific circumstances surrounding a particular offender and offense (Barton, 1998). Some discretion, then, is appropriate.

This discretion, however, has been implicated as one of the main causes of the gross inconsistencies in dispositions and over-reliance on institutional placements of juvenile offenders. Howell (1995) urges the adoption of more objective risk assessment and classification systems to guide decisions at all points in the juvenile justice system, including dispositional placement decisions.

Another approach attempts to make more explicit the factors that decision makers intend to use, asking the question: Can relatively objective criteria emerge that link dispositional decisions more closely to intended policy, especially regarding use of secure correctional placements?

Developing guidelines in New Hampshire: An example

A committee to study dispositional guidelines for delinquency cases was appointed by New Hampshire's Municipal and District Court Judges Association after studies indicated that many of the youths committed to the state's public training school did not appear to be serious or chronic offenders (Butts & DeMuro, 1989; Governor's Commission on Dispositional Guidelines for Juveniles, 1986).

The committee began by adopting a policy affirming the principle of using the least restrictive placement consistent with the needs of public safety and the offending youth, and reserving secure correctional placement for serious or chronic offenders. After deliberating and consulting with system representatives throughout the state, the committee developed a set of guidelines, the purpose of which was to increase the consistency of training school placement decisions and encourage the placement of only the most serious and chronic delinquents at the Youth Development Center.

The guidelines assigned points to juveniles based on the most serious adjudicated instant offense, most serious prior adjudicated offense, and chronicity of adjudicated offenses. Scores above the eligibility threshold were intended to permit, but not require, placement at YDC. The guidelines permitted some discretion, allowing users to over-

rule the guidelines when the objective criteria seemed inappropriate for a particular youth, but use of this discretion was intended to be the exception rather than the rule. More details about the New Hampshire experience may be found in Barton (1997).

Guidelines may be helpful in assuring that the most restrictive placements are reserved for the most violent or serious offenders. They can only help, however, if their use is strictly monitored, users understand and comply with the purposes of the guidelines, and a sufficient array of dispositional alternatives exists.

Accountability and dispositional responses

Response options to the three dimensions must be both focused and diverse.

Restrictiveness and sanctions to hold offenders accountable fall in to five levels: maximum security, medium security, intensive community supervision, regular community supervision and minimal supervision.

Maximum security allows youth corrections to respond capably to the serious and chronic juvenile offenders who represent a very small number of the delinquent population, yet account for a disproportionately large share of the serious and violent crime committed by juveniles (Hamperian 1978; Schuster 1990; Wolfgang, Figlio, & Sellin 1972). This offender category, although differing across jurisdictions, generally includes offenders adjudicated for murder, rape, armed robbery and aggravated assault, as well as those whose number of serious offenses seem to imply chronicity.

Maximum security residential programs have either perimeter security or a remote location to make escape extremely difficult. Smaller facilities would seem to offer greater possibilities for normalization, although there is little empirical evidence supporting any particular size as optimal. However, any positive changes in behavior, skills, attitudes and motivation produced by even the best residential program is likely to vanish once youths are returned to the community unless a strong community-based aftercare component is included (Allerhand, Weber, & Haug 1966; Cavior and Schmidt 1978; Jesness, 1971; Jones, Weinrott, and Howard 1981; Kirigin, Wolf, Braukmann, Fixsen, & Phillips 1979; Taylor and Alpert 1973; Whittaker and Pecora, 1984).

Medium security programs are available for youths adjudicated for serious property offenses such as residential burglaries when jurisdictions want to respond with a staff secure group home, camp or campus-based facility. These programs are more open and rely on staff to provide security in lieu of locks, walls, fences or remoteness.

Intensive community supervision adequately addresses public safety issues for youths, traditionally incarcerated, who have not committed serious crimes. Caseloads of around 10 or fewer (as opposed to the typical probation caseload of 50 or more) are appropriate at this level. Since some of these youths may need alternative living arrangements, case managers can seek shelter care, proctor homes, foster family placement, or supported independent living to be used in conjunction with the other components of intensive supervision.

Regular community supervision is appropriate for those youths whose relatively minor offenses don't require intensive supervision. Regular probation, with occasional (one to four times per month) active supervision by probation officers, should suffice.

Minimal supervision is targeted toward those youths with very few offenses, none of them serious, who are eligible for diversion.

Other accountability tools include community service, curfews and restitution. Klein (1991) describes how these approaches have been effectively integrated into an intensive community supervision program targeting serious and high-risk offenders.

Risk control strategies

Public safety can be protected in both residential and non-residential settings.

Residential settings afford several potential ways to control risk that range from location, architecture and hardware to staffing patterns, assignments to particular residential units, and regulated movement. Additional strategies include fences, walls, elaborate locks and video monitoring systems, remote locations, high staff to youth ratios, small living units, and tightly controlled movement of youths.

Non-residential settings can be controlled through the frequency, timing and extensiveness of surveillance or tracking. Electronic monitoring should not be utilized as a substitute for human contact.

Needs based services for competency development

Service programs are of limited value without rational decision-making that targets the right youths, case management coordination, monitoring and evaluation. These service programs include:

- Education services
- Character and social skills building
- Day treatment
- Employment and training
- Therapeutic services
- Family interventions
- Leisure time and recreational services
- Alternative living arrangements
- Independent living/basic skills services
- Aftercare

Coordinating dispositional responses using case management

Because the transformation of assessment results into appropriate and effective interventions does not occur automatically, a youth corrections system must have ways to systematically develop, implement, monitor and evaluate case plans in accordance with individual assessments. A case manager provides the structure for coordinating the intervention plan, monitoring and outcome evaluation.

Conclusion

The ideological pendulum, always in motion, has for some time been swinging to the political pressure to "get tough" on juvenile crime, and will soon be replaced by some reassertion of a rehabilitative ideal. The fluctuations will continue as a result of the multiple goals that juvenile corrections officials must pursue, and the changing dominance of a diverse constituency.

The goals outlined in this paper—accountability, public safety protection and competency development—are not incompatible. They should be balanced, as developed and articulated by Maloney et al. (1988) and extended by Barton et al. (1991). Public opinion surveys suggest that such a balance is politically feasible. The public values all the goals, makes a distinction between adult and juvenile offenders, seeks protection from serious and chronic offenders, wants to hold offenders accountable to their victims, and favors providing community-based educational and skills-oriented programs to maximize competency development (Schwartz, Kerbs, Hogston, & Guilleen, 1992; Steinhart, 1988).

A juvenile corrections system incorporates such a balance by including reasonable decision-making criteria to match individuals appropriately with available resources, a wide range of available alternative resources, flexible and continuous case management, standards for quality programming in any setting, and vigilant monitoring of the system's performance at all levels.



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