Washington State Mental Health Transformation

Research & Evaluation FactSheet

WASHINGTON STATE'S *FAMILY INTEGRATED TRANSITIONS* PROGRAM DEMONSTRATES PROMISE AS A COST-EFFECTIVE APPROACH TO TREATING YOUTH IN THE JUVENILE JUSTICE SYSTEM

Mental health transformation

The President's New Freedom Commission has called for a transformation of existing mental health care to develop a consumer-centered and recovery-focused system that delivers excellent mental health care. Washington State is one of nine states to receive a five-year Mental Health Transformation-State Incentive Grant from the Substance Abuse and Mental Health Services Administration (SAMHSA) to transform services towards that goal.

One priority of Transformation is to develop and implement better approaches to serving individuals, including juveniles, with mental health concerns that may contribute to their offending in the community. It is estimated that 65-70% of youth in the juvenile justice system have a mental health diagnosis.[1] Increasingly, the juvenile justice system in the United States is recognizing the need to treat mental health disturbance among youth detainees in order to reduce the risk of recidivism and to improve health and well-being.

Family Integrated Transitions (FIT) provides individual and family services to juvenile offenders with mental health and chemical dependency disorders during the period of transition of the youth from incarceration back to the community. The goals of the FIT program include lowering the risk for recidivism, connecting the family with appropriate community supports, achieving youth abstinence from alcohol and other drugs, improving the mental health status of the youth, and increasing prosocial behavior.

The FIT approach combines three evidence-based interventions with the goal of targeting multiple determinants of antisocial behavior. Primary among these is *Multisystemic Therapy (MST)*,[2] a treatment model that targets systemic factors that create the context for problematic behavior. Recognizing that enhancing the ability of both the youth and the parent to manage impulses and distressing emotions is pivotal to a behavior intervention, FIT incorporates elements of *Dialectical Behavior Therapy (DBT)*[3] into the intervention. Finally, because youth involved in the juvenile justice system and their families are often reluctant to participate in therapy, FIT also relies heavily on the techniques of *Motivational Enhancement Therapy (MET)*[4] to engaging clients in treatment with the objective of increasing their commitment to change.

FIT has now been implemented in six counties in Washington State (King, Pierce, Snohomish, Kitsap, Thurston and Mason). The intervention begins during the youth's final two months in a JRA residential setting and continues for approximately four months while the youth is under parole supervision. The FIT team consists of the contracted "coaches"; the University of Washington team, which provides clinical oversight and training; and JRA, which serves as the host agency. Each FIT team has four coaches working under a quarter-time clinical supervisor. Teams include children mental health specialists and chemical dependency professionals. The average coach serves from four to six families at any one time. Services are available 24 hours per day, seven days per week.

Outcome Evaluation

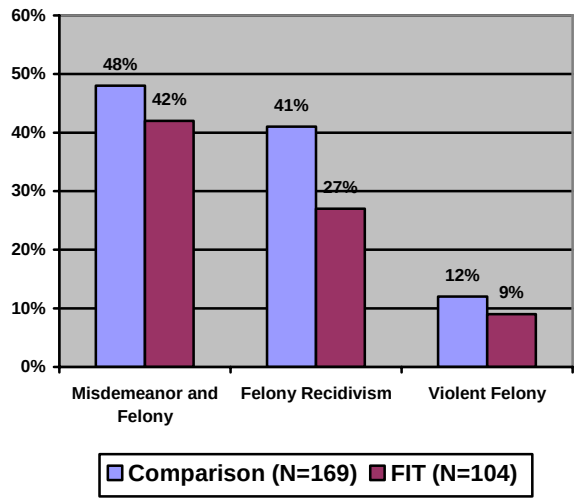
In 2004, the Washington State Institute of Public Policy (WSIPP) released a report on the outcomes and cost effectiveness of the FIT program, based on a quasi-experimental comparison study design.[5] The sample for the study included 104 youth who participated in FIT and 169 FIT-eligible youth who did not participate in FIT because they returned to counties in Washington where the pilot project was not available at the time. The 104 FIT youth included all participants regardless of whether they finished the program.

The primary results of the evaluation are shown in Figure 1. Results found that mean-adjusted recidivism rates at 18 months were lower for the FIT participants for all three types of offenses studied: Total (felony and misdemeanor) recidivism, felony recidivism, and violent felony recidivism, with felony recidivism showing significantly lower rates for the FIT group compared to the FIT-eligible non-FIT group.

Costs and Benefits

WSIPP also asked the question of whether the reduction in recidivism found for the FIT program

Figure 1
Mean-Adjusted 18-Month Recidivism Rates
FIT vs. Comparison Group



leads to more benefits than the costs of the program – about $9,665 per participant. The evaluation found that Washington State's FIT program avoided costs to both taxpayers and crime victims. From the sum of these benefits (avoided costs), WSIPP then subtracted the $9,665 cost of the FIT program to determine the economic "bottom line" of the intervention. Using the effect size associated with the statistically significant felony conviction finding, the $9,665 per youth cost of FIT was found to generate $50,210 in benefits in the form of reduced criminal justice system expenditures and fewer crime victims This results in an overall net gain of $40,545 per youth, or $5.20 in benefits per dollar of cost.

Conclusions

In 2006, WSIPP examined the cost-effectiveness of several programs available for juvenile offenders. The FIT intervention was among the top programs in terms of cost-savings. Such studies support the importance of a structured family centered approach for youth transitioning from secure juvenile justice placements back to the community. This study of FIT indicates that a social-ecological approach towards treatment of co-occurring mental health and substance use disorders reduces felony recidivism and pays for itself several-fold. These promising results also provide a rationale for a larger-scale randomized-control trial of FIT. This program clearly benefits youth and a larger scale study would enable investigation of other likely positive outcomes associated with program participation.

Figure 2. Summary of estimated costs and benefits of FIT

Benefits to taxpayers in criminal Justice system savings	$19,502
Benefits to non-participants from avoided criminal victimizations	$30,708
Total Life-Cycle Benefits	**$50,210**
Total Program Costs	**- $9,665**
Net Present Value	**$40,545**
Benefit-to-Cost Ratio	**$5.20**

Note: The dollar figures reported here are the present value of life-cycle benefits to taxpayers and crime victims from the estimated reduction in crime that the FIT program produces, discounted with a 3 percent real discount rate.[6]

References

[1] Teplin, L., Abram, K., McClelland, G., Dulcan, M., & Mericle, A. (2002). Psychiatric disorders in youth in juvenile detention. *Archives of General Psychiatry, 59* (12), 1133-1143.

[2] Henggeler, S.W., Schoenwald, S.J., Borduin, C.M., Rowland, M.D., & Cunningham, P.B. (1998). *Multisystemic Treatment of Antisocial Behavior in Children and Adolescents.* New York: The Guilford Press.

[3] Linehan, M.M. (1993). *Cognitive-Behavioral Treatment of Borderline Personality Disorder*. New York: The Guilford Press.

[4] Miller, W.R., & Rollnick, S. (1991). *Motivational Interviewing: Preparing People to Change Addictive Behavior*. New York: The Guilford Press.

[5] Aos, S. (2004). *Washington State's family integrated transitions program for juvenile offenders: outcome evaluation and benefit-cost analysis.* Olympia: Washington State Institute for Public Policy.

[6] See S. Aos, M. Miller, and E. Drake. (2006). *Evidence-Based Public Policy Options to Reduce Future Prison Construction, Criminal Justice Costs, and Crime Rates.* Olympia: Washington State Institute for Public Policy

This ***Research and Evaluation FactSheet*** was prepared by Eric J. Bruns and Suzanne E. Kerns of the University of Washington Division of Public Behavioral Health & Justice Policy on behalf of the Washington State Mental Health Transformation (MHT) Evaluation Team. For more information about the MHT Evaluation Team or this FactSheet, please contact Dr. Bruns at ebruns@u.washington.edu. For more information about FIT, please contact Dr. Eric Trupin at Trupin@u.washington.edu or 206-685-2085.