

Evaluating Program Effectiveness of Probation Youth Treatment at the Child and Youth Study Center

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This project seeks to review the effectiveness of counseling services on probationary youth behavior by determining how many probation youth reoffend after receiving counseling at the University of Idaho Child and Youth Study Center (UICYSC). In the past few years, more attention has been placed on evaluating the effectiveness of psychological interventions and treatment programs. This was mainly due to a 2005 directive from the president of the American Psychological Association (APA) to develop a task force. The role of this task force was to determine what interventions were most effective for treating common mental health problems (empirically validated treatments). Although there have theoretical arguments regarding this approach, the result of this was more outcome research and an emphasis on treatment program evaluation (Nelson & Steele, 2006; Weisz, Jensen-Doss, & Hawley, 2006).

These program reviews have come at a good time because they parallel the greater need to prove program effectiveness in order to obtain funding from external sources. In the case of the UICYSC, we have struggled to maintain counseling services as economy and politics affect our grants and contracts and result in less funds each year. Over the history of the program, we have developed an interdisciplinary approach with our county probation office, Latah County Youth Services (LCYC), to treat youth with psychological health issues. This year LCYC announced their inability to fund our program as generously as it had in the past, which makes the importance of determining program effectiveness essential. The current program at UICYSC has not been formally evaluated for either efficacy or effectiveness.

Overview

Youth problem behavior occurs at rather high rates and peaks in adolescence so that serious problems affect the individual, families, communities and society at large. Rhule (2005) reported adolescent prevalence rates for the following issues: conduct disorder: 6-16%; substance abuse or dependence: 8.9%; minor criminal behavior: 30% of high school seniors; serious fighting or assault: 12-15% of high school seniors; major theft or property damage: 9-14% of high school seniors. Problems persisting into adulthood not only result in deleterious effects on relationships, job obtainment, and mental and physical health, society is saddled with large financial burdens related to these problems. For instance, it was estimated that federal costs for career criminals are approximately \$1.3-\$1.5 million dollars and \$370,000-\$970,000 for heavy drug users (Rhule, 2005). Prevention programs for youth are designed to prevent problems or decrease the intensity of future problems as well as treat youth that are at risk for full blown psychological health issues and/or disorders. Youth prevention research is interdisciplinary in that it combines the approaches of psychology, medicine, sociology,

human development, and criminology (Magaletta & Verdeyen, 2005; Weisz & Hawley, 2002).

There are different theoretical conceptualizations that have influenced both clinical interventions and outcome measurement of youth prevention programs. Regarding clinical interventions, theoretical conceptualizations generally include bio-psycho-social approaches (Magaletta & Verdeyen, 2005) or multisystemic approaches (Huey, Henggeler, Brondino, & Pickrel, 2000). These models take into consideration person in context issues and combine interdisciplinary treatments such as individual and group therapy, parent training, life skills training, drug courts, and school and/or after school programs to address the complexity of adolescent risk factors and augment protective factors for adolescents (Henggeler, Halliday-Boykins, Cunningham, Randall, Shapiro, & Chapman, 2006; Nation, Crusto, Wandersman, Kumpfer, Seybolt, Morrissey-Kane, & Davino, 2003; Weisz et al., 2006). Such theories also include education and understanding of physiological and developmental factors in adolescent treatment (Weisz & Hawley, 2002), as well as focus on relational factors of treatment such as therapeutic alliance and gender and racial differences between the adolescent and counselor (Hogue, Dauber, Stambaugh, Cecero & Liddle, 2006; Bolton Oetzel & Scherer, 2003; Wintersteen, Mensinger, & Diamond, 2005). Regarding outcome measure conceptualization, evaluation of treatment programs is multifaceted. Therefore, evaluation of outcome efficacy and effectiveness, provider effectiveness, economic feasibility, and consumer satisfaction are all recommended for a well-rounded program evaluation (Nelson & Steele, 2006).

The UICYSC program follows a bio-psycho-social and multisystemic approach to youth treatment with an emphasis on behavioral, cognitive-behavioral, and interpersonal/family interventions to decrease problematic behavior and increase protective factors in youth. As reviewed, this approach is supported by the research to be most effective and empirically validated. Our current program evaluation methods are focused on individual counselor performance and include no show statistics and client satisfaction surveys that are conducted approximately three times per year. Our future goals in program evaluation include outcome measurements regarding the efficacy and effectiveness of counseling. The specific purpose of this study is to collect preliminary data regarding the effectiveness of counseling services on probationary youth behavior by determining how many probation youth reoffend after receiving counseling at the UICYSC.

Hypothesis

Current literature suggests that counseling results in greater efficacy than it does effectiveness when the measure for effectiveness is whether or not probationary youth reoffend (Henggeler et al., 2006). Hypotheses regarding efficacy and other measures of counseling outcome will be tested at a later date. This study will test the hypothesis that counseling will result in more effectiveness (measured by reoffense rate). The null hypothesis:

H₀: participation in the UICYSC counseling program will result in neither decreasing nor increasing reoffenses for probationary youth.

Method

Design and Procedures

To determine the effectiveness of counseling services on probationary youth reoffense rate, 2006-2007 quarterly statistics were reviewed and 62 probationary youth were identified as receiving counseling services. From the original sample of 62, 60 participants were reviewed as to reoffense rate because two of the names were not recognized by probation staff. It was determined that these names were misspelled and/or repeated on the list. A Chi Square test was used to determine if the rate of reoffenses were significantly different than expected.

Participants

The 60 participants were 12-18 year-old adolescents from Latah County Youth Services in Moscow, Idaho who met Diagnostic and Statistical Manual of Mental Disorders (4th ed., 3rd revision; DSM-IV-TR; American Psychological Association, 2004) diagnostic criteria for alcohol or drug abuse or dependence, and/or a mood, anxiety, developmental or a behavioral disorder. It was not uncommon for the youth to carry dual diagnoses. Inclusion criteria were (a) age 12-18, (b) formal or informal probationary status, and (c) mental health diagnosis. Youth were required to come to counseling as part of their probation plan. They were excluded if they moved from the area; however, youth were not excluded from the study if they prematurely terminated from counseling because they successfully completed other probation requirements and were no longer required to come to counseling.

Results

Results indicated that, to date, 27 youth reoffended and 33 did not. The Chi Square observed was $\chi^2 = 0.6$. At $\alpha = .01$, the critical value of $\chi^2 = 2.7$. Since the observed value did not exceed the critical value of Chi Square, the null hypothesis should be accepted. Therefore, results indicate that counseling did not affect the reoffense rates of probationary youth. Yates correction was not completed due to acceptance of the null hypothesis.

Discussion

The purpose of this study was to begin a preliminary outcome evaluation of counseling services at the UICYSC. The conclusion of the study unfortunately indicated that participation in counseling did not result in significantly less reoffenses by probationary youth. This was not an altogether surprising finding since most studies have concluded that efficacy outcomes tend to be more robust than effectiveness outcomes, particularly when the outcome measurement is reoffense rate (Henggeler et al., 2006).

An explanation for this result may be explained by the very general and encompassing manner in which effectiveness was measured: by reoffense rates. That is to say, it is possible that positive outcome was not captured because the measure of outcome was not specific enough. Oftentimes, the main goal of counseling is not only to get off probation/not reoffend, but to improve mood and social functioning, to improve concentration and attention, to improve conscious decision-making, and/or to explore

identity, which leads to increased healthy behaviors and self-esteem. These outcomes were not measured in this study and will be the focus of a more complete program evaluation in the future. In addition, results concluded that 27 youth reoffended after participating in counseling services and 33 did not. Although not statistically significant, there is a trend indicating that counseling does show some decrease in youth reoffense rates.

The future direction of program evaluation at the UICYSC includes using reliable and valid measures before, during, and after counseling to measure symptom reduction and to add such measures to satisfaction, counselor characteristics, and openness to counseling.

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