



# Budgeting for Results

## Department of Juvenile Justice

Therapeutic Communities for Substance Use Disorder  
Program Assessment



## **Introduction**

The statute that created Budgeting for Results (BFR) states that in Illinois, budgets submitted and appropriations made must adhere to a method of budgeting where priorities are justified each year according to merit (Public Act 96-958). The BFR Commission, established by the same statute, has worked since 2011 to create and implement a structure for data-driven program assessment useful to decision makers.

The BFR framework utilizes the Results First benefit-cost model<sup>1</sup> and the State Program Assessment Rating Tool to produce comprehensive assessments of state funded programs.

The Pew-MacArthur Results First Initiative developed a benefit-cost analysis model based on methods from the Washington State Institute for Public Policy (WSIPP). The Results First model can analyze programs within multiple policy domains, including: adult crime, juvenile justice, substance use disorders, K-12 and higher education, general prevention, health and workforce development.

The State Program Assessment Rating Tool (SPART) combines both quantitative (benefit-cost results) and qualitative components in a comprehensive report. It is based on the federal Program Assessment Rating Tool (PART)<sup>2</sup> developed by the President's Office of Management and Budget and has been modified for Illinois use. The SPART provides a universal rating classification to allow policy makers and the public to more easily compare programs and their performance across results areas.

## **Methods**

BFR begins each assessment by examining an Illinois program's design and assessing its implementation. Each program is then matched with an existing rigorously studied program or policy. BFR completes a comprehensive review of related program literature to inform the modeling and matching process.

Each rigorously studied program has an effect size determined from existing validated national research that summarizes the extent to which a program impacts a desired outcome. The effect size is useful in understanding the impact of a program run with fidelity to best practices or core principles.

The Results First benefit-cost model uses the effect size combined with the state's unique population and resource characteristics to project the optimal return on investment that can be realized by taxpayers, victims of crime, and others in society when program goals are achieved.

The SPART contains summary program information, historical and current budgetary information, the statutory authority for the program, and performance goals and measures. The SPART tool consists of weighted questions, which tally to give a program a numerical score of 1-100. Numerical scores are converted into qualitative assessments of program performance: effective, moderately effective, marginal and not effective.

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<sup>1</sup> <https://www.pewtrusts.org/en/projects/pew-macarthur-results-first-initiative>

<sup>2</sup> <https://georgewebush-whitehouse.archives.gov/omb/performance/index.html>

# **Section 1**

## **Results First Benefit-Cost Analysis**

## **Benefit-Cost Summary – DJJ Therapeutic Communities Program**

This is the benefit-cost analysis of the Illinois Department of Juvenile Justice (DJJ) Therapeutic Communities (TC) program. TCs are a form of residential treatment for substance use disorder (SUD) among adults or adolescents. DJJ uses TCs to treat SUD among youth in detention at four of its five facilities.<sup>3</sup>

SUD among adolescents is a significant public safety and health issue, and specifically a significant concern for youth within the criminal justice system. There are numerous benefits to youth and their communities in reducing SUD, including its role in perpetuating other destructive and criminal behavior. Adolescents are uniquely impacted by peer dynamics and pressures that can influence substance use, and are also more vulnerable to the physical, cognitive and emotional effects of substances due to their stage of development.

This report examines the effect of the DJJ TC program on reducing youth recidivism. It does not include potential effects of the TC program on other outcomes of interest, such as youth substance use. The benefit-cost analysis completed by BFR calculated that for every one dollar spent on the TC program by DJJ, \$2.52 of future benefits from reduced crime could be realized by Illinois taxpayers and crime victims.

The major takeaways from this analysis can be found in Table 1 below along with the program's comprehensive SPART score. The optimal benefits are the benefits the program can expect to achieve if run with fidelity to best practices or core principles. Benefits per participant are projected over fifty years after program participation. The real costs of a program are the sum of its direct and indirect costs, net of the cost of treatment as usual. The benefits and the costs are discounted to present value. The benefit/cost ratio is the optimal return on investment (OROI) Illinois can expect from implementing the program with fidelity.

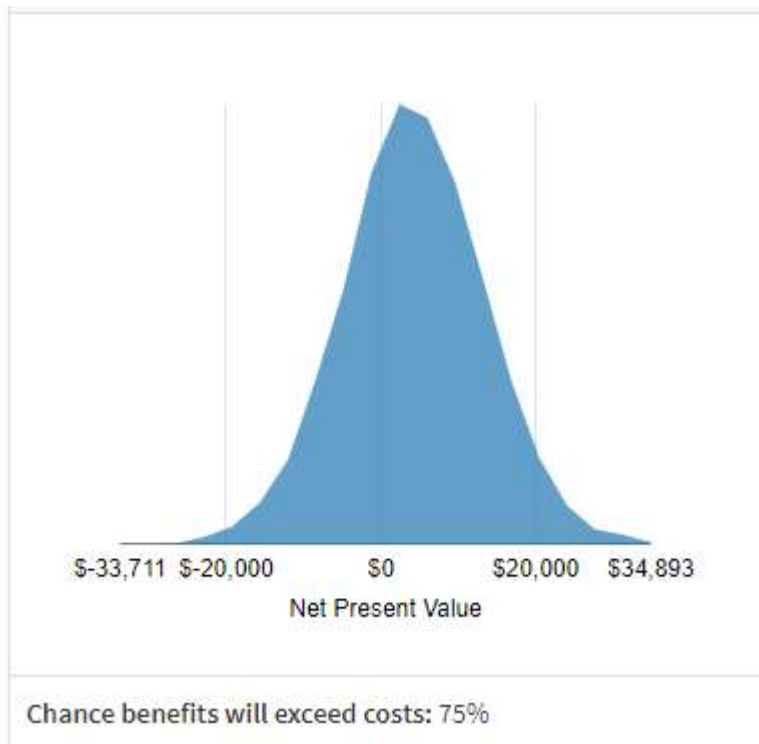
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<sup>3</sup> DJJ does not run a TC at IYC-Warrenville because IYC-Warrenville is a co-ed facility. Living together is a core component of a TC and a co-ed facility separates males and females. Therefore, the SUD program at IYC-Warrenville is assessed in a separate report.

**Table 1:**

<b>Benefit-Cost Results</b>	
<b>DJJ Therapeutic Communities Program per Participant</b>	
<b>Optimal Benefits</b>	<b>\$9,945</b>
<b>Real Cost (Net)</b>	<b>\$3,941</b>
<b>Benefits – Costs (Net Present Value)</b>	<b>\$6,004</b>
<b>Benefits/Costs (OROI)</b>	<b>\$2.52</b>
<b>Chance Benefits Will Exceed Costs</b>	<b>75%</b>
<b>SPART Score</b>	<b>75 – Effective</b>

All program benefits are predictive, and there is uncertainty when forecasting future outcomes. To help account for the uncertainty, BFR runs each benefit-cost analysis 10,000 times with random variations in the costs and benefits. The histogram below shows the results of this risk analysis. The optimal program benefits exceeded the program costs in 75 percent of the simulations.



## Benefit-Cost Detail – DJJ Therapeutic Communities Program

### *Program Information*

Using program information gathered with DJJ, BFR matched the DJJ Therapeutic Communities (TC) program with the program profile ‘Therapeutic communities for chemically dependent juvenile offenders’ in the Results First benefit-cost model. This profile is based on the small but increasing body of literature on TC programs specifically for youth involved with juvenile justice. The information for the DJJ TC program was provided by DJJ and is described in Table 2 below. More specific program information can be found in the SPART.

**Table 2:**

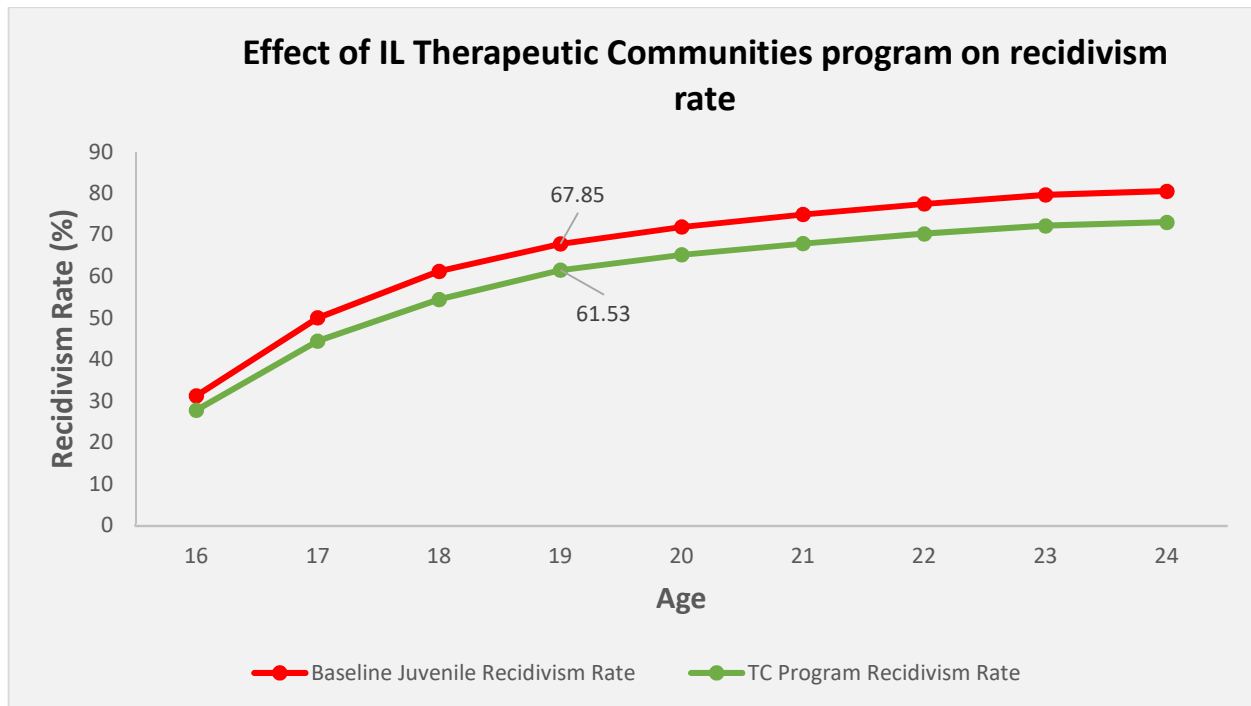
Program Name	Program Description
<p><b>Therapeutic Communities</b></p>	<ul style="list-style-type: none"> <li>- Youth entering DJJ facilities are assessed for substance use behavior. Youth who are assessed as Level 1 or Level 2 for SUD treatment need are placed in the TC at their facility.</li> <li>- Youth with a Level 1 need receive a minimum of 6 hours of SUD treatment per week. Youth with a Level 2 need receive a minimum of 9 hours per week.</li> <li>- The SUD treatment group sessions are centered around the Forward Thinking Interactive Journaling curriculum, and integrates pro-social values and skills using a cognitive behavioral approach combined with specialized substance use disorder services</li> <li>- Average length of stay in FY17 ranges from 104-137 days for successful completers, depending on the facility, with a minimum of 90 days</li> </ul>

BFR completed a literature review of programming for residential juvenile substance use disorder. The review found that juvenile justice systems across the country have been moving in recent years toward a more effective and age-appropriate model for addressing juvenile delinquency. This approach aims to minimize the time that youth spend in confinement and provide them services in the community. However, there remains a need for a population of youth to receive services while in detention. The TC model for juvenile offenders in detention is a highly structured, comprehensive intervention that contains programming on substance use, mental health, life skills and academic instruction. There has been relatively little study on detention-based TC programs for youth. The TC model has been shown by several rigorous studies to be effective as a SUD treatment program among incarcerated adults and among youth in community-based settings. For further information, see the SPART.

## Benefit-Cost Analysis - DJJ Therapeutic Communities Program

The standard in Illinois is to track youth cohorts released from DJJ in the same year and record their recidivism over the next three years. Based on national studies on incarcerated juveniles in TC programs, the benefit-cost analysis predicts the three-year recidivism rate<sup>4</sup> for participants in the TC program to be under 62%, compared to just under 68% for the general juvenile population – a decrease of six percentage points, as shown in *Figure 1*.

**Figure 1:**



DJJ also tracks the actual recidivism rate for participants in its own program. The most recent three-year recidivism rate for DJJ overall was 52.1%. From July 2015-September 2018, DJJ’s four TC programs had recidivism rates ranging from 30.8-38.5% for youth who completed the program – a difference of anywhere from 13 to over 21 percentage points. This data is a promising indication that DJJ’s TC program is effective even in comparison to TC programs nationally.

<sup>4</sup> Recidivism for juveniles is defined as an adjudication after release from custody.

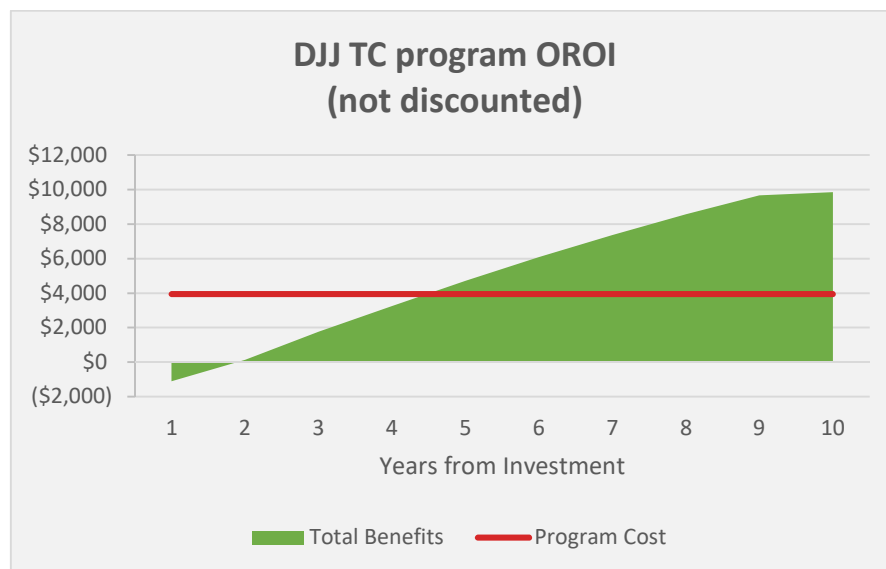
The cumulative annual costs and benefits for the DJJ TC Program can be seen below in *Figure 2*. For this program all costs are incurred in the first year, and benefits accrue over time. The red line across the graph depicts net program costs. The costs per person for the DJJ TC program change based on the number of youth served each year. Over the 10,000 simulations BFR runs, a range of possible costs are used in order to achieve a more accurate analysis.

The green area shows how program benefits accumulate. As illustrated, the program benefits exceed the program costs beginning four years after the initial investment. After ten years, the program benefits approach \$10,000, nearly \$6,000 more than the program cost. Although not depicted in *Figure 2*, BFR projected the program benefits out 50 years and found that total expected program benefits are \$9,945 when discounted to present value.

When tax revenue is spent on one program, it has an opportunity cost of revenue that cannot be spent on other beneficial programs and services like public safety or economic development. Money that is taxed is also not available for private consumption and investment. The indirect benefits of making effective, economically efficient investments to reduce criminal recidivism are quantified within the Results First model using the Deadweight Cost of Taxation. This inefficiency creates both a benefit and a cost in this model – the initial spending on the program generates a cost, shown in Year 1 below. Later savings for Illinois due to reduced recidivism decrease the deadweight cost of inefficient government taxation and spending.

The return on investment from the benefit-cost analysis only calculates the benefits from reducing recidivism. Other benefits or costs related to substance use disorder are not included in this report. Based on additional data that will be obtained from future studies, this program will be reevaluated to determine outcomes in other result areas.

**Figure 2:**





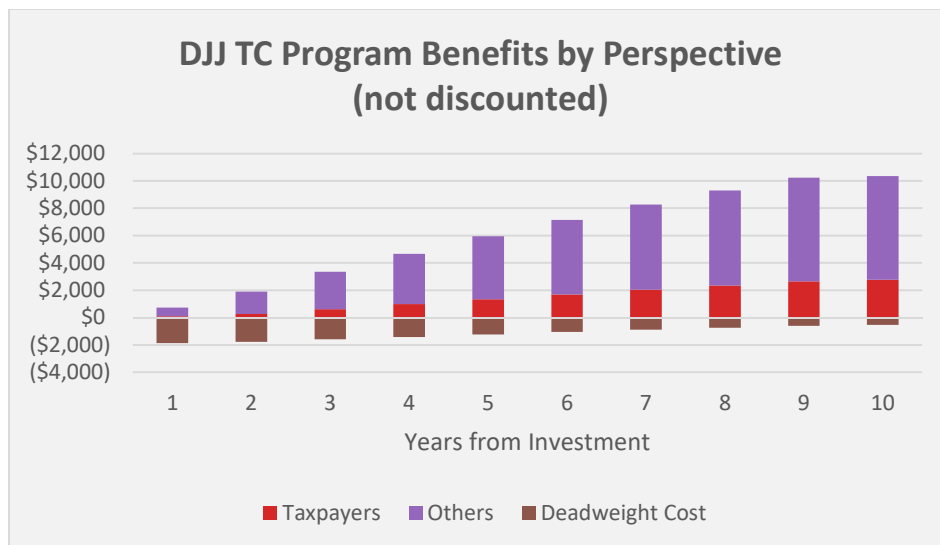
The DJJ TC program accumulates benefits over time to various groups. The benefits to Illinois are based on avoided criminal justice expenses and avoided private costs incurred as a result of fewer crime victims. The private victimization costs include lost property, medical bills, wage loss, and the pain and suffering experienced by crime victims.

Taxpayers avoid paying for additional criminal justice system costs of arrests and processing; prosecutions, defense, and trials; and incarceration and supervision. Lower incarceration rates lead to fewer prisoners that need to be paid for by the State. The benefits to DJJ are determined by calculating DJJ’s avoided future costs, classified as either fixed, variable or step costs. Fixed costs do not change based on the DJJ population. Variable costs change as the population increases or decreases marginally. Step costs only change once a threshold level of DJJ population numbers are reached. The costs that could be avoided by reducing recidivism are determined by calculating the fixed, variable and step costs that would change with a change in the DJJ population.

Additional indirect benefits accrue to society as well, including better use of current tax dollars and a reduced need for future tax revenue due to a lower recidivism rate. There are also indirect deadweight costs caused by spending tax dollars on the program. These are counted against the indirect benefits, so indirect benefits are negative for the first year of the program.

Figure 3 below illustrates how benefits accumulate to different Illinois stakeholders. The majority of the benefits come from future avoided victimization costs. The remaining benefits come from taxpayer costs and other avoided indirect deadweight costs.

**Figure 3:**



## **Section 2**

# **State Program Assessment Rating Tool**

**State Program Assessment Rating Tool (SPART)**  
**Therapeutic Communities for Substance Use Disorder (TCs)**  
425-Department of Juvenile Justice

This report was compiled by the Budgeting for Results Unit of the Governor’s Office of Management and Budget with the support of the Department of Juvenile Justice. The SPART is an assessment of the performance of state agency programs. Points are awarded for each element of the program including: Program Design and Benefit-Cost and Performance Management/Measurement. This combined with benefit-cost analysis through Results First establishes an overall rating of the program’s effectiveness, which can be found on the final page of this report.

**Section 1: General Information**

Prior Year (PY), Current Year (CY), Fiscal Year (FY) Budget (in thousands) Appropriated \_\_\_ Expended X

PY 2015	PY 2016	PY 2017	PY 2018	CY 2019	FY 2020
\$1,978	\$359	\$1,743	n/a	n/a	n/a

Is this program mandated by law? Yes \_\_\_ No X  
 Identify the Origin of the law. State \_\_\_ Federal \_\_\_ Other \_\_\_  
 Statutory Cite \_\_\_\_\_ N/A \_\_\_\_\_  
 Program Continuum Classification \_\_\_\_\_ Treatment, Case Identification \_\_\_\_\_

**Evaluability**

*Provide a brief narrative statement on factors that impact the evaluability of this program.*

There are four DJJ facilities that run TC programs. Each facility has its own challenges based on the physical structure of the facility, logistics and the resources available. All the DJJ TCs are running the same curriculum, however due to the mentioned constraints there is inconsistency in the implementation among the four DJJ TC programs.

Additionally, there is currently limited rigorous evidence on the effectiveness of TC programs for youth in a detention setting. Most studies on TC programs for youth offenders focus on youth on parole or probation in community settings.

Key Performance Measure	FY 2013	FY 2014	FY 2015	Reported in IPRS Y/N
Therapeutic Communities recidivism rate <sup>5</sup>	N/A	N/A	34% <sup>6</sup>	N
Overall DJJ recidivism rate	58.7%	57.8%	52.1%	Y

<sup>5</sup> DJJ collects standard recidivism rates in annually discharged cohorts tracked for three years.

<sup>6</sup> Weighted average of recidivism rates for each facility running a TC program.

**Section 2: Program Design and Benefit-Cost**

**Total Points Available: 60**  
 Total Points Awarded: 40

Question	Points Available	Evidence Level	Points Awarded
2.1 What is the program evidence level?  - Evidence Based 25pts - Theory Informed 15 pts - Unknown Effect 0 pts - Negative Effect -5 pts  (Provide core principles in narrative section)	25	Theory Informed	15

**Explanation:** DJJ runs therapeutic communities (TCs) at 4 of their 5 facilities. TCs are a form of intensive, residential substance use disorder (SUD) treatment. TCs are highly structured interventions where participants spend large portions of their waking hours in structured programming and activities. This routine contains programming on substance use, mental health, life skills training and academic instruction. The organizational structure of the community is hierarchical, with participants taking on different jobs and roles and gaining responsibility as they advance through the program. TCs emphasize peer relationships and both personal and group accountability for substance use behaviors.

Among SUD treatment programs for incarcerated individuals, TCs show the “most consistent evidence of treatment effectiveness” (Mitchell, 2012). However, most research on TCs has focused on programs for adults. The evidence on TCs’ effectiveness for juveniles is mixed. Additionally, while TC programs typically are at least 6 months in duration, research indicates that juveniles have better outcomes overall when their time in detention is minimized.

Evidence indicates that a TC may be an effective program when compared to other ways of treating youth in detention. However, evidence also indicates that youth may be better served by being released more quickly and referred to treatment in the community. DJJ understands these challenges and is working to innovate and develop solutions.

Question	Points Available	Yes/Partial/No	Points Awarded
2.2 Is the Program implemented and run with fidelity to the program design?	25	Partial	15

**Explanation:** DJJ’s therapeutic communities program is implemented at four of their five facilities: IYC-Chicago, IYC-Harrisburg, IYC-Pere Marquette, and IYC-St. Charles. All youth at IYC-Pere Marquette participate in SUD programming, so the facility as a whole can be labeled a therapeutic community. At IYC-Chicago, IYC-Harrisburg and IYC-St. Charles, youth participating in SUD programming are housed together in a dedicated unit which can be considered the therapeutic community. The fifth facility, IYC-Warrenville, also offers SUD programming, but because the SUD program participants at Warrenville are not in a dedicated housing unit, DJJ does not consider the Warrenville program a TC. The SUD program at IYC-Warrenville is discussed in a separate BFR report available at [www.Budget.Illinois.gov](http://www.Budget.Illinois.gov).

The implementation of the TC program varies somewhat among DJJ facilities. All facilities use a variation of the Forward Thinking Interactive Journaling curriculum, from the Change Companies, as part of the SUD programming. The curriculum is designed to be modular and to be used flexibly according to youths’ needs. Consistent with standard TC program philosophy, the Forward Thinking curriculum takes a holistic cognitive-behavioral approach to addressing youths’ thought patterns and coping skills, in addition to addressing substance-using behavior directly.

DJJ’s TC program is designed to last 90 days, with actual average length of stay ranging from 104-137 days per youth depending on the facility. DJJ’s TC utilizes a short program duration compared to most TCs. As discussed above, this duration is supported by evidence that shorter detention stays overall have been shown to have better outcomes for youth offenders. Additionally, DJJ has a statutory mandate to place youth in the least restrictive environment possible (705 ILCS 405/5-750)<sup>7</sup>.

In addition to communal housing and SUD programming, another central component of a TC is a highly structured daily routine including education, other programming, and social and recreational activities. The amount of time DJJ youth spend in education, other programming and activities varies widely between DJJ facilities. BFR was able to conduct a site visit to IYC-Pere Marquette, which is a small, minimum-security step-down facility where all youth participate in the TC program. IYC-Pere Marquette offers a wide variety of programming and educational opportunities for the youth, including off-site trips. Youth reported spending only about an hour of waking time in their cells per day. In contrast, other DJJ facilities utilize varying amounts of out-of-confinement time as confirmed by independent monitoring reports<sup>8</sup>. IYC-Chicago and IYC-St. Charles attribute youth confinement schedules to low staffing levels and youth behavioral problems.

<sup>7</sup> Available at: <http://www.ilga.gov/legislation/ilcs/fulltext.asp?DocName=070504050K5-750>

<sup>8</sup> Available through the John Howard Association at: <https://www.thejha.org/youthfacilities>

Question	Points Available	Yes/Partial/No	Points Awarded
2.3 If the program achieved full credit in question 2.2, can we expect the Optimal Return on Investment (OROI) for this program to be equal to or greater than \$1 for each \$1 spent?	10	Yes	10

**Explanation:**

The DJJ TC program is using available evidence to implement best practices and follow state law. The expected optimal return on investment from this program is \$2.52. Please see the attached benefit-cost report for additional information.

**Section 3: Performance Management/Measurement**

**Total Points Available: 40**  
**Total Points Awarded: 35**

Question	Points Available	Yes/Partial/No	Points Awarded
3.1 Does the program regularly collect timely and credible performance measures?	10	Yes	10

**Explanation:** DJJ collects quarterly metrics on the youth recidivism rate for each of its facilities, as well as the recidivism rate for youth in the Therapeutic Communities program specifically. This is defined as the percentage of youth who complete the Therapeutic Communities program and are paroled, vacated, or discharged, and then return to DJJ or as adults to the Illinois Department of Corrections (IDOC) within three years of their release. DJJ also collects data on what percentage of these youth return for drug-related issues or charges.

The BFR Unit recommends that DJJ report these Therapeutic Communities program recidivism figures in IPRS. DJJ currently reports the overall youth recidivism rate as a metric under its Aftercare program, but does not report the Therapeutic Communities program-specific rate<sup>9</sup>.

Question	Points Available	Yes/Partial/No	Points Awarded
3.2 Do the performance measures focus on outcomes?	10	Yes	10

**Explanation:** The primary outcome DJJ is seeking from its Therapeutic Communities program is the reduction of juvenile recidivism. The department is directly tracking its desired outcome.

As stated above, it is recommended that DJJ report the recidivism data in IPRS for this program in addition to reporting the number of youth enrolled in Substance Use Disorder treatment (both Therapeutic Communities and other) as it currently does. It is also recommended that DJJ consider whether there are other outcomes of interest, such as substance use, that could be tracked.

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<sup>9</sup> See the most recent DJJ IPRS report at: [https://www2.illinois.gov/sites/budget/IPRS%20Reports/425-Juvenile\\_Justice.pdf](https://www2.illinois.gov/sites/budget/IPRS%20Reports/425-Juvenile_Justice.pdf)

Question	Points Available	Yes/Partial/No	Points Awarded
3.3 Are independent and thorough evaluations of the program conducted on a regular basis or as needed to support program improvements and evaluate effectiveness?	10	Partial	5

**Explanation:**

The John Howard Association (JHA), an independent monitoring organization, produces periodic reports on each DJJ facility. JHA notes from site visits to two facilities in the spring of 2018, that each had a substantial waitlist for the TC program. DJJ reported to JHA in October 2018 that both facilities no longer have a waitlist.

Youth sentenced to DJJ custody do not have a set release date, however a target release date is given. Release is ultimately dependent on being deemed rehabilitated. JHA expressed concern that some youth are being kept in detention beyond their original target release date in order to complete the TC program. JHA recommended that the DJJ TC program be condensed and that youth be triaged more effectively to refer more youth to treatment in the community after their release, rather than in detention (John Howard Association, 2018).

This is a main issue for the evaluation of DJJ’s TC program. While TC programs are generally designed for longer durations than the DJJ program length of 90 days, and while TC is considered an effective program when compared to other programs for SUD treatment in incarceration, evidence validates that, in general, youth have better outcomes when residing in their communities rather than in detention.

JHA is dedicated to monitoring both adult and juvenile correctional facilities in Illinois. JHA does not specialize in SUD treatment, nor has it conducted comprehensive program evaluations of DJJ’s TC program specifically. Therefore, a full independent evaluation of the TC program by SUD treatment experts is recommended.

Question	Points Available	Yes/Partial/No	Points Awarded
3.4 Does the Agency use performance information (including that collected from program partners) to adjust program priorities, allocate resources, or take other appropriate management actions?	10	Yes	10

**Explanation:**

DJJ uses information from the TC program’s Quarterly Quality Improvement Meetings to adjust program priorities, and make other appropriate management decisions, which may include additional group topics/materials, curriculum changes, program schedule changes, staff trainings, etc.



### Concluding Comments

DJJ began transitioning its facilities to a Therapeutic Communities (TC) model in 2015. The design of this program is impacted by a tension within the existing evidence. TC programs are considered an effective program when compared to other programs for SUD treatment in incarceration. However, studies of TC programs involve longer durations than the average DJJ program length. DJJ has shortened the program because, in general, youth have better outcomes when housed in their communities rather than in detention. DJJ also has a statutory mandate to place youth in the least restrictive environment possible.

### Final Program Score and Rating

Final Score	Program Rating
75	Effective

### SPART Ratings

Programs that are **PERFORMING** have ratings of Effective, Moderately Effective, or Adequate.

- **Effective.** This is the highest rating a program can achieve. Programs rated Effective set ambitious goals, achieve results, are well-managed and improve efficiency. Score 75-100
- **Moderately Effective.** In general, a program rated Moderately Effective has set ambitious goals and is well-managed. Moderately Effective programs likely need to improve their efficiency or address other problems in the programs' design or management in order to achieve better results. Score 50-74
- **Marginal.** This rating describes a program that needs to set more ambitious goals, achieve better results, improve accountability or strengthen its management practices. Score 25-49

Programs categorized as **NOT PERFORMING** have ratings of Ineffective or Results Not Demonstrated.

- **Ineffective.** Programs receiving this rating are not using your tax dollars effectively. Ineffective programs have been unable to achieve results due to a lack of clarity regarding the program's purpose or goals, poor management, or some other significant weakness. Score 0-24
- **Results Not Demonstrated.** A rating of Results Not Demonstrated (RND) indicates that a program has not been able to develop acceptable performance goals or collect data to determine whether it is performing.

Please see [www.Budget.Illinois.gov](http://www.Budget.Illinois.gov) for additional information.

## Glossary

**Best Practices:** Policies or activities that have been identified through evidence-based policymaking to be most effective in achieving positive outcomes.

**Evidence-Based:** Systematic use of multiple, rigorous studies and evaluations which demonstrate the efficacy of the program's theory of change and theory of action.

**Illinois Performance Reporting System (IPRS):** The state's web-based database for collecting program performance data. The IPRS database allows agencies to report programmatic level data to the Governor's Office of Management and Budget on a regular basis.

**Optimal Return on Investment (OROI):** A dollar amount that expresses the present value of program benefits net of program costs that can be expected if a program is implemented with fidelity to core principles or best practices.

**Outcome Measures:** Outcomes describe the intended result of carrying out a program or activity. They define an event or condition that is external to the program or activity and that is of direct importance to the intended beneficiaries and/or the general public. For example, one outcome measure of a program aimed to prevent the acquisition and transmission of HIV infection is the number (reduction) of new HIV infections in the state.

**Output Measures:** Outputs describe the level of activity that will be provided over a period of time, including a description of the characteristics (e.g., timeliness) established as standards for the activity. Outputs refer to the internal activities of a program (i.e., the products and services delivered). For example, an output could be the percentage of warnings that occur more than 20 minutes before a tornado forms.

**Results First Clearinghouse Database:** One-stop online resource providing policymakers with an easy way to find information on the effectiveness of various interventions as rated by eight nation research clearinghouses which conduct systematic research reviews to identify which policies and interventions work.

**Target:** A quantifiable metric established by program managers or the funding entity established as a minimum threshold of performance (outcome or output) the program should attain within a specified timeframe. Program results are evaluated against the program target.

**Theory Informed:** A program where a lesser amount of evidence and/or rigor exists to validate the efficacy of the program's theory of change and theory of action than an evidence-based program.

**Theory of Change:** The central processes or drives by which a change comes about for individuals, groups and communities

**Theory of Action:** How programs or other interventions are constructed to activate theories of change.

## Citations

Illinois Performance Reporting System, Department of Juvenile Justice Performance Metric Reports FY19 Quarter 1. Retrieved from [https://www2.illinois.gov/sites/budget/IPRS%20Reports/425-Juvenile\\_Justice.pdf](https://www2.illinois.gov/sites/budget/IPRS%20Reports/425-Juvenile_Justice.pdf)

John Howard Association (2018). *2018 Monitoring Report for IYC-Chicago*. Chicago, IL.

Mitchell, Ojmarrh, David B. Wilson, and Doris L. MacKenzie. 2012. "The Effectiveness of Incarceration-Based Drug Treatment on Criminal Behavior: A Systematic Review." *Campbell Systematic Reviews* 18.

Office of Management and Budget (archived). *Assessing Program Performance*. Retrieved from <https://georgewbush-whitehouse.archives.gov/omb/performance/index.html>

The Pew Charitable Trusts. *Pew-MacArthur Results First Initiative*. Retrieved from <https://www.pewtrusts.org/en/projects/pew-macarthur-results-first-initiative>

Washington State Institute for Public Policy (2017). *Therapeutic communities for juveniles with substance use disorder*. Retrieved from <https://www.wsipp.wa.gov/BenefitCost/Program/197>

## Works Referenced

Drake, E. (2012). *Chemical Dependency Treatment for Offenders: A Review of the Evidence and Benefit-Cost Findings* (Document No. 12-12-1201). Olympia: Washington State Institute for Public Policy.

Gordon, J. A. (2002). Barrett Juvenile Correctional Center: Is it Effective? A Comparison of Youth Released from a Residential Substance Abuse Treatment Center to Youth at a Traditional Juvenile Correctional Center. *U.S. Department of Justice*.

John Howard Association (2018). *2018 Monitoring Report for IYC-St. Charles*. Chicago, IL.

Catherine M. Lemieux, Juan J. Barthelemy, Julie A. Schroeder & Johanna M. Thomas (2012) Therapeutic Communities for Youths in Secure Care: Participant Characteristics and Predictors of Treatment and Postrelease Supervision, *Journal of Social Service Research*, 38:4, 451-467, DOI: 10.1080/01488376.2012.683719

J. Mitchell Miller & Holly Ventura Miller (2011) Considering the Effectiveness of Drug Treatment behind Bars: Findings from the South Carolina RSAT Evaluation, *Justice Quarterly*, 28:1, 70-86, DOI: 10.1080/07418825.2010.506880

Morrall, A. R., McCaffrey, D. F., & Ridgeway, G. (2004). Effectiveness of Community-Based Treatment for Substance Abusing Adolescents: 12-month Outcomes From A Case-Control Evaluation of a Phoenix Academy. *Drug Policy Research Center, RAND*.

Pealer, J. A. (2004). *A Community of Peers – Promoting Behavior Change: The Effectiveness of a Therapeutic Community for Juvenile Male Offenders in Reducing Recidivism* (Doctoral dissertation).

Miriam D. Sealock, Denise C. Gottfredson and Catherine A. Gallagher (1997). *Drug treatment for juvenile offenders: some good and bad news*. *Journal of Research in Crime and Delinquency*. 34.2 (May 1997): p210+.

Winters, K. C. (1999). TIP 32: Treatment of Adolescents with Substance Use Disorders: Treatment Improvement Protocol (TIP) Series 32. *DHHS Publications, (SMA) 99-3283*.