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## Pilot and Adaptation of a Social-Emotional Learning Program in Youth Justice Settings

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Supervisor: Dr. Claire Crooks, *The University of Western Ontario*

A thesis submitted in partial fulfillment of the requirements for the Doctor of Philosophy degree in Education

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## **Abstract**

Youth involved in the justice system often have a constellation of complex problems and risk factors. Aiming to reduce risk factors is not sufficient, it is essential to also promote the development of protective factors. Social-emotional learning (SEL) programs aim to enhance intrapersonal, interpersonal, and cognitive competencies. A growing body of research demonstrates that SEL programs reduce aggression, substance use, and emotional distress and improve prosocial skills; however, to date, SEL programs have been primarily implemented in community schools. This integrated-article dissertation explored the feasibility and preliminary outcomes of implementing a SEL program in youth justice settings. The first paper (Chapter Two) provides an overview of the theoretical and empirical components of effective youth justice interventions and highlights the parallels with SEL programs. The paper proposes the implementation of SEL programs in youth justice settings and identifies some of the unique programming and implementation considerations for this population.

The second paper (Chapter Three) presents a two-phase study examining the feasibility, acceptability, and utility of an evidence-informed SEL program in youth justice settings. In the initial phase, the Healthy Relationships Plus Program was piloted in youth custody facilities. Data collected from program staff and administrators indicated high levels of feasibility and acceptability and several important adaptations. In the second phase, the adapted program (Healthy Relationships Plus - Enhanced Program) was piloted in youth correctional settings and youth reported high levels of acceptability and utility.

The third paper (Chapter 4) evaluated the Healthy Relationships Plus - Enhanced Program with a sample of justice-involved youth to explore preliminary outcomes. A mixed methods quasi-experimental design was used. During focus groups, youth reported that participation in the program promoted the development of SEL skills. At post-intervention youth reported significant increases in assertiveness, self-control, empathy, problem-solving efficacy, as well as a significant decrease in attitudes towards peer conflict. In addition, many of these improvements remained significant at one-month follow-up.

Taken together, the theory and preliminary evidence from these papers suggest that an adapted SEL program is relevant and compatible with youth justice settings, and it can also improve the attitudes and skills of youth offenders.

**Keywords**

Youth justice, delinquency, social-emotional learning

## Summary for Lay Audience

Youth involved in the justice system often have many complex problems and risk factors. It is not enough to reduce risk factors, we must also support these youth in developing protective factors. Social-emotional learning (SEL) programs help youth to better understand their emotions, effectively manage stress, build and maintain healthy relationships, show empathy for others, and make responsible decisions. Research has shown that SEL programs reduce problem behaviours and increase positive behaviours. However, to date, SEL programs have only been taught in community schools. This integrated-article dissertation explored whether it is appropriate and practical to teach SEL programs in youth justice settings. The first paper (Chapter Two) summarizes the theories and effective components of youth justice interventions and highlights the similarities with SEL programs. The paper argues that SEL programs should be taught in youth justice facilities and identifies some unique considerations for this population.

The second paper (Chapter Three) presents a two-phase study examining whether it is practical, appropriate, and useful to teach an SEL program in youth justice settings. In the first phase, we evaluated the Healthy Relationships Plus program in youth custody facilities. Data collected from staff indicated that the program was appropriate and perceived to be beneficial; however, several adaptations were recommended to improve the program. In the second phase, we evaluated the adapted program (Healthy Relationships Plus - Enhanced Program) and the youth reported that the program was useful and enjoyable.

The third paper (Chapter Four) evaluated the Healthy Relationships Plus – Enhanced Program with youth offenders to determine if participation in the program was associated with improved skills. Results from questionnaires and focus groups indicated that participation in the program promoted the development of positive skills. After the program, youth reported significant increases in assertiveness, self-control, empathy, problem-solving, and a significant decrease in attitudes towards peer conflict. Also, many of these improvements were maintained at one-month follow-up.

Overall, the theory and results from these papers suggest that an adapted SEL program is relevant and appropriate for youth justice settings. This program can also improve the attitudes and skills of youth offenders.

## **Co-Authorship Statement**

Amanda Kerry completed the following integrated-article dissertation with collaboration with coauthors. In all three manuscripts, the primary intellectual contributions were made by the first author, who conducted literature reviews, submitted ethical approvals, recruited participants, collected and transcribed data, led the analysis of data, and wrote the manuscripts.

Second author, Dr. Claire Crooks (Chapters 2, 3, 4) provided research supervision to the primary author, contributed to the design of the research studies, assisted in revising the codebooks, and assisted in preparing the manuscripts for publication. Third author, Dr. Deineria Exner-Cortens (Chapters 3 and 4) critically reviewed of the manuscripts and assisted in preparing the manuscripts for publication. Third author, Dr. Alan Leschied (Chapter 2) critically reviewed the manuscript, provided theoretical guidance, and contributed to the design of the research studies. Third author, Courtney Cadieux (Chapter 4) conducted preliminary data analysis.

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## **Chapter 1**

### **1 Social-Emotional Learning in Youth Justice Settings: An Introduction**

#### **1.1 Introduction**

The developmental changes that occur during adolescence are often linked with increased engagement of risky behaviours (Guerra & Bradshaw, 2008). While heightened experimentation and risk-taking is a hallmark of adolescence, most youth successfully navigate this transitional period with minimal negative impacts and no conflict with the law. However, for some youth, their impulsive, risky behaviours lead to involvement with the justice system. According to the National Crime Prevention Centre (2012), 37% of Canadian youth reported engagement in at least one delinquent behaviour, including acts of violence, property damage, or selling substances. Youth self-reported crimes often do not align with official records of charges or convictions because many delinquent behaviours are unreported or not directly observed (Kauffman & Landrum, 2018). Recent Canadian data suggests that approximately 153,000 youth per year are accused of committing a crime and this represents approximately 6% of the Canadian adolescent population aged 12 to 17 (National Crime Prevention Centre, 2012). While youth involved in the justice system represent a small proportion of adolescents, they are arguably the most at-risk and vulnerable youth in society.

Justice-involved youth rarely present with one isolated problem, rather they often present with several interrelated difficulties, including delinquency, substance use, and risky sexual activity (Siegel & Welsh, 2011). Engagement in antisocial, unhealthy, and unsafe behaviours has been linked to multiple adverse outcomes, including psychological, health, social, academic, and employment challenges (Odgers et al., 2008). The individual and societal impacts of youth offending highlight the importance of improving the well-being and outcomes of justice-involved youth.



## **1.2 Vulnerability and Resilience**

Justice-involved youth often have complex and difficult past and present life experiences. Many youth involved in the justice system have experienced adverse childhood experiences (ACEs). ACEs include childhood abuse (physical, emotional, sexual), neglect, and family dysfunction (exposure to family violence, substance use, family mental illness, family incarceration, and separation/divorce) (Baglivio & Epps, 2016). Results from a study that examined the prevalence of ACEs in a population of over 64,000 youth offenders indicated that 97% of the youth reported experiencing at least one ACE (Baglivio, Epps, Swartz, Huq, & Hardt, 2014). In a subsequent study, Baglivio and Epps (2016), found that of the youth who experienced one ACE, 100% of those reported exposure to at least one additional ACE, 68% reported five or more ACEs, and 25% reported exposures to seven or more ACEs. Negative early life experiences are not causal risk factors for offending; however, they contribute to a youth's vulnerability (Vidal et al., 2017). These elevated numbers of ACEs have been shown to predict a wide range of negative social, emotional, and health outcomes in other populations (Hughes et al., 2017).

The difficulties that these youth face were further highlighted in a qualitative study where researchers sought to understand youth offenders' perspectives of risk and protective factors (Barnert et al., 2015). The youth described their family homes as unstructured and chaotic, with the presence of frequent fighting and parental neglect. In terms of school, these youth perceived the school environment to be unsafe, they experienced limited academic success, had poor attendance, and often dropped out. Finally, they described high crime rates and violence in their communities. When asked about protective factors, youth described longing for kind, but firm relationships with parents, specifically expressing a need for love, attention, discipline, and control. Furthermore, youth described having a positive adult role model, safe and stable environments (e.g., home, school, and neighbourhoods), and having increased access to extracurricular activities as protective factors (Barnert et al., 2015).

The voices of these youth are consistent with empirically validated risk factors for offending, including, poor or conflictual family relationships, poor performance at school,

and limited prosocial interests/activities. Other validated risk factors include a history of antisocial behaviours, impulsivity, pro-criminal attitudes and beliefs, antisocial peers, and substance use (Olver, Stockdale, & Wong, 2012). These factors are referred to as the ‘Central Eight Risk Factors’ (Andrews and Bonta, 2003).

Research consistently demonstrates that youth often experience multiple risk factors, and the accumulation of these factors places youth at increased risk of justice involvement. Unfortunately, the aggregation of multiple risk factors often co-occurs with missed opportunities to experience and develop protective factors. As a result of their life experiences, many justice-involved youth are inadequately equipped with effective social, emotional, and behavioural skills to navigate the demands of their environments. These youth often have limited opportunities to develop and practice skills that can position them on a more healthy, positive trajectory. Fortunately, youth do not need to be completely risk-free for healthy, positive development. Youth can succeed despite difficult experiences and risk factors if they develop healthy compensatory skills (Garbarino, 1999).

As Ross Greene noted, “children do well if they can” (Greene, 2001, p. 310). He proposed that children and youth display challenging behaviours because they lack the skills to manage the demands and expectations of their environment. Specifically, youth with conduct problems lack cognitive flexibility, healthy emotion regulation strategies, effective social skills, and effective problem-solving strategies (Greene, 2001). Parents, teachers, and correctional staff tend to respond to challenging behaviours with discipline and consequences. Discipline is warranted at times; however, this strategy alone will not lead to improved behaviours in the absence of teaching youth skills to manage future situations effectively. Equipping these vulnerable youth with healthy, adaptive skills is necessary to transition to adulthood successfully and should be considered an important policy priority in the youth justice system.

### **1.3 Positive Youth Development**

Traditionally, youth justice interventions focused on youth offenders’ problems and deficits. In recent years, there has been a shift towards responding to youth offenders’ behaviours using the concepts and principles of positive youth development (PYD). PYD

posits that a youth's negative trajectory can be altered by promoting positive developmental opportunities (Lerner, Almerigi, Theokas, & Lerner, 2005). A positive youth justice model aims to leverage youths' strengths, and promote protective factors, while also addressing youths' risks and vulnerabilities. Additionally, rather than viewing youth offenders as incapable of prosocial behaviour without strict punishment, PYD views justice-involved youth as inherently capable of engaging in prosocial behaviour when provided with sufficient support and positive opportunities (Butts, Bazemore, Saa Meroe, 2010).

#### **1.4 Social-Emotional Learning**

Social-emotional learning (SEL) programs apply the core principles of PYD and aim to promote five competencies including self-awareness, self-management, social awareness, relationship skills, and responsible decision making (Taylor, Oberle, Durlak, & Weissberg, 2017). There is mounting evidence that school-based SEL programs significantly increases coping and communication skills, positive attitudes, prosocial behaviour, academic performance, and decrease aggression, substance use, and emotional distress (Corcoran, Cheung, Kim & Xie, 2018; Durlak, Weissbery, Dymnicki, Taylor, & Schellinger, 2011; Taylor et al., 2017). At present, youth must be residing in the community and attending school regularly to have access to and participate in SEL programs. Unfortunately, many justice-involved youth are truant, disengaged, or dropped out of school (Rocque, Jennings, Piquero, Ozkan, & Farrington, 2017). Based on the literature describing the risk factors for justice involvement (e.g., poor social skills, poor problem solving, limited emotion regulation strategies), it is conceivable that these youth would especially benefit from developing SEL skills. However, to date, there have been no efforts to implement or evaluate SEL programs with justice-involved youth.

#### **1.5 Purpose of the Research**

This dissertation is presented in an integrated article format and aimed to introduce and adapt an SEL program in youth justice settings. The overarching research questions were:

1. What is the feasibility, acceptability, and utility of an SEL program implemented in youth justice contexts?
2. What program adaptations are required to better match the needs of justice-involved youth and the constraints of youth justice settings?
3. What are the preliminary outcomes associated with participation in an adapted SEL program in a sample of justice-involved youth?

## **1.6 Dissertation Overview**

Chapter Two outlines the parallels between the risk and protective factors linked with youth offending and the objectives of SEL programs to make the case for applying SEL in youth justice contexts. The growing empirical support for school-based SEL programs is reviewed. This chapter highlights that a significant gap remains regarding SEL programs and justice-involved youth. Finally, the authors propose the implementation of SEL prevention programs in youth justice settings and identify some of the unique programming and implementation considerations for this population.

Chapter Three presents a two-phase study that implemented and adapted an SEL program in the context of youth correctional facilities. Phase one explored the feasibility, acceptability, utility of the Healthy Relationships Plus Program (HRPP) program, and identified adaptations needed for the program with youth justice populations. Data for this phase were collected from 16 youth correctional staff, including program facilitators and administrators. Implementation data were collected using de-identified attendance sheets, session tracking forms, implementation surveys, focus groups, and interviews. Results from phase one indicated high levels of acceptability of the HRPP and also highlighted a number of important adaptations for SEL programs in youth correctional environments. Following Phase one, the HRPP program was adapted. The adapted program was titled *Healthy Relationships Plus-Enhanced Program (HRP-Enhanced)*. Phase two piloted the HRP-Enhanced in youth correctional facilities. Focus group data were collected from 32 youth to understand their perceived acceptability and utility of the HRP-Enhanced program.

Chapter Four presents a mixed methods study that explored outcomes for justice-involved youth who participated in HRP-Enhanced program. Data were collected at four time points from 92 Canadian youth, ages 12 to 20. Youth and teachers completed questionnaires at each time point. In addition, youth participated in focus groups upon completion of the program. A quasi-experimental design was used to identify changes post-intervention and at one-month follow-up. Qualitative analysis was also used to explore the preliminary outcomes related to program participation. Figure 1 depicts the research process of this integrated dissertation.

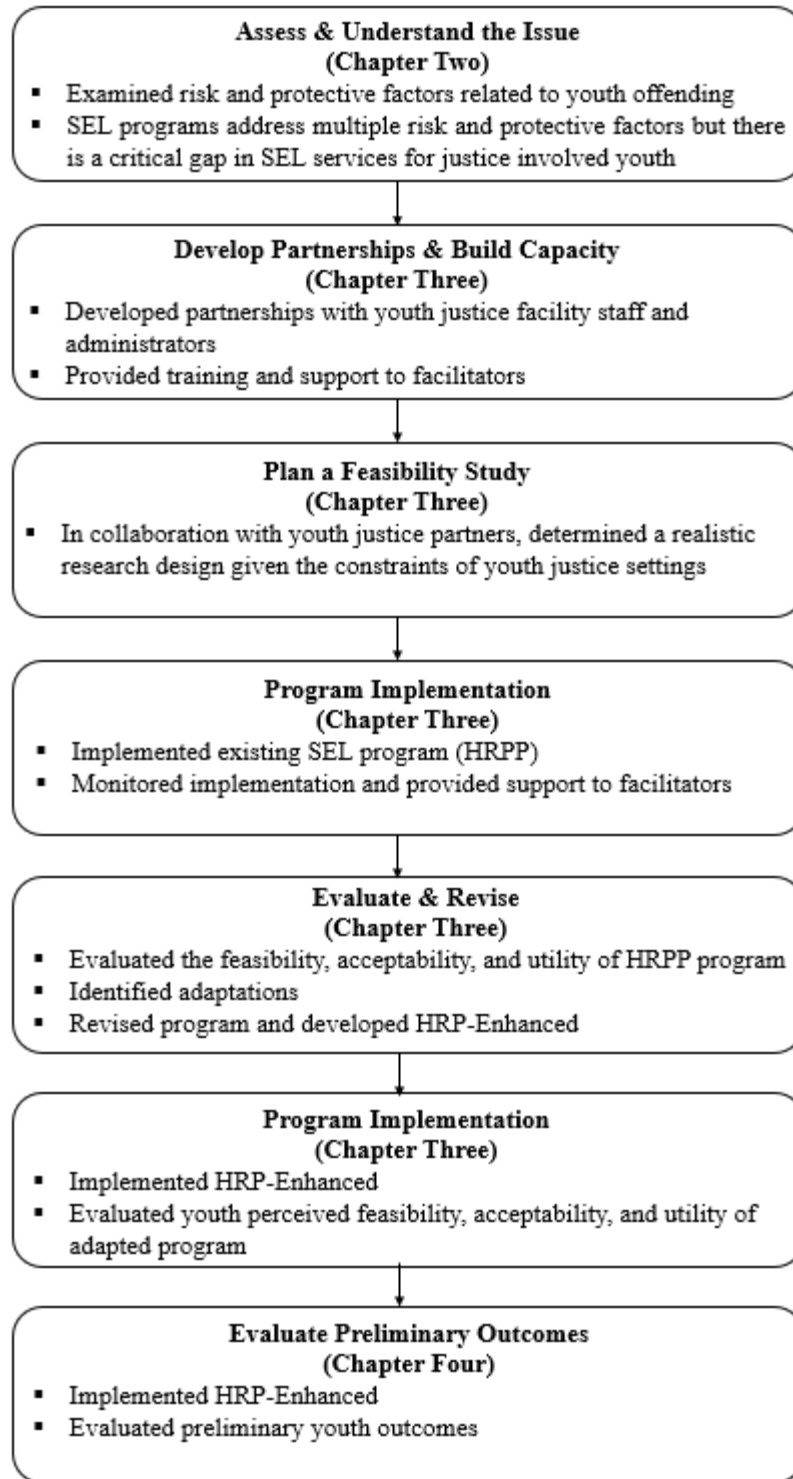


Figure 1-1. Research process to implement and adapt an SEL program in youth justice settings.

## **1.7 Summary**

The three papers presented in this integrated dissertation aim to improve services for justice-involved youth and demonstrate that SEL programs may be a promising, evidence-informed approach to target both risk and protective factors. This integrated dissertation also extends existing SEL research beyond community classrooms to higher risk youth in correctional facilities. However, this is the first study to examine SEL programs among youth justice populations, and future work is necessary to replicate and expand the current findings.

## 1.8 References

- Andrews, D. A., & Bonta, J. (2003). *The psychology of criminal conduct* (3rd ed.). Cincinnati, OH: Anderson Publishing.
- Baglivio, M. T., & Epps, N. (2016). The interrelatedness of adverse childhood experiences among high-risk juvenile offenders. *Youth Violence and Juvenile Justice, 14*(3), 179-198.
- Baglivio, M. T., Epps, N., Swartz, K., Huq, M. S., & Hardt, N. S. (2014). The prevalence of Adverse Childhood Experiences (ACE) in the lives of juvenile offenders. *Journal of Juvenile Justice, 3*, 1–23.
- Barnert, E. S., Perry, R., Azzi, V. F., Shetgiri, R., Ryan, G., Dudovitz, R., ... & Chung, P. J. (2015). Incarcerated youths' perspectives on protective factors and risk factors for juvenile offending: A qualitative analysis. *American Journal of Public Health, 105*(7), 1365-1371.
- Butts, Jeffrey A., Gordon Bazemore, & Aundra Saa Meroe (2010). *Positive Youth Justice-Framing Justice Interventions Using the Concepts of Positive Youth Development*. Washington, DC: Coalition for Juvenile Justice.
- Corcoran, R. P., Cheung, A. C., Kim, E., & Xie, C. (2018). Effective Universal school-based social and emotional learning programs for improving academic achievement: A systematic review and meta-analysis of 50 years of research. *Educational Research Review, 25*, 56-72.
- Durlak, J., Weissberg, R., Dymnicki, A., Taylor, R., & Schellinger, K. (2011). The impact of enhancing students' social and emotional learning: A meta-analysis of school-based universal interventions. *Child Development, 82*(1), 405-432.
- Garbarino, J. (1999). *Lost boys: Why our sons turn violent and how we can save them*. New York, NY: Free Press.



- Greene, R. W. (2001). *The explosive child: A new approach for understanding and parenting easily frustrated, chronically inflexible children*. New York, NY: HarperCollins Publishers Inc.
- Guerra, N., & Bradshaw, C. (2008). Linking the prevention of problem behaviours and positive youth development: Core competencies for positive youth development and risk prevention. In N.G. Guerra & C.P. Bradshaw (Eds.), *Core competencies to prevent problem behaviours and positive youth development. New Directions for Child and Adolescent Development, 122*, 1-17.
- Hughes, K., Bellis, M. A., Hardcastle, K. A., Sethi, D., Butchart, A., Mikton, C., ... & Dunne, M. P. (2017). The effect of multiple adverse childhood experiences on health: a systematic review and meta-analysis. *The Lancet Public Health, 2*(8), 356-366.
- Kauffman, J. M., & Landrum, T. J. (2018). *Characteristics of emotional and behavioral disorders of children and youth* (11<sup>th</sup> ed.). New York, NY: Pearson.
- Lerner, R. M., Almerigi, J. B., Theokas, C., & Lerner, J. V. (2005). Positive youth development: A view of the issues. *Journal of Early Adolescence, 25*(1), 10-16.
- National Crime Prevention Centre (NCPC) Public Safety of Canada. (2012). *A statistical snapshot of youth at risk and youth offending in Canada*.
- Odgers, C. L., Moffitt, T. E., Broadbent, J. M., Dickson, N., Hancox, R. J., Harrington, H., ... & Caspi, A. (2008). Female and male antisocial trajectories: From childhood origins to adult outcomes. *Development and psychopathology, 20*(2), 673-716.
- Olver, M. E., Stockdale, K. C., & Wong, S. C. (2012). Short and long-term prediction of recidivism using the youth level of service/case management inventory in a sample of serious young offenders. *Law and human behavior, 36*(4), 331.

- Rocque, M., Jennings, W. G., Piquero, A. R., Ozkan, T., & Farrington, D. P. (2017). The importance of school attendance: Findings from the Cambridge study in delinquent development on the life-course effects of truancy. *Crime & Delinquency*, 63(5), 592-612.
- Siegel, L., & Welsh, B. (2011). *Juvenile delinquency: The core* (4<sup>th</sup> ed.). Belmont, CA: Wadsworth.
- Taylor, R. D., Oberle, E., Durlak, J. A., & Weissberg, R. P. (2017). Promoting positive youth development through school-based social and emotional learning interventions: A meta-analysis of follow-up effects. *Child development*, 88(4), 1156-1171.
- Vidal, S., Prince, D., Connell, C. M., Caron, C. M., Kaufman, J. S., & Tebes, J. K. (2017). Maltreatment, family environment, and social risk factors: Determinants of the child welfare to juvenile justice transition among maltreated children and adolescents. *Child abuse & neglect*, 63, 7-18.

## **Chapter 2**

### **2 Beyond Recidivism: Equipping Youth Offenders with Social-Emotional Learning Skills**

#### **2.1 Introduction**

Adolescence is a developmental period defined by physical, cognitive, emotional, and social transitions. These developmental changes are often linked with experimentation and increased involvement in risky behaviours (Guerra & Bradshaw, 2008). Most youth navigate this developmental stage with minimal negative impact; however, for some, their risky behaviours result in involvement with the justice system. Statistics Canada reports that over one-third of Canadian youth have engaged in some form of delinquent behaviour by the age of 14 years (Savoie, 2006). Delinquency includes a wide range of problematic behaviours, and many of these are not reported to police; however, approximately 6% of Canadian youth have received charges for criminal offences (National Crime Prevention Centre, 2012).

In Canada, youth offending is defined as criminal behaviours committed by youth who are at least 12 and under 18 years old (Department of Justice Canada, 2013). Youth offending has been linked to many negative outcomes for children and youth, including psychological, emotional, health, social, academic, and employment challenges. For example, one longitudinal study followed male and female youth offenders into adulthood and examined outcomes at age the of 32 years (Odgers et al., 2008). Results indicated that many of the individuals in this study later experienced exposure to domestic violence, mental health difficulties, substance use, physical injuries, financial problems, unemployment, and limited qualifications related to school dropout. In addition to individual impacts, youth delinquency is associated with high societal costs, including a strain on finances and resources (de Vries, Hoeve, Assink, Stams, and Asscher, 2015).

Cohen (1998) reported that the average youth offender commits 68 to 80 offences, costing society between \$1.3 million to \$1.5 million as reflected in services and damages to the community as a result of this behaviour. When other societal costs are considered,

including drug use and high school dropout, total costs can range from \$1.7 million to \$2.3 million per youth (Cohen, 1998). More recently, Craig, Schumann, Petrunka, Khan, and Peters (2011) conducted a longitudinal, economic analysis to examine the costs associated with delinquency. Their comprehensive study assessed costs including the criminal justice system (i.e., arrests and court appearances), remedial education (i.e., grade repetition and special education services), health care and social services (i.e., attending the hospital and involvement with the child protective services), and social assistance (i.e., receiving financial support from the government). Results indicated that from ages 4 to 14 years, total costs for girls and boys were \$244,056 and \$229,236 per youth, respectively (Craig et al., 2011).

Given the high societal costs associated with youth offending, it is evident that prevention efforts should aim to intervene early to reduce further costs and improve youth well-being. Fortunately, research suggests that many prevention programs are cost-effective. For example, Cohen and Piquero (2009) estimated that prevention programs that successfully redirect a high-risk, 14-year old youth from an adult trajectory of crime could result in cost savings ranging from \$2.6 million to \$5.3 million.

The prevalence of youth offending, as well as the individual and societal impacts of these behaviours, highlight the importance of supporting the needs of these youth. To reduce the likelihood of negative outcomes for youth and society as a whole, stakeholders must carefully choose appropriate prevention and intervention programs. This paper begins with a brief overview of youth offenders and empirically-based recommendations to meet their needs. Following this synopsis, recommendations for the implementation of universal, social-emotional learning (SEL) programs will be discussed.

## **2.2 Differential Pathways to Anti-Social Behaviour**

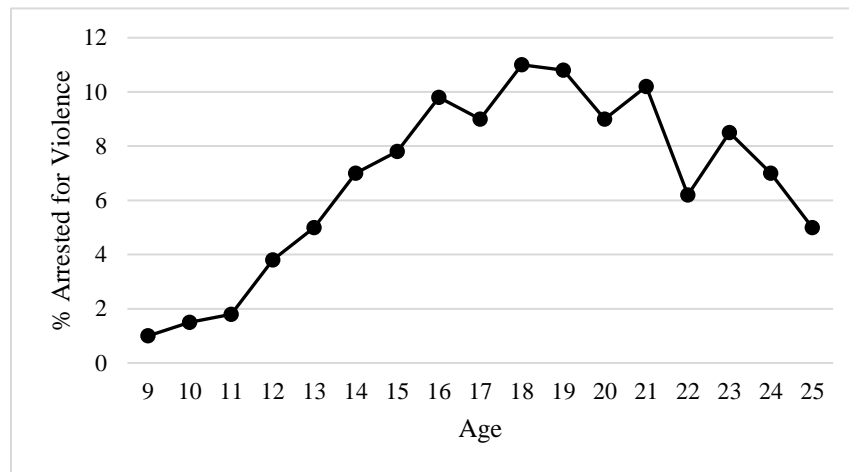
The literature indicates that involvement in anti-social behaviours emerges differently depending on factors related to developmental stage and gender.

### **2.2.1 Age-Related Trajectories**

Research suggests that there are two trajectories that describe how youth become involved with the justice system: life-course persistent and adolescent-limited (Moffit, 1993). Life-course persistent refers to children who exhibit behavioural difficulties and social transgressions from an early age into adulthood. This trajectory accounts for approximately 3% to 5% of the general population; however, it appears to be related to more serious and persistent antisocial behaviour in adulthood (Pozzulo, Bennell, & Forth, 2012; Tremblay, Van Aken, & Koops, 2009). Children who follow this trajectory often present with difficult temperament and impaired executive functioning (e.g., attention, problem-solving, and inhibitory control) (Felver, Doerner, Jones, Kaye, & Merrell, 2013). Highly reactive children who have difficulty regulating their emotions often exhibit aggressive behaviours in response to frustration and anger. These emotional and behavioural challenges may be misinterpreted by the caregiver as intentional defiance. As a result, caregivers may adopt an excessively permissive or highly reactive discipline style (Kagan & Snidman, 2004). In addition, chronic traumatic stress, such as maltreatment in the early stages of development, may impact children's neurological development and reduce their capacity to regulate aggressive and impulsive behaviours (Corrado & Freedman, 2011).

In contrast, adolescent-limited refers to youth who begin offending between the ages of 12 and 18 (Stewart, Currie, Arbeau, Leschied, & Kerry, 2015). This trajectory accounts for approximately 70% of the offender population (Pozzulo et al., 2012). The dominant theory applied to the adolescent-limited trajectory suggests that this developmental stage is a difficult physical and emotional phase preceding adulthood. Also, youth who follow this trajectory typically live in socially disorganized areas and may be easily recruited to antisocial peer groups. These youth often choose an antisocial lifestyle because it offers a sense of belonging, status, protection, and potentially income (Corrado & Freedman, 2011). Research suggests that many youth who begin offending in adolescence discontinue these behaviours in adulthood as they become independent of parents and other authority figures (Corrado & Freedman, 2011; Craig, et al., 2011). This

peak in offending behaviours during late adolescence and subsequent decrease into adulthood is commonly referred to as the age-crime curve. (Figure 1).



*Figure 2-1.* The age-crime curve depicts the increased frequency of anti-social behaviours through to late adolescence and the decline into adulthood (Loeber & Stallings, 2011).

The steep, positive slope from childhood through adolescence highlights the importance of allocating resources and services during this developmental period and supporting the needs of youth. Although research suggests that typically youth offending behaviours decrease into adulthood, some adolescents progress to chronic and more serious offenders. It is estimated that 5% to 15% of youth involved in the justice system become adult offenders (Day et al., 2011). Although this percentage appears small, this is a clinically significant population and it is estimated that these most at-risk youth account for approximately 80% of youth criminal justice costs (Craig et al., 2011).

According to the general age-graded theory of crime, distance from crime is explained by social controls, structured routine activities, and purposeful human agency (Sampson & Laub, 2003). Sampson and Laub extended the seminal research by Sheldon and Eleanor Glueck. The Glueck's study examined 500 adolescent male offenders and 500 age matched non-justice involved males at three time points, ages 14, 25, and 32 (Glueck & Glueck, 1952). To examine the continuity and desistance in adult crime, Sampson & Laub followed-up with a subsample ( $n=52$ ) of men (approximately age 70) from the Glueck's study. They found that experiences (i.e., turning points) in adolescence and adulthood can redirect criminal trajectories. Turning points included neighbourhood

changes, romantic relationships, and employment. These experiences provided the individuals with new environments, social support, routine, and identity transformation. Sampson and Laub argue that positive turning points during adolescence and adulthood can sustain long-term behavioural change (Sampson & Laub, 2003).

### **2.2.2 Gender**

Evidence has shown that males are more likely to engage in criminal behaviours compared to females (Craig et al., 2011). Additionally, the pathway to crime appears to differ based on gender (Blokland & Palmen, 2012). The higher prevalence of male perpetrated offences has been linked with the greater number of cumulative risk and fewer protective factors compared to girls (Leschied, Cummings, Van Brunschot, & Saunders, 2001). In males, risk factors, including early aggression, dishonesty, concentration difficulties, and family conflict are particularly important (Shader, 2001). In females, family risk factors appear to be most pertinent, including parental aggression and low parental support (Daigle, Cullen, & Wright, 2007). Research has also identified victimization as a key variable involved in females' pathway to crime (Asscher, Van der Put, & Stams, 2015; Cunningham, 2000). Specifically, histories of sexual abuse are more common among female youth involved in the justice system (Fields & Abrams, 2010).

## **2.3 Risk and Protective Factors**

To effectively support the complex needs of justice-involved youth, both risk and protective factors should be targeted. The extant research has identified many factors that increase or mitigate the likelihood that a youth will engage in delinquent behaviours.

### **2.3.1 Risk Factors**

Although research has demonstrated different pathways to crime, there are key risk factors that are equally predictive of delinquency, regardless of gender (Fagan, Van Horn, Hawkins, & Arthur, 2007). There are two primary types of predictors or risk factors for youth offending. First are static risk factors, reflecting that they do not change through treatment (i.e., parental criminality). Second, are dynamic risk factors, also referred to as criminogenic needs and that are amenable to change (i.e., anti-social peers) (Andrew & Bonta, 2010). Research supports a social-ecological conceptualization of youth offending.

That is, delinquency is determined by multiple factors; including families, peers, schools, and the community.

Additionally, empirical evidence suggests that the aggregation of multiple risk factors places youth at greater risk of offending, compared to the presence of specific risk factors (Allard, Ogilvie, & Stewart, 2007; Green, Gesten, Greenwald, & Salcedo, 2008). Moreover, prolonged exposure to risk factors may increase the probability of youth engaging in criminal behaviours (Green et al., 2008). Table 1 presents risk factors for delinquency across different domains.



Table 2-1 *Risk Factors for Youth Offending*

| <b>Individual</b>   | <b>Family</b>                   | <b>Community</b>                 |
|---|---------------------------------|----------------------------------|
| Pregnancy and delivery complications                              | Parental mental health          | Deviant peer group               |
| Difficult temperament   | Parental history of criminality | Bullying                         |
| Poor social skills  | Poor parenting practices        | Peer rejection                   |
| Poor problem solving  | Low supervision                 | Weak attachment to school        |
| Low self-esteem   | Family disruption               | Poor school achievement          |
| Positive attitudes towards violence                               | Violence in the home            | Socio-economic disadvantage      |
| Impaired executive functioning (i.e., impulsivity, hyperactivity) | Large family size               | Neighbourhood violence and crime |
| Substance use   |                                 |                                  |

(Allard et al., 2007; Leschied, Chiodo, Nowicki, & Rodger, 2008; Stewart et al., 2015)

Leschied and colleagues (2008) examined the combination of individual risk factors and outcomes at different time points, specifically, early childhood, mid-childhood, and adolescence. The combination of individual risk factors during mid-childhood was a significant predictor of adult criminality; however, with a small effect size ( $p < .05$ , effect size = .18). In contrast, the combination of risk factors during adolescence was a significant predictor of adult criminality, with a higher effect size ( $p < .001$ , effect size = .40). The findings suggest that individual risk factors present during adolescence are strong predictors of adult offending.

It is also important to note that risk factors that predict the onset of delinquent behaviour are not necessarily the same as those risk factors that predict recidivism. There are eight validated predictors of recidivism, known as the Central Eight Risk Factors, that include: anti-social attitudes, anti-social peers, history of anti-social behaviour, anti-social personality patterns, problematic circumstances at home, problematic circumstances at school, poor use of leisure time, and substance use (Andrews & Bonta, 2010).

### 2.3.2 Protective Factors

Given the significant number of factors that place children and youth at risk for engaging in criminal behaviours, it is important to use a social-ecological perspective and consider a variety of protective factors across different domains (Stewart et al., 2015). Critical protective factors include positive socioemotional skills, external support systems, and healthy relationships with parents and other adults (Mash & Barkley, 2014). Table 2 outlines protective factors against delinquency across different domains.

Table 2-2 *Protective Factors Against Youth Offending*

| <b>Individual</b>           | <b>Family</b>                         | <b>Community</b>                            |
|-----------------------------|---------------------------------------|---|
| Social competence           | Supportive, warm caregiver            | Prosocial peers                             |
| Good problem-solving skills | Healthy attachment to caregiver       | Sense of belonging                          |
| Communication skills        | Stable family                         | Positive school climate                     |
| Healthy self-regulation     | Appropriate and consistent discipline | Attachment to teachers and other adults     |
| Prosocial orientation       | Monitoring and supervision            | Participation in extracurricular activities |
| Optimism                    | Family involvement                    | Access to support services                  |

(Allard et al., 2007; Mash & Barkley, 2014; Stewart et al., 2015)

### 2.4 Dynamic Theories of Youth Offending and Desistance

There are several theories that contribute to understanding the development of criminal behaviours in children and adolescents. This paper applies a dynamic explanatory framework to understand delinquency. This framework was selected because it focuses on developmental processes. Dynamic explanatory frameworks do not deny that early established behaviours continue to influence future behaviour; however, the primary focus in these frameworks is on the influence of a changing social environment in explaining delinquency (Hoeve & van der Laan, 2016). Specifically, changing relationships with

parents and peers are expected to influence a youth's involvement in crime, as well as influence a youth's trajectory to persistence or desistance. (Donker, Bulten, Thornberry, & Matsuda, 2012). Social development theory is consistent with a dynamic explanatory framework. According to social development theory, personal, familial, and structural variables reflect both causal and mediating processes in predicting criminal behaviours throughout development (Catalano & Hawkins, 1996).

Hirschi's social bonding theory is also consistent with the underlying theoretical assumptions of a dynamic explanatory framework. The social bonding theory is one of the most influential and widely studied criminology theories on youth offending (Peterson, Lee, Henniger, & Cubellis, 2016). The theory explains that youth offending occurs when a young person has weak social bonds with family, peers, and schools. Social bonding is comprised of four interrelated elements, including (1) attachment to significant others and institutions, (2) commitment to prosocial goals, (3) involvement in prosocial activities, and (4) belief in conventional norms (Hirschi, 1969). According to the social bonding theory, strengthening positive relationships and prosocial involvement and beliefs reduces the likelihood that youth will engage in criminal behaviours (Peterson et al., 2016).

It is important for programs to be grounded in theory because such interventions are more likely to lead to positive outcomes (Conduct Problems Prevention Group, 2002). Utilizing social development theory reiterates that delinquent behaviour is typically not caused by one factor; therefore, programs should aim to address multiple factors (Leschied et al., 2008). Additionally, social bonding theory indicates the programs should promote the development of healthy, positive relationships and beliefs (Chui & Chang, 2011). Overall, a central element of redirecting youth from continued justice involvement is offering them a new script for the future (Sampson & Laub, 2004).

## **2.5 Overview of Programs for Youth Involved in the Justice System**

Programs for youth involved in the justice system aim to reduce recidivism by targeting risk factors. Of equal importance, effective programs are also designed to facilitate the development of healthy, prosocial life skills. Ideally, programs should address

risk factors, promote protective factors, and teach skills to effectively manage difficult emotions, behaviours, and situations.

### **2.5.1 Prevention Programs**

There are three primary types of prevention programs: (1) primary prevention programs, (2) secondary prevention programs, (3) tertiary prevention programs. Primary prevention programs target an entire population, such as a school or community, to promote protective factors and reduce the onset of violence. Secondary prevention programs target at-risk populations that are susceptible to criminal behaviours based on the presence of risk factors, but have not yet displayed aggressive behaviour. Tertiary prevention programs target youth who have committed acts of violence and aim to prevent further criminal involvement (Lafontaine, Ferguson, & Wormith, 2005; Leschied, 2015).

The field of prevention science has significantly evolved over the past several decades. Early prevention programs employed a risk-focused approach, which resulted in a range of separate problem-specific programs. These programs have been criticized for emphasizing what is going wrong and perceiving adolescence as problematic and a process of overcoming deficits and risks (Guerra & Bradshaw, 2008). In contrast, positive youth development is a strengths-based model. The positive youth development approach views successful development not as the absence of risk factors, but as the presence of protective factors that strengthen youths' abilities to cope with adversity and reach their full potential (Guerra & Bradshaw, 2008). To a certain degree, risk prevention (problem-centred) and positive youth development (asset-building) have been described as opposite ends of a continuum (Small & Memmo, 2004). Comprehensive prevention programs need to integrate both addressing risk and promoting positive development. Prevention science (e.g., reduce risk factors) and positive youth development (e.g., promote protective factors) are complementary frameworks to support the complex needs of justice-involved youth (Catalano, Hawkins, Berglund, Pollard, & Arthur, 2002).

Research suggests that prevention programs can effectively redirect a child or youth from future criminal involvement. De Vries and colleagues (2015) conducted a multilevel meta-analysis to explore the effectiveness of prevention programs for youth at risk of

persistent engagement in criminal behaviours. The study included 39 high-quality studies, specifically randomized control trials and quasi-experimental design studies. The findings suggested that prevention programs have positive effects on preventing persistent delinquency. Results of the meta-analysis also revealed that programs with a behavioural orientation and those that promoted skill building were most effective. The strongest effects were found with programs that incorporated positive behaviour modelling ( $d=0.57, p<.05$ ) and those that included behaviour contracts ( $d=0.61, p<.05$ ) (de Vries et al., 2015).

Historically, the perception of treatment of youth in the justice system has moved from "nothing works" to "what works" to "making what works work" (Andrew & Bonta, 2010). There is a growing body of research examining the effective components of tertiary prevention programs for youth. An important characteristic of an effective program is the philosophy that reflects the assumed mechanisms of change. Programs that follow a therapeutic philosophy aim to facilitate behaviour change by promoting personal development. The following types of programs align with the therapeutic philosophy: skill building, restorative, counselling, and multiple coordinated services (Lipsey, Howell, Kelly, Chapman, & Carver, 2010).

The opposing, and less effective, control philosophy aims to suppress antisocial behaviours through external control tactics. Programs that employ this approach aim to instill discipline, evoke fear of the consequences, and emphasize surveillance to detect problem behaviours (Lipsey et al., 2010). Furthermore, Lipsey and colleagues (2010) compared the effectiveness of youth offender programs and determined that programs that employed a therapeutic approach led to more positive outcomes than the control approach. Specifically, with the exception of programs that assert surveillance, programs that follow the control philosophy actually increase a youth's risk of reoffending (Figure 2).

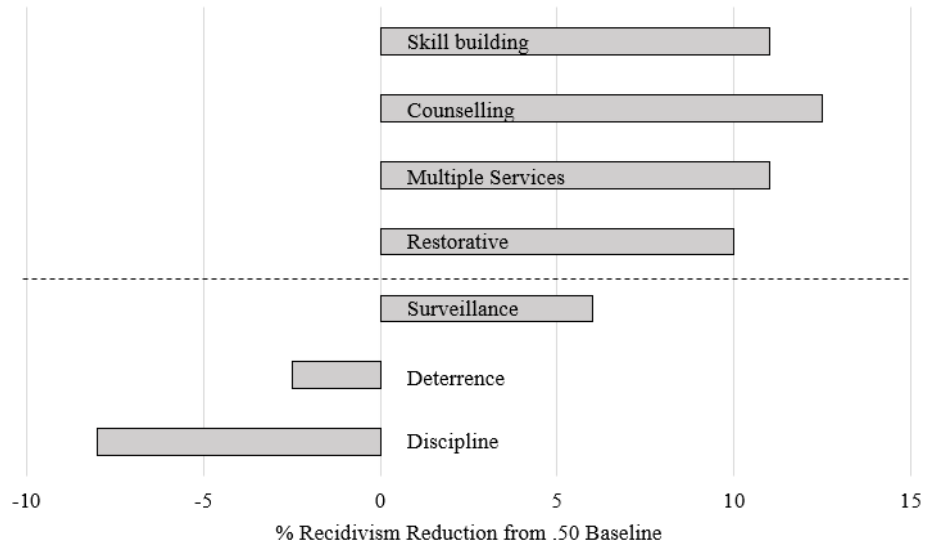


Figure 2-2. Mean recidivism effects for programs that follow therapeutic versus control philosophies (Lipsey et al, 2010).

In addition to the overarching philosophy of the program, research has also indicated key components of effective treatment programs. Latimer, Dowden, Morton-Bourgon, Edgar, and Bania (2003) conducted a meta-analysis and identified empirically-based ingredients of programs that reduce offending behaviours in youth. Based on the results of their meta-analysis, it was recommended that programs aim to develop social skills (i.e., positive communication) and cognitive skills (i.e., problem-solving and perspective taking). Additionally, family involvement was encouraged, as well as directly involving teachers and targeting school performance and attendance. In terms of program implementation, the results of Latimer et al.'s (2003) meta-analysis revealed that program length should be limited to six months and low-risk offenders should receive a maximum of 20 hours of programming, while the dosage for high-risk offenders should be increased. Programs should also be highly structured and include a manual, staff training and supervision, and a measure of program compliance (Latimer et al., 2003). Guerra, Kim, and Boxer (2008) also examined critical components of programs and reported that comprehensive programs that target multiple risk factors across different contexts yield better outcomes compared to single-component programs.

Tertiary prevention programs for youth offenders should also adhere to the risk-need-responsivity (RNR) model. The RNR model is widely regarded as the premier model

for informing offender treatment (Andrews, Bonta, & Wormith, 2011). The risk principle states that it is necessary to appropriately match the level of treatment to the risk level of the youth. Specifically, higher-risk youth need more intensive and extensive services to reduce recidivism. In contrast, low-risk youth require minimal or even no intervention. Research has shown that when intensive services are provided to low-risk offenders, they had a negative effect, translated as actually increasing the likelihood of future offending (Andrews & Bonta, 2010; Lowenkamp & Latessa, 2004). The need principle states that criminogenic needs or dynamic risk factors are directly linked to criminal behaviour and treatment must assess and target multiple factors. For example, programs should target multiple relevant risk factors, including antisocial attitudes, antisocial peers, substance use, limited prosocial activities, and impulsivity. The responsivity principle states that in order to maximize the youth's ability to learn from rehabilitative interventions, the delivery of treatment should be consistent with the ability and learning style of the youth (Andrews & Bonta, 2010). For example, youth offenders with learning difficulties would benefit more from programs that use discussions, interactive activities, and visually presented information, compared to reading and writing exercises.

When selecting programs for youth offenders, Lipsey and colleagues (2010) also recommended choosing programs with a therapeutic philosophy along with evidence-based components. Selecting programs that are evidence-based and that utilize a therapeutic approach is consistent with the federal Youth Criminal Justice Act legislation, as well as provincial interpretations of the federal law (Department of Justice Canada, 2013). It is also critical to select programs that have been evaluated. Randomized control trial (RCT) designs are considered to be the gold standard in evaluation research (Welsh & Farrington, 2006). However, in terms of intervention programs for youth involved in the justice system, there are a limited number of programs that are deemed evidence-based (Guerra et al., 2008).

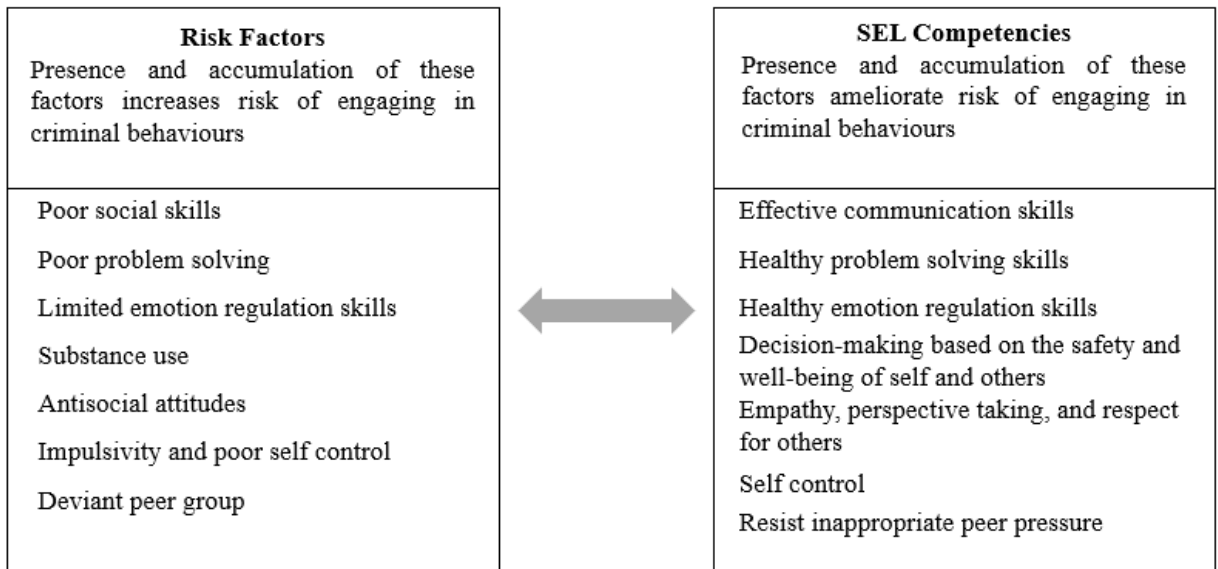
The Washington State Institute for Public Policy (2016) conducted an extensive program review and developed an inventory of evidence-based, research-based, and promising practices for youth involved in the justice system. To be classified as evidence-based, the program must have undergone multiple RCT studies. Research-based refers to

programs that have undergone a minimum of one RCT study. The promising practices distinction was applied to programs that were based on statistical analyses or well-established theory. Results indicated there were 13 evidence-based programs, 12 research-based programs, and 5 promising programs (WSIPP, 2016). It is necessary for programs targeting youth offenders to be carefully evaluated since several widely recognized programs designed to reduce criminal behaviour have been found to be ineffective in well-designed studies (Lipsey, 2010). The lack of supportive findings may be attributed to poor feasibility and fit between the programs, population, and settings.

## **2.6 Social-Emotional Learning**

Social-emotional learning (SEL) programs aim to enhance knowledge and skills to promote social competence, emotion regulation, and prosocial skills (Vazsonyi, Belliston, and Flannery, 2004). Promoting the mastery of SEL competencies integrates both risk prevention programming (e.g., reduce risk factors) and positive youth development (e.g., strengthen assets and skills). Although youth justice and SEL programs share intersecting goals, to date these programs have remained distinctly separate. According to the Collaborative for Academic, Social, and Emotional Learning (CASEL), it is important for youth to develop the following five interrelated competencies: self-awareness (i.e., understanding the influence thoughts and emotions have on behaviour), self-management (i.e., regulating thoughts, emotions, and behaviours), social awareness (i.e., perspective taking), relationship skills (i.e., communication, resisting peer pressure, conflict resolution), and responsible decision making (i.e., making healthy choices about personal behaviours and social interactions) (CASEL, 2015). Children and adolescents who lack these skills typically exhibit negative patterns of interactions and increased aggressive and delinquent behaviours (Claro, Boulanger, & Shaw, 2015; Vazsonyi et al., 2004). Promoting SEL competencies can ameliorate risk factors (Figure 3).





*Figure 2-3.* The development of SEL skills can mitigate risk factors related to youth offending. (Allard, et al., 2007; Andrew & Bonta, 2010; Stewart, et al., 2015; CASEL, 2015).

Developing SEL competencies allows individuals to shift from primarily behaving reactively to external factors, to choosing behaviours consistent with positive internalized beliefs and being accountable for one’s behaviours (Bear & Watkins, 2006). In addition, as these skills are not static or fixed, individuals can learn and progressively improve SEL skills. Similar to the way that people learn academic, musical, or athletic skills, SEL skills are developed through learning and practising. As children and adolescents mature, the situations, relationships, and decisions they are faced with become increasingly complex, and this requires the development of more sophisticated SEL skills (Zins & Elias, 2006).

The focus of most SEL programs is primary prevention. This indicates that all youth may benefit from SEL programs, including those at risk, those with emerging negative behaviours, and those already exhibiting significant difficulties (Zins & Elias, 2006). There is growing evidence regarding the positive impact of programs that aim to develop social and emotional competencies. Welsh and Farrington (2006) conducted a systematic review of 84 RCT studies and found that social skills training is effective in preventing aggressive and antisocial behaviours in youth. Durlak, Weissberg, Dymnicki, Taylor, and Schellinger (2011) conducted a meta-analysis of 213 school-based social-emotional learning (SEL) programs. SEL programs were implemented in elementary, middle, and high school and 44% of the programs were implemented with youth ages 12 to 18 (age range of youth

offenders under the Youth Criminal Justice Act). The results indicated that SEL programs improved youths' academic performance, attitudes towards school, reduced negative behaviours (i.e., noncompliance, aggression, and delinquent acts), and promoted positive emotional development. These benefits were also demonstrated among different ethnic groups (Durlak et al., 2011). A subsequent meta-analytic review of 75 SEL studies (63% included secondary students) concluded that participation in SEL programs improves social skills, positive self-image, academic achievement, mental health, and reduces antisocial behaviours and substance use (Sklad, Diekstra, Ritter, Ben, & Gravesteyn, 2012).

More recently, Taylor, Oberle, Durlak, and Weissberg (2017) conducted a meta-analysis of 82 school-based SEL interventions (58% included youth ages 12 to 18). The meta-analysis examined whether SEL interventions promote positive developmental trajectories. The study concluded with three important findings. First, the positive impact of SEL programs was maintained over time. Specifically, students who participated in school-based SEL programs demonstrated significant positive impact up to 3.75 years following participation. In a subsample of studies examining positive outcomes 18 years post-intervention, individuals who participated in these programs demonstrated improved social relationships, increased high school graduation and college attendance rates, as well as fewer arrests and clinical disorders. Second, SEL programs resulted in dual benefits (i.e., promotion and prevention) at follow-up. Promotion impacts included significantly improving positive attitudes and prosocial behaviour. Prevention impacts included reductions in conduct problems, emotional distress, and drug use. Third, and consistent with previous meta-analyses, the results indicated that benefits were observed across diverse and global populations. Overall, the findings of this study suggest that SEL programs are associated with significant improvements in students' long-term adjustment (Taylor et al., 2017). Table 3 summarizes the range of SEL outcomes identified in these prior studies. These findings highlight the importance of promoting SEL competencies in youth. However, despite the obvious overlap in skill gaps for youth involved with the youth justice system and SEL outcomes, there have been no efforts to apply SEL approaches in these settings.

Table 2-3 *School-Based SEL Prevention Program Outcomes*

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**Cognitive**

- Increased sense of self-efficacy
- More positive attitudes toward school
- Increased academic motivation
- Increased understanding of consequences of behaviour

**Emotional**

- Improved coping with stressors
- Reductions in emotional distress
- Less likely to attempt suicide

**Social**

- Improved sense of community
- Improved conflict resolution skills
- Decreased interpersonal violence

**Behavioural**

- Increased prosocial behaviour
- Improved classroom participation
- Reduction in absences and suspensions
- Reductions in aggression, conduct problems, and delinquent behaviour
- Reductions in substance, tobacco, and alcohol use
- Reductions in sexually transmitted diseases

**Performance**

- Increased academic achievement
  - Increased high school graduation and college attendance rates
- 

(Durlak et al., 2011; Sklad et al., 2012; Taylor et al., 2017; Zins & Elias, 2006)

## **2.7 Implementing SEL Programs in Youth Custody Facilities**

To date, most of the SEL intervention research has focused on implementation in schools. In addition, most of the research has focused on younger children, typically elementary school-aged (Wiglesworth, Humphrey, Lendrum, 2013). Schools play an important role in child and adolescent development. Students spend approximately 30 hours per week at school, making it an ideal setting to teach and practice SEL skills. Unfortunately, many of the youth who become involved in the justice system have poor attendance and high drop-out rates. Research suggests that many youth offenders have gaps in their learning or disrupted schooling because of truancy, suspensions, expulsions, and drop-out (Leone, Krezmien, Mason, & Meisel, 2005). Research has also shown that upon release, most youth who return to school in the community subsequently drop out (Leone et al., 2005; Williams, Wexler, Roberts, Carpenter, 2011). Thus, while many schools are implementing universal SEL programs, the students who need it most are often not in the classroom. Given the needs of these youth, their length of stays, and access to school and programs, youth correctional facilities provide an excellent opportunity to reach these youth and help them develop and practice SEL skills.

The review of the literature above on youth offenders highlights many links between the areas of the needs of these youth and the aims of SEL prevention programs. The research on effective programs for youth offenders indicates that interventions should target multiple risk and protective factors (Guerra et al., 2008). SEL programs foster a range of cognitive, emotional and social competencies, including decision making, coping with stressors, and interpersonal problem solving (Taylor et al., 2017). Effective programs for youth offenders also include skill building, which is congruent with the SEL framework. Finally, it is important for youth justice programs to be evidence-based. A number of SEL prevention programs have undergone rigorous randomized controlled trial evaluations; however, these programs were evaluated in school settings.

### 2.7.1 Important Considerations

Although the literature on youth offenders highlights many links between the areas of need for these youth and the objectives of SEL programs, it is equally important to identify potential challenges to implementing these programs in correctional settings. Given that most SEL programs were designed as primary prevention initiatives, adaptations are needed to ensure that SEL programs appropriately match the needs of youth offenders and the constraints of juvenile justice settings.

**Trauma.** Research suggests that as many as 90 percent of youth involved in the justice system have experienced some form of trauma (Dierkhising et al., 2013). Often these youth have experienced chronic and multiple forms of trauma. In a study of 898 male and female youth offenders, over half of the sample had been exposed to six or more traumatic events during their lifetime (Abram et al., 2004). Experiences of trauma may include poverty, neglect, physical, psychological, and sexual abuse, exposure to community or domestic violence, refugee experiences, and intergenerational trauma (i.e., residential schools). In addition, being held in a correctional facility can be traumatic for youth. Trauma can impact youth in many ways, including mental health difficulties, substance use, and relational challenges (Oudshoorn, 2015). It is possible that some youth may be activated by SEL program content or by disclosures shared by other participants. For example, discussing unhealthy coping strategies (e.g., substance use, self-harm) or abusive relationships may activate an emotional distress response for some youth. Potentially activating content or disclosures may be harmful to youths' well-being because facilitators may not recognize the signs that the youth is experiencing discomfort/distress and facilitators may not have the time or training to appropriately support the youth. Universal SEL programs were not designed as trauma-informed, so this is an adaptation to explore. Specifically, the content of universal SEL programs may need to be revised to resist inadvertently re-traumatizing youth. For example, the images, videos, and scenarios discussed in the programs may need to be adapted.

**Peer Contagion.** Research suggests that programs that aggregate at-risk peers can produce iatrogenic effects (Cecile & Born, 2009). Specifically, placing lower and higher risk youth together in the same group may increase problem behaviour. The increase and

emergence of new forms of antisocial behaviour that results from peer associations is often referred to as *deviancy training* (Leve & Chamberlain, 2005). The potential for deviancy training is an important consideration because youth correctional interventions typically include peer aggregation. It is possible that implementing SEL programs in youth correctional facilities may lead to peer contagion. The literature suggests approaches to avoid peer contagion including separating youth by risk level, implementing highly structured, evidence-based programs, and using experienced and knowledgeable facilitators who can identify and prevent antisocial communication and behaviour (Utah Criminal Justice Center, 2010). It is thus important to incorporate the approaches above when implementing SEL programs in youth justice settings.

**Frequent Admissions and Discharges.** According to the literature on youth correctional facilities, it can be difficult to maintain stable group numbers in youth justice settings (Mulcahy, Krezmien, Leone, Houchins, & Baltodano, 2008). This is particularly a challenge in short-term youth custody facilities where youth enter the facility and may be discharged for various reasons, including court appearances or release to community supervision. In addition, it is not uncommon for youth to have repeat admissions. For these reasons, it may be difficult to maintain stable group participation and group cohesiveness when implementing SEL programs in youth justice settings. Group cohesion is important in adolescent group programs because it promotes a sense of trust and belonging, which leads to more open and rich discussions (Glass & Benshoff, 2002). Finally, high attrition rates will likely impact the program dosage that youth receive. Research examining the effectiveness of youth offender programs has found that high attrition rates are associated with smaller effects (Lipsey et al., 2010).

## **2.8 Conclusion**

Fostering social and emotional competencies in children and adolescents is necessary for healthy development. Research has shown a number of positive outcomes from SEL programs, including impacts that are maintained several years post-intervention. Despite the dramatic increase in preventive SEL programs, significant gaps remain regarding specific populations and settings (i.e., at-risk youth and youth custody facilities). There is a tremendous opportunity to extend SEL programming to meet the needs of youth involved with juvenile justice system, although this work should be undertaken with attention to possible adaptations required.

## 2.9 References

- Abram, K. M., Teplin, L. A., Charles, D. R., Longworth, S. L., McClelland, G. M., & Dulcan, M. K. (2004). Posttraumatic stress disorder and trauma in youth in juvenile detention. *Archives of General Psychiatry*, *61*(4), 403-410.
- Allard, T., Ogilvie, J., Stewart, A. (2007). The efficacy of strategies to reduce juvenile offending. *Justice Modelling at Griffith (JMAG)*, Griffith University.
- Andrews, D., & Bonta, J. (2010). *The psychology of criminal conduct*. (5<sup>th</sup> Ed). New Providence (NJ): Matthew Bender & Company, Inc.
- Andrews, D. A., Bonta, J., & Wormith, S. J. (2004). *The Level of Service Inventory/Case Management Inventory*. Toronto: Multi-Health Systems.
- Andrews, D. A., Bonta, J., & Wormith, S. J. (2011). The risk-need-responsivity (RNR) model. Does adding the good lives model contribute to effective crime prevention. *Criminal Justice and Behaviour*, *38*(7), 735-755.
- Bear, G., & Watkins, J. (2006). Developing self-discipline. In G. Bear & K. Minke (Eds.), *Children's needs III: Development, prevention, and intervention*, 29-44. Bethesda, MD: National Association of School Psychologists.
- Brooks, C., Henry, R., Daschuk, M. (2015). Aboriginal youth gang involvement: Decolonizing the multicausal perspectives towards community strategies and social justice. In R. Corrado & A. Leschied (Eds.), *Serious and Violent Young Offenders and Youth Criminal Justice: A Canadian Perspective*, 291-324. Vancouver: Simon Fraser University Press.
- Canadian Psychological Association. (2000). Canadian Code of Ethics for Psychologists, Third Edition. Retrieved from <http://www.cpa.ca/cpsite/UserFiles/Documents/Canadian%20Code%20of%20Ethics%20for%20Psycho.pdf>



- CASEL. (2015). *Social and emotional learning core competencies*. Retrieved from <http://www.casel.org/social-and-emotional-learning/core-competencies/>
- Catalano, R.F. & Hawkins, J.D. (1996). The social development model: A theory of antisocial behavior. In J. D. Hawkins (Ed.), *Delinquency and crime: current theories* (pp.149-197). Cambridge: Cambridge University Press.
- Catalano, R. F., Hawkins, J. D., Berglund, M. L., Pollard, J. A., & Arthur, M. W. (2002). Prevention science and positive youth development: Competitive or cooperative frameworks?. *Journal of Adolescent Health, 31*(6), 230-239.
- Cécile, M., & Born, M. (2009). Intervention in juvenile delinquency: Danger of iatrogenic effects? *Children and youth services review, 31*(12), 1217-1221.
- Chui, W. H., & Chan, H. C. O. (2011). Social bonds and male juvenile delinquency while on probation: An exploratory test in Hong Kong. *Children and Youth Services Review, 33*(11), 2329-2334.
- Claro, A., Boulanger, M., & Shaw, S. (2015). Targeting vulnerabilities to risk behaviour: An intervention for promoting adaptive emotion regulation in adolescents. *Contemporary School Psychology, 19*, 330-339.
- Cohen, M. (1998). The monetary value of saving a high risk youth. *Journal of Quantitative Criminology, 14*(1), 5-33.
- Cohen, M., & Piquero, A. (2009). New evidence on the monetary value of saving a high risk youth. *Journal of Quantitative Criminology, 25*(1), 25-49.
- Conduct Problems Prevention Group. (2002). Evaluation of the first 3 years of the Fast Track prevention trial with children at risk for adolescent conduct problems. *Journal of Abnormal Child Psychology, 30*, 19-35.
- Corrado, R., & Freedman, L. (2011). *Youth at-risk of serious and life-course offending: Risk profiles, trajectories, and interventions*. Retrieved from <http://www.publicsafety.gc.ca/cnt/rsrscs/pblctns/lf-crs-ffndng/index-en.aspx>

- Correctional Service Canada. (2007). Education programs and services for offenders. *Commissioner's Directive 720*.
- Craig, W., Schumann, L., Petrunka, K., Khan, S., & Peters, R. (2011). Government costs associated with delinquent trajectories. *International Journal of Child, Youth, and Family, 2*(1), 263-293.
- Dahlberg, L., & Potter, L. (2001). Youth violence: Developmental pathways and prevention challenges. *American Journal of Preventive Medicine 20*, 3-14.
- Day, A., Howells, K., & Rickwood, D. (2003). *The Victorian juvenile justice rehabilitation review*. Melbourne: Department of Human Services.
- Day, D., Nielsen, J. D., Ward, A. K., Rosenthal, J. S., Sun, Y., Bevc, I., & Duchesne, T. (2011). Criminal Trajectories of Two Subsamples of Adjudicated Ontario Youths. *Research Report*. Ottawa: Public Safety Canada.
- Day, D., Nielsen, J., Ward, A., Sun, Y., Rosenthal, J., Duchesne, T., ... Rossman, L. (2012). Long-term follow-up of criminal activity with adjudicated youth in Ontario: Identifying offence trajectories and predictors/ correlates of trajectory group memberships. *Canadian Journal of Criminology and Criminal Justice, 54*(4), 377-413.
- Department of Justice Canada. (2013). *The youth criminal justice act: Summary and background*. Retrieved from <http://www.justice.gc.ca/eng/cj-jp/yj-jj/tools-outils/pdf/back-hist.pdf>
- De Vries, S., Hoeve, M., Assink, M., Stams, G., & Asscher, J. (2015). Practitioner Review: Effective ingredients of prevention programs for youth at risk of persistent juvenile delinquency- recommendations for clinical practice. *Journal of Child Psychology and Psychiatry, 56*(2), 108-121.
- Dierkhising, C. B., Ko, S. J., Woods-Jaeger, B., Briggs, E. C., Lee, R., & Pynoos, R. S. (2013). Trauma histories among justice-involved youth: Findings from the National

- Child Traumatic Stress Network. *European Journal of Psychotraumatology*, 4, 79-91.
- Durlak, J., Weissberg, R., Dymnicki, A., Taylor, R., & Schellinger, K. (2011). The impact of enhancing students' social and emotional learning: A meta-analysis of school-based universal interventions. *Child Development*, 82(1), 405-432.
- Fagan, A., Van Horn, M., Hawkins, J., & Arthur, M. (2007). Gender similarities and differences in the association between risk and protective factors and self-reported serious delinquency. *Prevention Science* 8(2), 115-124.
- Felver, J. C., Doerner, E., Jones, J., Kaye, N. C., & Merrell, K. (2013). Mindfulness in school psychology: Applications for intervention and professional practice. *Psychology in the School*, 50, 531-547.
- Glass, J. S., & Benshoff, J. M. (2002). Facilitating group cohesion among adolescents through challenge course experiences. *Journal of Experiential Education*, 25(2), 268-277.
- Glueck, S., & Glueck, E. (1952). *Delinquents in the making: Paths to prevention*. New York, NY: Harper.
- Green, A., Gesten, E., Greenwald, M., & Salcedo, O. (2008). Predicting delinquency in adolescence and young adulthood: A longitudinal analysis of early risk factors. *Youth Violence and Juvenile Justice* 6(4), 323-342.
- Guerra, N., & Bradshaw, C. (2008). Linking the prevention of problem behaviours and positive youth development: Core competencies for positive youth development and risk prevention. In N.G. Guerra & C.P. Bradshaw (Eds.), *Core competencies to prevent problem behaviours and positive youth development*. *New Directions for Child and Adolescent Development*, 122, 1-17.
- Guerra, N., Kim, T., and Boxer, P. (2008). What works: Best practices with juvenile offenders. In R. Hoge, N. Guerra, & P. Boxer (Eds.), *Treating the Juvenile Offender*, 79-102. New York, NY: Guilford Press.

- Guerra, N., Williams, K., Tolan, P., & Modecki, K. (2008). Theoretical and research advances in understanding the causes of juvenile offending. In R. Hoge, N. Guerra, & P. Boxer (Eds.), *Treating the Juvenile Offender*, 79-102. New York, NY: Guilford Press.
- Henry, J. D., & Crawford, J. R. (2005). The short-form version of the Depression Anxiety Stress Scales (DASS-21): Construct validity and normative data in a large non-clinical sample. *British journal of clinical psychology*, *44*(2), 227-239.
- Hirschi, T. (1969). *Causes of delinquency*. Berkeley: University of California Press.
- Hoeve, M., & van der Laan, P. H. (2016). *Persisters and desisters in crime from adolescence into adulthood: Explanation, prevention and punishment*. Routledge.
- Howell, J., & Lipsey, M. (2011). Research-based guidelines for juvenile justice programs. *Justice Research and Policy*, *14*(1), 17-34.
- Kagan, J., & Snidman, N. (2004). *The long shadow of temperament*. Cambridge, MA: Belknap Press.
- Lafontaine, T., Ferguson, M., & Wormith, J. (2005). *Street gangs: A review of the empirical literature on community and corrections-based prevention, intervention, and suppression strategies*. Regina, SK: Department of Corrections and Public Safety.
- Lamers, S., Westerhof, G. J., Bohlmeijer, E. T., ten Klooster, P. M., & Keyes, C. L. (2011). Evaluating the psychometric properties of the mental health continuum-short form (MHC-SF). *Journal of clinical psychology*, *67*(1), 99-110.
- Latimer, J., Dowden, C., Morton-Bourgon, K., Edgar, J., and Bania, M. (2003). *Treating youth in conflict with the law: A new meta-analysis*. Department of Justice Canada.
- Leone, P., Krezmien, M., Mason, L., & Meisel, S. (2005). Organizing and delivering empirically based literacy instruction to incarcerated youth. *Exceptionality*, *13*(2), 89-102.

- Leschied, A. (2015). The correlates of youth violence: Evidence from the literature. In R. Corrado & A. Leschied (Eds.), *Serious and Violent Young Offenders and Youth Criminal Justice: A Canadian Perspective*, 123-151. Vancouver: Simon Fraser University Press.
- Leschied, A., Chiodo, D., Nowicki, E., & Rodger, S. (2008). Childhood predictors of adult criminality: A meta-analysis drawn from the prospective longitudinal literature. *Canadian Journal of Criminology and Criminal Justice*, 50(4), 435-467.
- Leone, P., Meisel, S., & Drakeford, W. (2002). Special education programs for you with disabilities in juvenile corrections. *The Journal of Correctional Education*, 53, 46-50.
- Lipsey, M., Howell, J., Kelly, M., Chapman, G., & Carver, D. (2010). Improving the effectiveness of juvenile justice programs: A new perspective on evidence-based practice. Centre for Juvenile Justice Reform.
- Loeber, R., & Stallings, R. (2011). Modeling the impact of interventions on local indicators of offending, victimization, and incarceration. In R. Loeber, & D. Farrington (Eds.), *Young homicide offenders and victims: Development, risk factors and prediction from childhood*, 137–152. New York, NY: Springer.
- Lovibond, S. H., & Lovibond, P. F. (1995). *Manual for the depression anxiety stress scales*. Sydney: Psychology Foundation.
- Lowenkamp, C. T., & Latessa, E. J. (2004). Understanding the risk principle: How and why correctional interventions can harm low-risk offenders. *Topics in community corrections*, 2004, 3-8.
- Mash, E. & Barkley, R. (2014). *Child psychopathology third edition*. New York, NY: The Guilford Press.
- Moffit, T. (1993). Adolescence-limited and life-course persistent antisocial behaviour: A developmental taxonomy. *Psychological Review*, 100, 674-701.

- Mulcahy, C. A., Krezmien, M. P., Leone, P. E., Houchins, D. E., & Baltodano, H. (2008). Lessons learned: Barriers and solutions for conducting reading investigations in juvenile corrections settings. *Reading & Writing Quarterly*, 24(2), 239-252.
- National Crime Prevention Centre (NCPC) Public Safety of Canada. (2012). *A statistical snapshot of youth at risk and youth offending in Canada*.
- Odgers, C. L., Moffitt, T. E., Broadbent, J. M., Dickson, N., Hancox, R. J., Harrington, H., ... & Caspi, A. (2008). Female and male antisocial trajectories: From childhood origins to adult outcomes. *Development and psychopathology*, 20(2), 673-716.
- Oudshoorn, J. (2015). *Trauma-informed youth justice in Canada*. Toronto, ON: Canadian Scholars' Press Inc.
- Peterson, B. E., Lee, D., Henninger, A. M., & Cubellis, M. A. (2016). Social bonds, juvenile delinquency, and Korean adolescents: Intra-and inter-individual implications of Hirschi's social bonds theory using panel data. *Crime & Delinquency*, 62(10), 1337-1363.
- Pozzulo, J., Bennell, C, & Forth, A. (2012). *Forensic psychology*. (3<sup>rd</sup> Ed). Toronto (ON): Pearson Canada Inc.
- Sampson, R. J., & Laub, J. H. (2003). Life-course desisters? Trajectories of crime among delinquent boys followed to age 70. *Criminology*, 41(3), 555-592.
- Savoie, J. (2006). Youth self-reported delinquency. Statistics Canada Catalogue no. 85-002-XPE. *Juristat*, 27 (6). Ottawa: Statistics Canada.
- Schoenwald, S. (2011). It's a bird, it's a plane, it's ... fidelity measurement in the real world. *Clinical Psychology Science and Practice: American Psychological Association*, 142-147.
- Seifert, K. (2012). *Youth violence: Theory, prevention, and intervention*. New York: NY, Springer Publishing Company.

- Sklad, M., Diekstra, R., Ritter, M., Ben, J., & Gravesteyn, C. (2012). Effectiveness of school-based social, emotional, and behavioural programs: Do they enhance students' development in the area of skill, behaviour, and adjustment? *Psychology in Schools*, 49(9), 892-909.
- Small, S., & Memmo, M. (2004). Contemporary models of youth development and problem prevention: Toward an integration of terms, concepts, and models. *Family Relations*, 53, 3-11.
- Stewart, S. L., Currie, M., Arbeau, K., Leschied, A., & Kerry, A. (2015). Assessment and Planning for Community and Custodial Services: The Application of interRAI Assessment in the Youth Justice System. In R. Corrado & A. Leschied (Eds.), *Serious and Violent Young Offenders and Youth Criminal Justice: A Canadian Perspective*, 356-397. Vancouver: Simon Fraser University Press.
- Taylor, R., Oberle, E., Durlak, J., & Weissberg, R. (2017). Promoting positive youth development through school-based social and emotional learning interventions: A meta-analysis of follow-up effects. *Child Development*, 88(4), 1156-1171.
- Tremblay, R., Van Aken, M., & Koops, W. (Eds.). (2009). *Development and prevention of behaviour problems: From genes to social policy*. New York: Psychology Press.
- Utah Criminal Justice Center. (2010). *Peer contagion: Effects of mixing high and low risk level juveniles*. Program Improvement Resource Materials. Retrieved from <http://ucjc.utah.edu/wp-content/uploads/Peer-Contagion.pdf>
- Vazsonyi, A., Belliston, L., and Flannery, D. (2004). Evaluation of a school-based, universal violence prevention program: Low-, med-, high-risk children.
- Washington State Institute for Public Policy. (2016). *Updated inventory of evidence-based, research-based, and promising practices: For prevention and intervention services for children and juveniles in the child welfare, juvenile justice, and mental systems*.

- Wiglesworth, M., Humphrey, N., & Lendrum, A. (2013). Evaluation of a school-wide preventive intervention for adolescents: The secondart social and emotional aspects of learning (SEAL) programme. *School Mental Health*, 5, 96-109.
- Williams, J.L., Wexler, J., Roberts, G., & Carpenter, C. (2011). Intensive reading instruction in juvenile correctional settings. *Exceptionality*, 19, 238-251.
- Welsh, B., & Farrington, D. (2006). *Preventing crime: What works for children, offenders, victims and places*. New York: NY, Springer.
- Zins, J., & Elias, M. (2006). Social and emotional learning: promoting the development of all students. *Journal of Educational and Psychological Consultation*, 17(2&3), 233-255.



## **Chapter 3**

### **3 Pilot and Adaptation of a Social-Emotional Learning Program Implemented in Youth Justice Settings**

#### **3.1 Introduction**

Youth who engage in delinquent behaviours are more likely to experience mental health difficulties, substance use, physical injuries, school dropout, unemployment, and financial problems (Odgers, et al., 2008). These behaviours are also associated with high social costs. For example, a comprehensive study that assessed the costs associated with delinquency, including with the criminal justice system, remedial education, health care and social services, and social assistance, found that from ages 4 to 14 years, girls and boys cost \$244,056 and \$229,236 respectively (Craig, Schumann, Petrunka, Khan, & Peters, 2011). Fortunately, research suggests that effective prevention programs that redirect high-risk youth from an adult trajectory of crime could result in cost savings from \$2.6 million to \$5.3 million and improve outcomes for youth (Cohen & Piquero, 2009).

#### **3.2 Intervention Programs for Youth Offenders**

Effective programs are based on theory and should target both risk factors (e.g., substance use, aggression, and antisocial attitudes) and protective factors (e.g., social competence and prosocial skills) (de Vries, Hoeve, Assink, Stams, & Asscher, 2015; Vazsonyi, et al., 2004). The intervention approach is another factor associated with positive outcomes. Research consistently indicates that interventions that employ a therapeutic approach, which aim to improve skills, relationships, and self-awareness, are associated with greater reductions in recidivism compared to punitive approaches that aim to reduce problem behaviour through fear of consequences (Lipsey & Howell, 2012). Effective treatment programs for youth offenders are also based on the Risk-Need-Responsivity (RNR) model (Andrews & Bonta, 2010). The RNR is an evidence-based framework that has been widely adopted in correctional and community settings. The risk principle describes that the intensity of service should match the individual's level of risk to re-offend. The need principle indicates that programs must target relevant risk factors, also referred to as criminogenic needs. The responsivity principle describes that the

implementation of programs should be consistent with the individual's abilities and learning style (Andrews & Bonta, 2010). Finally, a key factor associated with effective interventions for youth offenders is high quality implementation (Young, Greer, & Church, 2017). Schoenwald and colleagues (2011) explain that program delivery must be evaluated for fidelity to content and process. Implementation fidelity includes the facilitator's adherence to prescribed procedures and avoidance of proscribed procedures. Prescribed procedures are those required to deliver the program as it was intended, while proscribed procedures are those that are not recommended (Schoenwald et al., 2011). Training and continued support are also critical to ensure that programs are implemented as intended.

### **3.3 Social-Emotional Learning**

Social-emotional learning (SEL) programs are aligned with the factors associated with effective youth offender programming. SEL programs aim to promote five competencies, including self-awareness, self-management, social awareness, relationship skills, and responsible decision making (CASEL, 2015; Taylor, Oberle, Durlak, & Weissberg, 2017). There is a growing body of research examining universal school-based SEL programs, and the findings are consistently positive. Meta-analyses reveal significant improvements in coping and communication skills, positive attitudes, prosocial behaviour, academic performance, and reductions in aggression, drug use, and emotional distress (Corcoran, Cheung, Kim & Xie, 2017; Durlak, Weissberg, Dymnicki, Taylor, & Schellinger, 2011; Taylor et al., 2017). Notably, some of these benefits were maintained up to 4 years following program participation (Taylor et al., 2017). Despite the increase in SEL research, significant gaps remain regarding populations and settings to be targeted (i.e., at-risk youth and youth custody facilities).

### **3.4 Overview of the Healthy Relationships Plus Program**

The Fourth R: Healthy Relationships Plus Program (HRPP) is universal evidence-based SEL program designed to address both risk and protective factors in youth. Although this program was not specifically designed for youth offenders, the universal approach addresses key areas of need for youth involved in the justice system.

### **3.4.1 Healthy Relationships Plus Program**

The HRPP is a 14 session, evidence-informed small groups program designed for youth ages 12 to 18 (Wolfe, 2016). The HRPP applies core principles from the evidenced-based *Fourth R program*, a classroom-based universal prevention curriculum (Crooks et al., 2015; Crooks, Scott, Ellis, & Wolfe, 2011; Wolfe, Crooks, Chiodo, Hughes, & Ellis, 2012; Wolfe et al., 2009). The HRPP curriculum includes skill-based activities to promote healthy relationships and address violence (e.g., bullying, peer and dating violence), high-risk sexual behaviour, and substance use. Beyond skills, the HRPP also addresses mental health and suicide prevention. The HRPP was examined using a latent class growth analysis to identify meaningful classes of youth based on their pre- and post-intervention depression scores (Lapshina, Crooks, & Kerry, 2018). The study identified changes in depression from pre- to post-intervention in a large sample of Canadian youth across varied settings. Notably, the results indicated that youth with extremely severe depression scores at pre-test reported significantly lower depression scores after the program. These results are promising and suggest that while the HRPP is a universal program, it can also be effective for youth with higher needs. In addition, the program was evaluated using a small RCT, where the authors found a decrease in bullying victimization 12 months post-intervention, which was mediated by increased help-seeking (Exner-Cortens, Wolfe, Crooks & Chiodo, 2019).

### **3.4.2 Relevant Adaptations of the Healthy Relationships Plus Program**

Many youth involved in the justice system are marginally literate or illiterate (Leone, Meisel, & Drakeford, 2002). As a result, these youth may have difficulty comprehending written program material and may experience frustration. The HRPP has recently developed a Supported Literacy Version which includes language that is more accessible for youth who struggle with reading, as well as fewer reading and writing tasks. If a youth can process the material, they will likely find the program more enjoyable and will be more likely to achieve the intended outcomes. The Supported-Literacy Version of the HRPP is also consistent with the responsivity principle of the RNR model, which describes that programs should match the youths' learning abilities.

### **3.4.3 Rationale for Implementing the HRPP with Youth Involved in the Justice System**

There are a number of links between the areas of need for youth involved with the justice system and the program objectives of the HRPP. Further, according to the Declaration of Principle included in the Youth Criminal Justice Act (YCJA), the public should be protected by supporting crime prevention and promoting the rehabilitation and reintegration of youth offenders (Department of Justice Canada, 2013). The implementation of the HRPP in youth custody facilities is consistent with the aforementioned principle. In addition, the program's content and approach fit the needs of youth offenders in several ways as described below.

**Focus on universal vulnerabilities of youth.** The HRPP was developed for youth ages 12 to 18, which is compatible with the age group defined under the YJCA. Currently, the program is implemented as a primary prevention program. The program's focus on universal vulnerabilities is consistent with the need principle of the RNR model, which describes that programs should target multiple dynamic risk factors. Based on the universal vulnerabilities of youth that the program targets and the existing research suggesting that the HRPP has been effective in various implementation settings, we believed the program can also benefit youth at all levels. That is, youth offenders, whether they are in custody, on probation in the community, or were diverted from the juvenile justice system with a community sentence, may benefit from participating in the HRPP program.

**Promotion of positive youth development.** Case and Haines (2015) critiqued risk-based prevention practices and suggested that prevention in the field of youth justice should approach children who offend as '*children first, offenders second.*' They further explained that primarily focusing on the reduction of negative behaviours does not imply the presence of positive behaviour; thus, programs should promote measurable and achievable positive outcomes (Case & Haines, 2015). These recommendations are congruent with the SEL competencies that the HRPP aims to develop. Furthermore, Day and colleagues (2012) recommended that programs designed to target crime should focus on more proximal variables, such as school and relationships. The focus on constructive personal development is also consistent with the goals of the HRPP.

In addition to promoting positive behaviours using a therapeutic approach, effective crime prevention programs are also comprehensive and target multiple risk factors across different contexts (Guerra, et al., 2008). The literature suggests that effective prevention strategies should focus on risk factors that are most amenable to change, and this can be achieved through skills training (Vazsonyi, et al., 2004). The recommendation for prevention programs to include skills training is consistent with the skills practice activities included in the HRPP, where youth are taught and given opportunities to practice prosocial skills (i.e., delay, negotiation, refusal, assertive communication, and apologizing). In addition to examining the literature that highlights the needs of youth involved in the justice system, it is also important to consider the voices of youth themselves. Guerra and colleagues (2008) interviewed six incarcerated adolescent male offenders. In terms of what programs the youth would recommend, they advised that it is important to learn and practice skills that will benefit them in the real world. Aligned with this request, the skills developed from participation in the HRPP can help youth navigate relationships with peers, family, correctional staff and future employers in a prosocial manner.

**Adolescence and peer influences.** Dahlberg and Potter (2001) recommended that in order to yield positive outcomes, prevention programs must recognize that risk factors interact differently at different developmental periods. During adolescence, association with antisocial peers is one of the strongest risk factors for delinquency and escalation of violence (Guerra, Williams, Tolan, & Modecki, 2008). Moreover, peer risk factors have been shown to increase offending behaviours in both girls and boys (Fagan, et al., 2007). The HRPP curriculum highlights the differences between healthy versus unhealthy relationships, creating personal boundaries, and how to navigate difficult peer pressure situations through role-play exercises. According to dynamic explanatory frameworks, desistance is largely explained by the re-establishment of healthy, prosocial relationships with peers and adults (Donker et al., 2012). The topics covered in the HRPP can help youth navigate relationships in a more prosocial manner and thus possibly promote desistance.

**Focus on mental health and suicide prevention.** The prevalence of mental health difficulties among youth involved in the justice system is higher than the general adolescent population. Research suggests more than 90% of youth offenders meet diagnostic criteria

for a least one psychological disorder (Drerup, Croysdale, & Hoffmann, 2008; Unruh, Gau, & Waintrup, 2009). In some cases, youth struggling with emotional difficulties may feel hopeless and experience suicidal thoughts. The Centers for Disease Control and Prevention (CDC) reports that suicide is the third leading cause of death among youth aged 15 to 24 (CDC, 2010). Research indicates that justice-involved youth have higher self-harm and suicide attempts than the general adolescent population (Kenny, Lennings, & Munn, 2008). The lifetime rates of self-harm and suicide attempts among youth offenders is between 15% to 24% (Carswell, Maughan, Davis, Davenport, & Goddard, 2004; Howard, Lennings, & Copeland, 2003). The literature suggests that youth are more likely to speak to peers about suicidal thoughts compared to adults (Cusimano & Sameen, 2011; Katz et al., 2013). The HRPP includes sessions that teach youth how to recognize signs of suicidal ideations in themselves and their peers and how to respond using active listening and connecting with appropriate resources.

#### **3.4.4 Potential Challenges**

While there are several links between the needs of youth offenders and the HRPP program, there are also important considerations. The HRPP was designed as a universal intervention. At the outset, the authors anticipated that adaptations would be required to appropriately match the needs of youth offenders and the constraints of youth justice settings. First, research suggests that more than 90% of youth in the justice system have experienced at least one traumatic event, and many of these youth have experienced poly-victimization and cumulative trauma (Dierkhising et al., 2013; Jencks & Liebowitz, 2018). The HRPP was not originally designed to be trauma-informed. Second, programs that aggregate at-risk youth may result in deviancy training. Treating youth offenders together may lead to increased and/or new problematic behaviours by way of peer contagion (Souverein, Van der Helm, & Stams, 2013). Third, it can be difficult to maintain stable group numbers in youth justice settings due to frequent admissions and discharges.

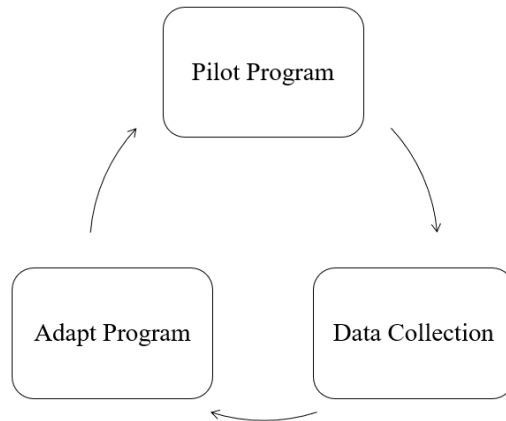
### **3.5 Transporting an Evidence-Informed Program to a Novel Setting**

In the past decade, there has been increased interest in adopting evidence-informed and evidence-based programs in the youth justice system (Lipsey, 2014). While this is an

important advancement, researchers have cautioned policy-makers and stakeholders that it cannot be assumed that evidence-based programs designed for community contexts will translate seamlessly to youth justice populations and settings (Lipsey, 2014, Rodriguez & Baille, 2010). It would be premature and unreasonable to implement a community-based program in youth justice settings and expect that program content and structure will directly generalize to the complex needs of youth offenders and the constraints of youth correctional settings. At present, SEL programs have not been transported to youth justice settings; thus, it unclear whether these programs will be appropriate for the context and attain the same positive results observed in school and community settings. A feasibility study is the first step in addressing this gap. The purpose of feasibility studies is to assess whether something can be done, should we proceed with it, and if so, how and what adaptations might be necessary (Eldridge et al., 2016). Evaluating the acceptability of a program requires feedback from program facilitators and recipients to understand engagement and satisfaction (Sekhon, Cartwright & Francis, 2017). Finally, examining the perceived utility of the program provides information regarding the usefulness and relevance of the content.

### **3.6 The Present Study**

While the HRPP has been implemented in various contexts, including schools and community settings, it has not been examined in a youth justice setting. There is growing research regarding which prevention programs are most effective; however, less is known about how to generalize the delivery of those programs to other settings (Leschied, 2015). This study aimed to address this gap by piloting the HRPP in youth correctional facilities. A two-phase study was used to investigate the feasibility, acceptability, and utility of the HRPP in youth custody facilities. Phase one piloted the original HRPP in youth justice settings and collected data from facilitators and administrators. Following phase one, the HRPP program was adapted based on facilitator and administrator feedback, as well as literature on best-practices for youth offender programming (Table 1). The adapted program was titled *Healthy Relationships Plus-Enhanced Program (HRP-Enhanced)*. Phase two piloted the HRP-Enhanced in youth correctional facilities and data were collected from youth. Figure 1 depicts the research process of the current study.



*Figure 3-1.* Flowchart of current study.

The specific objectives of both phase one and phase two were to determine:

1. What was the feasibility (i.e., compatibility), acceptability (i.e., satisfaction with the content and delivery), and utility (i.e., usefulness) of the HRPP program (phase one) and the HRP-Enhanced program (phase two) in youth justice settings?
2. What were the successes and challenges associated with implementation?
3. What modifications should be made to the programs to increase feasibility, acceptability, utility and implementation success?



Table 3-1 *Overview of the HRP-Enhanced Program*

| Session | Session Title   | Description  |
|---------|---|--|
| 1       | Getting to Know You                                       | Meet group members and facilitator <sup>a</sup><br>Understand the program objectives <sup>a</sup><br>Identify stressors that impact youth <sup>a</sup><br>Review healthy coping strategies <sup>b</sup><br>Review strengths and resilience <sup>b</sup>  |
| 2       | It's Your Choice – Friendships/ Relationships             | Identify ways in which youth choose friends and dating partners <sup>a</sup><br>Understand how gender-based stereotypes may impact relationships <sup>a</sup><br>Identify qualities of a supportive friend <sup>a</sup>  |
| 3       | Shaping Our Views   | Identify influences (e.g., family, media, culture) that affect how we think about relationships <sup>a</sup><br>Consider how influences impact our decisions about relationships <sup>a</sup>  |
| 4       | Influences on Relationships                               | Identify and critically deconstruct negative media messages <sup>a</sup><br>Understand how power imbalances affect relationships <sup>a</sup><br>Understand how substance use influences relationships <sup>a</sup>  |
| 5       | Impact of Substance Use and Abuse                         | Understand different levels of substance use <sup>a</sup><br>Understand the impact of substance use on themselves and others <sup>a</sup><br>Understand harm reduction <sup>b</sup><br>Consider how to help a friend who is struggling with substance use <sup>a</sup>                                     |
| 6       | Healthy Relationships                                     | Identify the difference between healthy and unhealthy relationships <sup>a</sup><br>Understand the role of active listening <sup>a</sup><br>Practice the skill of active listening <sup>a</sup>  |
| 7       | Early Warning Signs of Dating Violence                    | Dispel myths related to dating violence <sup>a</sup><br>Identify early warning signs of dating violence <sup>a</sup><br>Understand how to talk to a friend who is in an abusive relationship <sup>a</sup><br>Gain awareness of resources for support related to dating violence <sup>a</sup>               |
| 8       | Safety and Unhealthy Relationships <sup>c</sup>           | Understand why people stay in abusive relationships <sup>b</sup><br>Gain awareness about sexual exploitation <sup>b</sup><br>Understand how to keep themselves safe and develop a safety plan <sup>b</sup>   |
| 9       | Rights and Responsibilities in Relationships <sup>c</sup> | Identify power and control in relationships <sup>b</sup><br>Identify equality and respect in relationships <sup>b</sup><br>Understand their rights in relationships <sup>b</sup>   |
| 10      | Boundaries and Assertive Communication                    | Understand the importance of knowing your own values and boundaries <sup>a</sup><br>Understand consent and respecting others' boundaries <sup>b</sup><br>Understand the differences between assertive, passive, and aggressive communication <sup>a</sup><br>Practice assertive communication <sup>a</sup> |
| 11      | Taking Responsibility for Emotions                        | Understand signs of stress and anger <sup>a</sup><br>Identify healthy strategies to manage anger and stress <sup>a</sup><br>Identify support systems <sup>a</sup><br>Understand taking accountability for our actions <sup>a</sup><br>Learn and practice how to apologize <sup>a</sup>                     |

|    |  |   |
|----|--|---|
| 12 | Standing Up for What is Right          | Understand the difference between delay, refusal, and negotiation skills <sup>a</sup><br>Practice delay, refusal, and negotiation skills to handle situations when our boundaries are being challenged <sup>a</sup>   |
| 13 | When Friendships and Relationships End | Identify and practice ways to help a friend <sup>a</sup><br>Understand reasons why a friendship/relationship should end <sup>a</sup><br>Practice ending a friendship/relationship in a healthy way <sup>a</sup><br>Identify rights and responsibilities of a healthy relationship <sup>a</sup>  |
| 14 | Mental Health and Well-being           | Understand and develop strategies to cope with rejection <sup>b</sup><br>Understand mental health <sup>a</sup><br>Identify issues that can impact mental health <sup>a</sup><br>Understand connection between healthy relationships and good mental health <sup>a</sup><br>Identify resources to access help and information about mental health issues <sup>a</sup>                                |
| 15 | Helping Our Friends                    | Identify signs and symptoms of mental health challenges and suicide <sup>a</sup><br>Understand the role of active listening and other strategies for supporting a friend with mental health difficulties <sup>a</sup><br>Practice skills for active listening and seeking help <sup>a</sup><br>Identify community resources to access for themselves or a friend in a crisis situation <sup>a</sup> |
| 16 | Sharing and Celebrating                | Discuss what was learned from the group <sup>a</sup><br>Celebrate the completion of the program <sup>a</sup>  |

<sup>a</sup>Original HRPP content

<sup>b</sup>HRP- Enhanced content

<sup>c</sup>Newly added session for HRP-Enhanced

### 3.7 Method

#### 3.7.1 Participants

**Phase One.** Two youth secure custody facilities in Canada, (one urban and one rural), piloted the original HRPP program. Administrators at the participating custody facilities contacted the authors and expressed an interest in collaborating and piloting the program. The length of time that youth spent in custody varied at each site. One facility supported male youth on pre-trial detention and male youth sentenced to secure custody; thus, custody lengths ranged from a few days to several years. The other site was an open custody and remand centre where male and female youth were held for shorter lengths of time (i.e., a few days to a few months). Each site implemented the HRPP to examine the compatibility of the program with the population and setting.

Overall, 16 correctional facility staff (67% females) were trained to implement the HRPP, including 12 program facilitators and 4 administrators. The administrators made a

conscious implementation decision to train 16 staff because of expressed interest, perceived demand of the programs, and potential staff-turnover. Of those trained, six program facilitators implemented the HRPP. Six HRPP groups (two female and four male) were completed. The average HRPP group size was nine youth (range = 8 to 11). Across both sites, a total of 56 youth (34% female) participated in the programs. The average age of participants was 16.2 years ( $SD= 1.67$ ). Five administrators (i.e., chief psychologist, unit managers, assistant superintendent of programs, and superintendents) participated in interviews. Finally, all six program facilitators consented to participate in focus groups.

**Phase Two.** Three youth custody facilities and one intensive residential treatment facility in Canada (across two provinces) implemented the HRP-Enhanced. Two of the facilities were located in rural areas, while the other two facilities were in urban areas. However, the youth who were referred or mandated to the facilities came from both rural and urban communities. In addition to the two youth secure custody facilities (see Phase one), the open custody facility supported low-risk male youth who were remanded or received a custodial sentence. The typical length of stay at the open custody facility was a few months. The intensive residential treatment facility supported youth who were referred by guardians, child welfare agencies, and the courts due to significant behavioural problems. Many of the youth referred to the facility have current or previous justice involvement, and the typical length of placement was approximately eight months to a year.

Across all sites, 11 HRP-Enhanced groups (four female groups and seven male groups) were completed. The average group size was eight youth (range = 3 to 10). Overall, 92 youth (62% male) consented to participate. The average age of participants was 16.5 years ( $SD=1.45$ ) and 78% of the youth identified as Indigenous. Most of the youth (91.3%) participated in the program while in a secure custody setting, 3.3% were from open custody facilities, and 5.4% were from the intensive residential treatment facility. Of the youth from the intensive residential treatment facility, 60% had previous justice involvement.

### **3.7.2 Procedure**

In phase one, program staff employed by the youth correctional facilities and intensive residential facility received a one-day, in-person training on the HRPP. Each facilitator received a binder with the program session plans and support materials. In phase two, program staff who received the original HRPP training received a one-hour, in-person training on the HRP-Enhanced program content. Facilitators who were not involved in phase one received a one-day, in person training on the HRP-Enhanced. Following the trainings, the research team monitored implementation (see below) and provided facilitators with informal support via emails, phone calls, and site visits.

In both phases one and two, there was variability in terms of group selection process and program delivery of the HRPP and HRP-Enhanced across sites. Facilitators considered several factors when determining appropriate groups. At both secure custody sites, youth were referred to the program by a case manager or unit staff and youth participation was voluntary. To assist with group selection, both sites conducted intake interviews to determine criminogenic needs (i.e., peer and romantic relationships), responsivity factors (i.e., reading level and motivation), as well as court and release dates. At one site, groups were comprised of youth from different living units, and a Preventative Security Officer reviewed the names of potential participants to assess security concerns related to incompatibilities and gang affiliations. The other secure custody site selected units that contained several youth with relevant criminogenic needs and responsivity factors and had an entire living unit complete the program together. The open custody facility and intensive residential treatment facility were significantly smaller sites and implemented the program with all of the youth.

In terms of delivery, all four sites implemented the HRPP (phase one) and the HRP-Enhanced (phase two) using two facilitators. One secure custody site delivered the program once per day (2-hour sessions) for three consecutive weeks, while the other delivered the program twice per day (each session lasting 1 hour) over a week and a half. The open detention facility delivered the program two or three times per week (1-hour sessions) for six consecutive weeks. The intensive residential treatment facility delivered the program

once or twice per week (1-hour sessions) for 12 consecutive weeks. Both the HRPP and HRP-Enhanced were conducted in gender-segregated groups.

### **3.7.3 Measures**

We collected data from multiple sources to gain a comprehensive understanding of program feasibility, acceptability, utility, and implementation. Some measures were completed during program implementation (completed on paper), and others were done at the end of the program (completed online). The following measures were employed in both phases one and two.

**Session tracking sheets.** After each session, facilitators were asked to briefly outline the successes and challenges of that particular session and activities, as well as any modifications that they made. In addition, we measured implementation fidelity through the session tracking sheets. Specifically, facilitators were asked to indicate on the tracking sheet which session activities were completed.

**De-identified attendance sheets.** Program facilitators completed de-identified attendance sheets. The purpose of the attendance sheets was to collect data regarding the continuity and dosage of the program (i.e., how many sessions each youth received) and the program completion rate.

**Implementation survey.** Upon completion of the program, facilitators completed an online survey. The survey inquired about the successes and challenges of the program implementation in a youth custody facility, as well as the modifications made to the delivery and material, and perceived benefits for the youth. The survey was adapted from Crooks, et al., 2013, and consisted of 43 questions, including both Likert-scale (e.g., In your opinion, to what extent did youth in the HRPP learn about healthy relationships?) and open-ended questions (e.g., Was there anything about the composition of this group that had an impact on your ability to deliver the program as intended?).

**Focus groups and interviews.** We conducted semi-structured focus groups and interviews (Appendix B) at both of the youth custody facilities. The purpose of these

meetings was to collect more descriptive data about the pilot study, specifically implementation challenges, successes, and modifications.

**Phase One.** Facilitators who implemented the original HRPP were asked to participate in focus groups upon completion of the program to provide their feedback. All of the facilitators who implemented the program consented to participate. Each focus group lasted approximately 1.5 hours. In addition, youth justice administrators were asked to participate in a brief 30-minute interview to openly discuss their feedback. Overall, three focus groups ( $n=6$  facilitators, 67% male) and four interviews were completed. Facilitators and administrators who volunteered to participate in the focus groups/interviews received a \$10 gift card.

**Phase Two.** Youth who completed the HRP-Enhanced were invited to participate in focus groups. Given the time constraints and geographical distance to facilities, only six groups ( $n = 39$ , 62% males), including both secure and open custody settings, were conducted. Each focus group lasted approximately one hour. The author provided the youth with snacks and beverages during the focus groups (with permission from the correctional facilities).

### **3.7.4 Analysis**

Descriptive statistics were used to analyze the data collected from de-identified attendance sheets, session tracking sheets, and the implementation surveys. These summary statistics were computed with SPSS (Version 22). Bivariate differences between the HRPP and HRP-Enhanced on completion rates and gender were calculated using  $t$  tests. Excel was used to calculate content fidelity. To be classified as a high degree of program fidelity, facilitators needed to consistently deliver the sessions as they were intended, which included covering all the sessions, at least 80% of the individual session topics and 100% of skills practice activities (omitting skills practice activities was a proscribed procedure). Medium fidelity described groups that covered 60% to 79% of the sessions, individual session topics, and skills practice activities. The low fidelity category was reserved for groups that did not implement the program as intended, meaning less than 60% of sessions, individual session topics, and skills practice activities. Fidelity categories were developed

based on the Fourth R Implementation Manual and results of a large meta-analysis that examined the impact of implementation on prevention program outcomes (Crooks, Zwarych, Hughes, & Burns, 2015; Durlak & DuPre, 2008). Durlak and DuPre (2008), assessed over 500 youth prevention and promotion interventions and found that it is not realistic to expect perfect implementation.

A series of systematic steps was carried out to condense the extensive qualitative data into smaller analyzable units. Audio recorded focus groups and interviews were transcribed with Trint voice-to-text software and reviewed and revised by the first author. Transcripts from the facilitator focus groups and administrator interviews were uploaded to the cloud-based program Dedoose (V5.3.22) that facilitates mixed methods research by coding qualitative data and grouping quantitative moderators to explore qualitative responses within and between groups. Post-transcript review used a multi-phase process. Given the exploratory nature of the study, the authors looked for emerging themes, and simultaneous and descriptive coding was employed (Saldaña, 2012). Initially, the primary author created a provisional codebook. Through collaboration between the first author and senior researchers, the codebook was refined using an iterative process (three cycles of revisions) that included meetings, codebook updates, and discussion. The final version of the codebook included parent and child codes, as well as definitions of codes. Each transcript was coded using an inductive approach. We compared and contrasted themes by gender of the youth groups, by facilitators versus administrators, as well as links with previous research.

The Western University Non-Medical Research Ethics Board (NMREB) reviewed and approved all study protocols. Further approval was granted by the Manitoba Justice Corrections Division.

## **3.8 Results**

### **3.8.1 Quantitative Findings**

**Implementation fidelity.** In phase one, four of the six HRPP groups (67%) were implemented with high fidelity. The other two HRPP programs were implemented with medium fidelity. Results from session tracking forms, online implementation surveys, and

focus groups consistently indicated that it was difficult for facilitators to complete all of the session topics within the recommended time frame. The most common deviation from the program was skipping the final cool down activity during a session because they ran out of time. Overall, 50% of the HRPP groups experienced this challenge.

In phase two, seven of HRP-Enhanced groups (64%) were implemented with high fidelity. The remaining four groups were implemented with medium fidelity. Consistent with results from phase one, facilitators reported that it was difficult to complete all sessions topics within the recommended timeframe. Facilitators noted that youth were very engaged in discussing the program content and the duration of sessions activities often exceeded the recommended timeframe.

**Completion rates.** For the purposes of the current study, completion of the original HRPP was defined as a youth participating in at least 11 of 14 the sessions (i.e., approximately 80% of the program). Completion of the HRP-Enhanced was defined as participating in at least 12 of the 16 sessions (75% of the program). Completion rates were operationalized based on the Standardized Program Evaluation Protocol (SPEP) developed by Mark Lipsey (Lipsey, 2009; Lipsey, Howell, Kelly, Chapman, & Carver, 2010). Completion rates were calculated using the attendance tracking sheets. Youth participation in the programs was voluntary at all sites, and they could choose to drop out at any time with no consequences.

In phase one, the youth completion rate for the HRPP was 66%. In phase two, the youth completion rate for the HRP-Enhanced was 78%. Results from a Chi-square test for independence (with Yates Continuity Correction) indicated no significant differences between the completion rates of the HRPP and HRP-E,  $\chi^2(1, n = 148) = 2.07, p = .15$ . Furthermore, in phases one and two, there were no significant differences for completion rates between gender or sites.

### **3.8.2 Qualitative Findings**

Utilizing the covariate feature of Dedoose, we were able to explore themes based on site and gender. In phase one, there were no differences between the correctional staff reported successes and challenges of the HRPP for male versus female groups. Likewise,



there were no differences between the overall successes and challenges of the program based on site. In phase two, there were no gender or site differences between the youth perceived successes and challenges of the HRP-Enhanced. Below we discuss themes that highlight the successes, challenges, recommendations, and considerations for implementing the HRPP in correctional settings (phase one). Additionally, we discuss themes that highlight the success and challenges of the adapted HRP-Enhanced (phase two).

## *1. Phase One: Staff Reported Successes of the HRPP in Youth Justice Settings*

### *1.1. Feasibility of HRPP*

Across sites, the program facilitators expressed that it was feasible to implement the program with youth offenders. Facilitators could select youth who would likely remain in custody for the length of the HRPP, and creating a closed and relatively stable group allowed for the development of positive group dynamics. *“They provided support and encouragement. They would help each other out and laugh”* (Facilitator 1). The staff also explained that throughout the program, the group cohesiveness increased which created a sense of safety and trust among the youth in both male and female groups.

*“Especially during the sharing part, there were some youth who were really reluctant, but I think we had three or four who really kind of surprised us with their sharing. They really shared a lot, personal stuff, their experiences with relationships you know being in a very tough relationship. Yeah, I guess as we progressed about halfway through, they just kind of started to trust in the process and started really sharing their personal stuff with us and with the girls that we have here, that’s a big step because a lot of their experiences have been very traumatic”* (Facilitator 1).

### *1.2. Acceptability of HRPP*

Correctional staff described a high degree of acceptability related to the HRPP program’s engaging activities and the program’s alignment with the responsibility principle. Facilitators expressed that the HRPP promoted youth engagement, and the youth enjoyed the program. This theme applied to both male and female youth groups. *“This is a very fun program for them. Kids get involved a lot, so it kind of gets them engaged in a different way”* (Facilitator 4). *“It’s an excellent program! The youth have been very responsive to*

*the interactivity of it and have stated that it is their favourite program that we offer”* (Facilitator 6).

The program facilitators also described the interactive activities as notable successes of the HRPP.

*“I think the strength is definitely the interaction and the discussions. By far the most favourite thing for me to see and I think is the feedback that we're getting from the residents is they enjoy how interactive it is, they're not just sitting there and listening, they're actually going and doing stuff”* (Facilitator 1).

The responsivity principle describes that correctional programs should be matched to the youths’ learning style, abilities, mental health, gender, age, and cultural background (McCormick, Peterson-Badali, & Skilling, 2015). There was evidence that the HRPP was somewhat consistent with responsivity, but also required improvements in this regard. To some degree, the HRPP was described as responsive to the youth,

*“It’s that responsivity factor which is so very important in correctional programs, we ground all programs in 3 basic principles – risk, need, responsivity. Responsivity factor is hugely important. It has to be delivered in a way that is responsive to the recipients and their learning style, and what I’ve heard, is that the Healthy Relationships Plus does that and it does so in an engaging manner”* (Administrator 4).

Consistent with the universal design of the HRPP, staff expressed that the program was a good fit for varied ages, gender, and cultural backgrounds.

*“I think everyone could benefit from this. Relationships obviously in their [the youths’] lives have been, I like to use the word fragmented and very unhealthy. The material is beneficial for everyone and I would like to see it delivered as part of our core program”* (Facilitator 5).

Staff also felt that the program did not require specific cultural adaptations.

*“I think it’s because the relationships. Everyone has different relationships. All these youth have trouble with relationships, whether they're Aboriginal, whether they're white, whether they're from Somalia, you know what I mean?”* (Facilitator 4).

*“I think the Aboriginal video examples (included in the HRPP) were essential because it normalizes for them that you know these people are us. I don't know if any of the written material needs to be changed in any type of Aboriginal way” (Facilitator 6).*

Some responsivity considerations (e.g., learning style and cognitive abilities of the youth) were identified as lacking in the HRPP. Some participants indicated that the written tasks were difficult for the youth, *“Written responses are too time-consuming. Our clientele does not have very good reading or writing skills”* (Facilitator 6). To address this issue, participants suggested adding more visuals and activities that rely less heavily on literacy skills.

*“Even just more options, so rather than having a low literacy version and a regular version, you could put just an additional page in the regular sessions for low functioning residents. I would rather see that than a whole separate program. I would rather see it incorporated in as appendices in each session rather, than a whole other book”* (Facilitator 6).

### *1.3. Utility of HRPP*

The HRPP program's focus on mental health, suicide prevention, peer and dating relationships, and drug and alcohol use was described to be highly useful and relevant to youth justice populations. The staff reported that the HRPP promoted meaningful and relevant discussions for the youth in both male and female groups.

*“Dating violence is something that needs to be talked about and we don't really have anything that really kind of addresses that here. So it's really good that we have a session on it”* (Facilitator 1).

Facilitators also believed that discussions about suicide prevention were well received by the youth and necessary in correctional environments.

*“I enjoy teaching the mental health and wellbeing session. A lot of participants in our program have witnessed a suicide or suicide attempt. Even more know at least one person who has committed suicide. A lot of our participants are at a high risk of suicide themselves. This is a much needed topic and the program provides a safe place to talk about it and become more aware of the warning signs. They don't know the warning signs. It is a really important subject to talk about especially with our clientele and I think it's just really a good session”* (Facilitator 3)

*“We had a guy in our last class who said that you know he basically cut down his friend (from a hanging death by suicide) and you know he's thinking back, he's like 'I did notice those things'. And he was able to talk about it and it's a place where you know like nobody really wants to talk about it in everyday, like 'hey, want to talk about that?', but this is a place where they can open up and talk about it because it's the topic. Some of the feelings that are brought up are hard to feel, but at the end of the day they're happy too. I think it's just good to know the information” (Facilitator 6).*

When asked if the HRPP addressed any of the risk factors that contribute to offending, Facilitator 3 stated, *“Yeah, drugs and alcohol, substance use, friends, relationships, examining relationships. Those are probably the biggest ones”*. This sentiment was also shared by other staff and applied to both male and female youth groups.

*“What I've read and heard about the Healthy Relationships Plus, it fits with our programming here which fits with our current risk assessment tool the YLS/CMI (Youth Level of Service/Case Management Inventory) which scores and indicates the top four risk areas and criminogenic needs in a youth's life. And you know, be it alcohol and drugs, or pro-criminal attitudes, anti-social patterns, whatever label you want to put on it. Absolutely it (the HRPP) fits in and can target some of those areas” (Administrator 2)*

On the other hand, since the HRPP was not developed specifically for youth justice populations, it did not sufficiently target all criminogenic needs. The central eight criminogenic needs include procriminal attitudes, antisocial personality, procriminal companions, family and/or marital difficulties, substance abuse, employment, school, and leisure challenges (Andrews & Bonta, 2010). The staff highlighted that the HRPP does not adequately address all of the above risk factors.

*“It covers a lot of different things. I don't know if it goes enough in depth in each one though, but I mean it's a tough balance, it covers a lot of topics, but it doesn't go in depth as like a specific substance abuse program” (Facilitator 3).*

## *2. Phase One: Staff Reported Challenges with the HRPP in Youth Justice Settings*

Despite the successes of the HRPP implementation in youth justice settings, the program was not without challenges.

## 2.1. Setting Characteristics Challenges

To date, the HRPP has been implemented in diverse community settings, including schools, community organizations, and women’s shelters. However, these settings do not pose the safety and security risks that are present in youth custody facilities. Staff in youth custody facilities must be cognizant of many factors including the room set-up, equipment and materials that may be used as weapons, gang affiliations, and aggressive behaviours. As one staff mentioned, *“Definitely the gang aspect, we need to move guys around for safety and security in our facility”* (Administrator 2). Based on the feedback from this sample, some of the HRPP activities were not appropriate for male and female youth correctional settings and needed to be omitted in order to maintain a safe and secure environment. *“We could not do the chair activity due to the possibility of fights breaking out due to our population, so we had to modify with no contact”* (Facilitator 4). *“Interpersonal relationships and conflicts among the participants meant that we had to skip the contact games and activities for safety”* (Facilitator 1).

In addition to safety and security concerns, staff also highlighted the challenge of youth attrition in both male and female youth groups. Staff tried to alleviate turnover in the group by consciously selecting youth participants: *“Your most stable groups are groups who are made up of guys that have been here for a considerable period of time”* (Administrator 2).

Despite their efforts to select stable groups, movement in youth justice settings is often inevitable due to short sentences, problem behaviour, rescheduled court dates, transfers, or early release. Staff acknowledged attrition and movement is a logistical challenge with scheduling and offering any programming in youth justice facilities.

*“Correctional centres, yes that’s an issue with the shorter sentences lengths and so on, it always has been and always will be. It certainly is disruptive but it’s the reality, but I think that the potential for success is there”* (Administrator 1).

## 2.2. Youth Characteristics Challenges

Another obstacle with HRPP implementation was the skills practice scenarios were not compatible with the lived experiences of youth involved in the justice system. For

example, scenarios included in the program encourage youth to consider how they would respond if a peer offered them weed (marijuana) or encouraged them to skip class. Many youth offenders have a history of behavioural problems including violating rules, societal norms and laws (Murray & Farrington, 2010), and the HRPP scenarios were often not at the appropriate risk level. Across both sites, the facilitators highlighted the incongruence, and this applied to both male and female youth groups. *“A lot of the scenarios are too young and immature for our clientele”* (Facilitator 3). *“Role plays were not realistic”* (Facilitator 2). *“Participants had difficulty relating to the scenarios and were not taking it seriously”* (Facilitator 4).

### 3. Phase One: Recommendations for the HRPP

The facilitators and administrators had a wealth of experience (ranging from less than 5 years to 25 years) working with justice-involved youth and were readily able to provide recommendations to improve the relevance and compatibility of the HRPP with correctional settings.

#### 3.1. Additional content on dating violence

Staff expressed an interest in having additional content on healthy and unhealthy relationships. *“I think there could be a more expanded session on the dating violence. Because I think it's such a normal thing for dating and domestic violence”* (Facilitator 4). *“I would really like more about examining whether this relationship is healthy or not. And I think there could be more in that area”* (Facilitator 6). While this theme was based on only two facilitators it was important given the prevalence and impact of teen dating violence (Wincentak, Connolly, & Card, 2017). In addition, the facilitators identified a need for dating violence prevention programs specifically for youth involved in the justice system.

#### 3.2. Create a shared culture

Another recommendation was using HRPP training to create a shared healthy youth relationships culture among all staff. Youth justice settings aim to decrease unhealthy, antisocial behaviours and increase healthy, prosocial behaviours. Behavioural change

techniques include having a set goal, a target standard of behaviour, monitoring, feedback, prompts, reinforcement, and opportunities for behavioural rehearsal (Michie, Johnston, Francis, Hardeman, & Eccles, 2008). When all staff are working towards the same goal and using a shared, consistent language, they can maximize opportunities for acquiring and mastering healthy relationships, communication, and self-regulation skills. Across interviews and focus groups, creating a shared culture emerged as a critical aspect of correctional programming.

Research suggests that to improve outcomes for youth involved in the justice system, youth correctional facilities must engage in capacity building for all staff (Mathur, Clark, & Schoenfeld, 2009). All staff, from superintendents to frontline workers, are stakeholders in the positive development of youth and each stakeholder can ensure that prosocial skills are being fostered and reinforced. Unfortunately, correctional programs are often taught in isolation, with knowledge of the program content and objectives being limited to program facilitators and superintendents. The participants highlighted the need for education for all staff in order to create an environment that promotes the generalization of healthy and prosocial skills.

*“That’s kind of a gap in our system because you know if we’re teaching this right? And we only see them (the youth) in the program, then how are the staff supposed to know what they’re learning? I would say it’s taught as a compartmentalized program and it needs to be run as an integrated program. We want youth to remember through repetition, repetition, repetition” (Facilitator 5).*

*“I really want to have a couple of information sessions, maybe hour-long information sessions, for the staff so they understand the basic principles of what is involved in Healthy Relationships and how it ties into what we currently do. So if the youth leave program and that evening have a real life scenario happen, staff could be equipped to prompt them” (Administrator 2).*

Shufelt and Coccozza (2006) suggested that to effectively respond to the needs of complex needs of youth offenders, the justice system should strive for increased collaboration and continuity of service. Ideally, all youth justice services should be coordinated and accountable for meeting the needs of youth. This extends beyond custody facilities and includes the youths’ success in the community.

*“It can't be a standalone document that other folks aren't aware of. So if it's program facilitators delivering this, other folks that are working with the same youth need to understand what the content is so that they can support and empower the youth to utilize skills that they're gaining from attending the program. And possibly even making sure that the community portion, like probation officers, that there's an understanding there as well. I don't think they need to know the intricate details of the program but certainly an overview of the key principles” (Administrator 4).*

#### 4. Phase One: Considerations for implementing HRPP in correctional settings

##### 4.1. Peer contagion

Peer contagion is an important consideration in youth correctional programs. The literature suggests that to reduce the likelihood of peer contagion, programs should separate youth by risk level, be highly structured, evidence-based, and implemented by facilitators that can identify and prevent antisocial communication and behaviour (Utah Criminal Justice Center, 2010). When asked if peer contagion was observed, staff indicated that it was not an issue in the implementation of the HRPP.

*“No and I'll tell you why. Because of the YCJA (Youth Criminal Justice Act), we're only incarcerating the most violent and more repeat offenders. So they are all, the vast majority, assessed as high and very high risk youth. We're mindful of that (peer contagion) to a point here, but it's not it's not a big consideration because again the vast majority of our guys are high risk, very high risk factors and have been have been criminally and or gang involved for a number of years” (Administrator 3).*

In addition to considering criminogenic needs, selecting youth who were motivated to change was a strategy employed by facilitators to manage peer contagion, since youth motivation to participate in programming is a responsivity factor.

*“When we're doing program, we don't take people that are pre-contemplative. We do our screening for programs and put a lot of work and effort into trying to avoid that situation. When we have those guys or those girls that are pre-contemplative we wouldn't take them just because I mean it can sabotage the group. It's always for the good of the group” (Facilitator 4).*



#### 4.2. Trauma-informed approach

When asked if any of the youth had histories of trauma and whether their past experiences made it difficult to discuss certain HRPP topics, staff emphasized the high prevalence rates of trauma among both the male and female youth. *“The vast majority of youth, probably more than the numbers even show, have endured multiple traumas”* (Administrator 4). Interestingly, some staff mentioned that the discussions that occurred in the HRPP served to empower the youth.

*“During the sessions, the girls appeared to be more empowered to actually speak about their experiences. It was reinforcing that ‘yeah what was done was not okay and should never have been done to anyone’ and they felt like ‘oh gee we can actually talk about it’* (Facilitator 1).

While the facilitators did not observe behavioural indicators that a youth was experiencing discomfort with a topic due to their traumatic history during facilitation, they also acknowledged that they did not see the youth after the program when difficulties may arise. *“I don’t recall anyone crying, unless it happened later on”* (Facilitator 2).

*“We like to end (each session) with uplifting videos. Like the mental health session, we ended with a funny video so that they could leave on a giggle. But having said that, we don’t see the repercussions at 8 o’clock, 9 o’clock at night when they’re going to bed. Without seeing that I can’t connect it to what was delivered in program”* (Facilitator 6).

Given both the high prevalence of trauma among incarcerated youth and the sensitive topics included in the HRPP, staff noted the importance of staff training in order to appropriately respond to youths’ needs: *“Anything can sort of trigger trauma. We need to therefore be trauma-informed, which we are, we offer that to all of our staff, and it’s a very important issue there’s always a concern”* (Administrator 2).

## *5. Phase Two: Youth Perceived Successes of HRP-Enhanced*

### *5.1. Acceptability of the HRP-Enhanced*

Following the staff feedback received in phase one, the HRPP program was adapted and the revised program was entitled HRP-Enhanced. In phase two, youth shared their perspectives on the acceptability, utility, and challenges with the HRP-Enhanced. The literature suggests that one measure of acceptability and satisfaction is whether program recipients would recommend the program (Sekhon, et al., 2017). When asked if they would recommend the HRP-Enhanced program, both male and female youth reported that the program would benefit other justice-involved youth.

*“Yeah, I would recommend it because it’s not only good for the relationships around you, like improving friendships more and your peers around you. It gives you a lot better idea of all the resources you got and how to handle yourself and the negative and positive effects of choices” (Female, age 17).*

*“Honestly, like in my opinion, I would recommend it to everybody that comes here because everybody's here for a reason. Obviously, committing crimes. But there's stuff that led up to the crimes, like started from one little thing and then it just snowballed into something bigger and bigger. It could have started from the kid growing up around it or they could have been peer pressured into it. So, it could help a lot of people” (Male, age 16).*

### *5.2. Utility of the HRP-Enhanced*

During the focus groups, youth also identified a number of strengths related to HRP-Enhanced program, demonstrating good acceptability. Specifically, both male and female youth described the program as engaging and interactive. Additionally, they consistently reported that the discussion topics included in the program were relevant and meaningful. Table 2 summarizes the identified strengths and supporting quotes.

Table 3-2 *Utility of the HRP-Enhanced*

| Themes                    | Exemplar Quotes   |
|---------------------------|---|
| Interactive Program       | <p><i>“I actually learned some stuff, it wasn’t like one of those boring programs”</i> (Female, age 16).</p> <p><i>“I like how we’re able to move lots or like use our hands instead of sitting around all the time and just writing. We’re actually able to go hands on with some activities”</i> (Male, age 19).</p>  |
| Relevant Topics Discussed | <p><i>“Most of this relates to my life because everything that it states in there, I’ve been through it all. So I don’t know, it’s kind of like my life story. Everything related in some sort of way”</i> (Male, age 16).</p> <p><i>“I liked when you talked about healthy versus abusive relationships. A lot of the youth here I think benefited from that. Lots of people grew up in like, for example, broken homes and they don’t know healthy relationships, all they know is abuse. So it helps for them to know healthy versus negative”</i> (Female, age 17).</p> |

6. *Phase Two: Youth Perceived Challenges with HRP-Enhanced*

During the focus groups, the youth also identified some of the program’s weaknesses. Notably, some activities were less successful due to small group numbers. Other topics raised painful feelings for some youth. Although the HRP-Enhanced was developed using a trauma-informed framework, that did not preclude the possibility of activating distressing memories. A few female youth described that it was difficult to discuss some of the sensitive topics included in the program. *“It made me think of my last relationship. It was very abusive”* (Female, age 16). *“I didn’t like the abusive relationship stuff, like domestic violence. There’s just like a lot of abuse in my family so that’s why I didn’t like that subject”* (Female, age 16).

While some female youth indicated that it was difficult discussing content that activated painful memories, one youth commented that although it can be uncomfortable, discussions can facilitate positive change.

“How we grew up affects how we are today. I came from a family that used to use lots of alcohol, and that’s how I lost my grandpa and auntie about two years back. And so that really stood out to me because that’s not something I’m comfortable talking about with others, but it’s you know, stuff has to change, or else it’s just going to be the same for me” (Female, age 18).

### 3.9 Discussion

The purpose of this two-phase study was to evaluate the feasibility of a universal SEL program (HRPP) in youth justice settings and determine the adaptations needed to better match the complex needs of justice-involved youth. In phase one, correctional staff indicated high levels of feasibility, acceptability, and utility of the HRPP, while also highlighting several important adaptations for SEL programs in youth correctional environments. Following phase one, the HRPP program was adapted to create the *Healthy Relationships Program-Enhanced (HRP-Enhanced)* (Figure 2). Phase Two piloted the HRP-Enhanced and findings showed that youth reported high levels of acceptability and utility.

| <b>Recommendation</b>               | <b>Adaptation</b>   | <b>Description</b>   |
|-------------------------------------|---|--|
| Responsivity<br>consideration       | Literacy supported options                                | Additional alternative activities with reduced reading and writing expectations  |
| Relevant content                    | Higher risk scenarios                                     | Additional higher risk scenarios for skills practice activities  |
|                                     | Harm-reduction  | Discussions to promote strategies for safer substance use  |
|                                     | Dating violence, sexual exploitation, and safety planning | Additional content on unhealthy relationships  |
| Recognize high prevalence of trauma | Trauma-informed   | Designed to resist re-traumatization by offering alternative activities, avoided extreme imagery, included trauma-informed framework into facilitator training |

Figure 3-2. Adaptations included in the HRP-Enhanced Program

The literature on programs for justice-involved youth emphasizes the importance of the amount (e.g., dosage) and implementation quality (e.g., fidelity) of the intervention. Lipsey (2010) reported high fidelity and program implementation quality are associated with greater effects. The current study found that both the original HRPP and HRP-Enhanced program were generally implemented with high fidelity. In addition, Lipsey (2010) indicated that high dropout rates and incomplete service delivery are associated with smaller effects. Results from the current study showed that both the HRPP and HRP-Enhanced had good completion rates, 66% and 78% respectively. The literature also suggests that attendance and completion are indicators of engagement in youth justice programs. Specifically, when youth are engaged, they are more motivated and committed to participating in programs (Mason & Prior, 2008).

In phase one, the original HRPP proved to be appropriate for youth justice settings. Staff described that the youth were engaged and enjoyed the program, and that the youth particularly appreciated the interactive teaching strategies, as well as the relevant content (e.g., dating violence and suicide). The discussions and activities included in the HRPP appeared to facilitate the development of meaningful learning. Meaningful learning is defined as the process in which learners actively relate new information to their previous knowledge and experiences (Ausubel, 1963). For example, according to staff, youth recognized that some of their past relationships were unhealthy. Additionally, following a group discussion on suicide, a staff recalled a youth who retrospectively identified the warning signs of his friend's suicidal behaviours. Our findings support previous studies that highlighted how interactive and cooperative learning activities can promote meaningful learning (Grabe & Grabe, 2007; Karppinen, 2005).

Similarly, in phase two, the youth described the HRP-Enhanced program as engaging, and they appreciated the interactive activities. Research consistently indicates that justice-involved youth experience higher reading difficulties compared to the general adolescent population (Shelley-Tremblay, O'Brien, & Langhinrichsen-Rohling, 2007). Some studies have found that the reading levels of youth offenders were one to two years behind their nondelinquent peers (Baltodano, Harris, & Rutherford, 2005; Foley, 2001). As a result, these youth may have difficulty comprehending written program material and

may experience frustration. In the current study, both male and female youth reported that they preferred the hands-on activities included in the HRP-Enhanced, compared to other programs that place greater emphasis on reading and writing. If youth can process the material, they will likely find the program more enjoyable and will be more likely to achieve the intended outcomes (Mason & Prior, 2008). The youth also perceived the program content to be meaningful and relevant. Finally, youth reported that they would recommend the HRP-Enhanced program to other youth.

### **3.10 Implications**

Our findings have important implications for youth justice programming. First, existing SEL programs, such as the HRPP, seem promising in terms of implementation with youth justice populations; however, the content must be adapted to better meet the needs of youth offenders and the constraints of correctional settings. Second, results highlighted the importance of creating a shared organizational culture. Offering an in-service training on SEL competencies and the HRPP is a strategy to achieve an organizational culture that embodies consistency and collaboration among staff. This training opportunity would serve as professional development and provide a platform for all staff to discuss how to consistently respond to the strengths and needs of the youth, while using the HRPP language and core principles. Third, stakeholders and policymakers who influence the youth justice system should consider incorporating SEL programs into the rehabilitation framework.

### **3.11 Limitations**

Limitations of this study include the challenge of undertaking a rigorous gender analysis. During each HRPP focus groups, facilitators shared their experiences implementing both male and female groups. Consequently, comments relating to male and female groups were captured within the same transcript. Some responses were coded for either male or female groups because the participant explicitly referred to the group gender; however, not all responses were able to be coded by group gender. Furthermore, our self-report measures of implementation fidelity were a limitation. Another limitation is the generalizability of the results. Most of the youth groups in phase one and phase two were

male and Indigenous; however, these demographics mirror those of the youth justice population in Canada (Munch, 2012). Finally, the youth justice jurisdiction in the current study was very interested and eager to implement the programs and results may not generalize to other youth correctional facilities.

### **3.12 Conclusion**

To date, the research on SEL programs has focused primarily on community school-based implementation. At this time, the HRP-Enhanced program is the only SEL program designed specifically for youth correctional facilities. There is much work that remains to be done to improve the transmission of knowledge about SEL programs with youth offenders. While there is a lack of rigorous empirical research or program evaluations for SEL programs with youth offenders, this study found that the HRPP and the adapted HRP-Enhanced are generally relevant and appropriate to youth justice settings. These results are promising, and future research is needed to investigate SEL programs in youth justice settings further.

### 3.13 References

- Allard, T., Ogilvie, J., Stewart, A. (2007). The efficacy of strategies to reduce juvenile offending. *Justice Modelling at Griffith (JMAG)*, Griffith University.
- Andrews, D. A., & Bonta, J. (2010). Rehabilitating criminal justice policy and practice. *Psychology, Public Policy, and Law*, 16(1), 39.
- Ausubel, D. P. (1963). *Psychology of meaningful verbal learning: An introduction to school learning*. New York: Grune & Stratton.
- Baltodano, H.M., Harris, P.J., & Rutherford, R.B. (2005). Academic achievement in juvenile corrections: Examining the impact of age, ethnicity, and disability. *Education and Treatment of Children*, 28, 361-379.
- Breitenstein, S. M., Gross, D., Garvey, C. A., Hill, C., Fogg, L., & Resnick, B. (2010). Implementation fidelity in community-based interventions. *Research in nursing & health*, 33(2), 164-173.
- Brooks, C., Henry, R., Daschuk, M. (2015). Aboriginal youth gang involvement: Decolonizing the multicausal perspectives towards community strategies and social justice. In R. Corrado & A. Leschied (Eds.), *Serious and Violent Young Offenders and Youth Criminal Justice: A Canadian Perspective*, 291-324. Vancouver: Simon Fraser University Press.
- Carswell, K., Maughan, B., Davis, H., Davenport, F., & Goddard, N. (2004). The psychosocial needs of young offenders and adolescents from an inner-city area. *Journal of Adolescence*, 27, 415–428.
- Case, S., & Haines, K. (2015). Children first, offenders second: The centrality of engagement in positive youth justice. *The Howard Journal*, 54(2), 157-175.
- CASEL. (2015). *Social and emotional learning core competencies*. Retrieved from <http://www.casel.org/social-and-emotional-learning/core-competencies/>
- CDC-Centers for Disease Control and Prevention. (2010). *Suicide facts at a glance*. 4-1.



- Cohen, M., & Piquero, A. (2009). New evidence on the monetary value of saving a high risk youth. *Journal of Quantitative Criminology*, 25(1), 25-49.
- Corcoran, R. P., Cheung, A. C., Kim, E., & Xie, C. (2018). Effective Universal school-based social and emotional learning programs for improving academic achievement: A systematic review and meta-analysis of 50 years of research. *Educational Research Review*, 25, 56-72.
- Correctional Service Canada. (2007). Education programs and services for offenders. *Commissioner's Directive 720*.
- Craig, W., Schumann, L., Petrunka, K., Khan, S., & Peters, R. (2011). Government costs associated with delinquent trajectories. *International Journal of Child, Youth, and Family*, 2(1), 263-293.
- Crooks, C., Chiodo, D., Dunlop, C., Lapointe, A., & Kerry, A. (2018). The Fourth R: Considerations for implementing evidence-based healthy relationships and mental health promotion programming in diverse contexts. In A. Leschied, D. Saklofske, & G. Flett (Eds.), *The Handbook of Implementation of School Based Mental Programs*. New York, NY: Springer Publishing.
- Crooks, C. V., Chiodo, D., Zwarych, S., Hughes, R., & Wolfe, D. A. (2013). Predicting implementation success of an evidence-based program to promote healthy relationships among students two to eight years after teacher training. *Canadian journal of community mental health*, 32(1), 125-138.
- Crooks, C., Scott, K., Broll, R., Zwarych, S., Hughes, R., & Wolfe, D. (2015). Does an evidence-based healthy relationships program for 9<sup>th</sup> graders show similar effects for 7<sup>th</sup> and 9<sup>th</sup> graders? Results from 57 schools randomized to intervention. *Health Education Research*, 1-7.
- Crooks, C., Scott, K., Ellis, W., Wolfe, D. (2011). Impact of universal school-based violence prevention program on violent delinquency: Distinctive benefits for youth with maltreatment histories. *Child Abuse & Neglect*, 35, 393-400.

- Crooks, C., Scott, K., Wolfe, D., Chiodo, D., & Killip, S. (2007). Understanding the link between childhood maltreatment and violent delinquency: What do schools have to add? *Child Maltreatment, 12*(3), 269-280.
- Crooks, C., Zwarych, S., Hughes, R., & Burns, S. (2015). *The Fourth R implementation manual: Building for success from adoption to sustainability*. University of Western Ontario.
- Cusimano, M. D., & Sameem, M. (2010). The effectiveness of middle and high school-based suicide prevention programmes for adolescents: a systematic review. *Injury Prevention, 17*, 43-49.
- Dahlberg, L., & Potter, L. (2001). Youth violence: Developmental pathways and prevention challenges. *American Journal of Preventive Medicine 20*, 3-14.
- Day, A., Howells, K., & Rickwood, D. (2003). *The Victorian juvenile justice rehabilitation review*. Melbourne: Department of Human Services.
- Day, D., Nielsen, J., Ward, A., Sun, Y., Rosenthal, J., Duchesne, T., ... Rossman, L. (2012). Long-term follow-up of criminal activity with adjudicated youth in Ontario: Identifying offence trajectories and predictors/ correlates of trajectory group memberships. *Canadian Journal of Criminology and Criminal Justice, 54*(4), 377-413.
- Department of Justice Canada. (2013). *The youth criminal justice act: Summary and background*. Retrieved from <http://www.justice.gc.ca/eng/cj-jp/yj-jj/tools-outils/pdf/back-hist.pdf>
- De Vries, S., Hoeve, M., Assink, M., Stams, G., & Asscher, J. (2015). Practitioner Review: Effective ingredients of prevention programs for youth at risk of persistent juvenile delinquency- recommendations for clinical practice. *Journal of Child Psychology and Psychiatry, 56*(2), 108-121.

- Dierkhising, C. B., Ko, S. J., Woods-Jaeger, B., Briggs, E. C., Lee, R., & Pynoos, R. S. (2013). Trauma histories among justice-involved youth: Findings from the National Child Traumatic Stress Network. *European Journal of Psychotraumatology*, *4*, 79-91.
- Donker, A., Bulten, E., Thornberrr, T. & Matsuda, M. (2012). Explanations of offending. In R. Loeber, M. Hoeve, N. Slot, & P. Van Der Laan (Eds.), *Persisters and Desisters in Crime from Adolescence into Adulthood* (77-104). New York, NY: Routledge.
- Drerup, L. C., Croysdale, A., & Hoffmann, N. G. (2008). Patterns of behavioral health conditions among adolescents in a juvenile justice system. *Professional Psychology: Research and Practice*, *39*, 122–128.
- Durlak, J. A., & DuPre, E. P. (2008). Implementation matters: A review of research on the influence of implementation on program outcomes and the factors affecting implementation. *American journal of community psychology*, *41*(3-4), 327-350.
- Durlak, J. A., & Weissberg, R. P. (2007). *The impact of after-school programs that promote personal and social skills*. Chicago, IL: Collaborative for Academic, Social, and Emotional Learning.
- Durlak, J., Weissberg, R., Dymnicki, A., Taylor, R., & Schellinger, K. (2011). The impact of enhancing students' social and emotional learning: A meta-analysis of school-based universal interventions. *Child Development*, *82*(1), 405-432.
- Eldridge, S. M., Lancaster, G. A., Campbell, M. J., Thabane, L., Hopewell, S., Coleman, C. L., & Bond, C. M. (2016). Defining feasibility and pilot studies in preparation for randomised controlled trials: development of a conceptual framework. *PloS one*, *11*(3), 1-22.
- Exner-Cortens, D., Wolfe, D. A., Crooks, C. V., & Chiodo, D. (2019). A randomized controlled evaluation of a universal healthy relationships program for youth. *Canadian Journal of School Psychology*

- Fagan, A., Van Horn, M., Hawkins, J., & Arthur, M. (2007). Gender similarities and differences in the association between risk and protective factors and self-reported serious delinquency. *Prevention Science* 8(2), 115-124.
- Foley, R.M. (2001). Academic characteristics of incarcerated youth and correctional educational programs: A literature review. *Journal of Emotional and Behavioural Disorders*, 9(4), 248-259.
- Grabe, M., & Grabe, C. (2007). Integrating technology for meaningful learning (5th ed.). New York: Houghton Mifflin Company.
- Grigorenko, E., Macomber, D., Hart, L., Naples, A., Chapman, J., Geib, C., ... Wagner, R. (2015). Academic achievement among juvenile detainees. *Journal of Learning Disabilities*, 48(4), 359-368.
- Guerra, N., Kim, T., and Boxer, P. (2008). What works: Best practices with juvenile offenders. In R. Hoge, N. Guerra, & P. Boxer (Eds.), *Treating the Juvenile Offender*, 79-102. New York, NY: Guilford Press.
- Guerra, N., Williams, K., Tolan, P., & Modecki, K. (2008). Theoretical and research advances in understanding the causes of juvenile offending. In R. Hoge, N. Guerra, & P. Boxer (Eds.), *Treating the Juvenile Offender*, 79-102. New York, NY: Guilford Press.
- Howard, J., Lennings, C. J., & Copeland, J. (2003). Suicidal behavior in a young offender population. *Crisis*, 24, 98-04.
- Jencks, J. W., & Leibowitz, G. S. (2018). The impact of types and extent of trauma on depressive affect among male juvenile sexual offenders. *International journal of offender therapy and comparative criminology*, 62(5), 1143-1163.
- Karppinen, P. (2005). Meaningful learning with digital and online videos: theoretical perspectives. *Association for the Advancement of Computing in Education Journal*, 13(3), 233-250.

- Katz, C., Bolton, S. L., Katz, L. Y., Isaak, C., Tilston-Jones, T., Sareen, J., & Swampy Cree Suicide Prevention Team. (2013). A systematic review of school-based suicide prevention programs. *Depression and anxiety*, 30(10), 1030-1045.
- Kenny, D. T., Lennings, C. J., & Munn, O. A. (2008). Risk factors for self-harm and suicide in incarcerated young offenders: implications for policy and practice. *Journal of Forensic Psychology Practice*, 8(4), 358-382.
- Lafontaine, T., Ferguson, M., & Wormith, J. (2005). *Street gangs: A review of the empirical literature on community and corrections-based prevention, intervention, and suppression strategies*. Regina, SK: Department of Corrections and Public Safety.
- Lansing, A. E., Washburn, J. J., Abram, K. M., Thomas, U. C., Welty, L. J., & Teplin, L. A. (2014). Cognitive and academic functioning of juvenile detainees: Implications for correctional populations and public health. *Journal of Correctional Health Care*, 20(1), 18-30.
- Lapshina, Crooks, & Kerry. (2018). Changes in depression and positive mental health among youth in a healthy relationships program. *Canadian Journal of School Psychology*, 1-17.
- Latimer, J., Dowden, C., Morton-Bourgon, K., Edgar, J., and Bania, M. (2003). *Treating youth in conflict with the law: A new meta-analysis*. Department of Justice Canada.
- Leone, P., Meisel, S., & Drakeford, W. (2002). Special education programs for you with disabilities in juvenile corrections. *The Journal of Correctional Education*, 53, 46-50.
- Leschied, A. (2015). The correlates of youth violence: Evidence from the literature. In R. Corrado & A. Leschied (Eds.), *Serious and Violent Young Offenders and Youth Criminal Justice: A Canadian Perspective*, 123-151. Vancouver: Simon Fraser University Press.

- Lipsey, M. W. (2009). The primary factors that characterize effective interventions with juvenile offenders: A meta-analytic overview. *Victims and offenders*, 4(2), 124-147.
- Lipsey, M. W. (2014). Interventions for juvenile offenders: A serendipitous journey. *Criminology & Public Policy*, 13(1), 1-14.
- Lipsey, M. W., & Howell, J. C. (2012). A broader view of evidence-based programs reveals more options for state juvenile justice systems. *Criminology & Public Policy*, 11(3), 515-523.
- Lipsey, M., Howell, J., Kelly, M., Chapman, G., & Carver, D. (2010). Improving the effectiveness of juvenile justice programs: A new perspective on evidence-based practice. Centre for Juvenile Justice Reform.
- MacLeod, K. B., & Brownlie, E. B. (2014). Mental health and transitions from adolescence to emerging adulthood: developmental and diversity considerations. *Canadian Journal of Community Mental Health*, 33(1), 77-86.
- Mason, P., & Prior, D. (2008). Engaging young people who offend. *Youth Justice Board*.
- Mathur, S. R., Clark, H. G., & Schoenfeld, N. A. (2009). Professional development: A capacity-building model for juvenile correctional education systems. *Journal of Correctional Education*, 164-185.
- McCormick, S., Peterson-Badali, M., & Skilling, T. (2015). Mental health and justice system involvement: A conceptual analysis of the literature. *Psychology, Public Policy, and Law*, 21(2), 213-225.
- Michie, S., Johnston, M., Francis, J., Hardeman, W., & Eccles, M. (2008). From theory to intervention: mapping theoretically derived behavioural determinants to behaviour change techniques. *Applied psychology*, 57(4), 660-680.
- Muijs, D. (2011). *Doing quantitative research in education with SPSS (2nd Ed.)*. London, UK: SAGE Publishers.

- Munch, C. (2012). Youth correctional statistics in Canada, 2010/2011. *Canadian Centre for Justice Statistics, Juristat*.
- Murray, J., & Farrington, D. P. (2010). Risk factors for conduct disorder and delinquency: key findings from longitudinal studies. *The Canadian Journal of Psychiatry, 55*(10), 633-642.
- Odgers, C. L., Moffitt, T. E., Broadbent, J. M., Dickson, N., Hancox, R. J., Harrington, H., ... & Caspi, A. (2008). Female and male antisocial trajectories: From childhood origins to adult outcomes. *Development and psychopathology, 20*(2), 673-716.
- Rodriguez, P. F., & Baille, D. M. (2010). Reforming our expectations about juvenile justice. *Reclaiming Children and Youth, 19*(2), 43.
- Saldaña, J. (2012). *The coding manual for qualitative researchers*. Thousand Oaks, CA: Sage.
- Schoenwald, S. K., Garland, A. F., Chapman, J. E., Frazier, S. L., Sheidow, A. J., & Southam-Gerow, M. A. (2011). Toward the effective and efficient measurement of implementation fidelity. *Administration and Policy in Mental Health and Mental Health Services Research, 38*(1), 32-43.
- Sekhon, M., Cartwright, M., & Francis, J. J. (2017). Acceptability of healthcare interventions: an overview of reviews and development of a theoretical framework. *BMC health services research, 17*(1), 88.
- Shelley-Tremblay, J., O'Brien, N., & Langhinrichsen-Rohling, J. (2007). Reading disability in adjudicated youth: Prevalence rates, current models, traditional and innovative treatments. *Aggressing and Violent Behaviour, 12*, 376-392.
- Shufelt, J. L., & Coccozza, J. J. (2006). *Youth with mental health disorders in the juvenile justice system: Results from a multi-state prevalence study* (pp. 1-6). Delmar, NY: National Center for Mental Health and Juvenile Justice.

- Souverein, F.A., Van der Helm, G., & Stams, G. (2013). 'Nothing works' in secure residential youth care? *Children and Youth Services Review*, 35, 1941-1945.
- Sweeten, G., Larson, M., & Piquero, A. R. (2016). Predictors of emotional and physical dating violence in a sample of serious juvenile offenders. *Criminal behaviour and mental health*, 26(4), 263-277.
- Taylor, R. D., Oberle, E., Durlak, J. A., & Weissberg, R. P. (2017). Promoting positive youth development through school-based social and emotional learning interventions: A meta-analysis of follow-up effects. *Child development*, 88(4), 1156-1171.
- Unruh, D. K., Gau, J. M., & Waintrup, M. G. (2009). An exploration of factors reducing recidivism rates of formerly incarcerated youth with disabilities participating in a re-entry intervention. *Journal of Child and Family Studies*, 18, 284–293.
- Utah Criminal Justice Center. (2010). *Peer contagion: Effects of mixing high and low risk level juveniles*. Program Improvement Resource Materials. Retrieved from <http://ucjc.utah.edu/wp-content/uploads/Peer-Contagion.pdf>
- Vazsonyi, A., Belliston, L., and Flannery, D. (2004). Evaluation of a school-based, universal violence prevention program: Low-, med-, high-risk children. *Youth Violence and Juvenile Justice*, 2(2), 185-206.
- Wincentak, K., Connolly, J., & Card, N. (2017). Teen dating violence: A meta-analytic review of prevalence rates. *Psychology of Violence*, 7(2), 224.
- Wolfe, D. (2016). The Fourth R: Strategies for healthy youth relationships. Retrieved from <https://youthrelationships.org/>
- Wolfe, D., Crooks, C., Jaffe, P., Chiodo, D., Hughes, R., Ellis, W., ... Donner, A. (2009). A school-based program to prevent adolescent dating violence. *Archives of Pediatric Adolescent Medicine*, 163(8), 692-699.



- Wolfe, D., Crooks, C., Chiodo, D., Hughes, R., & Ellis, W. (2012). Observations of adolescent peer resistance skills following a classroom-based healthy relationship program: A post-intervention comparison. *Prevention Science, 13*, 196-205.
- Wolfe, D., Wekerle, C., Gough, R., Reitzel-Jaffe, D., Grasley, C., Pittman, A., ... Stumpf, J. (2003). *The youth relationships manual: A group approach with adolescents for the prevention of woman abuse and the promotion of healthy relationships*. Thousand Oaks, CA: Sage.
- Young, S., Greer, B., & Church, R. (2017). Juvenile delinquency, welfare, justice and therapeutic interventions: a global perspective. *BJPsych bulletin, 41*(1), 21-29.
- Young, M. V., Phillips, R. S., & Nasir, N. I. S. (2010). Schooling in a youth prison. *Journal of Correctional Education, 203-222*.

## **Chapter 4**

### **4 Mixed Methods Preliminary Evaluation of a Social-Emotional Learning Program Adapted for Youth Justice Settings**

#### **4.1 Introduction**

Youth offenders are a vulnerable population at high risk of violence, substance use, and mental health difficulties (Gearing et al., 2017). The high prevalence of mental health and behaviour difficulties among this population increases the likelihood of multiple adversities as youth transition to adulthood. Specifically, justice-involved youth are at heightened risk for physical health challenges, poor psychosocial adjustment, school dropout, and unemployment (Monahan, Rhew, Hawkins, & Brown, 2013). As a result, youth justice facilities are an important site for public health intervention and research.

##### **4.1.1 Intervention Programs for Justice-Involved Youth**

A number of risk factors contribute to delinquency including antisocial attitudes, deviant peer groups, substance use, poor school achievement, poor social skills, poor problem-solving skills, and poor self-control (Stewart, Currie, Arbeau, Leschied, & Kerry, 2015). Research consistently suggests that effective intervention programs should target multiple risk factors, as well as protective factors (Andrews & Bonta, 2010; de Vries, Hoeve, Assink, Stams, & Asscher, 2015). In addition, youth justice programs that employ a therapeutic approach are associated with positive outcomes, compared to interventions that rely on external control techniques (Lipsey & Howell, 2012). Effective youth justice programs are also based on the Risk-Need-Responsivity (RNR) model (Andrews & Bonta, 2010). The RNR is an evidence-based framework that has been adopted internationally in correctional settings. The risk principle asserts that the intensity of service should increase with the individual's level of risk to reoffend. The need principle indicates that programs should target relevant risk factors, also referred to as criminogenic needs. The responsivity principle describes that program delivery should be consistent with personal characteristics that regulate youths' abilities to learn, such as level of motivation, cognitive abilities, and mental health (Andrews & Bonta, 2010).

There are a limited number of evidence-based programs developed for justice-involved youth (Guerra, Kim, & Boxer, 2008). Consequently, many correctional facilities use locally-developed interventions, and few use evidence-based programs (Cislo & Trestman, 2013). Researchers have highlighted the need for more methodologically rigorous evaluations of interventions for youth offenders. Additionally, existing research has highlighted the need to promote the widespread adoption of evidence-based programs in youth justice settings (Knight, et al., 2017).

#### **4.1.2 Social-Emotional Learning Approaches**

Social-emotional learning (SEL) programs are consistent with the design considerations associated with effective youth justice interventions. Effective youth justice interventions and SEL programs both aim to target multiple, overlapping risk factors and protective factors. SEL programs aim to promote five competencies, including self-awareness, self-management, social awareness, relationship skills, and responsible decision making (Taylor, Oberle, Durlak, & Weissberg, 2017). Results from several meta-analyses have found that participation in school-based SEL programs significantly increases coping and communication skills, positive attitudes, prosocial behaviour, academic performance, and decreases aggression, substance use, and emotional distress (Corcoran, Cheung, Kim & Xie, 2018; Durlak, Weissberg, Dymnicki, Taylor, & Schellinger, 2011; Taylor et al., 2017). While advances in SEL programs are developing rapidly in community schools, to date, these programs have not been adapted or evaluated for use in youth justice settings. Adapting evidence-based SEL programs for use in correctional settings is a priority to meet the needs of youth offenders.

#### **4.2 Healthy Relationships Plus Program**

The Fourth R: Healthy Relationships Plus Program (HRPP) is an evidence-informed universal SEL program. The program consists of 14 sessions and was designed for youth ages 12 to 18 (Crooks, Chiodo, Dunlop, Lapointe, & Kerry, 2018). The HRPP is based on the core positive youth development principles of the evidence-based Fourth R classroom-based curriculum. The HRPP aims to promote skills to foster healthy relationships, positive mental health, and reduce unhealthy behaviours (e.g., substance use,

bullying, and dating violence). A recent quasi-experimental study investigated pre- to post-outcomes of the HRPP program. Results indicated changes in depression following participation in the program, particularly for youth who began with higher depression (Lapshina, Crooks, & Kerry, 2018). Additionally, a randomized controlled trial (RCT) found that youth who participated in the HRPP reported a decrease in bullying victimization at 12 months post-intervention, and this was mediated by increased help-seeking (Exner-Cortens, Wolfe, Crooks, & Chiodo, 2019).

#### **4.2.1 Healthy Relationships Plus - Enhanced Program**

Previously, our team conducted a pilot study to examine the feasibility, acceptability, and utility of the HRPP in youth justice settings (Chapter 3, this volume). This initial pilot identified several important recommendations to improve the relevance and compatibility of the HRPP with correctional settings including higher risk scenarios, additional content on dating violence, and responsivity considerations (e.g., fewer written tasks). Results from this pilot work were used to adapt the original program and develop the HRP-Enhanced.

Program modifications were also informed by the existing literature on youth justice interventions and were consistent with the RNR model. Consistent with the risk principle, higher risk scenarios were added and two additional sessions on dating violence were included, making the adapted program more intensive. Consistent with the need principle, the adapted program included a greater emphasis on dynamic risk factors including antisocial attitudes, antisocial peers, and substance use. Consistent with the responsivity principle, the adapted program was tailored to the youths' cognitive abilities (e.g., additional literacy supported options) and a trauma-informed framework integrated throughout. Overall, each session of the HRPP was adapted and two new sessions were included. The adapted version of the program was entitled HRP-Enhanced. Figure 1 summarizes the specific content adaptations and Figure 2 provides an overview of the content included in the HRP-Enhanced program along with the intended short- and long-term outcomes. The purpose of this study was to evaluate the HRP-Enhanced in a sample of justice-involved youth.

| <b>Adaptation</b>                       | <b>Description</b>   | <b>Rationale</b>  |
|---|--|---|
| Trauma-informed                         | Designed to resist re-traumatization by offering alternative activities. E.g., standing too close to others may be feel unsafe or be interpreted as an aggressive invasion of personal space | High rates of trauma among youth involved with juvenile justice, child protection, and community mental health services   |
| Enhanced coping                         | More positive mental health strategies built into every session; some introductory mindfulness activities  | Lack of positive coping strategies has been shown to be predictive of serious (violent) recidivism  |
| Harm reduction                          | Teaches specific considerations and strategies for increasing safety while engaging in substance use; encourage thinking about protective factors for safer use                              | Many high-risk youth are already using substances so preventing initiation may not be a reasonable goal versus increasing safety considerations while engaging in substance use |
| Safety planning and sexual exploitation | Added specific modules on safety planning and also sexual exploitation   | Overlapping risk factors for sexual exploitation and youth offending including history of physical or sexual abuse, time spent in provincial care, disconnection from family    |
| Higher risk scenarios                   | Addition of higher risk scenarios for skills building practice throughout the program  | Consistent with the risk-need-responsivity model, intervention programs and content must match the risk level of the youth  |
| Enhanced cognitive problem solving      | Added scenarios to practice overcoming negative and/or reactive thinking patterns  | Developing cognitive skills is an empirically-based component of programs that reduce offending behaviours in youth   |
| Literacy supported options              | Added alternative activities with reduced reading and writing expectations   | Many justice-involved youth have learning difficulties and low academic achievement, particularly related to literacy   |

*Figure 4-1.* Adaptations included in the HRP-Enhanced Program (Andrews, Bonta, & Wormith, 2011; Catchpole & Brownlie, 2016; Hopkins, Clegg, & Stackhouse, 2016; Latimer, Dowden, Morton-Bourgon, Edgar, & Bania, 2003; Mulder, Brand, Bullens, & Van Marle, 2011; Royal Canadian Mounted Police, 2013; Toumbourou et al., 2007).

| <b>HRP-Enhanced Inputs</b>  | <b>Short-Term Outcomes</b>   | <b>Long-Term Outcomes</b>   |
|---|--|---|
| <b>Relationship Skills</b>  |  |   |
| <ul style="list-style-type: none"> <li>▪ Characteristic of healthy relationships</li> <li>▪ The role of power in relationships</li> <li>▪ Active listening</li> <li>▪ Assertive communication</li> <li>▪ Boundaries and consent</li> <li>▪ Warning signs of dating violence and sexual exploitation</li> <li>▪ Safety planning</li> <li>▪ Ending friendships and relationships</li> </ul> | <ul style="list-style-type: none"> <li>▪ Improved communication skills</li> <li>▪ Increased resistance of inappropriate peer pressure</li> <li>▪ Increased offer help when needed</li> <li>▪ Improved establishment of healthy boundaries</li> <li>▪ Improved management of interpersonal conflict</li> <li>▪ Improved attitudes about violence</li> <li>▪ Maintained positive, healthy relationships</li> </ul> | <ul style="list-style-type: none"> <li>▪ Reduced unhealthy relationship victimization</li> <li>▪ Reduced unhealthy relationship perpetration</li> <li>▪ Maintained positive, healthy relationships</li> </ul> |
| <b>Self-Management</b>  |  |   |
| <ul style="list-style-type: none"> <li>▪ Stressors for youth</li> <li>▪ Healthy versus unhealthy emotion regulation strategies</li> <li>▪ Signs and symptoms of mental health problems</li> <li>▪ Help-seeking</li> </ul>   | <ul style="list-style-type: none"> <li>▪ Increased healthy emotion regulation strategies</li> <li>▪ Decreased unhealthy emotion regulation strategies (e.g., substances)</li> <li>▪ Improved self-control</li> <li>▪ Increased knowledge of signs and symptoms of mental health difficulties</li> <li>▪ Increased awareness of help seeking resources</li> <li>▪ Increased willingness to seek help</li> </ul>   | <ul style="list-style-type: none"> <li>▪ Improved well-being</li> <li>▪ Improved self-control</li> <li>▪ Reduced substance use</li> </ul>   |
| <b>Self-Awareness</b>   |  |   |
| <ul style="list-style-type: none"> <li>▪ Strengths and resiliency</li> </ul>  | <ul style="list-style-type: none"> <li>▪ Increased awareness of strengths</li> </ul>   | <ul style="list-style-type: none"> <li>▪ Maintained awareness of strengths and resiliency</li> </ul>  |
| <b>Social Awareness</b>   |  |   |
| <ul style="list-style-type: none"> <li>▪ Gender-based stereotypes</li> <li>▪ Social and cultural influences on relationships/decisions</li> </ul>   | <ul style="list-style-type: none"> <li>▪ Improved perspective taking</li> <li>▪ Improved empathy</li> <li>▪ Improved critical thinking about influences on relationships</li> </ul>  | <ul style="list-style-type: none"> <li>▪ Improved ability to empathize with others</li> <li>▪ Improved ability to respect diversity</li> </ul>  |

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|  |   |  |
|--|---|--|
| <b>Responsible Decision Making</b>   |   |  |
| <ul style="list-style-type: none"> <li>▪ Constructive choices about personal behaviour and social interactions</li> <li>▪ Evaluate and solve problems</li> </ul> | <ul style="list-style-type: none"> <li>▪ Improved problem-solving skills</li> </ul> | <ul style="list-style-type: none"> <li>▪ Improved decision making</li> </ul> |

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*Figure 4-2.* Overview of the HRP-Enhanced Program

### **4.3 Considerations for Conducting Research in Youth Justice Settings**

Although randomized controlled trials (RCTs) are generally viewed as the “gold standard” for estimating the causal effects of interventions, there is also increasing interest in using quasi-experimental designs to evaluate interventions under real-world circumstances where RCT designs are not suitable (Handley, Schillenger, & Shiboski, 2011). In particular, in many public health interventions, it may not be feasible to have a randomized control group because policy-makers believe the intervention is beneficial and no one should be denied the opportunity to participate (Bonell, et al., 2011). Based on the large body of research (including RCTs) supporting the Fourth R classroom-based program and the feasibility of the HRPP demonstrated in the initial pilot study, the youth justice stakeholders believed that there was sufficient evidence of benefits and it would be unethical to have control groups. The youth justice partners and researchers collaboratively determined that a repeated measures, time series design was instead appropriate.

### **4.4 The Present Study**

This study employed a mixed-methods, time series design to examine the HRP-Enhanced with justice-involved youth in correctional facilities. The objective was to explore the preliminary effectiveness of the HRP-Enhanced on relationships skills (e.g., social skills and problem-solving skills), drug resistance efficacy, antisocial attitudes, and internalizing and externalizing behaviours.

## 4.5 Method

### 4.5.1 Participants

Three youth custody facilities and one intensive residential treatment facility in Canada (across two provinces) implemented the HRP-Enhanced. Two of the facilities were located in rural areas, while the other two facilities were in urban areas. However, the youth who were referred or mandated to the facilities came from both rural and urban communities. The length of time that youth spent at the facility varied at each site. One secure custody facility supported male youth on pre-trial detention and male youth sentenced to secure custody; thus, custody lengths ranged from a few days to several years. The other secure custody facility supported sentenced and remanded male and female youth for shorter lengths of time (i.e., a few days to a few months). The open detention facility supported male youth who were lower risk and sentenced or awaiting sentencing. Youth typically spend a few days to a few months at the open detention facility. Finally, the intensive residential treatment facility supported male youth who have been referred by caregivers, child welfare agencies, and the courts due to significant conduct problems. A high percentage of the youth referred to this facility had previous justice involvement and were either diverted through extrajudicial sanctions or on probation. The length of placement at the intensive residential facility was approximately eight months to a year.

In total, the facilities selected 108 youth to participate in the HRP-Enhanced program. For the study, youth ages 18 and older were able to provide consent, while youth ages 17 and younger required guardian consent to participate in the study. Those youth who did not have consent or assent (15%) were still able to participate in the HRP-Enhanced program; however, they were excluded from the research study. Figure 3 depicts youth attrition over time. Reasons for attrition included youth who dropped out of the program (35%), youth were released from custody or transferred to another facility (47%), and youth were removed from the program due to behavioural reasons (18%).



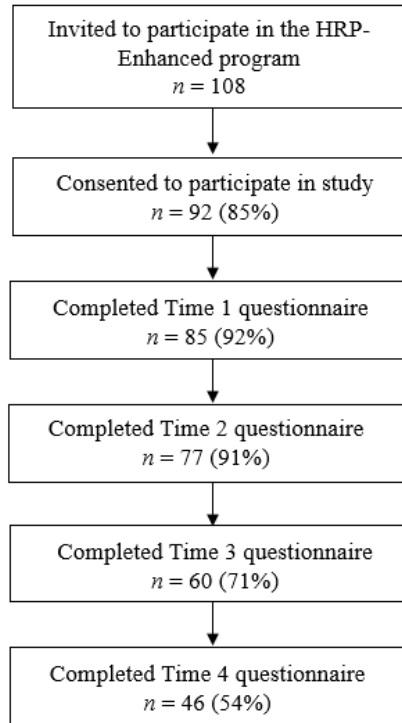


Figure 4-3. Participant attrition across study time points.

*Note.* The percentage of youth who completed Time 1 questionnaires was calculated using the number of youth who consented to participate. The percentages of the remaining youth who completed Time 2, Time 3, and Time 4 questionnaires were calculated using the number of youth who completed Time 1 questionnaires.

Across all sites, 11 HRP-Enhanced groups (four female and seven male) were completed. The average group size was eight youth (range = 3 to 10). A total of 92 youth (62% male) participated in the study. The average age of participants was 16.5 years ( $SD=1.45$ ) and 78% of the youth identified as Indigenous. The majority of the youth (91.3%) participated in the program while in a secure custody setting, 3.3% were from open custody facilities, and 5.4% were from the intensive residential treatment facility. Of the youth from the intensive residential treatment facility, 60% had previous justice involvement. All of the youth completed the Time 1 questionnaire (four weeks before the program start date); however, not all youth remained in the custody facilities when the program began. The program facilitators employed by the youth custody facilities implemented the HRP-E. Facilitators received a one-day, in-person training on the HRP-

Enhanced program. Each facilitator received the program session plans and support materials. Following the training, the research team provided facilitators with informal support via emails, phone calls, and site visits. A total of ten facilitators implemented the program across sites. Finally, 19 (73.7% female) on-site classroom teachers participated in the study. Teachers from the custody and residential treatment facilities were not involved in the implementation of the HRP-Enhanced program, rather they were included in the study as impartial observers and completed questionnaires about the youths' behavioural presentation.

#### **4.5.2 Procedure**

There was variability in terms of the group selection process and program delivery of the HRP-Enhanced across sites. Each site could select youth participants based on the facilities' policies and procedures. Facilitators considered several factors when determining appropriate groups. At the two secure custody sites, youth were referred to the program by a case manager or unit staff and youth participation was voluntary. The secure custody sites conducted intake interviews to determine criminogenic needs (i.e., peer and romantic relationships), responsivity factors (i.e., reading level and motivation), as well as court and release dates. The open detention facility and intensive residential treatment facility were significantly smaller sites and implemented the program with all of the youth from the unit. In terms of delivery, all sites implemented the HRP-E using co-facilitators. The implementation schedule varied across sites because each site operated around highly controlled routines. Across all sites, the HRP-Enhanced was implemented in gender-segregated groups.

#### **4.5.3 Measures**

To gain a comprehensive understanding of program acceptability and the preliminary effectiveness of the HRP-Enhanced, we collected data from multiple sources.

**Focus groups.** Youth were asked to participate in focus groups upon completion of the program to provide their feedback. Given the time constraints and geographical distance to the custody facilities, not every program group participated in a focus group. Overall, six groups ( $n = 39$ , 62% males) from secure and open custody facilities completed

focus groups. Semi-structured focus groups (Appendix C) were conducted by the first author and took place at the youth custody facilities. The purpose of these meetings was to collect descriptive data about the pilot study, specifically the youth's perceived strengths and weaknesses of the HRP-Enhanced. In addition, information regarding the youth's self-awareness (an SEL competency) was gathered during focus groups (e.g., From your perspective, what areas do you need to continue to work on and improve? From your perspective, what is your greatest strength?). Each focus group lasted approximately one hour. The author provided the youth with snacks and beverages during the focus groups (with permission from the correctional facilities). Focus groups were audiotaped and transcribed.

**Questionnaires.** Youth and their teachers each completed four questionnaires at different time points. The Time 1 questionnaire was completed four weeks prior to starting the HRP-Enhanced. The purpose of the Time 1 questionnaire was to establish a baseline of the youths' functioning and to look at possible regression to the mean prior to the start of the program. The Time 2 questionnaire was completed on the first day the program began. The Time 3 questionnaire was completed immediately after the final session of the program. The Time 4 questionnaire was completed four weeks following program completion to examine potential maintenance effects. Both the youth and teacher questionnaires included an identification code to maintain confidentiality.

**Youth questionnaires.** The youth questionnaires consisted of 71 items. The youth questionnaire used scales from the Antisocial Beliefs and Attitudes in Pre-Adolescent and Adolescent Youth (ABAS), the Social Skills Improvement System (SSIS) Student Report, and the Texas Christian University (TCU) Adolescent Thinking Form B. The questionnaires also included items related to gender, age, sexual orientation, and ethnicity. To avoid concerns about literacy and reading level, we provided youth with the opportunity to complete the questionnaires independently, or have questionnaires orally administered by program staff. Total administration time for each youth questionnaire was 20 to 30 minutes. Table 1 summarizes how each scale on the youth questionnaire aligns with SEL competencies and indicates the Cronbach's alpha for each scale in the current sample. No

measures targeted self awareness directly, but this aspect of SEL was explored in the focus groups.

Table 4-1 *Questionnaire Scales' Alignment with SEL Competencies and Internal Consistency Reliability*

| SEL Competencies            | Questionnaire Scales                 | Number of Items | Internal Reliability |
|-----------------------------|--------------------------------------|-----------------|----------------------|
| Relationship Skills         | ABAS Attitudes towards Peer Conflict | 10              | .81                  |
|                             | TCU Assertiveness                    | 5               | .82                  |
| Self-Management             | TCU Drug Resistance Efficacy         | 5               | .90                  |
|                             | Youth SSIS Self-Control              | 6               | .88                  |
|                             | Teacher SSIS Self-Control            | 7               | .92                  |
| Social Awareness            | Youth SSIS Empathy                   | 6               | .89                  |
|                             | Teacher SSIS Empathy                 | 6               | .93                  |
| Responsible Decision Making | TCU Problem Solving Efficacy         | 12              | .87                  |

**Antisocial Beliefs and Attitudes in Pre-Adolescent and Adolescent Youth (ABAS)** is a developmentally-sensitive youth self-report measure designed to measure antisocial beliefs and attitudes in older children and adolescents (Butler, Leschied, & Fearon, 2007). The ABAS Attitudes towards Peer Conflict scale was used in this study. The ABAS uses a 3-point Likert scale (agree, not sure, disagree), with higher scores indicating stronger antisocial beliefs and attitudes. The ABAS items were found to be internally consistent, and the measure demonstrated good construct validity when assessed using a sample of 425 children and adolescents (Butler, et al., 2007).

**TCU Adolescent Thinking Form B** is a publicly available screening tool that measures judgement and decision-making among adolescents (Institute of Behavioral Research, 2010). The following three scales were used in the current study: Problem Solving Efficacy, Drug Resistance Efficacy, and Assertiveness. The measure uses a 5-point Likert scale (disagree strongly, disagree, uncertain, agree, agree strongly), with higher scores indicating higher levels of the measured construct. The Adolescent Thinking Form B was found to have high internal consistency when assessed using a sample of 1,189 adolescents in residential treatment programs (Knight, Becan, Landrum, Joe, & Flynn, 2014; Knight et al., 2016).

**Teacher questionnaires.** The teacher questionnaires consisted of 35 items. The teacher questionnaires used scales from the SSIS Teacher Report. In addition, it included items related to gender, ethnicity, and the length of time they had known the youth. Total administration time for the teacher survey was 10 minutes for each student at each time point.

**Social Skills Improvement System Rating Scales (SSIS)** is a multi-rater series that evaluates social skills, problem behaviours, and academic competence (Gresham & Elliot, 2008). For the current study, we collected both teacher and student ratings.

**Student Rating Scale.** The student self-report measure for ages 13 to 18 was used. Specifically, the SSIS Social Skills and Problem Behaviours domains were used to create the youth questionnaires. The Social Skills scales used included Empathy and Self Control (Table 1). The Problem Behaviours scales used were Externalizing (12 items, internal reliability .779) and Internalizing (10 items, internal reliability .869). The youth responded using a 4-point Likert scale (not true, a little true, a lot true, very true) to indicate their social skills and problem behaviour.

**Teacher Rating Scale.** The SSIS Social Skills and Problem Behaviours domains were used to create the teacher questionnaires. The Social Skills scales used included Empathy and Self Control (Table 1). The Problem Behaviours scales used were Externalizing (12 items, internal reliability .939) and Internalizing (7 items, internal reliability .889). Using a 4-point Likert scale (never, seldom, often, almost always), teachers indicated the frequency that they observed youth engaging in each social skill and problem behaviour. The SSIS Total Social Skills and Total Problem Behaviour scores have high test-retest reliability for both teachers and youth (Gresham, Elliot, Vance, & Cook, 2011).

**De-identified attendance sheets.** Program facilitators completed de-identified attendance sheets. The purpose of the attendance sheets was to collect data regarding the continuity and dosage of the program (i.e., how many sessions each youth received) and the program completion rate.

The Western University Non-Medical Research Ethics Board (NMREB) reviewed and approved all study protocols, including consent procedures. Further approval was granted by the Manitoba Justice Corrections Division and Anago Youth Justice Services.

#### **4.5.4 Analysis**

A series of systematic steps was carried out to condense the extensive qualitative data into smaller analyzable units. Audio recorded focus groups were transcribed with Trint voice-to-text software and revised by the first author based on audio recordings. Transcripts from the youth focus groups were uploaded to the cloud-based program Dedoose (V5.3.22) to facilitate qualitative data analysis. Post-transcript review used a multi-phase process. Given the exploratory nature of the study, researchers looked for emerging themes, and employed simultaneous and descriptive coding (Saldaña, 2012). Initially, the first author created a provisional codebook (Appendix D). In the first cycle of coding, codes included broad categories that were based on the focus group questions (e.g., strengths and challenges of the program). The second cycle of coding employed open coding methods (Saldaña, 2012) to break down and further investigate the data. The third cycle of coding used pattern coding to specify themes. Based on this approach to coding and theming the youth focus groups, we identified five overarching themes: (1) relationship skills, (2) self-management, (3) social awareness, (4) responsible decision-making, and (5) self-awareness. Themes were also compared by gender.

Descriptive statistics were analyzed using the data collected from de-identified attendance sheets, youth questionnaires, and teacher questionnaires. These summary statistics were computed with SPSS (Version 22). Bivariate analyses revealed that outcomes remained stable from Time 1 (baseline) to Time 2 (pre-intervention), with no significant differences. As a result, a new Time 1 variable was calculated using the mean of Time 1 and Time 2. The new Time 1 variable (referred to as pre-intervention) was

compared to Time 3 (referred to as post-intervention) to examine potential changes over the duration of the program. Bivariate comparisons between pre-intervention and post-intervention outcomes, as well as pre-intervention and Time 4 (referred to as follow-up) outcomes, were calculated using paired sample *t* tests. We also calculated effect sizes using Cohen's *d*. Effect size was interpreted per Cohen (1988), where *d* .20 is small, .50 is medium, and .80 is large. Analyses also included general linear model (GLM) repeated measures to examine potential gender effects and/or time-by-gender interactions related to post-intervention outcomes. Finally, chi-square analyses were conducted to determine whether systematic attrition occurred.

## **4.6 Results**

Qualitative and quantitative data were collected to explore the outcomes of the HRP-Enhanced. The results highlighting the acceptability of the program are presented, followed by the results describing the preliminary outcomes for SEL competencies.

### **4.6.1 Completion Rates**

Youth program completion was defined as participation in at least 75% of the program (a minimum of 12 sessions) based on the Standardized Program Evaluation Protocol (SPEP) developed by Mark Lipsey (Lipsey, 2009; Lipsey, Howell, Kelly, Chapman, & Carver, 2010). The completion rate for the HRP-Enhanced was 78%. Reasons for attrition included voluntary drop out (35%), release from custody or transfer to another correctional facility (47%), and removal from program due to difficult behaviours (18%). There was no significant difference between male and female youth completion rates.

### **4.6.2 Preliminary Program Effects on SEL Competencies**

During the focus groups, youth provided several examples describing how participation in the HRP-Enhanced promoted their development of SEL competencies. Qualitative findings are organized into SEL themes. In addition, qualitative results are augmented with quantitative results where available.

### *Theme 1: Relationship Skills*

Youth described that participation in the HRP-Enhanced facilitated improvements in their communication skills. According to both male and female youth, their improved communication skills generalized across relationships, including dating relationships and interactions with staff (Table 2). Youth also reported that they were better able to communicate with peers:

*“When I was first here back in September, me and him never got along. We always fought and were always at each other’s heads. And now, it’s like we actually sit down and listen to each other, we actually interact better than what we were before”* (Male, age 16).

While in custody, youth have limited access to their family via letters, phone calls, and visits. Positive communication skills can maximize the enjoyment of limited interactions. One youth commented on his ability to communicate with his sister:

*“Just listen to them, because that’s one of the main things, people want someone to talk to without any advice or their opinion give[n]. So that’s what I try with my sister. She struggles a lot, and after the program I kind of just started thinking about it, finding different ways to talk to her about it, so not just give her advice. I’ll just talk to her on the phone about it and just listen to what she has to say”* (Male, age 20).



Table 4-2 *Relationship Skills Secondary Themes and Examples*

| Secondary Themes                                       | Exemplar Quotes  |
|--|--|
| Communication <sup>a</sup>                             | <p><i>“I feel like I can talk to my boyfriend easier now. Like we can talk about things when we’re mad at each other. I can be like, ‘Okay, why are you mad?’ or he’ll ask me why am I mad or something like that, and we’ll work on the problem”</i> (Female, age 17).</p> <p><i>“I’ve been trying to use active listening the most because I usually jump to conclusions before the sentence is even over. And it sometimes gets me in trouble. A couple of days ago, a staff was talking, and I kind of didn’t really care. But in the end I thought about it and was like maybe I do need to listen. So I actually sat and listened and I wasn’t looking around. I was actually focusing on the person that was talking”</i> (Male, age 16).</p> |
| Resist Inappropriate Social Pressure <sup>b</sup>      | <p><i>“I like the one how to deny things if like someone is peer pressuring you and what to say and what to do. I used to always get peer pressured and I didn’t know what to do, so it kind of relates to me”</i> (Male, age 18)</p> <p><i>“I used the refusal on group members. They’ll ask me to do something and I don’t really feel in the mood. Usually I’ll be like ‘yeah, I’ll play later’, but then in that moment I kind of give in. But after taking the program, I kind of understood it, they can’t really tell me I can’t, so I just say ‘no, I’m good’ and they respected that. It worked out pretty good”</i> (Male age 17).</p>   |
| Offer Help When Needed <sup>a</sup>                    | <p><i>“One of my friends, she was really upset, so I made an attempt to be there for her the best I could. So I guess I gave her the comfort that she needed. I felt pretty good after that”</i> (Female, age 16).</p> <p><i>“There’s one session we did about suicide. A couple times already actually I’ve been able to use that and notice those little signs and point them out to people and they said, ‘yeah, you’re right’. And I asked them straight up, you know, ‘are you trying to hurt yourself? Are you trying to kill yourself?’ And he did. And you find out the truth and you’re able to help that person, so that was good”</i> (Male, age 16).</p>   |
| Establish Healthy Boundaries <sup>b</sup>              | <p><i>“Me and my dad, I feel like there’s so many bad stuff between each other. I realized stuff that he did that was bad. So I called him, like ‘you gotta stop doing this if you want a healthy relationship.’ I’m trying to build a better relationship”</i> (Male, age 18).</p> <p><i>“After the program, I kind of ended a few friendships. I ended like two or three because I didn’t realize how like unhealthy they were and negative. So I kinda told them, I can’t have people like that in my life anymore and I wanted to try something new”</i> (Male, age 16).</p>   |
| Manage Interpersonal Conflict Effectively <sup>a</sup> | <p><i>“I don’t fight with my mom as crazy. Sometimes when I call her, I don’t always want to be like aggressive and angry. I don’t know why I’m aggressive and angry. But then I noticed those things, so I’m trying to change, but it’s kind of hard”</i> (Female, age 15).</p> <p><i>“He started swearing at me and what not, and I could have lashed out on him and like attacked him, I could have just like started yelling. But I came up to him assertively and told him how I felt and what we should do. It worked it, it was alright”</i> (Male, age 16).</p>  |

<sup>a</sup>Theme did not vary by gender

<sup>b</sup>Theme varied by gender, males endorsed more

Association with antisocial peers is a significant predictor of adolescent delinquent behaviour (Akers & Jensen, 2006). Research also suggests that the effect of antisocial peers is amplified when an adolescent is highly susceptible to peer influence (Miller, 2010). In the focus groups, male youth reported that participation in the program assisted in resisting peer pressure and promoting assertiveness (Table 2). Consistent with qualitative findings of improved assertiveness skills, youths' self-reported assertiveness skills significantly increased from pre-intervention to post-intervention,  $F(1, 59.0) = 4.79, p < .05, \eta_p^2 = .075$ , 95% confidence interval [CI] = [.01, .31]. Results from a repeated measures GLM analyses revealed no moderating effect of gender  $F(2, 57.0) = .161, p = .851, \eta_p^2 = .006$ , 95% CI = [-.24, .57]. Table 3 presents a summary of the means, standard deviations, and significance for bivariate comparisons of pre-intervention and post-intervention. Figure 4 represents the significant outcomes from pre-intervention to post-intervention.

Table 4-3 *Post-Intervention Outcomes for SEL Related Competencies (Paired samples t-test Pre-with Post-Intervention)*

| SEL Competencies            | Subscales                            | Pre-Intervention |            | Post-Intervention |    | df   | t    | p    | Cohen's d |
|-----------------------------|--------------------------------------|------------------|------------|-------------------|----|------|------|------|-----------|
|                             |                                      | n                | M(SD)      | M(SD)             |    |      |      |      |           |
| Relationship Skills         | ABAS Attitudes towards Peer Conflict | 52               | 1.65(0.38) | 1.51(0.41)        | 51 | 2.86 | .006 | .73  |           |
|                             | TCU Assertiveness                    | 60               | 4.09(0.62) | 4.24(0.72)        | 59 | 2.19 | .032 | -.47 |           |
| Self-Management             | TCU Drug Resistance Efficacy         | 60               | 3.77(0.80) | 4.00(0.99)        | 59 | 1.71 | .092 | -.35 |           |
|                             | Youth SSIS Self-control              | 60               | 2.61(0.72) | 2.82(0.74)        | 59 | 2.08 | .042 | -.44 |           |
|                             | Teacher SSIS Self-control            | 66               | 2.43(0.48) | 2.43(0.50)        | 65 | .206 | .837 | .08  |           |
| Social Awareness            | Youth SSIS Empathy                   | 60               | 2.88(0.68) | 3.06(0.70)        | 59 | 2.28 | .026 | -.51 |           |
|                             | Teacher SSIS Empathy                 | 57               | 2.46(0.48) | 2.49(0.49)        | 56 | .539 | .592 | -.12 |           |
| Responsible Decision Making | TCU Problem Solving Efficacy         | 60               | 3.81(0.56) | 4.03(0.68)        | 59 | 2.61 | .012 | -.64 |           |

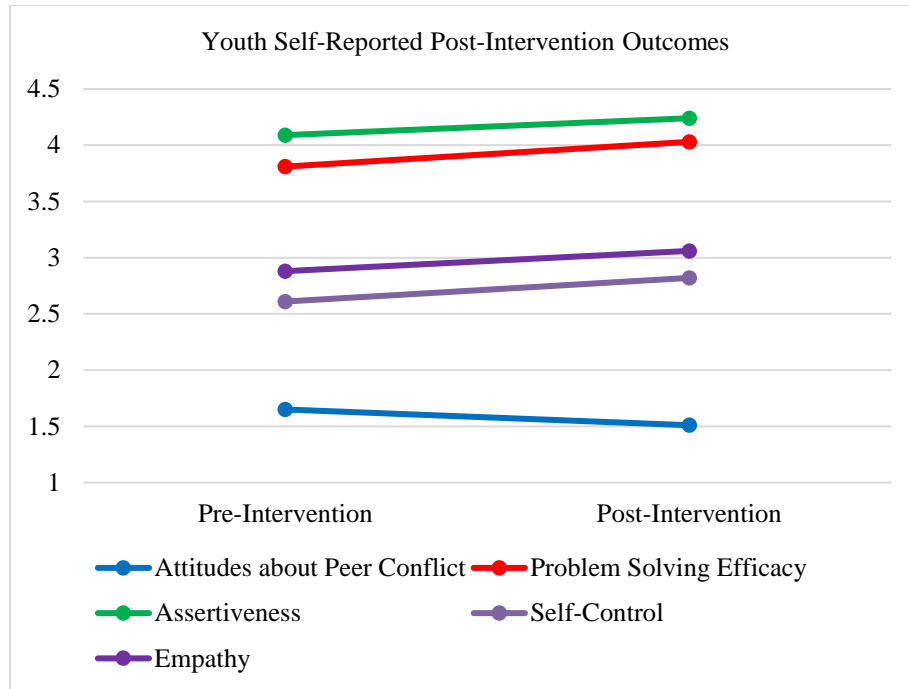


Figure 4-4. Significant self-reported youth outcomes from baseline to post-intervention.

Both male and female youth reported that following participation in the program, they were better able to offer support to others (Table 2). In addition to relationship skills, offering help to others relies on the development of other SEL competencies, including social awareness and decision-making. Social awareness is required to recognize and understand the other person’s emotions. Decision-making skills are also needed to determine how to proceed.

Another key relationship skill is establishing healthy boundaries. Youth expressed that after participating in the program they were able to recognize unhealthy relationships in their lives and implement appropriate boundaries. Some male youth described establishing boundaries with family relationships (Table 2).

Finally, research has indicated that conflict management competence is important for maintaining healthy relationships (Chow, Ruhl, & Buhrmester, 2013). Both male and female youth described improved conflict resolution skills across different interpersonal relationships (Table 2). Consistent with qualitative findings of improved conflict management with peers, youths’ self-reported attitudes supportive of antisocial peer

conflict significantly decreased from pre-intervention to post-intervention,  $F(1, 51.0) = 8.15, p < .05, \eta_p^2 = .138, 95\% \text{ CI} = [.04, .21]$ . (see Table 3 and Figure 4). A repeated measures GLM determined that the mean difference of attitudes about peer conflict between time points approached significance difference by gender  $F(2, 49.0) = 2.85, p = .067, \eta_p^2 = .104, 95\% \text{ CI} = [-.26, .17]$ . Specifically, males' attitudes decreased more than females.

### *Theme 2: Self-Management*

Research indicates that limited or inadequate emotion regulation is a risk factor for aggressive behaviour and mental health problems among adolescents (McLaughlin, Hatzenbuehler, Mennin, & Nolen-Hoeksema, 2011; Roll, Koglin, & Peterman, 2012). Both male and female youth reported that participation in the program provided them with healthy strategies to manage difficult emotions.

*“A lot of people nowadays have depression and anxiety and everything. And I mean, I know because I’m one of them. It’s tough to deal with, but if you know the right people that know how to deal with it, and if you do the program, you know a little bit more perspectives on how to deal with it” (Male, age 16).*

*“The one activity we do where the unhealthy things we do to relieve stress and the healthy things we do to relieve stress. And when we look at it overall, how serious the unhealthy things do and how it affects us and others around us, and how easy the healthy stuff is to do and how it would benefit us more and others around us as well. Like go for a walk with a positive friend, talk to a therapist, listen to music, meditate, do yoga, workout, anything like that” (Female, age 18).*

Consistent with qualitative findings related to emotion regulation, youths' self-reported self-control significantly increased from pre-intervention to post-intervention,  $F(1, 59.0) = 4.34, p < .05, \eta_p^2 = .069, 95\% \text{ CI} = [.01, .34]$  (see Table 3 and Figure 4). Results from GLM analyses revealed no moderating effect of gender for youth self-reported self-control  $F(2, 57.0) = .152, p = .859, \eta_p^2 = .005, 95\% \text{ CI} = [-.17, .72]$ . In contrast to youth self-reports, teacher reports did not indicate a change in self-control,  $F(1, 65.0) = .042, p = .837, \eta_p^2 = .001, 95\% \text{ CI} = [-.07, .06]$  (see Table 3).

Youth did not indicate a change in drug resistance efficacy (e.g., confident that they can find ways to reduce stress that do not involve alcohol/substances) from pre-intervention

to post-intervention,  $F(1, 59.0) = 2.94, p = .092, \eta_p^2 = .04, 95\% \text{ CI} = [-.03, .39]$  (see Table 3 and Figure 4).

*Theme 3: Social Awareness*

Male youth reported improvements in their social awareness, specifically perspective taking and empathy (Table 4).

Table 4-4 *Social Awareness Secondary Themes and Examples*

| <b>Secondary Theme</b> | <b>Exemplar Quotes</b>   |
|------------------------|--|
| Perspective Taking     | <i>“I need to work on the way I come out, because I guess my assertive, what I think of when I’m talking, when I think of assertive, others may see it as aggressive. So I need to be aware of basically how others perceive me”</i> (Male, age 15). |
| Empathy                | <i>“I was able to relate more to them and like understand them better when they’re telling me stuff and kind of put myself in their shoes when they’re tell[ing] me stuff”</i> (Male, age 17).   |

Evidence suggests that empathy is positively correlated to prosocial behaviours and negatively correlated to aggressive and antisocial behaviour (De Wied, Branje, Meeus, 2007). One youth highlighted the negative impact of an individual’s antisocial behaviours on others. This is notable because some youth justice interventions, particularly, restorative justice approaches, emphasize victim empathy (Rodriguez, 2007).

*“When you do too much drugs and alcohol, you’re not really in a clear state of mind and something bad could happen and you end up in a place like this. It doesn’t just affect you, it affects a lot of people like your family, and if you assault someone or victimize someone, their family, and it’s just a big chain reaction or domino effect”* (Male, age 17).

Consistent with qualitative findings related to empathy, youths' self-reported empathy significantly increased from pre-intervention to post-intervention,  $F(1, 59.0) = 5.21, p < .05, \eta_p^2 = .08, 95\% \text{ CI} = [.02, .31]$  (see Table 3). Results from GLM analyses revealed no moderating effect of gender for youth self-reported empathy  $F(2, 57.0) = .128, p = .880, \eta_p^2 = .004, 95\% \text{ CI} = [-.27, .51]$ . In contrast, teacher reports did not indicate a change in empathy,  $F(1, 56.0) = .29, p = .59, \eta_p^2 = .01, 95\% \text{ CI} = [-.08, .14]$  (see Table 3).

#### *Theme 4: Responsible Decision-Making*

Responsible decision making involves identifying possible options and evaluating the potential consequences of each option (CASEL, 2015). Research has found that the tendency to carefully think through decisions is inversely associated with risk behaviours among adolescents (Wolff & Crockett, 2011). Both male and female youth who participated in the program described improvements in their decision-making skills, particularly related to considering the consequences of their choices.

*“To help myself, I’ve learned to think about different ways to look at it. You can either look at it positively, and kind of fix what you did wrong, or you can think about it negatively and just keep going on with it for days. It’s taught me a lot. It’s not just like pushing it off for another day and then having it come back; you deal with it the day of so you don’t have to suffer consequences later on”* (Male, age 15).

*“I gotta try and think, I gotta outweigh the pros and cons and think, so if he has a shitty personality but he has money or he has good friends, which ones are more worth it. So just kind of evaluating all of that”* (Female, age 18).

Consistent with qualitative findings related to responsible decision making, youths' self-reported problem solving significantly increased from pre-intervention to post-intervention,  $F(1, 59.0) = 6.79, p < .05, \eta_p^2 = .10, 95\% \text{ CI} = [.04, .29]$ . (see Table 3 and Figure 4). Results from GLM analyses revealed no moderating effect of gender  $F(2, 57.0) = .308, p = .736, \eta_p^2 = .011, 95\% \text{ CI} = [-.09, .59]$ .

### *Theme 5: Self-Awareness*

During the focus groups, youth were asked to identify their strengths. Some youth were able to provide responses, including athletic abilities and artistic talents. However, many youth reported that they do not possess strengths. *“I don’t know. I don’t see myself as good at anything”* (Male, age 16). *“What if you’re not good at anything?”* (Female, age 17). From the perspective of one male youth, justice involvement often results in youth being negatively labelled and their strengths go unrecognized.

*“I’m not really good when it comes to like school, but when it comes to like street smarts or just intelligence about life, I’m very good at it. And people overlook it cause we fit the stereotype ‘Oh, you must be in a gang’ which means you’re stupid and you’re not smart enough to not join that lifestyle. It’s kind of annoying”* (Male, age 17).

When asked about what areas they need to improve, both male and female youth provided insightful responses. *“Worry about myself instead of others, because I’m always trying to make other people happy before I make myself happy”* (Male, age 16). *“Trying to have more patience with myself and with other people”* (Male, age 15). *“Cut down on drugs and alcohol”* (Female, age 16).

One male youth commented that the program supports the changes that justice-involved youth are trying to achieve.

*“People come here for like a long sentence or even just a short one, and they trying to make those steps to change. I was very unhealthy, I think we all were people who did stupid things, so trying to make an effort to be a better person, so being in the [program] HRP-Enhanced really helps with that”* (Male, age 18).

#### **4.6.3 Preliminary Program Effects on Internalizing and Externalizing Behaviours**

Bivariate comparisons indicated no significant changes from pre-intervention to post-intervention in either youths’ self-reported or teacher-reported internalizing and externalizing behaviours. Table 5 presents a summary of the means, standard deviations, and significance for bivariate comparisons of internalizing and externalizing behaviours at pre-intervention and post-intervention.

Table 4-5 *Post-Intervention Outcomes for Problem Behaviours (Paired samples t-test Pre- with Post-Intervention)*

| Problem Behaviours | Subscales                  | Pre-Intervention |              | Post-Intervention |    | <i>df</i> | <i>t</i> | <i>p</i> | Cohen's <i>d</i> |
|--------------------|----------------------------|------------------|--------------|-------------------|----|-----------|----------|----------|------------------|
|                    |                            | <i>n</i>         | <i>M(SD)</i> | <i>M(SD)</i>      |    |           |          |          |                  |
| Internalizing      | Youth SSIS                 | 60               | 2.16(0.65)   | 2.18(0.65)        | 59 | .448      | .656     | -.10     |                  |
|                    | Internalizing Teacher SSIS | 67               | 2.13(0.47)   | 2.14(0.50)        | 66 | .255      | .799     | -.09     |                  |
| Externalizing      | Internalizing Youth SSIS   | 60               | 2.14(0.51)   | 2.06(0.65)        | 59 | .732      | .467     | .17      |                  |
|                    | Externalizing Teacher SSIS | 58               | 2.10(0.44)   | 2.01(0.46)        | 57 | 1.16      | .251     | .32      |                  |
|                    | Externalizing              |                  |              |                   |    |           |          |          |                  |

#### 4.6.4 Sub-sample Analysis: Maintenance of Program Effects

Of the youth who completed the pre- and post-intervention questionnaires, 83.6% ( $n = 46$ ) were available for a one-month follow-up. Chi-square analyses were used to examine differences between youth who completed the follow-up questionnaire and those who did not. Results indicated that attrition was not related to age, gender, or facility. Bivariate comparisons were then conducted using a subsample of completers ( $n=46$ ).

To assess maintenance of effects, pre-intervention responses were compared to one-month follow-up. Results indicated that improvements in attitudes about peer conflict remained significant at follow-up,  $F(1, 39.0) = 6.99, p < .05, \eta_p^2 = .15, 95\% \text{ CI} = [-.28, -.04]$ . Results from GLM analyses revealed a significant moderating effect of gender. Specifically, males' attitudes about peer conflict decreased more than females,  $F(2, 37.0) = 3.88, p < .05, \eta_p^2 = .174, 95\% \text{ CI} = [-.18, .31]$ . The increase in assertiveness skills remained significant at follow-up,  $F(1, 45.0) = 8.99, p < .05, \eta_p^2 = .165, 95\% \text{ CI} = [.08, .43]$ . Results from GLM analyses revealed a significant moderating effect of gender. Specifically, males' assertiveness increased more than females,  $F(2, 43.0) = 5.65, p < .05, \eta_p^2 = .208, 95\% \text{ CI} = [-.56, .19]$ . Additionally, the increase in youth reported self-control remained significant at follow-up,  $F(1, 45.0) = 7.05, p < .05, \eta_p^2 = .135, 95\% \text{ CI} = [.05, .39]$ . Results from GLM analyses revealed no moderating effect of gender  $F(2, 43.0) = .10, p = .907, \eta_p^2 = .005, 95\% \text{ CI} = [-.61, .66]$ . Finally, the increase in problem-solving efficacy remained significant at follow-up,  $F(1, 45.0) = 6.49, p < .05, \eta_p^2 = .126, 95\% \text{ CI} = [.06,$



.48]. Results from GLM analyses revealed no moderating effect of gender  $F(2, 43.0) = .57$ ,  $p = .572$ ,  $\eta_p^2 = .026$ , 95% CI = [-.48, .54].

Furthermore, while no change was indicated in drug resistance efficacy at post-intervention, this variable significantly increased at follow-up.  $F(1, 45.0) = 4.16$ ,  $p < .05$ ,  $\eta_p^2 = .085$ , 95% CI = [.01, .39]. Results from GLM analyses revealed no moderating effect of gender  $F(2, 43.0) = 1.91$ ,  $p = .160$ ,  $\eta_p^2 = .082$ , 95% CI = [-.54, .36]. Similarly, teacher-reported self-control was not significant at post-intervention; however, this variable significantly increased at follow-up,  $F(1, 45.0) = 6.15$ ,  $p < .05$ ,  $\eta_p^2 = .120$ , 95% CI = [.03, .29]. Results from GLM analyses revealed no moderating effect of gender  $F(2, 43.0) = .24$ ,  $p = .790$ ,  $\eta_p^2 = .011$ , 95% CI = [-.17, .46]. Finally, results indicated that the significant increase in youth reported empathy at post-intervention was not maintained at follow-up. Table 6 presents a summary of the means, standard deviations, and significance for bivariate comparisons of the subsample from pre-intervention to one-month follow-up. Figure 5 represents the significant outcomes from pre-intervention to post-intervention.

Table 4-6 *One-Month Follow-Up Outcomes for SEL Related Competences (Paired samples t-test Subsample of Pre-Intervention to Follow-Up)*

| SEL Competencies            | Subscales                            | Pre-Intervention |            | One-Month Follow-Up |    | df   | t    | p    | Cohen's d |
|-----------------------------|--------------------------------------|------------------|------------|---------------------|----|------|------|------|-----------|
|                             |                                      | n                | M(SD)      | M(SD)               |    |      |      |      |           |
| Relationship Skills         | ABAS Attitudes towards Peer Conflict | 40               | 1.70(0.39) | 1.55(0.42)          | 39 | 2.65 | .012 | .66  |           |
|                             | TCU Assertiveness                    | 46               | 4.05(0.69) | 4.31(0.68)          | 45 | 2.98 | .005 | -.73 |           |
| Self-Management             | TCU Drug Resistance Efficacy         | 46               | 3.78(0.81) | 3.97(0.98)          | 45 | 2.04 | .047 | -.67 |           |
|                             | Youth SSIS Self-control              | 46               | 2.65(0.72) | 2.87(0.83)          | 45 | 2.66 | .011 | -.76 |           |
| Social Awareness            | Teacher SSIS Self-control            | 46               | 2.47(0.44) | 2.63(0.49)          | 45 | 2.48 | .017 | -.56 |           |
|                             | Youth SSIS Empathy                   | 46               | 2.85(0.64) | 2.95(0.82)          | 45 | 1.18 | .245 | -.30 |           |
| Responsible Decision Making | Teacher SSIS Empathy                 | 46               | 2.48(0.46) | 2.59(0.52)          | 45 | 1.36 | .181 | -.26 |           |
|                             | TCU Problem Solving Efficacy         | 46               | 3.83(0.62) | 4.11(0.88)          | 45 | 2.55 | .014 | -.60 |           |

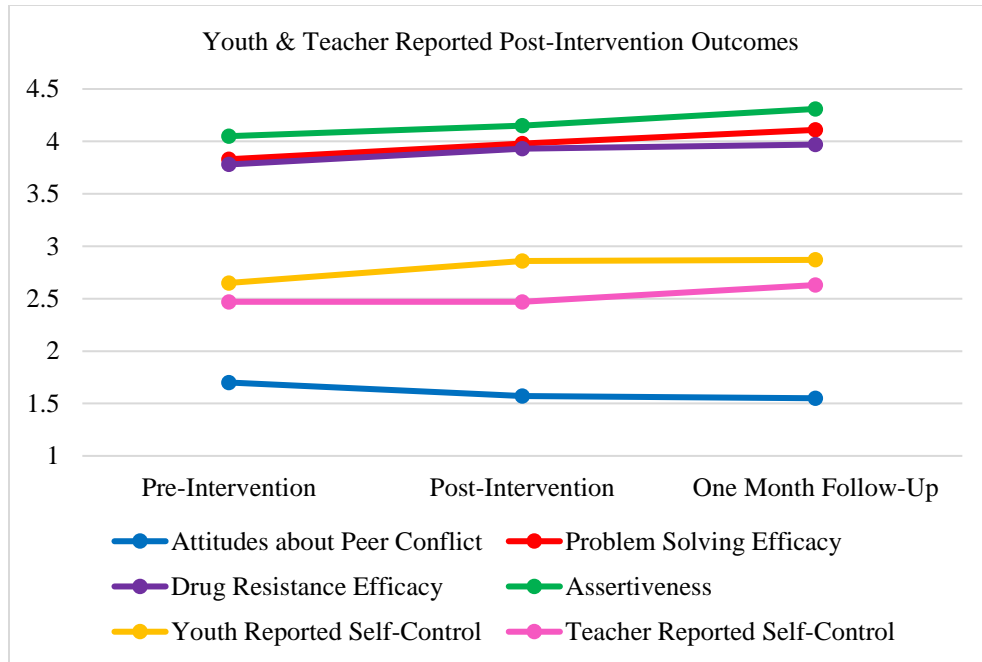


Figure 4-5. Significant self-reported youth outcomes from baseline to one-month follow-up.

Similar to the results of pre-intervention to post-intervention, there were no significant changes from pre-intervention to one-month follow-up in terms of youth and teacher-reported internalizing behaviours or youth reported externalizing behaviours. However, results indicated that teacher-reported externalizing behaviours approached significance at one-month follow-up,  $F(1, 45.0) = 3.61, p = .064, \eta_p^2 = .07, 95\% \text{ CI} = [-.27, .01]$ . Results from GLM analyses revealed no moderating effect of gender  $F(2, 43.0) = .278, p = .758, \eta_p^2 = .013, 95\% \text{ CI} = [-.55, .14]$ . Table 7 presents a summary of the means, standard deviations, and significance for bivariate comparisons of internalizing and externalizing behaviours at pre-intervention and one-month follow-up.

Table 4-7 *One-Month Follow-Up Outcomes for Problem Behaviours (Paired samples t-test Subsample of Pre-Intervention to Follow-Up)*

| Problem Behaviours | Subscales                  | Pre-Intervention |              | One-Month Follow-Up |    | <i>df</i> | <i>t</i> | <i>p</i> | <i>Cohen's d</i> |
|--------------------|----------------------------|------------------|--------------|---------------------|----|-----------|----------|----------|------------------|
|                    |                            | <i>n</i>         | <i>M(SD)</i> | <i>M(SD)</i>        |    |           |          |          |                  |
| Internalizing      | Youth SSIS                 | 45               | 2.08(0.59)   | 2.04(0.63)          | 44 | .340      | .736     | .08      |                  |
|                    | Internalizing Teacher SSIS | 46               | 2.05(0.47)   | 2.00(0.53)          | 45 | .738      | .464     | .15      |                  |
| Externalizing      | Internalizing Youth SSIS   | 45               | 2.12(0.51)   | 2.03(0.64)          | 44 | 1.19      | .242     | .35      |                  |
|                    | Externalizing Teacher SSIS | 46               | 2.01(0.40)   | 1.88(0.42)          | 45 | 1.90      | .064     | .34      |                  |
|                    | Externalizing              |                  |              |                     |    |           |          |          |                  |

## 4.7 Discussion

This study examined the preliminary SEL outcomes of the HRP-Enhanced in youth justice settings. Qualitative and quantitative findings showed that youth perceived improvements in several areas, including attitudes, assertiveness, self-control, problem-solving, empathy, drug resistance self-efficacy, and relationships skills. Of the four outcomes rated by both teachers and youth, teachers only indicated improvements in self-control.

### 4.7.1 Antisocial Attitudes towards Peer Conflict

The extant research has highlighted the importance of targeting antisocial attitudes in correctional programs. Specifically, we would expect that treatment and programs that target procriminal attitudes would lead to reduced recidivism (Skilling & Sorge, 2014). The present study found that following participation in the HRP-Enhanced, both male and female youth displayed a significant decrease in attitudes related to peer conflict (e.g., attitudes related to being part of a gang, engaging in physical fights, and carrying weapons). Reduced antisocial attitudes also remained significant in a sub-sample examined at one-month follow-up. The results also indicated gender differences in reduced attitudes towards peer conflict (males' attitudes decreased more). A possible explanation for this is the scale that measured attitudes towards peer conflict focused more on overt aggression (e.g., physically fighting and carrying a weapon). There is some evidence to suggest gender-specific aggressive behaviours. Specifically, in aggressive peer conflicts, adolescent males

typically engage in physical aggression (e.g., hitting, pushing), while females tend to engage in relational aggression (e.g., gossiping, spreading rumours, excluding) (McEachern & Snyder, 2012). It possible that the peer conflict questions did not effectively measure relational aggression.

#### **4.7.2 Self-Control**

The results of the current study indicated that youth reported self-control significantly increased following participation in the HRP-Enhanced and these changes remained significant at one-month follow-up. Though teachers did not report improved self-control at post-test, they reported a significant increase at one-month follow-up. This may suggest that the youth required time to consolidate their improved skills. Since the publication of *A General Theory of Crime* (Gottfredson & Hirschi, 1990), research has consistently found a strong relationship between low self-control and delinquent behaviours (de Ridder, Lensvelt-Mulders, Finkenauer, Stok, & Baumeister, 2012; Jo & Armstrong, 2018). Lower self-control during childhood and adolescence is also associated with other externalizing behaviours, including substance use, school dropout, and risky sexual behaviours (Moffitt et al., 2011). Piquero and colleagues (2010) conducted a meta-analysis to determine whether self-control improvement programs impact delinquency outcomes. The findings showed that self-control among children and adolescents could be improved through targeted interventions, and these interventions also reduce delinquency. The theory and empirical evidence linking self-control and antisocial behaviours suggests that the increased self-control following the HRP-Enhanced may also reduce future delinquent behaviours.

#### **4.7.3 Problem-Solving**

Social problem-solving deficits have been linked with aggression and delinquency in adolescents (Fives, Kong, Fuller, & DiGiuseppe, 2011; Jaffee & D’Zurilla, 2003). The literature consistently recommends that problem-solving training be included in treating and preventing adolescent behavioural problems (Feindler & Engel, 2011). The present study found that youth self-reported problem-solving abilities significantly increased at post-intervention and remained significant at one-month follow-up. Specifically, youth

indicated that they were more confident that they can remain calm in difficult situations, resist the urge to give up when they encounter problems, and ask an adult or friend to help them cope with a problem. Increased problem-solving skills will likely be beneficial for managing difficult situations both in custody and when youth return to the community.

#### **4.7.4 Drug Resistance Efficacy**

Research suggests elevated rates of alcohol and substance use problems among justice-involved youth (Chassin, et al., 2009). Youth who are in custody are approximately three times more likely to have had substance use problems in the past year, compared to youth in the community (Office of Applied Studies, 2004). In addition, approximately 50% of youth in custody reported using alcohol and substances at the time of their offence (DeMatteo & Marczyk, 2005). For these reasons, substance use is an important risk factor that should be targeted in treatment programs.

Measuring substance use behaviours while in custody would likely produce misleading results because youth custody facilities are restrictive environments and responses would likely reflect forced abstinence rather than choice. In restrictive settings, such as correctional facilities, it may be more beneficial to measure drug resistance self-efficacy. The present study found that youth self-reported significantly higher drug resistance efficacy at one-month follow-up. Relevant to the present study, results showed that at one-month follow-up, youth reported increased confidence in the abilities to reduce stress without using alcohol/substances and resist the temptation to use alcohol/substances when their peers are using.

#### **4.7.5 Risk Factors Often Occur in the Context of Relationships**

Justice-involved youth often have a constellation of complex problems and risk factors. These risk factors are typically relevant to interpersonal relationships. Specifically, in adolescents, relationships with antisocial peers are associated with adopting antisocial attitudes, peer associations have been linked with self-control, and peer substance use is a predictor for adolescent substance use (Cleveland, Feinbery, Bontempo, & Greenberg, 2008; Espelage, Green, & Wasserman, 2007; Franken, et al., 2016; Schunk & Meece, 2006). The HRP-Enhanced addresses multiple areas of risk in the context of relationships.

The present study found that youth assertiveness skills significantly increased at post-intervention and remained significant at one-month follow-up. In addition, youth reported empathy significantly increased at post-intervention; however, these improvements were not maintained at follow-up. A possible explanation is youth were able to develop and strengthen empathy during the highly structured HRP-Enhanced group environment, and once the group ended, youth did not have the same opportunities to practice this competency. The most robust qualitative finding in the present study was youth self-reported improvements in relationships skills with peers and others. It is possible that improvements across multiple domains (e.g., relationship skills, self-control, antisocial attitudes, problem-solving, drug resistance efficacy) led to a synergistic effect producing positive outcomes for youth.

#### **4.7.6 Potential Primer Program**

The research consistently shows that a disproportionate number of justice-involved youth struggle with significant internalizing and externalizing behaviour problems (Gearing, et al., 2017). Results of the current study indicated that participation in the HRP-Enhanced did not impact internalizing or externalizing behaviours. It is possible that over time, increased practice of healthy self-control and problem-solving skills may gradually serve to positively impact internalizing and externalizing behaviours. Alternatively, it is possible that the program's focus on cultivating SEL skills does not sufficiently address the youths' complex mental health and behavioural needs. Many youth in custody do not perceive mental health treatment as important or accessible. Specifically, they believe that their difficulties can be solved without assistance and/or they do not know how or where to seek help (Abram, Paskar, Washburn, & Teplin, 2008; Sylwestrzak, Overholt, Ristau, & Coker, 2015). The HRP-Enhanced teaches youth that mental health difficulties are prevalent, the signs and symptoms to help recognize when they, or their friends, may need help, and how to access resources and services to address their needs. While the current study did not find impacts on youth reported internalizing and externalizing behaviours, it is conceivable that participation in the HRP-Enhanced may serve as a primer program and help to eliminate some of the youths' perceived barriers to seeking more intensive mental health services. Additionally, if youth recognize the value of mental health treatment

services, they may be less likely to dropout of future interventions. Finally, teachers did not report improvements in internalizing or externalizing behaviours at post-intervention; however, they indicated that improvements in externalizing behaviours approached significance at one-month follow-up. A possible explanation is youth required time to consolidate their self-control skills which in turn, improved their externalizing behaviours.

#### **4.8 Limitations**

Although timely and important, the current study had some limitations. Results from the current quasi-experimental study suggested that participation in the HRP-Enhanced increased important SEL skills; however, the challenge with this design is it does not rule out alternative explanations for the findings. For example, the researchers did not have data about other interventions or supports that youth were accessing concurrently. Additionally, a potential threat to internal validity is the findings may be due to regression towards the mean, although there was not a noticeable change in scores between the two pre-intervention questionnaires. Another limitation is the possibility that the current findings may not generalize to other youth custody facilities. A final limitation of generalizability is most of the youth were male and Indigenous; however, these demographics mirror those of the youth justice population in Canada (Munch, 2012).

#### **4.9 Future Research**

An important direction for future research will be to investigate the HRP-Enhanced in other youth justice facilities. Specifically, it would be valuable to employ an experimental design with a larger sample size to assess for causality between the program and youth outcomes. In addition to questionnaires and focus groups, future research should also collect institutional records (e.g., behavioural incident reports) to examine whether youths' self-reported improved skills are observable. Additional sources of information are particularly important to triangulate the current findings because teacher ratings did not show the same improvements as youth self-reports. It is possible that youths' behavioural presentation varies within the facility. For example, classroom teachers may observe different behaviours compared to unit staff on the living units. Future research should also gather reports from unit staff. It is also important to conduct follow-up research with youth



once they return to the community to examine potential impacts on recidivism. Furthermore, a larger sample size would allow researchers to look at different outcomes by subgroup (e.g., gender, risk status).

#### **4.10 Conclusion**

Although we cannot make causal conclusions about program impacts of the HRP-Enhanced due to the research design of the current study, the results are nonetheless promising. These findings add to the existing research on SEL programs and provide evidence that an adapted SEL program can improve the attitudes and skills of youth offenders. Improving youths' relationship skills, attitudes, problem-solving, drug resistance efficacy, and self-control are all relevant to successfully cope with being in custody, and subsequently succeed at community reintegration.

#### 4.11 References

- Abram, K. M., Paskar, L. D., Washburn, J. J., & Teplin, L. A. (2008). Perceived barriers to mental health services among youths in detention. *Journal of the American Academy of Child & Adolescent Psychiatry*, 47(3), 301-308.
- Akers, R. L., & Jensen, G. F. (2006). The empirical status of social learning theory of crime and deviance: The past, present, and future. In F. T. Cullen, J. P. Wright, & K. R. Blevins (Eds.), *Taking stock: The status of criminological theory* (pp. 37–76). New Brunswick, NJ: Transaction Publishers.
- Andrews, D. A., & Bonta, J. (2010). *The psychology of criminal conduct (5th ed.)*. Newark, NJ: LexisNexis.
- Andrews, D. A., Bonta, J., & Wormith, S. J. (2011). The risk-need-responsivity (RNR) model. Does adding the good lives model contribute to effective crime prevention. *Criminal Justice and Behaviour*, 38(7), 735-755.
- Bandura, A. (1997). *Self-efficacy: the exercise of control*. New York, NY: Freeman.
- Bonell, C. P., Hargreaves, J., Cousens, S., Ross, D., Hayes, R., Petticrew, M., & Kirkwood, B. R. (2011). Alternatives to randomisation in the evaluation of public health interventions: design challenges and solutions. *Journal of Epidemiology & Community Health*, 65(7), 582-587.
- Butler, S. M., Leschied, A. W., & Fearon, P. (2007). Antisocial beliefs and attitudes in pre-adolescent and adolescent youth: the development of the antisocial beliefs and attitudes scales (ABAS). *Journal of Youth and Adolescence*, 36(8), 1058-1071.
- CASEL. (2015). *Social and emotional learning core competencies*. Retrieved from <http://www.casel.org/social-and-emotional-learning/core-competencies/>
- Catchpole, R. E., & Brownlie, E. B. (2016). Characteristics of youth presenting to a Canadian youth concurrent disorders program: clinical complexity, trauma,

adaptive functioning and treatment priorities. *Journal of the Canadian Academy of Child and Adolescent Psychiatry*, 25(2), 106.

- Chassin, L., Knight, G., Vargas-Chanes, D., Losoya, S. H., & Naranjo, D. (2009). Substance use treatment outcomes in a sample of male serious juvenile offenders. *Journal of Substance Abuse Treatment*, 36(2), 183-194.
- Chow, C. M., Ruhl, H., & Buhrmester, D. (2013). The mediating role of interpersonal competence between adolescents' empathy and friendship quality: A dyadic approach. *Journal of adolescence*, 36(1), 191-200.
- Cislo, A. M., & Trestman, R. (2013). Challenges and solutions for conducting research in correctional settings: The US experience. *International journal of law and psychiatry*, 36(3-4), 304-310.
- Cleveland, M. J., Feinberg, M. E., Bontempo, D. E., & Greenberg, M. T. (2008). The role of risk and protective factors in substance use across adolescence. *Journal of Adolescent Health*, 43(2), 157-164.
- Cohen, J. (1988). *Statistical power analysis for the behavioral sciences* (2nd ed.). Mahwah, NJ: Erlbaum.
- Corcoran, R. P., Cheung, A. C., Kim, E., & Xie, C. (2018). Effective Universal school-based social and emotional learning programs for improving academic achievement: A systematic review and meta-analysis of 50 years of research. *Educational Research Review*, 25, 56-72.
- Crooks, C., Chiodo, D., Dunlop, C., Lapointe, A., & Kerry, A. (2018). The Fourth R: Considerations for implementing evidence-based healthy relationships and mental health promotion programming in diverse contexts. In A. Leschied, D. Saklofske, & G. Flett (Eds.), *The Handbook of Implementation of School Based Mental Programs*. New York, NY: Springer Publishing.

- de Ridder, Lensvelt-Mulders, G., Finkenauer, C., Stok, F., & Baumeister, R. (2012). Taking stock of self-control: A meta-analysis of how trait self-control relates to a wide range of behaviors. *Personality and Social Psychology Review, 16*, 76-99.
- De Vries, S., Hoeve, M., Assink, M., Stams, G., & Asscher, J. (2015). Practitioner Review: Effective ingredients of prevention programs for youth at risk of persistent juvenile delinquency- recommendations for clinical practice. *Journal of Child Psychology and Psychiatry, 56*(2), 108-121.
- De Wied, M., Branje, S. J., & Meeus, W. H. (2007). Empathy and conflict resolution in friendship relations among adolescents. *Aggressive Behavior: Official Journal of the International Society for Research on Aggression, 33*(1), 48-55.
- DeMatteo, D., & Marczyk, G. (2005). Risk factors, protective factors, and prevention of antisocial behavior among juveniles. In K. Heilburn, N.E. Seven Goldstein, & R.E. Redding (Eds.). *Juvenile delinquency: Prevention, assessment, and intervention (pp. 19-44)*. New York: Oxford University Press.
- Durlak, J., Weissberg, R., Dymnicki, A., Taylor, R., & Schellinger, K. (2011). The impact of enhancing students' social and emotional learning: A meta-analysis of school-based universal interventions. *Child Development, 82*(1), 405-432.
- Espelage, D. L., Green Jr, H. D., & Wasserman, S. (2007). Statistical analysis of friendship patterns and bullying behaviors among youth. *New directions for child and adolescent development, 2007*(118), 61-75.
- Exner-Cortens, D., Wolfe, D. A., Crooks, C. V., & Chiodo, D. (2019). A randomized controlled evaluation of a universal healthy relationships program for youth. *Canadian Journal of School Psychology*
- Farrington, D.P., & Welsh, B.C. (2005). Randomized experiments in criminology: What have we learned in the last two decades? *Journal of Experimental Criminology, 1*, 9-38.

- Feindler, E. L., & Engel, E. C. (2011). Assessment and intervention for adolescents with anger and aggression difficulties in school settings. *Psychology in the Schools, 48*(3), 243-253.
- Fives, C. J., Kong, G., Fuller, J. R., & DiGiuseppe, R. (2011). Anger, aggression, and irrational beliefs in adolescents. *Cognitive therapy and research, 35*(3), 199-208.
- Franken, A., Moffitt, T. E., Steglich, C. E., Dijkstra, J. K., Harakeh, Z., & Vollebergh, W. A. (2016). The role of self-control and early adolescents' friendships in the development of externalizing behavior: The SNARE study. *Journal of youth and adolescence, 45*(9), 1800-1811.
- Fritz, M. V., Wiklund, G., Kuposov, R. A., af Klinteberg, B., & Ruchkin, V. V. (2008). Psychopathy and violence in juvenile delinquents: What are the associated factors?. *International journal of law and psychiatry, 31*(3), 272-279.
- Gearing, R. E., Schwalbe, C. S., MacKenzie, M. J., Ibrahim, R. W., Bushnaq, S., & Brewer, K. B. (2017). C-FIT adolescent diversion program: A behavioral intervention pilot test for delinquent offenders. *International Social Work, 60*(5), 1111-1125.
- Gottfredson, M., & Hirschi, T. (1990). *A general theory of crime*. Stanford, CA: Stanford University Press.
- Gresham, F., & Elliott, S. (2008). *Social Skills Improvement System-Rating Scales manual*. Minneapolis, MN: Pearson Assessments.
- Gresham, F. M., Elliott, S. N., Vance, M. J., & Cook, C. R. (2011). Comparability of the Social Skills Rating System to the Social Skills Improvement System: Content and psychometric comparisons across elementary and secondary age levels. *School Psychology Quarterly, 26*(1), 27.
- Guerra, N., Kim, T., and Boxer, P. (2008). What works: Best practices with juvenile offenders. In R. Hoge, N. Guerra, & P. Boxer (Eds.), *Treating the Juvenile Offender, 79-102*. New York, NY: Guilford Press.

- Handley, M. A., Schillinger, D., & Shiboski, S. (2011). Quasi-experimental designs in practice-based research settings: design and implementation considerations. *J Am Board Fam Med*, *24*(5), 589-596.
- Hawkins, J. D., & Weis, J. G. (2017). The social development model: An integrated approach to delinquency prevention. In *Developmental and Life-course Criminological Theories* (pp. 3-27). Routledge.
- Hay, C., & Forrest, W. (2006). The development of self-control: Examining self-control theory's stability thesis. *Criminology*, *44*(4), 739-774.
- Higgins, G. E., Jennings, W. G., Tewksbury, R., & Gibson, C. L. (2009). Exploring the link between low self-control and violent victimization trajectories in adolescents. *Criminal Justice and Behavior*, *36*(10), 1070-1084.
- Hopkins, T., Clegg, J., & Stackhouse, J. (2016). Young offenders' perspectives on their literacy and communication skills. *International Journal of Language & Communication Disorders*, *51*(1), 95-105.
- Hubbard, D. J., & Pratt, T. C. (2002). A meta-analysis of the predictors of delinquency among girls. *Journal of Offender Rehabilitation*, *34*(3), 1-13.
- Institute of Behavioral Research. (2010). *TCU Adolescent Thinking Form B (TCU ADOL THKForm B)*. Fort Worth: Texas Christian University, Institute of Behavioral Research.
- Jaffee, W., & D'Zurilla, T. (2003). Adolescent problem solving, parent problem solving, and externalizing behavior in adolescents. *Behavior Therapy*, *34*, 295-311.
- Jo, Y., & Armstrong, T. (2018). The development of self-control in late adolescence: an analysis of trajectories and predictors of change within trajectories. *International journal of offender therapy and comparative criminology*, *62*(1), 50-72.
- Knight, A., Shakeshaft, A., Havard, A., Maple, M., Foley, C., & Shakeshaft, B. (2017). *Australian and New Zealand Journal of Public Health*, *41*(1), 54-60.

- Knight, D. K., Becan, J. E., Landrum, B., Joe, G. W., & Flynn, P. M. (2014). Screening and assessment tools for measuring adolescent client needs and functioning in substance abuse treatment. *Substance use & misuse, 49*(7), 902-918.
- Knight, D. K., Joe, G. W., Crawley, R. D., Becan, J. E., Dansereau, D. F., & Flynn, P. M. (2016). The effectiveness of the Treatment Readiness and Induction Program (TRIP) for improving during-treatment outcomes. *Journal of substance abuse treatment, 62*, 20-27.
- Laal, M., & Ghodsi, S. M. (2012). Benefits of collaborative learning. *Procedia-social and behavioral sciences, 31*, 486-490.
- Lapshina, Crooks, & Kerry. (2018). Changes in depression and positive mental health among youth in a healthy relationships program. *Canadian Journal of School Psychology, 1-17*.
- Latimer, J., Dowden, C., Morton-Bourgon, K., Edgar, J., and Bania, M. (2003). *Treating youth in conflict with the law: A new meta-analysis*. Department of Justice Canada.
- Lipsey, M. W. (2009). The primary factors that characterize effective interventions with juvenile offenders: A meta-analytic overview. *Victims and offenders, 4*(2), 124-147.
- Lipsey, M. W., & Howell, J. C. (2012). A broader view of evidence-based programs reveals more options for state juvenile justice systems. *Criminology & Public Policy, 11*, 515.
- Lipsey, M., Howell, J., Kelly, M., Chapman, G., & Carver, D. (2010). Improving the effectiveness of juvenile justice programs: A new perspective on evidence-based practice. Centre for Juvenile Justice Reform.
- McEachern, A. D., & Snyder, J. (2012). Gender differences in predicting antisocial behaviors: Developmental consequences of physical and relational aggression. *Journal of abnormal child psychology, 40*(4), 501-512.

- McLaughlin, K. A., Hatzenbuehler, M. L., Mennin, D. S., & Nolen-Hoeksema, S. (2011). Emotion dysregulation and adolescent psychopathology: A prospective study. *Behaviour research and therapy*, 49(9), 544-554.
- Miller, H. V. (2010). If your friends jumped off of a bridge, would you do it too? Delinquent peers and susceptibility to peer influence. *Justice Quarterly*, 27(4), 473-491.
- Moffitt, T. E., Arseneault, L., Belsky, D., Dickson, N., Hancox, R. J., Harrington, H., ... & Sears, M. R. (2011). A gradient of childhood self-control predicts health, wealth, and public safety. *Proceedings of the National Academy of Sciences*, 108(7), 2693-2698.
- Monahan, K. C., Rhew, I. C., Hawkins, J. D., & Brown, E. C. (2014). Adolescent pathways to co-occurring problem behavior: The effects of peer delinquency and peer substance use. *Journal of research on adolescence*, 24(4), 630-645.
- Mulder, E., Brand, E., Bullens, R., & Van Marle, H. (2011). Risk factors for overall recidivism and severity of recidivism in serious juvenile offenders. *International Journal of Offender Therapy and Comparative Criminology*, 55(1), 118-135.
- Munch, C. (2012). Youth correctional statistics in Canada, 2010/2011. *Canadian Centre for Justice Statistics, Juristat*.
- Piquero, A. R., Jennings, W. G., & Farrington, D. P. (2010). On the malleability of self-control: Theoretical and policy implications regarding a general theory of crime. *Justice Quarterly*, 27(6), 803-834.
- Ray, J. V., Jones, S., Loughran, T. A., & Jennings, W. G. (2013). Testing the stability of self-control: Identifying unique developmental patterns and associated risk factors. *Criminal Justice and Behavior*, 40(6), 588-607.
- Rodriguez, N. (2007). Restorative justice at work: Examining the impact of restorative justice resolutions on juvenile recidivism. *Crime & Delinquency*, 53(3), 355-379.



- Röll, J., Koglin, U., & Petermann, F. (2012). Emotion regulation and childhood aggression: Longitudinal associations. *Child Psychiatry & Human Development*, 43(6), 909-923.
- Royal Canadian Mounted Police. (2013). Project SAFEKEEPING - Domestic human trafficking for sexual exploitation in Canada. Retrieved from Government of Canada Publications website: <http://www.publications.gc.ca/site/eng/9.698821/publication.html>
- Schunk, D., & Meece, J. (2006). Self-efficacy development in adolescence. In T. Urdan, & F. Pajares (Eds.). *Self efficacy beliefs of adolescents (pp. 71-96)*. IAP.
- Stewart, S. L., Currie, M., Arbeau, K., Leschied, A., & Kerry, A. (2015). Assessment and Planning for Community and Custodial Services: The Application of interRAI Assessment in the Youth Justice System. In R. Corrado & A. Leschied (Eds.), *Serious and Violent Young Offenders and Youth Criminal Justice: A Canadian Perspective*, 356-397. Vancouver: Simon Fraser University Press.
- Sylwestrzak, A., Overholt, C. E., Ristau, K. I., & Coker, K. L. (2015). Self-reported barriers to treatment engagement: adolescent perspectives from the National Comorbidity Survey-Adolescent supplement (NCS-A). *Community mental health journal*, 51(7), 775-781.
- Tangney, J. P., Stuewig, J., Furukawa, E., Kopelovich, S., Meyer, P. J., & Cosby, B. (2012). Reliability, validity, and predictive utility of the 25-item Criminogenic Cognitions Scale (CCS). *Criminal justice and behavior*, 39(10), 1340-1360.
- Taylor, R. D., Oberle, E., Durlak, J. A., & Weissberg, R. P. (2017). Promoting positive youth development through school-based social and emotional learning interventions: A meta-analysis of follow-up effects. *Child development*, 88(4), 1156-1171.

- Toumbourou, J. W., Stockwell, T., Neighbors, C., Marlatt, G. A., Sturge, J., & Rehm, J. (2007). Interventions to reduce harm associated with adolescent substance use. *The Lancet*, *369*(9570), 1391-1401.
- Townsley, D., Crooks, C., Kerry, A., Dale, S., & Hughes, R. (2017). *Healthy relationships plus program: A Fourth R small groups program to promote healthy relationships and positive mental health enhanced for vulnerable youth and youth in the justice system*. Copyright © The University of Western Ontario.
- Wiklund, G., Ruchkin, V. V., Kuposov, R. A., & af Klinteberg, B. (2014). Pro-bullying attitudes among incarcerated juvenile delinquents: Antisocial behavior, psychopathic tendencies and violent crime. *International journal of law and psychiatry*, *37*(3), 281-288.
- Wolfe, D. (2016). The Fourth R: Strategies for healthy youth relationships. Retrieved from <https://youthrelationships.org/>
- Wolff, J. M., & Crockett, L. J. (2011). The role of deliberative decision making, parenting, and friends in adolescent risk behaviors. *Journal of youth and adolescence*, *40*(12), 1607-1622.

## Chapter 5

### 5 Social-Emotional Learning in Youth Justice Settings: Conclusion

I began this integrated dissertation with a discussion of the complex needs of justice-involved youth. These youth come to the attention of the justice system because of their offending behaviours; however, their criminal behaviours are not the only presenting problems. Bronfenbrenner's ecological model describes how individuals are embedded in a variety of environments, including family, friends, school, and community (Bronfenbrenner, 1979). Justice-involved youth often experience challenges in multiple environments, which not only increases their risk factors, but also limits their exposure to healthy, positive opportunities to cultivate effective social-emotional skills. Consequently, many of these youth are not equipped with the appropriate skills to successfully navigate life's challenges. In Chapter Two, we reviewed the risk and protective factors for youth offending and proposed the implementation of social-emotional learning (SEL) programs in youth justice settings. Multi-target SEL programs have produced positive youth outcomes in community schools and implementing these programs with justice-involved youth is consistent with the youth justice field's heightened interest in evidence-based programs (Durlak, Weissberg, Dymnicki, Taylor, & Schellinger, 2011; Lipsey, 2014). The final chapter of this dissertation is organized to present an integrated summary of key findings, discuss limitations, and provide implications for research, practice, and policy.

#### 5.1 Research Findings and Contributions

In Chapter Three, the results from our two-phase feasibility study were presented. Findings from phase one demonstrated that an existing SEL program (*Healthy Relationships Plus Program - HRPP*) was feasible, acceptable, and useful for youth-justice populations. However, staff identified several important program adaptations to appropriately match the needs of youth offenders and the constraints of youth justice settings. Subsequently, the program was revised based on the data collected in phase one and the literature on empirically-based components of youth justice programs. Adaptations included higher risk scenarios, enhanced coping skill development, additional content on dating violence and sexual exploitation, more harm-reduction strategies, and the

integration of a trauma-informed approach. Phase two piloted the adapted program (*Healthy Relationships Plus - Enhanced Program, HRP - Enhanced*). Results from phase two indicated that both male and female youth reported high levels of acceptability and utility of the HRP-Enhanced program.

When examining the effectiveness of youth justice programs, measuring reductions in reoffending is important; however, it is not the only measure of success. Improvement is not merely the absence of anti-social behaviour, but also the development of positive, prosocial behaviour (Rodriguez & Baille, 2010). Chapter Four presented a mixed method, quasi-experimental design study that explored the preliminary youth outcomes associated with participation in the HRP-Enhanced program. Qualitative and quantitative findings showed that youth perceived improvements in all SEL competencies. Specifically, youth reported significant improvements in attitudes towards peer conflict, assertiveness, self-control, problem-solving, empathy, drug resistance self-efficacy, and relationships skills. Notably, many of these outcomes remained significant at one-month follow-up. Teachers reported improvements in youth self-control and externalizing behaviours at follow-up.

Taken together, results from Chapters Three and Four indicate that an SEL program adapted for youth justice settings is both feasible and produced promising empirical outcomes (Figure 1). Future research is needed to replicate and expand these findings.

|          |        | Fit & Feasibility   |   |  |
|----------|--------|---|---|--|
|          |        | Poor  |   | Good   |
| Evidence | Weak   | Untested or ineffective <u>and</u> poor fit and feasibility | Untested or ineffective <u>and</u> some challenges to fit and feasibility | Untested or ineffective <u>but</u> good fit and feasibility        |
|          |        | Promising effectiveness <u>but</u> poor fit and feasibility | Promising effectiveness <u>but</u> some challenges to fit and feasibility | <b>Promising effectiveness <u>and</u> good fit and feasibility</b> |
|          | Strong | Evidence-based <u>but</u> poor fit and feasibility          | Evidence-based <u>but</u> some challenges to fit and feasibility          | Evidence-based <u>and</u> good fit and feasibility                 |

Figure 5-1. The results of this integrated dissertation indicate that the HRP-Enhanced demonstrates good fit and feasibility and promising effectiveness (EpisCenter, 2013).

## 5.2 Limitations

While the results of this integrated dissertation are promising, the generalizability of these results may be limited because most of the youth were male and Indigenous. However, these demographics mirror those of the youth justice population in Canada (Munch, 2012). These results may not generalize to other youth correctional facilities and youth justice jurisdictions because the sites that participated in the research were eager to implement the program. In addition, while the Youth Criminal Justice Act (YCJA) is federal legislation, there is some variation across provincial and territorial jurisdictions (Department of Justice, 2013).

## 5.3 Future Directions

An important direction for future research will be to investigate the HRP-Enhanced in other youth justice facilities across Canada. Results from this dissertation indicate that participation in the HRP-Enhanced is associated with positive youth outcomes. It would be interesting to investigate whether there is a differential response (i.e., who responds most to the program). Specifically, future studies should investigate if youth risk level (e.g., low, moderate, high risk) moderates the HRP-Enhanced outcomes. While the HRP-Enhanced demonstrated good youth completion rates, programs implemented in youth justice settings

are known to have high attrition rates (Mulcahy, Krezmien, Leon, Houchins, & Baltodano, 2008). Further studies should examine program dosage and aim to identify how much of the HRP-Enhanced program is needed to achieve positive SEL outcomes.

In this integrated dissertation, the HRP-Enhanced was examined in open and secure custody facilities, as well as a residential treatment facility for at-risk and justice-involved youth. Another direction for future research would be to explore where in the youth justice pathway the HRP-Enhanced is most appropriate, or if it is equally effective across services. For example, the HRP-Enhanced can be evaluated in alternative education programs and attendance centres that serve students who have been expelled or are justice-involved. The program can also be evaluated in diversion programs (when youth are redirected from court), probation orders (youth serving their sentence in the community), as well as open and secure custody facilities.

Another interesting research area is exploring the effectiveness of the HRP-Enhanced with youth who are dually involved in the child welfare and youth justice system (also known as *crossover youth*; Herz, Ryan, & Bilchik, 2010). During a youth focus groups for this dissertation, one female youth reported, “*Most of us are in CFS (Child & Family Services)*” (Female, age 16). Research consistently indicates that crossover youth are overrepresented in the youth justice system (Bala, De Filippis, & Hunter, 2013; Herz et al., 2010). Possible explanations for the overrepresentation include, these youth have complex needs (e.g., maltreatment, family disruption, multiple out-of-home placements, emotional and behavioural difficulties) and their behaviours are more likely to result in charges (e.g., property-related offences, assault, breaching supervision conditions) compared to youth with no history of child welfare involvement (Bala et al., 2013; Herz et al., 2010; Young, Bowley, Bilanin, & Ho, 2015). Future research should explore whether participation in the HRP-Enhanced can prevent youth involved in child welfare services from entering the youth justice system and whether the program can improve outcomes for crossover youth.

Finally, future research should include a follow-up study to assess the long-term outcomes once justice-involved youth are reintegrated to the community. Research

suggests that youth offenders' social-emotional difficulties often persist beyond release from custody facilities because these youth do not receive the necessary services before incarceration or while in custody (Anthony et al., 2010). Further research is needed to explore whether the youths' improved SEL skills following participation in HRP-Enhance transfer to the community and whether improved skills promote healthy functioning and reduce recidivism. An interesting possibility to support the transfer of skills to the community is youth participation in a booster session (an additional session after completion of the HRP-Enhanced). Some research suggests that booster sessions lead to more stable positive outcomes, while other research has found that booster sessions did not improve the effectiveness of violence prevention programs (Bundy, McWhirter, McWhirter, 2011; Foshee et al., 2004).

#### **5.4 Implications for Practice**

Many existing correctional programs (i.e., anger management and substance use) are designed to increase knowledge through psychoeducational lectures and having youth complete worksheets and homework. However, the research consistently suggests that interactive teaching strategies (i.e., group work and role plays) are more effective and engaging for youth compared to exclusively didactic instruction (Durlak & Weissberg, 2007). Results from Chapter Three indicate that staff and youth appreciated the interactive activities included the HRPP and HRP-Enhanced. Specifically, they identified the interactive nature of the program as a key factor related to program acceptability. Not only did the staff and youth appreciate the interactive activities because they were more engaging, the activities were also more accessible to youth because of the reduced emphasis on reading and writing.

The HRP-Enhanced addresses both risk and protective factors for justice-involvement. Removing risk factors and problem behaviours alone does not support the positive development of youth. We must also equip justice-involved youth with skills to effectively navigate their environment and feel confident and competent to communicate their needs, manage difficult situations, and make healthy decisions. SEL skills can also be targeted beyond group programs and can be reinforced throughout the day by staff. Many youth correctional facilities have a level system (e.g., youth who earn higher levels receive more

privileges) and advancement through the level system is contingent on not engaging in inappropriate behaviours (e.g., swearing, aggression, non-compliance). Rather than focusing primarily on extinguishing negative behaviours, more emphasis should be placed on shaping positive behaviours, specifically SEL skills. To encourage the practice and consolidation of SEL skills, these skills should be added as target behaviours to achieve a higher privilege level at custody facilities.

### **5.5 Implications for Policy**

Research has highlighted the importance of selecting and implementing evidence-based youth justice programs (Lipsey, Howell, Kelly, Chapman, & Carver, 2010). Given the existing body of research indicating the benefits of community school-based SEL programs and the findings from the current dissertation, youth justice policy-makers should consider selecting SEL programs that have been adapted to match the needs of youth offenders and are evidence based.

While youth involved in the justice system have made poor choices and engaged in negative behaviours, their voices are important and should be considered when making program decisions. Youth perspectives are imperative to inform programs that directly impact youth (Heffernan et al., 2017). In Chapter Three, justice-involved youth meaningfully participated in focus groups and provided valuable feedback. The youth justice system should strive to ensure that the youth voices are heard at all levels (e.g., frontline staff, program facilitators, administrators, and policy-makers) and their suggestions should be integrated where appropriate. Their feedback collected for this dissertation indicated that they are proponents of the HRP-Enhanced.

### **5.6 Conclusion**

Overall, this integrated dissertation provided evidence that the HRP-Enhanced is feasible and associated with positive youth outcomes. These findings suggest that SEL programs can be integrated into the youth justice system and promote the development of SEL competencies among justice-involved youth. Future research should continue to explore SEL programs in youth justice settings.



## 5.7 References

- Anthony, E. K., Samples, M. D., De Kervor, D. N., Ituarte, S., Lee, C., & Austin, M. J. (2010). Coming back home: The reintegration of formerly incarcerated youth with service implications. *Children and Youth Services Review, 32*(10), 1271-1277.
- Bala, N. C., De Filippis, R., & Hunter, K. (2013). *Crossover youth: Improving Ontario's responses*. Ontario Chapter of the Association of Family & Conciliation Courts.
- Bundy, A., McWhirter, P. T., & McWhirter, J. J. (2011). Anger and violence prevention: Enhancing treatment effects through booster sessions. *Education and Treatment of Children, 1-14*.
- Bronfenbrenner, U. (1979). *The ecology of human development*. Boston, MA: Harvard University Press.
- Department of Justice Canada. (2013). *The youth criminal justice act: Summary and background*. Retrieved from <http://www.justice.gc.ca/eng/cj-jp/yj-jj/tools-outils/pdf/back-hist.pdf>
- Durlak, J. A., & Weissberg, R. P. (2007). The Impact of After-School Programs that Promote Personal and Social Skills. *Collaborative for academic, social, and emotional learning (NJ1)*.
- Durlak, J. A., Weissberg, R. P., Dymnicki, A. B., Taylor, R. D., & Schellinger, K. B. (2011). The impact of enhancing students' social and emotional learning: A meta-analysis of school-based universal interventions. *Child development, 82*(1), 405-432.
- EpisCenter, Penn State (2013). *The Pennsylvania Youth Survey (PAYS) Guide: Program fit & feasibility*.
- Foshee, V. A., Bauman, K. E., Ennett, S. T., Linder, G. F., Benefield, T., & Suchindran, C. (2004). Assessing the long-term effects of the Safe Dates program and a booster

in preventing and reducing adolescent dating violence victimization and perpetration. *American journal of public health*, 94(4), 619-624.

Heffernan, O. S., Herzog, T. M., Schiralli, J. E., Hawke, L. D., Chaim, G., & Henderson, J. L. (2017). Implementation of a youth-adult partnership model in youth mental health systems research: Challenges and successes. *Health Expectations*, 20(6), 1183-1188.

Herz, D. C., Ryan, J. P., & Bilchik, S. (2010). Challenges facing crossover youth: An examination of juvenile-justice decision making and recidivism. *Family court review*, 48(2), 305-321.

Lipsey, M. W. (2014). Interventions for juvenile offenders: A serendipitous journey. *Criminology & Public Policy*, 13(1), 1-14.

Lipsey, M. W., Howell, J. C., Kelly, M. R., Chapman, G., & Carver, D. (2010). Improving the effectiveness of juvenile justice programs. *Washington DC: Center for Juvenile Justice Reform at Georgetown University*.

Mulcahy, C. A., Krezmien, M. P., Leone, P. E., Houchins, D. E., & Baltodano, H. (2008). Lessons learned: Barriers and solutions for conducting reading investigations in juvenile corrections settings. *Reading & Writing Quarterly*, 24(2), 239-252.

Munch, C. (2012). Youth correctional statistics in Canada, 2010/2011. *Canadian Centre for Justice Statistics, Juristat*.

Rodriguez, P. F., & Baille, D. M. (2010). Reforming our expectations about juvenile justice. *Reclaiming Children and Youth*, 19(2), 43-46.

Young, D., Bowley, A., Bilanin, J., & Ho, A. (2015). Traversing two systems: An assessment of crossover youth in Maryland. Retrieved from the National Criminal Justice Reference Service website: <https://www.ncjrs.gov/pdffiles1/nij/grants/248679.pdf>.

## Appendix

### Appendix A: Western University Ethics Approval



Date: 3 October 2017  
To: Dr. Claire Crooks  
Project ID: 106918  
Study Title: Healthy Relationships Plus eval  
Application Type: NMREB Amendment Form  
Review Type: Full Board/Delegated  
Date Approval Issued: 03/Oct/2017 13:50  
REB Approval Expiry Date: 30/Jul/2018

Dear Dr. Claire Crooks ,

The Western University Non-Medical Research Ethics Board (NMREB) has reviewed the application and approved the amendment, as of the date noted above.

#### Documents Approved:

| Document Name  | Document Date | Document Version |
|--|---------------|------------------|
| Appendix JJ CLEAN CHANGES- Protocol for Youth Offender Focus Group-Winnipeg (Sept 26, 2017)    | 26/Sep/2017   | 2                |
| Appendix KK CLEAN CHANGES- Youth Justice- Teacher Pre- Survey 2017 (Sept 26, 2017)             | 26/Sep/2017   | 2                |
| Appendix LL CLEAN CHANGES- Youth Justice- Teacher Post- Survey 2017 (Sept 26, 2017)            | 26/Sep/2017   | 2                |
| Appendix MM CLEAN CHANGES Youth Justice- Teacher 3-Month Follow-Up Survey 2017 (Sept 26, 2017) | 26/Sep/2017   | 2                |
| Appendix NN CLEAN CHANGES HRPP Youth Justice Parent LOI and Consent Form (Sept 2017)           | 26/Sep/2017   | 2                |
| Appendix OO CLEAN CHANGES HRPP Youth Justice Youth LOI and Assent Form (Sept 26 2017)          | 26/Sep/2017   | 2                |
| Appendix PP CLEAN CHANGES HRPP Youth Justice Youth LOI and Consent Form (Sept 26 2017)         | 26/Sep/2017   | 2                |
| Appendix QQ CLEAN CHANGES HRPP Youth Justice Teacher LOI and Consent Form 2017 (Sept 26, 2017) | 26/Sep/2017   | 2                |

REB members involved in the research project do not participate in the review, discussion or decision.

The Western University NMREB operates in compliance with the Tri-Council Policy Statement Ethical Conduct for Research Involving Humans (TCPS2), the Ontario Personal Health Information Protection Act (PHIPA, 2004), and the applicable laws and regulations of Ontario. Members of the NMREB who are named as Investigators in research studies do not participate in discussions related to, nor vote on such studies when they are presented to the REB. The NMREB is registered with the U.S. Department of Health & Human Services under the IRB registration number IRB 00000941.

Please do not hesitate to contact us if you have any questions.

Sincerely,

Kelly Patterson



Date: 2 February 2018

To: Dr. Claire Crooks

Project ID: 106918

Study Title: Promoting healthy relationships, wellbeing, and preventing risky behaviours: Implementation of the Fourth R Healthy Relationships Plus Program

Application Type: NMREB Amendment Form

Review Type: Delegated Full Board

Meeting Date / Full Board Reporting Date:

Date Approval Issued: 02/Feb/2018 16:41

REB Approval Expiry Date: 30/Jul/2018

Dear Dr. Claire Crooks,

The Western University Non-Medical Research Ethics Board (NMREB) has reviewed and approved the WREM application form for the amendment, as of the date noted above.

**Documents Approved:**

| Document Name  | Document Type          | Document Date | Document Version |
|--|------------------------|---------------|------------------|
| Appendix NN CLEAN CHANGES HRPP Youth Justice Parent LOI and Consent Form (November 2017)       | Written Consent/Assent |               |                  |
| Appendix OO CLEAN CHANGES HRPP Youth Justice Youth LOI and Consent Form (November 2017)        | Written Consent/Assent |               |                  |
| Appendix RR - Youth Consent Form   | Written Consent/Assent |               |                  |
| Appendix SS NEW Facilitator LOI- Focus group only revised January 29, 2018 clean               | Written Consent/Assent |               |                  |
| Appendix VV NEW Interview guide for girls groups   | Interview Guide        |               |                  |
| Appendix WW NEW LOI for guardians for girls groups   | Written Consent/Assent |               |                  |
| Appendix XX NEW LOI for youth 18+ for girls groups   | Written Consent/Assent |               |                  |
| Appendix YY NEW Youth assent for girls groups  | Written Consent/Assent |               |                  |
| Appendix PP CLEAN CHANGES HRPP Youth Justice Youth LOI and Assent Form (November 2017)         | Written Consent/Assent |               |                  |
| Appendix QQ CLEAN CHANGES HRPP Youth Justice Teacher LOI and Consent Form 2017 (November 2017) | Written Consent/Assent |               |                  |

**Documents Acknowledged:**

| Document Name   | Document Type       | Document Date | Document Version |
|---|---------------------|---------------|------------------|
| CLEAN CHANGES Ethics- Health Canada Protocol (January 18, 2018)   | Cover Letters/Memos |               |                  |
| crooks response to recommendations January 26, 2018               | Cover Letters/Memos |               |                  |
| overview of changes Dec 21 2017                                   | Cover               |               |                  |
| TRACKED CHANGES Ethics- Health Canada Protocol (December 21 2017) | Cover Letters/Memos |               |                  |
| TRACKED CHANGES Ethics- Health Canada Protocol (January 18, 2018) | Cover Letters/Memos |               |                  |

REB members involved in the research project do not participate in the review, discussion or decision.

The Western University NMREB operates in compliance with the Tri-Council Policy Statement Ethical Conduct for Research Involving Humans (TCPS2), the Ontario Personal Health Information Protection Act (PHIPA, 2004), and the applicable laws and regulations of Ontario. Members of the NMREB who are named as Investigators in research studies do not participate in discussions related to, nor vote on such studies when they are presented to the REB. The NMREB is registered with the U.S. Department of Health & Human Services under the IRB registration number IRB 00000941.

Please do not hesitate to contact us if you have any questions.

Sincerely,

, Research Ethics Officer on behalf of Dr. Randal Graham, NMREB Chair

, Research Ethics Officer on behalf of Dr. Riley Hinson, NMREB Vice-Chair

*Note: This correspondence includes an electronic signature (validation and approval via an online system that is compliant with all regulations).*

## **Appendix B. Protocol for Administrator Interviews & Facilitator Focus Groups**

# **Protocol for Interviews & Focus Groups**

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### **Objectives**

The interview will elicit discussion about administrator experiences/facilitator experiences with the Fourth R - Healthy Relationships Plus Program. The objective of the interview will be to assess the success and challenges of implementation in a youth justice setting. Additionally, other program logistic details will be discussed, such as how youth were selected for the program, staff's attitudes towards the programs, and the perceived compatibility of the programs in youth custody facilities.

### **Logistics**

The facilitators and the Western researchers will be present in the room. The structure will be semi-structured interviews using open-ended questions.

### **Structure**

The questions below will provide the framework for the focus group discussion. Answers provided by facilitators may affect the order in which the questions are asked and what types of additional questions/prompts are used. Follow-up questions may be used, when appropriate, to gather further information on perceived changes. Note: Facilitator tracking forms will augment the feedback provided to us orally during these focus groups.

### **Materials Required**

- Computer to record facilitator responses
- Tape recorded to audio record facilitator responses

### **Interview & Focus Group Outline**

#### **PART 1: Introduction**

This should be read by the Western Researcher. *“The purpose of this interview/focus group is to get your feedback about the Healthy Relationships Plus Program. Typically, our findings from interviews/focus groups are used to make changes and adaptations to existing programming, so please share your honest feelings, positive or negative, that will help enhance the program. Please note that everything you say will be kept confidential and identifying information will not be used in any reports.”*

## **PART 2: Open-Ended Questions**

### **General Program Feedback Questions**

1. Briefly describe the types of youth who participated in the programs (age, academic ability, skills, other developmental concerns, etc.)
2. Can you tell us about how youth were selected for the programs?
3. Overall, what are some of your general impressions about the program (successes/challenges)?
4. How does Healthy Relationships Plus Program (HRPP) compare to other programs that your sites implement?
5. Do you think the HRPP compliment or pair well with any of the other programs offered?

### **Facilitators (*Questions exclusively for administrators*)**

6. What is your perception of your staff's willingness to implement the program?
7. What personal and professional qualities do you think a facilitator should have to promote effective implementation?
8. How would you describe the staff turnover at your facility?

### **Role Plays (*Questions exclusively for facilitators*)**

9. Did you do the role plays with your youth?
10. Tell us about how the role plays were received by the youth. Were they able to practice the skills? Do you feel the scenarios were relevant to the youth?

### **Skill Development**

11. Describe any changes you have seen in the youth over the course of delivering the program?
12. Have you had the opportunity to see the youth use any skills outside of program time?
13. What changes are you expecting or hoping for in the youth who participate in the HRPP?
13. What is it about the HRPP that helps youth achieve those changes?

## **Challenges, Barriers, Recommendations**

14. How can we improve the program? Recommendations?
15. What advice would you give administrators at other youth justice settings who would like to implement these programs?

## **Program Logistics in a Youth Justice Setting**

16. There are many factors that contribute to youth offending. Which factors do you think were addressed by the program and which factors were not?
17. In terms of program engagement and willingness to integrate the skills into their lives, did you observe any differences in:
  - a. Male versus female youth?
  - b. Younger versus older youth?
  - c. First time versus repeat offenders?
18. Some literature suggests that putting anti-social youth in a group can lead to peer contagion, meaning youth learn additional deviant behaviours and attitudes from each other. Did you observe this in your groups?
19. As we know, it can be difficult to have a stable group of youth in these settings because youth are leaving and entering the custody facility. Was this movement disruptive to the program?
20. In earlier discussions, some facilitators shared that some of the youth had difficulty with paired work. What did this look like and how do you think this can be adapted?
21. In earlier discussions, some facilitators shared that many of the youth have low literacy. Which parts of the program was this particularly challenging and do you have any suggestions to overcome this issue?
22. Aboriginal youth and adults are overrepresented in the justice system and in preliminary discussions some of the facilitators mentioned that the youth expressed an interest in more inclusion of Aboriginal concepts. Can you tell us more about that? What do you think that might look like?
23. Research suggests that over half of youth involved in the justice system have experience some form of trauma. Did you notice if any of the topics triggered the youth in terms of their past trauma? If so, what did this look like and how was it responded to?

24. It is estimated that many youth involved in the justice system may have Fetal Alcohol Spectrum Disorder (FASD). Did any of your groups include youth with this diagnosis, and if so, how would you describe their engagement and willingness to integrate the skills into their lives?

25. What do you see as the greatest strengths of these youth and how can it be integrated into the program?

26. Is there anything else you would like us to know/ consider?



## Appendix C. Protocol for Youth Focus Groups

# Protocol for Youth Focus Groups- HRPP-Enhanced

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### Objective

The focus group will elicit discussion about youths' experiences with the HRPP. The objective of the focus group will be to assess the impact of the program on the youth involved, particularly looking at how the program has affected their relationships, decision-making, understanding of emotions, and communication skills.

### Logistics

The structure will be semi-structured focus group using open-ended questions. The interviewer will begin the interview with a personal introduction and then will explain the purpose of the meeting. The focus group may last between 60 and 90 minutes.

### Structure

The questions below will provide the framework for the focus group. Answers provided by the youth may affect the order in which the questions are asked and what types of additional questions/prompts are used. Follow-up questions may be used, when appropriate, to gather further information on perceived changes.

### Materials Required

- Tape recorder to audio record the youths' responses

### Introduction

Begin by introducing the purpose of the interview to the youth. The topic, flow, confidentiality, and limits to confidentiality of the interview will be explained to the youth.

Read the following to the youth:

*Today, we're going to discuss your experiences in the Healthy Relationships Plus Program (HRPP). An interview is a relaxed discussion. There are no right or wrong answers—I really want you to share your honest opinion with us. I will take some notes and our discussion will be audio recorded so that I can remember what you said later, but whatever you say will remain anonymous. I will not include your name or any other identifying information in the notes or any future reports, and what you say will not affect your time at name of youth custody facility or your participation in any other programs.*

*The purpose of this interview is to get feedback from you about your participation in the HRPP. The findings from this interview will be used to make changes and adaptations to the program, so please share your honest feelings—positive or negative—since it will help us to improve the program.*

### **Focus Group Questions**

1. What sessions, topics, or activities did you like the most?
  - a. Why did you enjoy them?
2. What sessions, topics, or activities did you like the least?
  - a. Why did you dislike them?
  - b. How might these sessions, topics, or activities be improved?
3. Would you recommend the program to other youth at (*facility name*)? Why or why not?
4. Can you think of an example when you used the skills from the program? (If required, interviewer will prompt youth to recall potential interactions with staff, peers, family, etc.).
5. What are some ways that the (*facility name*) staff can help you practice the skills that you learned in the program?
6. Has participation in this program positively impacted your relationship with:
  - a. self (e.g., self-esteem, confidence in abilities, etc.)? Explain.
  - b. others (e.g., family, friends, peers, teachers, etc.)? Explain.
7. From participating in the program, what did you learn about:
  - a. Helping yourself?
  - b. Helping your friends?
  - c. Was this information useful? Explain.
8. What programs did you participate in prior to coming to (*facility name*) and what impact did these programs have on you?
9. What other programs have you participated in since being in custody at (*facility name*) and what impact did these programs have on you?
10. If you were in charge of (*facility name*), what type of programs or treatment services would you provide and why?

11. If you were in charge of making sure that youth did not get in trouble with the law, what type of prevention programs would you provide in schools and communities?
12. What are some things that you think might help youth in general to not reoffend? (If required, interviewer will prompt youth to discuss things that other people could do, including family, friends, staff, etc.).
13. From your perspective, what areas do you need to continue to work on and improve?
14. From your perspective, what is your greatest strength?
15. Is there anything else you would like to add or speak about?

### **Conclusion**

To conclude, ask the youth if they have anything else they would like to share. Specifically, inquire if there are any additional topics or life situations that they might like to learn more about. Before finishing, thank the youth for their participation:

*I would like to thank you for your participation. As a reminder, everything you shared today will be kept anonymous and no information that could identify you will be included in reports. If you have any questions, please feel free to ask me or your facilitator. If anything we talked about today bothered you, a facilitator or counsellor is a good person to talk to.*

## Appendix D. Preliminary Evaluation of HRP-Enhanced Codebook

# Codebook

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**Gender:** this code is used to indicate the gender of the youth group.

- **Male youth:** use this code to indicate when the youth speaking is a male.
- **Female youth:** use this code to indicate when the youth speaking is a female.

**Successes:** this code is used to indicate general successes about the program implementation.

- **Content:** use this code to indicate benefits related to the program content.
- **Activities:** use this code to indicate benefits related to the program structure/activities.
- **SEL Skills:** use this code to indicate the development and/or application of skills related to the program.
  - **Self-management:** use this code to indicate youths' comments about regulating emotions, managing stress, self-control/controlling impulses, self-motivation, setting and achieving goals
  - **Social awareness:** perspective taking, empathy, appreciating diversity, respect for others
  - **Relationship skills:** communication, listen well, social engagement, relationship building, teamwork/working cooperatively, resolving conflicts, seeking help, resist inappropriate social pressure
  - **Responsible decision-making:** identifying problems, basing decisions on safety, social, and ethical considerations, evaluating realistic consequences of actions, considering the well-being of self and others
  - **Self-awareness:** use this code to indicate youths' descriptions of their strengths and/or weaknesses (accurate self-perception), identifying emotions, self-confidence, self-efficacy, optimism

**Challenges:** this code is used to indicate general challenges or disappointments with the program.

- **Content:** use this code to indicate drawbacks/negatives related to the program content.
- **Activities:** use this code to indicate drawbacks/negatives related to the program structure/ activities.
- **Skills:** use this code to indicate difficulties practicing the skills within a youth justice setting.

**Recommendations:** this code is used to indicate general recommendations and adaptations that the youth had for the implementation of the HRPP in youth justice settings.

- **Content:** use this code to indicate when the youth suggest modifying or adding content to improve the program.
- **Implementation:** use this code to indicate when the youth suggest program delivery strategies to improve the program.

**Service Gaps/Areas of Need:** this code is used to indicate the youths' descriptions of gaps in the youth justice programming and/or treatment.

**Good Quotes:** this code is used to highlight any interesting or exemplary quotes.

**Stories:** this code is used for any general stories the youth tell that seem interesting or illuminating.

## Curriculum Vitae

**Name:** Amanda Kerry

**Post-Secondary Education and Degrees:** Doctor of Philosophy, School & Applied Child Psychology  
Western University  
London, Ontario, Canada  
2015-Present

Master of Education, Counselling Psychology  
Western University  
London, Ontario, Canada  
2011-2013

Honours Bachelor of Science, Psychology-Behavioural  
Neuroscience Specialization  
McMaster University  
Hamilton, Ontario, Canada  
2005-2009

**Honours and Awards:** Ontario Graduate Scholarship (OGS)  
2017-2018

Alberta O'Neil Ontario Graduate Scholarship  
2018

The David Wolfe Scholarship on Research on Violence Prevention  
2018

Scotiabank Award for Studies in Violence Against Women and  
Children  
2017

The Sun Life Financial Bursary  
2005-2008

McMaster Entrance Scholarship  
2005

**Related Work  
Experience**

Doctoral Internship – Youth Justice Assessment Clinic  
Centre for Addiction and Mental Health  
2018-Present

Doctoral Internship – Syl Apps Youth Centre  
Kinark Child and Family Services  
2018-Present

Research Assistant – Centre for School Mental Health  
Western University  
2015-Present

Doctoral Student Clinician - Child & Youth Development Clinic  
Western University  
2017-2018

Doctoral Student Clinician – London Family Court Clinic  
2018, 2016-2017

Doctoral Student Clinician – Children’s Hospital  
London Health Sciences Centre  
2017-2018

Doctoral Student Clinician – Thames Valley District School Board  
2016-2017

Instructor – EDUC5481 Social and Emotional Learning  
Western University  
2017

Mental Health Clinician – Multi-level security female federal  
institution  
Correctional Service of Canada  
2016

Doctoral Student Clinician – Mary J. Wright Research &  
Education Centre  
Western University  
2016

Offender Counsellor – Minimum, medium, and maximum security  
male federal institutions  
Correctional Service of Canada  
2013-2014

Student Counsellor – Changing Ways (Organization that addresses family violence)  
2011-2013

Counselling Psychology Internship  
Merrymount Family Support & Crisis Centre  
2012-2013

Student Counsellor – Westgate Correctional Facility  
Bermuda Department of Corrections  
2012

External Research Consultant  
The Child & Parent Resource Institute  
2012

Group Facilitator - Here to Help Program (Family violence program)  
Aisling Discoveries Child & Family Centre  
2009-2010

**Publications:**

Crooks, C. V., Jaffe, P., Dunlop, C., **Kerry, A.**, & Exner-Cortens, D. (2019). Preventing Gender-Based Violence Among Adolescents and Young Adults: Lessons From 25 Years of Program Development and Evaluation. *Violence Against Women*, 25(1), 29-55.

Lapshina, N., Crooks, C., & **Kerry, A.** (2018). Changes in depression and positive mental health among youth in a healthy relationships program. *Canadian Journal of School Psychology*.

Crooks, C., Chiodo, D., Dunlop, C., Lapointe, A., & **Kerry, A.** (2018). The Fourth R: Considerations for implementing evidence-based healthy relationships and mental health promotion programming in diverse contexts. In A. Leschied, D. Saklofske, & G. Flett (Eds.), *The Handbook of Implementation of School Based Mental Programs*. New York, NY: Springer Publishing.

Townsley, D., Crooks, C., **Kerry, A.**, Dale, S., & Hughes, R. (2017). *Healthy relationships plus program: A Fourth R small groups program to promote healthy relationships and positive mental health enhanced for vulnerable youth and youth in the justice system*. Copyright © The University of Western Ontario.



Jaffe, P. G., Crooks, C. V., Dunlop, C., & **Kerry, A.** (2016). *Primary prevention of violence against women and girls: Current knowledge about program effectiveness and priorities for future research*. Invited policy paper prepared for the Government of Canada, Status of Women.

Chapter: Stewart, S. L., Currie, M., Arbeau, K., Leschied, A., & **Kerry, A.** (2015). Assessment and Planning for Community and Custodial Services: The Application of interRAI Assessment in the Youth Justice System. In R. Corrado & A. Leschied (Eds.), *Serious and Violent Young Offenders and Youth Criminal Justice: A Canadian Perspective*. Vancouver: Simon Fraser University Press.