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PROFESSIONALS' PERSPECTIVES ON  
JUVENILE RECIDIVISM

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A Project  
Presented to the  
Faculty of  
California State University,  
San Bernardino

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In Partial Fulfillment  
of the Requirements for the Degree  
Master of Social Work

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by  
Maribel Lopez

June 2012

PROFESSIONALS' PERSPECTIVES ON  
JUVENILE RECIDIVISM

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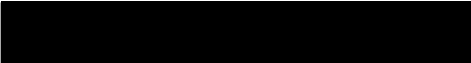
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by  
Maribel Lopez

June 2012

Approved by:

  
\_\_\_\_\_  
Dr. Herb Shon, Faculty Supervisor  
Social Work

05-29-12  
Date

  
\_\_\_\_\_  
Dr. Rosemary McCaslin,  
M.S.W. Research Coordinator

## ABSTRACT

Dynamics surrounding juvenile recidivism continue to be an area of interest for researchers. Given advances in methodology, meta-analysis studies have been able to identify key factors that seem to be most influential in reoffending behavior. Through a quantitative survey method, 41 probation officers and 36 social workers in the Inland Empire offered their professional expertise on variables believed to be most influential in juvenile recidivism. Inferential statistic tests revealed no significant variance among responses between professions. Results correspond with research of the importance identified risk factors have on juvenile recidivism. Key variables identified centered on criminal history, psychopathology and social and environmental factors. Results from this research add to literature evaluating the predicting value on recidivism of various factors juveniles face.

## ACKNOWLEDGMENTS

I would like to express my deepest gratitude to all the social workers and probation officers who participated, thank you for making this possible.

To Dr. Herb Shon, thank you for your ongoing support and guidance in the last stretch of this paper. I appreciated how you were always available for any questions I had and responded to your emails promptly before my anxiety levels reached a new high.

To Dr. Thomas Davis, Dr. Rosemary McCaslin and Dr. Janet Chang, thank you for helping to turn an idea into the project it became.

## DEDICATION

This research project is dedicated to all youth struggling to realize their dreams while having to battle obstacles no one should need to face. Your continued perseverance in the face of violence, tragedy and addictions gives me hope that there is a brighter future ahead of you all. I hope this paper will serve to bring to light what we need to do to help you reach your potential.

I would also like to dedicate this project and my MSW degree to my family, who without their love and support I would not be here today. Especially to my parents who have always believed in me and have helped me become the person I am today. To my sister and brother-in-law, thank you for welcoming me into your home and helping me in any way you could. To my two little nephews who were always there to make me feel better after a rough day, it'll mean more to me than you'll ever know. To all my friends who have been there to remind me that my sacrifices will pay off in the long run. To all the friends I have made in this cohort, it's been a blast! I'm grateful you all were by my side through this ordeal! Thank you all!

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## CHAPTER ONE

### INTRODUCTION

Juvenile delinquency is a serious concern in our society (Cottle, Lee & Heilbrun, 2001; Mudler, Brand, Bullens & Marie, 2010). National public opinion polls have shown that nine out of 10 adults perceive youth crime to be a major problem (Krisberg & Marchionna, 2000). This perception is well founded. In 2000, 2.4 million adolescents were arrested nationwide (Harshberger, 2005, p. 2). Eight years later that number has remained steady with 2.1 million juveniles being arrested nationwide (Puzzanchera, 2009). What is even more disconcerting is the notion that these youth are likely to reoffend.

#### Problem Statement

According to the Juvenile Justice Outcome Evaluation Report, of the youth released in from the California Division of Juvenile Justice in 2004-05, 81% were rearrested and 56% were incarcerated (California Department of Corrections and Rehabilitation, 2010). Furthermore, the California Department of Juvenile Justice has suggested that 70% of their detainees

released from state facilities are likely to reoffend within two years (as cited in Abrams & Snyder, 2010, p. 1788). With an estimated 100,000 to 200,000 of juvenile offenders being released from correctional facilities in the United States each year, the need for social service professionals to intervene is pressing (Abrams & Snyder, 2010, p. 1787). Nevertheless, the importance of juvenile recidivism lies not only in the needs of the individual but also that of society

It has been estimated that detaining an adolescent in a state correctional facility costs \$241 per day or \$88,000 per year, compared to an adult who costs the state \$65 per day or 23,876 per year (as cited in Abrams & Snyder, 2010, p. 1788). Keep in mind the added cost that come from law enforcement personnel, county detention facilities, and community service agencies (Abrams & Snyder, 2010, p. 1788). Ultimately society will contribute 1.7 to 2.3 million for every youth involved in the Juvenile Justice system (as cited by Katsiyannis, Zhang, Barrett & Flaska, 2004, p. 23). The fiscal impact of juvenile recidivism is a cause of concern, but most alarming is the idea of the continued victimization.

If the dynamics surrounding recidivism are not adequately addressed, community safety is threatened. In 2008, 96,000 juveniles were arrested nationally for crimes under the violent crime index (Puzzanchera, 2009). These crimes include murder, forcible rape, and aggravated assault. Furthermore, that same year, 439,600 juveniles in the United States were arrested for property crimes, including burglary and theft (Puzzanchera, 2009). Consider for a moment all of those victims and loved ones that have been impacted as a result of the unrelenting youth crime. Then imagine how many of those crimes could have been prevented had these youth taken part in evidence based practices known to reduce recidivism rates.

Many who doubt that juvenile offenders cannot be rehabilitated must be aware of the impact evidence based practice programs have on reducing recidivism among youth. A meta-analysis conducted on 200 research studies discovered that given the most effective features, intervention programs had the ability to reduce recidivism by 40-50% (Lipsey, 1999, p. 163). Given the potential rehabilitation results effective intervention efforts can have among juvenile offenders, it is vital

for researchers to recognize the latest data concerning the various dynamics involved in recidivism. Intervention approaches need to target those factors research has supported as being most influential in predicting juvenile recidivism.

Policy practice in the juvenile justice system directs the focus of interventions for juvenile offenders. Over the past 100 years, the juvenile justice system has cyclically been balancing ideals of rehabilitation and punishment (Anthony, Samples, Nicole de Kervor, Ituarte, Lee & Austin 2010, p.1271). Given the influx of crimes reported during the 1980's and 1990's, the juvenile justice system has phased back to a punitive approach to juvenile delinquency (Anthony et al., 2010, p. 1272; Jenson & Howard, 1998, p. 324), overwhelming state and county detention facilities. As a result, a focus towards rehabilitation has diminished, generating limited treatment for juvenile offenders and consequently disregarding influential features in recidivism behavior. Policy makers, given additional knowledge on recidivism factors, may make changes to funding allocations to those programs noted for targeting and identifying recidivism factors, thus improving the strategies of deterring

juvenile offenders (Cottle, Lee & Heilbrun, 2001, p. 388).

Recidivism is a treatable social problem that, given appropriate treatment, can be reduced (Mulder, Brand, Bullens & Marie, 2010, p. 119). The risk factors promoting youth to reoffend need to be re-evaluated time and time again to allow for the most competent intervention approaches. Social workers, along with other professions, need to be aware of the social problem of juvenile recidivism and must value the role various dynamics play in recidivism. Only then can effective interventions be put in place to reduce the current status (Mulder, Brand, Bullens & Marie, 2010, p. 119).

#### Purpose of the Study

This study identified important risk factors literature has shown to contribute to juvenile recidivism. Additionally, this study assessed what social workers and probation officers think are the most influential risk factors in juvenile recidivism since literature on the perspectives of professionals on risk factors is lacking.

For the purpose of this study, a juvenile was classified as an individual between the ages of 12 and 18 years. The definition of recidivism comes from the California Juvenile Justice System. Recidivism is defined as a youth who has previously been convicted of a crime and has been rearrested by authorities, or has been returned to the Division of Juvenile Justice (DJJ) for violating parole regulations or has been commitment to the Division of Adult Institutions (DAI), or has any been incarcerated by state facilities (California Department of Corrections and Rehabilitation, 2010).

The data source were social workers and probation officers in the Inland Empire because both professions carry out roles essential in a youth's rehabilitation process and play a great role in intervention efforts targeting the reduction of juvenile recidivism. Social workers work in a number of roles pertaining to juvenile delinquency. Their tasks can include completing risk assessments, advocating for youth, participating in community outreach and engaging in individual, family and group therapy (Brownell & Roberts, 2002, p. 1). Correction officers carry out risk assessments, enhance rehabilitation, make placement and sentencing

recommendations and generally supervise adjudicated offenders (Nieto, 2008, p. 10).

Brennan and Khinduka (1970) conducted a study on probation officers to determine any discrepancies among those that had a Master's degree in Social Work (MSW) and those without one. It was found that probation officers, with an MSW background, utilized a systems approach to interventions and also felt more responsibility in their role to provide for the needs of a juvenile offender after they were released. The role each profession plays in reducing recidivism is enormous; therefore any discrepancies in perceptions of influential risk factors contributing to juvenile recidivism may have several implications. Research evaluating the perceptions of juvenile recidivism of these two professions is lacking. Therefore, identifying the perceptions of social workers and probation officers may indicate the intervention approaches these professions take in rehabilitating juvenile offenders.

This study employed a quantitative approach. A quantitative approach was intended to produce a clear response on how influential psychopathology, criminal history, and social and family factors are to recidivism



among youth. A quantitative design allowed participants to calmly consider their beliefs without any time pressures. Also, using a quantitative survey design gave the participants anonymity, allowing for more honest answers. Furthermore, a quantitative approach made data collection more passive, limiting biases that may occur more often in qualitative approaches.

For the purpose of this study, a self-administered questionnaire was distributed to 41 probation officers and 35 social workers in the Inland Empire. The questionnaire consisted of 24 questions, 17 of those questions were answered on a 5-point Likert Scale. It asked participants to rate how important they see certain factors as they may contribute to or influence a juvenile to reoffend. Focus was drawn to any discrepancies between professions in the risk factors most influential in juvenile recidivism. An analysis was made from independent variables which was the participant's profession. Dependent variables were risk factors research has identified as most influential in juvenile recidivism.

## Significance of the Project for Social Work

The results of this study offered additional support to the research continually being done to identify risk factors contributing to juvenile delinquency. Probation officers and social workers were able to provide their professional opinions on the nature of these risk factors. The results can allow other professionals targeting juvenile recidivism to reconsider their own assumptions. On an agency level, risk assessment practices can be evaluated to determine if all of the most influential factors are being identified, altering any needed forms (Jenson & Howard, 1998, p. 332).

Targeting accurate risk factors will help social workers match each youth with appropriate resources that can prevent reoffending which can also improve the well-being of that individual (Jenson & Howard, 1998, p. 332). Additionally, agencies can appraise the level of intervention efforts they currently have and may consider adding or changing programs that can best fit the need of juvenile offenders. Moreover, the results can enlighten the perceptions of both professions. Social workers in particular work on a belief that an individual is part of

a system. Increasing awareness of how influential each system is to juvenile recidivism can help social workers have a holistic view of their client adding to social workers' competency level.

Research supports the view that juvenile recidivism is not perpetuated solely by an individual's personal characteristics. Factors are multisystemic and require a multisystemic intervention approach. Punishment has proven ineffective in reducing recidivism. Changes to policy within the juvenile justice system must reflect a rehabilitation approach instead of a punitive approach. Social workers are change agents that can be leaders in advocating for the transformation that must occur in the services that are offered to juvenile offenders. Social workers can help create programs targeting key risk factors contributing to recidivism and can write for grants to fund additional program needs.

## CHAPTER TWO

### LITERATURE REVIEW

#### Introduction

In order for professionals to attempt an effective intervention approach for reducing recidivism, they must fully understand the various factors that lead a juvenile to perpetrate following their release back into society. Therefore, empirically supported risk factors contributing to juvenile recidivism rates are essential when approaching this population as a probation officer and social worker.

As far as research has shown, predictive factors of juvenile recidivism can be fit into two categories, static and dynamic. Static factors are those features that cannot be changed such as age of first offense, gender or type of crime; and dynamic factors are those that can be changed or modified such as psychosocial factors (Harshbarger, 2005). The following categories were created to classify risk factors that were considered for this study: criminal history, family and social environment, and psychopathology. The risk factors subsequently mentioned are not a complete list of known

risk factors in recidivism, but are those factors noted by several meta-analyses to be most influential in identifying re-offense risk.

### Criminal History Factors

Static factors such as age of first commitment into a detention facility and length of stay in a facility have substantial pull when predicting recidivism (Katsiyannis & Archwamety, 1997, p. 50). Cottle, Lee and Heilbrun (2001), conducted a meta-analysis of 22 recidivism studies comprising 15,265 participants. Most of the data came from official records recording the risk factors predicting recidivism in juveniles. The results indicated the most significant predictor of juvenile delinquency was age of first commitment into a detention facility (Cottle, Lee & Heilbrun, 2001). Additional support also comes from Katsiyannis, Zhang, Barrett & Flaska (2004) who found, through a three year longitudinal study of 299 adolescents incarcerated at a Youth Rehabilitation and Treatment Facility, that a young age of first commitment into a detention facility was "the single most important predictor of recidivism" (p. 28).

Further research has also looked at the implications of incarcerating juvenile offenders in detention facilities. According to a study done by Winokur, Smith, Bontrager and Blankenship (2008), of the 16,779 juveniles released from a facility in Florida, those that had longer incarceration times had an increased probability to reoffend than those that were incarcerated for a shorter period. Moreover, Myner, Santman, Cappeletty and Perlmutter (1998), concluded from mental health and probation files of 138 male juveniles that there existed a positive correlation between the length of stay in a detention facility and the number of future criminal violations. Explanations for the positive correlation between incarceration length and future recidivism can come from Budeiri who concluded, from work on Virginia's juvenile offenders, that locking up youth for long periods of time may impede rehabilitation and make a youth's transition back into the community more difficult (as cited in Winokur et al., 2008, p.127).

It is quite apparent that the implications of incarcerating juvenile offenders have no real benefit to any party involved. Detention facilities are often a damaging and dangerous environment that is not conducive

for rehabilitation. Rampant violence in facilities between youth perpetuates maladaptive behaviors that led youth to incarceration in the first place (Mendell, 2011, p. 8). Detention facilities are often grounds for youth to learn new, maladaptive behaviors from other detainees that will only increase the likelihood of reoffending. Furthermore, once released, youth are labeled as dangerous and become a nuisance for society (Myner et al., 1998, p.76). Youth might feel a need to behave in a manner according to their label, continuing their delinquent actions. Studies exploring the occurrences in juvenile detention facilities note that physical, sexual, and emotional abuse by staff and other detainees are common (Mendel, 2011). The notion of using incarceration as a deterrent to recidivism behavior must be challenged given that substantial research has recognized that incarceration amplifies recidivism (Myner et al., 1998, p. 76).

### Family and Social Environment

Addressing the juvenile population requires professionals to look at the family and social context (Hoagwood, Burns, Kiser, Ringeisen & Schoenwald, 2001,

p. 1181), given the high dependency level youth are under. Most effective treatment approaches aimed at juvenile offenders are those that successfully focus on family interactions (Greenwood, 2008, p. 198). This is because research has identified family interactions to have a high association with juvenile recidivism (Cottle, Lee & Heilbrun, 2001; Abrams & Snyder, 2010, p. 1789).

Hoge Andrews and Leschied (1996) sampled 338 youth offenders over a 6 month period and found that family interactions and structuring problems were related to criminal activity. Furthermore, when there was poor parent and child relations and parenting deficiencies, youth were more likely to reoffend and have a worse adjustment period after incarceration (Hoge, Andrews & Leschied, 1996, p. 422).

Additionally, research has found that dysfunctional parenting styles contributed to recidivism, while high parental involvement led to fewer adolescents with conduct problems (as cited by Noyori-Corbett & Moon, 2010, p 247). To add to the research, Mudler, Brand, Bullens and Marie (2010) found that in their sample of 728 juvenile offenders, poor parenting skills were associated with higher recidivism rates among the



participants. Madden-Derdich, Leonard, and Gunnell (2002) conclude that families with poor problem solving skills, poor parent-child interactions, and deficient parenting skills often promote the youth's delinquent behavior (p.355).

Any treatment approach aimed at juvenile offenders requires the look at family dynamics and the roles it takes in recidivism. Addressing key family interactions in juvenile offenders has been shown to be beneficial in reducing the probability of recidivism (Henggeler, Rodick, Borduin, Hanson, Watson, & Urey, 1986, p. 138). Following a family-ecological treatment approach, Henggeler et al. (1986) found that youth who had fewer conduct problems, had healthier family interactions, and had disassociated with delinquent peers (p. 138). When maladaptive family interactions are addressed by professionals, parents are better able to model appropriate ways of behaving and teach appropriate social skills (Greenwood, 2008, p. 198; Madden-Derdich, Leonard & Gunnell, 2002, p. 363). It is essential for researchers to continue to identify critical family factors that seem to raise recidivism rates so professionals are able to

target these key interactions in their intervention endeavors.

A study conducted by Myner et al. (1998) revealed that 31% of the 138 male juvenile offenders had been a victim of child abuse (p. 77). An estimate of the number of youth currently in the California Youth Authority with a history of abuse cases points to 19%, some hinting that number to be much higher (as cited in Abrams, Shannon & Sangalang, 2008, p. 523). A multitude of research studies have indicated that maltreatment is significantly correlated to predicting recidivism (Kingree, Phan & Thompson, 2003). More specifically, Kingree, Phan and Thompson (2003) found that of their 272 adolescent held at a juvenile facility, emotional neglect was related to an increase in recidivism.

Furthermore, as noted by Kingree, Phan and Thompson (2003), low parental monitoring can also result in higher chances of reoffending because standards of conduct are not being enforced and their emotional needs are ignored (p. 638). In the event that the abuse is addressed by CPS and a child or adolescent is taken into protective custody, the event often creates unforeseeable repercussions. Studies have concluded that juvenile re-

offenders have higher rates of out-of-home placements (Myner et al., 1998, p. 76). Researchers suggest that parental separation and interactions with other group home peers often allow for continued criminal behavior (Myner et al., 1998, p. 76). Some familial factors discussed in this section can be classified as static factors, often seen as unalterable, but professionals must be aware of the significance family aspects have on a youth's delinquent behavior. Professionals must realize that youth will most likely return to this same family environment that research has shown to be conducive to recidivism. Interventions must factor in family dynamics involved in the juvenile's life and make plans to limit their negative impact.

Social factors found to be significantly related to reoffending behavior included delinquent peers and the effective use of leisure time (Cottle, Lee & Heilbrun, 2001). Further support can be found in the study mentioned earlier conducted by Hoge, Andrews and Leschied (1996), which also found positive peer relations and effective use of leisure time to have a positive outcome for previous offenders (p. 423). Hoge, Andrews and Leschied (1996) reported that when peer relations and use

of leisure time were protective factors, previous delinquents had lower levels of recidivism (p. 423). Findings from a study conducted by Noyori-Corbett and Moon (2010) found that the more extracurricular activities adolescents participated in the less likely they were to engage in delinquency (p. 262). Interestingly, research has found that when delinquent peers were tested with family involvement, the less family involvement the more delinquent peers the delinquent youth were involved with (as cited by Noyori-Corbett & Moon, 2010, p. 250). It is during adolescence when teens begin to become disconnected from parental involvement and begin to accept peer ideas as dominant forces in their lives (Henggler et al., 1986, p. 133). Leve and Chamberlain (2005) warn that delinquent peer interactions encourage antisocial behavior and promote continued transgressions (p. 345). Professionals ought to be conscious of the deviant and defiant behavior that may be reinforced when newly freed offenders interact with other delinquent peers. Identifying social variables influencing deviant behavior may assist professionals in the struggle to limit continued criminal behavior.

## Psychopathology

Research studies have shown that juvenile offenders in the United States are in desperate need for mental health services. Data from Juvenile Justice Department of Probation suggests that 76% of youth currently in a detention facility have been diagnosed with at least one mental health disorder (Skowyra & Coccozza, 2007, p. 58). Additionally, one in five juveniles have a mental health disorder severe enough to impair their ability to function successfully as an adolescent and consequently as an adult (Hammond, 2007, p. 4). Specific problems investigators have found to be significant in juvenile recidivism were disruptive disorders (conduct disorder), mood disorders (depression) and substance abuse (Cottle, Lee & Heilbrun, 2001). In fact, McReynolds, Schwalbe and Wasserman (2010), discovered that when disruptive disorders and substance abuse disorders were paired, their 991 subjects were twice as likely to reoffend (p. 212).

Mudler et al.'s (2010) research of 728 juvenile offenders adds to the research on the prevalence of conduct disorder symptoms in delinquent youth. The study reported that conduct disorder was related to higher

recidivism; more than that, they had a higher rate of violent reoffending crimes (Mudler, et al., 2010). In Myner et al.'s (1998) investigation, 58% of 138 male juvenile offenders had been diagnosed with conduct disorder.

Conduct disorder is a well known diagnosis that has been shown time and time again to significantly increase recidivism rates (Vermeiren, De Clippele & Deboutte, 2000, p. 133). Investigations have reported that 30% to 50% of juvenile offenders have a disruptive behavior disorder (Hammond, 2007, p. 4). The American Psychiatric Association's (2000) Diagnostic and Statistical Manual of Mental Disorders IV-TR (DSM-IV-TR) describe conduct disorder as a persistent pattern of violating the basic human rights of others, with aggression as a common feature (p. 93). Youth diagnosed with this disorder will evidently struggle to conform to society's rules. Identifying youth with this particular mental health diagnosis and targeting useful interventions can help minimize the probability that the offender will reoffend.

Investigators have also found evidence that disruptive disorders are often coexisting with other mood and anxiety related disorders (Steiner, Cauffman &

Duxbury, 1999). A study sampling 481 incarcerated juveniles in the California Youth Authority found that the more depression, anxiety and low self esteem reported in these participants, the more like they were to have prior delinquent acts (Steiner, Cauffman & Duxbury, 1999). The study mentioned earlier by Katsiyannis, et al. (2004), additionally identified depression as a significant variable correlating with recidivism. The Center for Mental Health Services reports that the prevalence of existing mood disorders in adolescents is one in eight; juvenile offenders have been known to have a much higher rate (as cited in Hammond, 2007, p. 4).

Depression often brings out feelings of hopelessness and may lead youth to behave in reckless criminal ways, not caring about the consequences of the juvenile justice system (Ryan & Redding, 2004, p. 1398). Furthermore, studies have pointed out that boys tend to express their depression through aggressive behavior (as cited in Ryan & Redding, 2004, p. 1398). Finally, research has suggested that depression and conduct disorders often are co-occurring disorders (as cited in Ryan & Redding, 2004, p. 1398). Ryan and Redding (2004) suggest that professionals who are invested in diminishing recidivism

must be able to address mood disorders and conduct disorders with effective treatment approaches (p. 1399).

The role substance abuse plays in raising recidivism rates is still debated among researchers. A study conducted by Stoolmiller and Blechman in 2005 sampled 505 juvenile offenders and found that if the juvenile and parent self reports were positive for substance abuse, the juvenile had a 70%-114% greater risk at reoffending. Additionally, Myner et al. (1998) found that out of their sample of 138 juvenile offenders, 43% abuse alcohol and 45% abuse drugs. It was concluded that alcohol and recidivism had a positive correlation while drug abuse and recidivism showed no significant relationship.

Harshbarger (2005) found that when offenders had a minimal history with substance abuse or when they were in drug recovery, they were less likely to re-offend (p. 47). These results may lead professionals to conclude that addressing substance abuse difficulties could prove to become a protective factor towards recidivism (Harshbarger, 2005, p. 47).

As mentioned early in this section, when substance abuse and disruptive disorders such as conduct disorder were paired, recidivism rates doubled (McReynolds,



Schwalbe & Wasserman, 2010, p. 212) suggesting substance abuse to be influential in reoffending behavior. Additional research on the relationship between substance abuse and recidivism challenge the earlier studies. Katsiyannis et al.'s (2004) eleven year longitudinal study of 299 juvenile offenders found no significant relationship between substance abuse and recidivism (p. 27). Wierson and Forehand (1995) collected data from a sample of 91 male youth in the delinquent population in Georgia. They found that substance abuse was actually more prevalent in non-reoffending juveniles (p. 66). Wierson and Forehand's (1995) explanation for the paradoxical finding is that substance abusing youth offenders might be indulging in criminal activity as a means to get their drug of choice, rather than criminal activity being a result of antisocial behavior (p. 66). When offending youth receive substance abuse services while part of the juvenile justice system, their drive to re-offend might be diminished since they are no longer addicted to drugs (Wierson & Forehand, 1995, p. 66).

While the influence of substance abuse on reoffending behavior continues to be debated among researchers, professionals targeting recidivism risk

among juvenile offenders must continue to address drug addiction. Further research is needed to measure the substance abuse variable in relation to recidivism among juvenile offender.

### Theories Guiding Conceptualization

Theories guiding research are vast, yet a theme among various prominent articles is the Ecological Systems Theory. The Ecological Systems Theory encompasses a wide variety of factors that contribute to juvenile recidivism. It takes into account the individual's immediate interactions with family, friends and the environmental. This theory acknowledges that treating the individual requires the capacity for professionals to acknowledge that every juvenile comes into contact with various systems in everyday life (Henggler et al., 1986, p. 132).

As literature has shown no one factor is independent in predicting recidivism, each system has relative influence over the behavior of the offender. Professionals must target an assortment of variables that contribute to a youth's drive to reoffend. Prominent risk factors are multisystemic and need to be regarded as such

in order to provide comprehensive intervention approaches (Hinton, Sheperis & Sims, 2003, p. 167).

### Summary

Human behavior does not rely solely on the effects of one variable, but on a multitude of them. As such, juvenile recidivism is not dependent on one factor. Researchers have been able to shed light on predictive factors of recidivism and have identified various features related to criminal history, family and social environment, and psychopathology to be highly influential. Meta analysis studies frequently stress the negative impact that youth's age of first incarceration and the length spent in the facility have on post release behavior. Negative peer guidance and maladaptive family interactions have been shown to create a negligent environment where youth's continual criminal activity is enabled. Finally, common pathological features, such as conduct disorder, substance abuse and depression have given researchers evidence of its predictive role in juvenile recidivism.

## CHAPTER THREE

### METHODS

#### Introduction

This study identified how influential selected risk factors are in contributing to juvenile recidivism. Furthermore, this study explored any difference in perception of risk factors between probation officers and social workers. The following chapter will illustrate the study's design, sampling methods, data collection and instruments, procedures, the protection of human subjects and the method that was used to analyze the data.

#### Study Design

The present research is an exploratory study aimed at exploring how influential various risk factors are to recidivism based on the perceptions of social workers and probation officers. Risk factors that will be discussed center around psychopathology, criminal history and social and family factors. In order to obtain the necessary information, a quantitative survey approach was utilized. The function of this quantitative survey design is to draw data gained through 24 self-administered questions asking how influential social workers and

probation officers see certain risk factors as being. A quantitative approach limits biases that may be created during the data collection phase. This approach is also the most efficient method to discover discrepancies among the perceptions of social worker and probation officers. Most importantly, the present quantitative design offers the most generalizable data and may produce interesting results that other researchers might want to re-test.

The present measurement tool is a self constructed survey guided by the survey structure of Ephriam and Catro (2005) questionnaire on youth crime risk factors. Additionally, this survey has not proven to be valid or reliable. Additional limitations include the representative sample gathered of probation officers and social workers in the Inland Empire. Given the limited sample size, the results are difficult to generalize to the rest of the social worker and probation officer population.

The study hoped to gain insight on what type of obstacles juvenile offenders are facing contributing to continuously high recidivism rates. Additionally, the results may generate new ideas on how juvenile recidivism may be decreased. Finally, practitioners, especially

social workers and probation officers, may draw certain conclusions from the data results and may evaluate or alter their intervention methods to accurately address research supported risk factors. Given the implications, this study asked, "what do social workers and probation officers identify as the most influential risk factors contributing to juvenile recidivism."

### Sampling

The present study sought data from probation officers and social workers given the critical position they have with many juvenile offenders. A non-probability convenience sampling method was initially used to gather participants who work with youth from desert agencies in Riverside County Department of Mental Health and Riverside County Department of Probation. However, due to low participants, a snowball sampling method was used to encompass social workers and probation officers in the Inland Empire. A total of 41 probation officers and 36 social workers were surveyed. The study utilized purposive sampling method and the selection criteria for participants asked participants to self identify as a social worker or probation officer. Additionally,

solicitations asked for social workers and probation officers with past or current experience with at risk youth to participate.

### Data Collection and Instruments

The self-administered survey (see Appendix A) has questions asking participants how influential they believe certain factors are in leading youth to reoffend. These questions had an ordinal level of measurement. The responses were based on a 5-point Likert scale that range from "very unimportant" (1) "to very important" (5). Additionally, a qualitative question asking participants to include additional risk factors associated with juvenile recidivism was included. Furthermore, participants were asked demographic information that included: gender, age, ethnicity, occupation, years of experience, and highest level of education. The levels of measurement in the questionnaire include nominal and scale levels.

The independent variable is the participants' profession, that being social work or probation officer. The dependent variables are the factors influencing a juvenile to reoffend. These variables fall under three

categories: criminal history, environmental and social factors and psychopathology. More specifically the variables that were addressed are: age at first commitment into a detention facility, length of stay in a detention facility, poor family interactions which include poor youth-to-parent relationship, poor parenting skills, poor family problem solving skills, child abuse or neglect, delinquent peers, effective use of leisure time, conduct disorder, depressive disorder, and substance abuse disorder.

Two short, simple scales were constructed specifically for this study to measure depression and conduct disorder. The depression scale was constructed from three variables, while the conduct scale was constructed from four variables. The variables have not been tested for validity.

It is important to note that the instrument is a self created measurement tool. Since literature is lacking on measuring professionals' perceptions of recidivism risk factors related to juveniles, there have been no known valid and reliable measurement tools created by researchers. The instrument is tailored to address each dependent variable relevant literature has



identified as most influential to juvenile recidivism. Some limitations included whether the instrument is valid and whether the instrument can be considered reliable.

### Procedures

Data was collected through a self-constructed questionnaire. The quantitative survey was distributed to social workers and probation officers that work with adolescents that are under Riverside County Department of Mental Health, Desert Region and Riverside County Department of Probation, Juvenile Division. More specifically, surveys were dispensed through the interdepartmental mail service. Each agency that met the criteria was notified in advance through email of the research study and the supervisor was given the option of declining. For those agencies that agree to participate, surveys were mailed to the agency supervisor giving specific guidelines on how to proceed. The data collection was made throughout the winter quarter of California State University, San Bernardino. Following approval, questionnaires were printed out in February, and were subsequently dispersed. Each survey had an attached addressed envelope with postage to be returned

to Van Horn Counseling Center. Attached instructions gave participants a URL address where identical questionnaires could be completed online.

Due to low participation, a snowball sampling method was subsequently utilized. Emails were sent to personal contacts that had experience working with youth in a social worker capacity. Additionally, a representative of the National Association of Social Workers, Inland Empire Region was asked to distribute an email to social workers soliciting participation for those who have previous or current experience with at-risk youth to participate in this study. The URL address linking to the approved survey was also provided. Data collection ended in April.

#### Protection of Human Subjects

The protection of participants was maintained through the anonymity of the survey study. Each survey had an attached consent form (see Appendix B) which only asked for the participant to place a mark agreeing to their willing participation. Following the survey, the final page included a debriefing statement (see Appendix C) outlining the purpose of the research study. The research advisor's contact information was given if any

comment/concerns had risen. No foreseeable or immediate risks for participants were identified.

### Data Analysis

The present study utilized a quantitative analysis to interpret data produced from a self-administered questionnaire. The independent variable (participant's profession) was analyzed in relation to the dependent variables. Dependent variables observed in this study include those under criminal history, environmental and social, and psychopathology factors.

Inferential statistics were used to conduct a bivariate analysis to compare responses based on identified profession. Through t-tests and chi-squares, any significant variance between the participant's profession and the recorded responses on the 5-point Likert scale was identified. Descriptive statistics summarized the characteristics of participants and identified factors perceived as most influential to recidivism.

The one qualitative question asked participants to write down additional risk factors they feel are

influential to juvenile recidivism and was coded and analyzed for themes.

#### Summary

It is hoped that through this study, data results can discover what social workers and probation officers recognize as the most influential factors leading to juvenile recidivism. Through an exploratory design, a self constructed questionnaire was distributed to probation officers and social workers in the Inland Empire, protecting confidentiality and anonymity among participants. Using inferential statistics, conclusions were made identifying discrepancies in responses between professions. Additional tests were made on participant's characteristics.

## CHAPTER FOUR

### RESULTS

#### Introduction

The following chapter presents the study's findings of the demographic description and bivariate analysis. Demographic data was collected from participants, such as age, gender and ethnicity. Additional information on participants' occupation, educational level, and years of experience in the identified profession were gathered. Descriptive analysis and frequency distribution of the respondent's characteristics are presented. The results from a written qualitative question showing themes that surfaced are presented. Furthermore, results of the inferential statistics identifying response variations between probation officers and social workers answering the research question are presented.

#### Participant Characteristics

Descriptive statistics on Table 1 summarize the demographic characteristics of respondents. There were a total of 79 responses collected. Over three quarters of respondents were female (71%) while only 29% were male. Participant's ethnicity results show that almost half of

the respondents identified as White or Caucasian (42%), one-third identified as Hispanic or Latino (33%), 13% identified as Black or African American, 4% identified as Asian, and the remaining 8% responded "other." Over half of participants identified their occupation as probation officer (53%) and 47% identified their occupation as social worker.

Table 1. Categorical Demographics of Respondents

Variable	Frequencies (n)	Percentage (%)
Gender (N = 77)		
Male	22	28.6
Female	55	71.4
Ethnicity (N = 76)		
Hispanic or Latino	25	32.9
Asian	3	3.9
Black of African American	10	13.2
White or Caucasian	32	42.1
Other	6	7.9
Occupation (N = 77)		
Probation Officer	41	53.2
Social Worker	36	46.8
Education (N = 77)		
Some College/Associate's	3	3.9
Bachelor's	36	46.8
Master's	36	46.8
PH.D or Other Professional Degrees	2	2.6

Analysis on occupational responses shows a fairly even divide between occupations. Fifty three percent of the participants identified as a probation officer and 47% identified as a social workers.

An analysis of participants' highest educational level revealed that 47% of participants had a Bachelor's degree, 47% had a Master's degree, 4% had some college or Associate's degree and 2% had Ph.D. or other professional degree.

Table 2 shows that the mean age of respondents was 38 years ( $SD = 10$ ). The youngest participant was 23 years old, while the oldest was 64 years old. Respondents' average years of experience was 8 years ( $SD = 5$ ). The range of years of experience as a social worker and probation officer was from 1 to 28 years.

Table 2. Continuous Demographics of Respondents

Variable	Mean	SD	Min	Max
Age (N = 73)	37.8	9.5	23	64
Years of Experience (N = 76)	8.3	5.3	1	28

### Response Variations

Bivariate analyses were conducted on participants' responses. The independent variable was participants' occupation, which was either social worker or probation officer. The dependent variables were responses from a 5-point Likert scale ranging from 1 ("Very Unimportant" or "Strongly Disagree") to 5 ("Very Important" or "Strongly Agree").

When asked how influential is a youth's "young age at first commitment into a detention facility" (see Appendix A, question 1) to recidivism, chi square tests revealed the percentage of responses did not significantly differ between social workers and probation officers,  $\chi^2 (4, N = 77) = 2.84, p = .59$ . Table 3 shows the percentage of responses based on identified occupation. Fifty-one percent of respondents selected "very important", 37% selected "important", 10% selected "neither unimportant or important", and 2% of probation officers selected "unimportant." Additionally, 47% of social workers chose "very important." 33% chose "important", 17% chose "neither unimportant or important", and 3% chose "very unimportant."



Table 3. Young Age at First Commitment

Variable (N = 77)	N	%
Probation Officer		
Very Unimportant	0	0
Unimportant	1	2.4
Neither Unimportant or Important	4	9.8
Important	15	36.6
Very Important	21	51.2
Social Worker		
Very Unimportant	1	2.8
Unimportant	0	0
Neither Unimportant or Important	6	16.7
Important	12	33.3
Very Important	17	47.2

When asked how influential is a youth's "extensive time spent in a detention facility" (see Appendix A, question 2) to recidivism, chi square tests revealed no significant difference in responses between social workers and probation officers,  $\chi^2 (4, N = 77) = 1.87$ ,  $p = .76$ . Table 4 shows the percentage of responses based on identified occupation. Over a third of probation officers (34%) selected "very important", while 49% chose "important." Only 12% of probation officers selected "neither unimportant or important", and 5% selected "unimportant." Similarly, 36 percent of social workers selected "very important" while 45% selected "important." Eight percent selected "neither unimportant or important"

8% selected "unimportant" and 3% selected "very unimportant."

Table 4. Detention Length

Variable (N = 77)	N	%
Probation Officer		
Very Unimportant	0	0
Unimportant	2	4.9
Neither Unimportant or Important	5	12.2
Important	20	48.8
Very Important	14	34.1
Social Worker		
Very Unimportant	1	2.8
Unimportant	3	8.3
Neither Unimportant or Important	3	8.3
Important	16	44.4
Very Important	13	36.1

When asked how influential is a youth "having poor relationship with parent(s)" (see Appendix A, question 3) to recidivism, chi square tests revealed no significant difference in responses between social workers and probation officers,  $X^2 (3, N = 77) = 2.78, p = .43$ . Table 5 shows the percentage of responses based on identified occupation. Over three quarters (76%) of probation officers selected "very important", 22% selected "important", and 2% selected "unimportant." Additionally, more than half (67%) of social workers selected "very

important", while 30% selected "important" and 3% selected "very unimportant."

Table 5. Poor Parental Relationship

Variable (N = 77)	N	%
Probation Officer		
Very Unimportant	0	0
Unimportant	1	2.4
Important	9	22.0
Very Important	31	75.6
Social Worker		
Very Unimportant	1	2.8
Unimportant	0	0
Important	11	30.6
Very Important	24	66.7

When asked how influential is a youth "having parents with poor parenting skills" (see Appendix A, question 4) to recidivism, chi square tests revealed no significant difference in responses between social workers and probation officers,  $\chi^2 (2, N = 77) = 5.63$ ,  $p = .06$ . Table 6 shows the percentage of responses based on identified occupation. A majority of probation officers (85%) chose "very important", 12% chose "important" and 2% selected "unimportant." Sixty seven percent of social workers selected "very important", 33% chose "important" and 3% selected "very unimportant."

Table 6. Poor Parenting Skills

Variable (N = 77)	N	%
Probation Officer		
Unimportant	1	2.4
Important	5	12.2
Very Important	35	85.4
Social Worker		
Unimportant	0	0
Important	12	33.3
Very Important	24	66.7

When asked how influential is a youth "having a family with poor problem solving skills" (see Appendix A, question 5) to recidivism, chi square tests yielded no significant difference in responses between social workers and probation officers,  $\chi^2 (2, N = 77) = .50$ ,  $p = .78$ . Table 7 shows the percentage of responses based on identified occupation. Sixty eight percent of probation officers selected "very important", 29% selected "important" and 2% selected "neither unimportant or important." Similarly, 67% of social workers selected "very important", 28% selected "important" and 6% selected "neither unimportant or important."

Table 7. Poor Problem Solving Skills

Variable (N = 77)	N	%
Probation Officer		
Neither Unimportant or Important	1	2.4
Important	12	29.3
Very Important	28	68.3
Social Worker		
Neither Unimportant or Important	2	5.6
Important	10	27.8
Very Important	24	66.7

When asked how influential is a youth "having a history of child abuse/neglect" (see Appendix A, question 6) to recidivism, chi square tests revealed no significant difference in responses between social workers and probation officers,  $\chi^2 (4, N = 77) = 1.71$ ,  $p = .79$ . Table 8 shows the percentage of responses based on identified occupation. Sixty-six percent of probation officers selected "very important", 29% selected "important", 2% selected "neither unimportant or important", 2% selected "unimportant." Over half (61%) of social workers selected "very important", 28% selected "important", 3% selected "neither unimportant or important", 6% selected "unimportant", 3% selected "very unimportant."

Table 8. Child Abuse History

Variable (N = 77)	N	%
Probation Officer		
Very Unimportant	0	0
Unimportant	1	2.4
Neither Unimportant or Important	1	2.4
Important	12	29.3
Very Important	27	65.9
Social Worker		
Very Unimportant	1	2.8
Unimportant	2	5.6
Neither Unimportant or Important	1	2.8
Important	10	27.8
Very Important	22	61.1

When asked how influential is a youth "having delinquent peers" (see Appendix A, question 7) to recidivism, chi square tests revealed no significant difference in responses between social workers and probation officers,  $\chi^2 (2, N = 77) = 2.07, p = .36$ . Table 9 shows the percentage of responses based on identified occupation. Sixty-three percent of probation officers selected "very important", 34% selected "important", 2% selected "neither unimportant or important." Almost half (47%) of social workers selected "very important", 50% selected "important", and 3% selected "neither important or unimportant."

Table 9. Delinquent Peers

Variable (N = 77)	N	%
Probation Officer		
Neither Unimportant or Important	1	2.4
Important	14	34.1
Very Important	26	63.4
Social Worker		
Neither Unimportant or Important	1	2.8
Important	18	50.0
Very Important	17	47.2

When asked how influential is a youth "having a tendency for ineffective use of leisure time" (see Appendix A, question 12) to recidivism, chi square tests revealed no significant difference in responses between social workers and probation officers,  $X^2 (3, N = 77) = 3.00, p = .39$ . Table 10 shows the percentage of responses based on identified occupation. Twelve percent of probation officers selected "very important", 63% selected "important", 20% selected "neither unimportant or important", 5% selected "unimportant." Twenty-two percent of social workers selected "very important", 47% selected "important", 19% selected "neither unimportant or important", 11% selected "unimportant."

Table 10. Leisure Time

Variable (N = 77)	N	%
Probation Officer		
Unimportant	2	4.9
Neither Unimportant or Important	8	19.5
Important	26	63.4
Very Important	5	12.2
Social Worker		
Unimportant	4	11.1
Neither Unimportant or Important	7	19.4
Important	17	47.2
Very Important	8	22.2

When asked how influential is a youth "being addicted to drugs/alcohol" (see Appendix A, question 16) to recidivism, chi square tests revealed no significant difference in responses between social workers and probation officers,  $\chi^2 (2, N = 77) = 5.95, p = .051$ . Table 11 shows the percentage of responses based on identified occupation. A majority of probation officers (93%) selected "very important", while 7% selected "important." Seventy-two percent of social workers selected "very important", 25% selected "important", and 3% selected "very unimportant."



Table 11. Addiction to Drugs and Alcohol

Variable (N = 77)	N	%
Probation Officer		
Very Unimportant	0	0
Important	3	7.3
Very Important	38	92.7
Social Worker		
Very Unimportant	1	2.8
Important	9	25.0
Very Important	26	72.2

When asked "factors you consider most influential to recidivism are being addressed in intervention/treatment" (see Appendix A, question 18), chi square tests revealed no significant difference in responses between social workers and probation officers,  $\chi^2 (4, N = 77) = 1.96$ ,  $p = .74$ . Table 12 shows the percentage of responses based on identified occupation. Twelve percent of probation officers chose "strongly agree", 44% chose "agree", 15% chose "neither disagree or agree", 27% chose "disagree" and 2% chose "strongly disagree." Similarly, 14% of social workers chose "strongly agree", 31% chose "agree", 14% chose "neither disagree or agree", 36% selected "disagree", and 6% selected "strongly disagree."

Table 12. Treatment Effectiveness

Variable (N = 77)	N	%
Probation Officer		
Strongly Disagree	1	2.4
Disagree	11	26.8
Neither Disagree or Agree	6	14.6
Agree	18	43.9
Strongly Agree	5	12.2
Social Worker		
Strongly Disagree	2	5.6
Disagree	13	36.1
Neither Disagree or Agree	5	13.9
Agree	11	30.6
Strongly Agree	5	13.9

An independent-samples t-test was conducted to compare the depression score variable (see Appendix A, questions 13, 14, 15) in social workers and probation officers. Results indicate on Table 13 that there was not a significant difference in depression score for probation officers ( $M = 10.1$ ,  $SD = 2.0$ ) and social workers ( $M = 10.1$ ,  $SD = 2.2$ );  $t(75) = .088$ ,  $p = .93$ . These results suggest that participants' responses on depression do not differ based on the identified occupation.

An independent-samples t-test was also conducted to compare the conduct score variable (see Appendix A, questions 8, 9, 10, 11) between social workers and

probation officers. Results indicate on Table 13 that there was no significant difference in response scores for probation officers ( $M = 17.1$ ,  $SD = 1.9$ ) and social workers ( $M = 17.0$ ,  $SD = 2.2$ );  $t(75) = .322$ ,  $p = .75$ . These results suggest that participants' responses on conduct disorder do not differ based on the identified occupation.

Table 13. Depression and Conduct by Occupation

	Occupation	N	Mean	Std. Deviation
Depression (N = 77)				
	Probation Officer	41	10.1	2.0
	Social Worker	36	10.1	2.2
Conduct (N = 77)				
	Probation Officer	41	17.1	1.9
	Social Worker	36	17.0	2.2

Question 17 (see Appendix A) was an open ended question in the questionnaire that was used to obtain themes that provided participants' perceptions on additional risk factors related to juvenile recidivism. The question stated, "Please list factor(s) that you feel are influential in juvenile recidivism that was not listed above?" (see Appendix A, question 17). Forty-three

participants responded to this question; their results were subsequently coded and analyzed resulting in six predominant themes in the results listed on Table 14.

The first theme that emerged was a family history of criminal activity (n = 13) Results show that thirteen participants believe that family members, especially parents and siblings, who are involved in the criminal justice system place a youth at more of a risk for re-arrest. The second theme that emerged was treatment effectiveness (n = 11), with participants reporting inadequate availability or effectiveness of treatment. Ten participants (n = 10) believed that the lack of parental support increases the likelihood of recidivism. Eight participants (n = 8) expressed that a neighborhood with few community resources and high crime rate influences recidivism rates. A final theme that emerged was gang influences (n = 6). Participants reported that gang involvement, either within the family or with the juvenile, negatively impacted a youth's ability to keep away from the juvenile justice system.

Table 14. Additional Risk Factors Reported

Theme	N
Family history of criminal activity	13
Treatment	11
Parental Support	10
Neighborhood	8
Gang Influences	6

#### Summary

The following chapter illustrated the results univariate and bivariate analysis. Frequency statistics displayed participants' demographic characteristics. Bivariate analyses were conducted to discover mean variations of participants' responses between probation officers and social workers. Finally qualitative coding was utilized to identify predominant themes that emerged from the questionnaire.

## CHAPTER FIVE

### DISCUSSION

#### Introduction

Chapter five discusses the meaning and implications of chapter four results and whether the research question, "What do social workers and probation officers identify as the most influential factors to juvenile recidivism?", was answered. The limitations of this study are also presented. Finally, social work implications and future research recommendations are discussed.

#### Discussion

This study made an effort to understand the perceptions of probation officers and social workers in regards to juvenile recidivism factors. Although research identifying task roles between professions differ, surprisingly responses in this study were very similar. Chi-squares and t-tests conducted on the 11 risk factors showed no significant difference between the responses of probation officers and social workers. This suggests that professional differences in assigned tasks, roles and treatment emphasis when working with youth do not change

perceptions of the risk factors that perpetuate continued re-offenses among youth. It can be suggested that because professions perceive risk factors in the same way, both professions are uniformly experiencing similar challenges when trying to work with youth to prevent re-offending behaviors.

Considering that young age at first commitment into a detention facility has been shown by research to be one of the most influential predictive factors in juvenile recidivism (Cottle, Lee & Heilbrun, 2001), only about half of the probation officers and social workers chose "very important." About 12% of probation officers and 20% of social workers responses fell between "very unimportant" to "neither important or unimportant." Additionally, 17% of probation officers and 19% of social workers responses felt that a long time spent in a detention facility was between "very unimportant" to "neither important or unimportant" to juvenile recidivism. This is particularly imperative for probation officers who often have the opportunity to recommend alternative treatment to the courts as a substitute for detainment sentences. If probation officers do not perceive commitment at a young age as being a very

influential risk factor, strong advocacy to prevent detainment will not be implemented and youth could more than likely face detrimental detainment rulings.

The family dynamics domain received more consistent responses that expressed an agreement that this domain has great influence in recidivism rates among youth. Consistently, over 90% of the responses for the variables in the family dynamics domain (poor family relationships, poor parenting skills, poor family problem solving skills, and child abuse history) were perceived as "important" or "very important." These results may support the notion that delinquent behavior often derives from maladaptive family patterns (Madden-Derdich, Leonard, & Gunnell, 2002, p. 355) thus reoffending may be perpetuated by continued family dysfunctions. For example, parents with lenient parenting practices may socialize their children to believe that their actions have no consequences and, furthermore, feel no accountability in the choices they make. This belief may drive youth to a false sense of unaccountability for the crimes they partake in and facilitate the continued victimization of others. It is speculated that both professions seem to understand the great influence family



factors have in perpetuating re-offending behaviors. It was not determined by this survey the degree to which probation officers or social workers work with a youth's family during the execution of intervention efforts. This would have served to offer insight into the experience level both professions have when working with youth and their families.

Social variables that included delinquent peers and ineffective use of leisure time also supported a general consensus of these factors' importance in driving juvenile recidivism upward. Over 90% of both professions' respondents considered delinquent peers to be "important" and "very important" in influencing recidivism. Both professions seemed aware the potential dangers delinquent peers can have on youth with a criminal history. These results are consistent with the wide body of evidence linking antisocial peers with a higher likelihood of continued criminal activity (Cottle, Lee & Heilbrun, 2001).

Although a little over 70% of responses of the ineffective use of leisure time variable fell between "important" and "very important", an increase among non important responses was seen. Close to 30% of probation

offers and social workers did not report ineffective use of leisure time as an important factor in increasing recidivism rates, despite supporting research..

Ineffective use of leisure time that include school truancy behaviors, lack of extracurricular activities, and lack of job prospects may drive potential risk of re-offending behaviors. It should be noted that clarity on what ineffective use of leisure time was meant was not provided, which might have driven less consensus to this variable's importance.

When it comes to the mental health variables, both professions seem in agreement to the importance these variables play in recidivism. Although the positive correlation between addiction to drugs and alcohol and high recidivism rates is still up for debate, both probation officers and social workers agreed that his factor was either "important" or "very important" to continued criminal offenses. These results did not reflect the uncertainty in research of the predictive value of this risk factor on increases in recidivism rates. It is important to note that 25% of social workers responded with "important" as opposed to probation officers (7%). Social workers seem to perceive addictions

to drugs and alcohol slightly less severe than probation officers. It is speculated that this may be due to the professional tasks that each profession has. Probation officers are often mandated to complete drug toxin screens on their clients and if drugs are detected, they are directed to arrest the offender. In other words, probation officers are more prone to see the effects drug addictions have on re-arrest rates.

Despite research suggesting the co-occurrence of mood disorders and conduct disorders, not much support from probation officers and social workers on the importance of depression was seen. When depression was measured (see Appendix A, questions 13, 14, 15), the average responses fell under "neither important" or "unimportant." Given the low importance scores of depression, this form of a mood disorder might not be as influential in recidivism as originally thought. A greater amount of support on importance might have been gained had other mood disorders such as anxiety had been measured. Another conjecture might be that both professions find it difficult to isolate depressive symptoms when other disruptive behavior disorders are present.

The average response rate for the conduct variable fell under "important." This supports research findings suggesting that when conduct disorders are present, recidivism rates are likely to increase (Vermeiren, De Clippele & Deboutte, 2000, p. 133). Given the American Psychiatric Association's (2000) Diagnostic and Statistical Manual of Mental Disorders IV-TR (DSM-IV-TR) diagnostic criteria of conduct disorders, it is no surprise that probation officers and social workers find this variable particularly influential in continued criminal activity. It can be theorized that social workers and probation officers might find youth offender patterns of violating the rights of other and a persistently disassociation from society's behavioral norms as dominant influences in criminal behavior.

Results from the perception of important risk factors being addressed in treatment displayed more distribution along the 5-point Likert scale. About 44% of probation officers and 55% of social workers responses were between "neither disagree or agree" and "strongly disagree." The responses suggest that many of the respondents perceive a lack of adequate interventions being delivered to what they feel are important risk

factors to juvenile recidivism. These responses may be explained by identifying the roles each profession has on the risk factors they believe to be influential. In other words, if their job duties are not designed to address risk factors they perceive as important, then they would be more likely to disagree with question 18 (see Appendix A).

Literature has identified a vast amount of risk factors related to juvenile recidivism that have mainly derived from studies targeting juvenile offenders, yet professional opinions have not been sought after. When asked to freely contribute additional risk factors, a surprising number of respondents offered their input. At the top of the themes were respondents identifying family's history of criminal activity or present incarceration as being influential to continued re-offending behavior among youth. Many respondents suggested that having a brother/sister or parents that have criminal history records increases a youth's chances of re-offending. It assumed that when criminal history is apparent in a youth's family, there are a number of family dysfunctions and/or environmental influences that enable a youth's continued criminal behavior; thus

creating a belief that this risk factor is influential in recidivism rates. Responses surrounding treatment were dominant among participants. One respondent reported that the lack of "resources upon release from jail especially related to jobs, education, goal setting, health care/mental health care and recovery care" were influencing continued recidivism rates (Participant 76, personal communication, March 2012). Additionally, some respondents felt that lack of parental support and gang involvement, either within the family or in the neighborhood placed a youth more at risk for re-offending. Finally, respondents felt that violent communities and those with impoverished community resources were risk factors that they felt were influential in juvenile recidivism. These responses came from 43 out of the 79 respondents; therefore it is unclear whether all respondents would support these additional risk factors. But these responses offer additional factors that researchers may have found to be significantly correlated with high re-arrest rates among youth.

## Limitations

This study made an effort to gain the perspectives of social workers and probation officers on the risk factors associated with juvenile recidivism. There are however limitations of this study that must be discussed. Due to the small sample size of 41 probation officers and 36 social workers, results cannot be generalized to the participating professions. Although a purposive sampling method attempted to solicit social workers and probation officers that work directly with juvenile offenders, respondents were not asked directly to verify their experience with them; thus participants' responses may or may not reflect a perspective of recidivism risk factors based on actual experiences with the population. Additional limitations of this study center on the self-constructed instrument tool used in this study, which has not been proven to be valid or reliable. Responses were measured on a 5-point Likert scale that offered little room for a deeper evaluation of perception that a wider Likert scale measurement would have provided. Moreover, perceptions were gathered on the limited amount of risk factors. The survey did not include a comprehensive list of the risk factors researcher have identified as

significantly related to an increase in recidivism; therefore it cannot be inferred from this study that these are the only risk factors that are most influential to continuous re-offending rates among youth.

#### Recommendations for Social Work Practice, Policy and Research

Research seeking opinions about the challenges social workers and probation officers face in preventing recidivism among youth is severely lacking. Both professions have a lot of knowledge and experience that can help shed light on what youth are struggling with when attempting to steer clear from the juvenile justice system. Future research on professional opinions can help bring clarity on inconsistent research results gathered from juvenile offenders.

The concern that some respondents raised, that treatment services aren't meeting the needs of youth offenders raises awareness for the need for further program development and policy creation relating to this population. Additionally, further investigation on the effectiveness of current treatment programs in the Inland Empire is needed to ensure the existence of effective and comprehensive services for this vulnerable population.



Policy implications also concern the support this study has shown on research identifying young age at commitment into a detention facility and lengthy stay at a detention facility as being important in leading a youth to re-offend. Policy in the juvenile justice department must reflect research supporting that these factors are highly predictive of future offenses; therefore setting limitations to the practice of sentencing youth to detention facilities at a young age and for a long period time.

Findings of this study can bring awareness to social workers and probation officers about the influence certain risk factors have on high recidivism rates. Intervention focus for social workers and probation officers can be developed around known influential risk factors that this study identified. In addition, social workers can strive to provide comprehensive mental health services that include individual and family therapy to address various family dynamics and mental health factors identified in this study. Presumptions about risk factors can also be re-evaluated based on findings of this study. Social workers working with this population or have a desire to do so can seek out programs that target

identified leading risk factors in recidivism.

Alternately, macro social workers can advocate or create programs that would fill in service gaps for juvenile offenders in the Inland Empire. Results can also help increase competence levels among other professions that work with juvenile offenders. Most importantly, both the social work and probation officer population can acknowledge that despite differences in profession, both are facing similar challenges with youth. This study may serve as motivation to collaborate in an effort to reduce recidivism rates among youth.

### Conclusions

This study has provided social workers and probation officers of the Inland Empire the opportunity to share their perspectives on the risk factors related to juvenile recidivism. Both professions found the presented risk factors relatively important to influencing youth to re-offend, supporting a multitude of research verifying significant connection among these risk factors and high recidivism rates. Additional, this study has highlighted the continued need for more developed services and policies that can effectively reduce juvenile recidivism.

Most importantly, this study can remind the social work community that juvenile recidivism is an unrelenting social problem with multifaceted features, and if forgotten, the hope of an optimistic future for these vulnerable youth will be lost.

APPENDIX A  
QUESTIONNAIRE

1	2	3	4	5
Very	Unimportant	Neither	Important	Very
<u>Unimportant</u>		Unimportant		<u>Important</u>
		or		
		Important		

The following questions ask you to identify the importance or unimportance of risk factors related to juvenile recidivism. Use the table above to answer the following question:

**How influential is this factor in leading a youth to reoffend?**

- 1.\_\_\_\_ Young age at first commitment into a detention facility
- 2.\_\_\_\_ Extensive time spent in a detention facility
- 3.\_\_\_\_ Having poor relationship with parent(s)
- 4.\_\_\_\_ Having parents with poor parenting skills
- 5.\_\_\_\_ Having a family with poor problem-solving skills
- 6.\_\_\_\_ Having a history of child abuse/neglect
- 7.\_\_\_\_ Having delinquent peers
- 8.\_\_\_\_ Having aggressive tendencies towards animals or people
- 9.\_\_\_\_ Having patterns of lying/deceitfulness
- 10.\_\_\_\_ Having patterns of destroying other's property
- 11.\_\_\_\_ Having patterns of running away from home

12.\_\_\_\_ Having a tendency for ineffective use of leisure time

13.\_\_\_\_ Having a depressed mood throughout the day

14.\_\_\_\_ Having difficulties sleeping

15.\_\_\_\_ Having loss of energy or feeling fatigued nearly every day

16.\_\_\_\_ Being addicted to drugs/alcohol

17. Please list factor(s) that you feel are influential in juvenile recidivism that were not listed above.

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18. Factors you consider most influential to recidivism are being addressed in intervention/treatment. (Circle One)

1	2	3	4	5
Strongly Disagree	Disagree	Neither Disagree or Agree	Agree	Strongly Agree

Developed by Maribel Lopez

APPENDIX B  
INFORMED CONSENT

## **INFORMED CONSENT**

This study is being conducted by Maribel Lopez under the supervision of Dr. Janet Chang, Professor of Social Work, California State University, San Bernardino. The study in which you are being asked to participate is designed to investigate what probation officers and social workers consider to be most influential to juvenile recidivism rates. Participation will involve responding to a questionnaire relating to risk factors associated with juvenile reoffending. Partaking in the questionnaire should last anywhere from 5-10 minutes. This study has been approved by the Social Work Sub Committee of the Institutional Review Board California State University, San Bernardino.

Participation in this study is completely voluntary. You are free to refuse to participate without any penalties. Also, you may discontinue answering any questions and withdraw from participation at any time. Please note that a complete questionnaire will be appreciated and will facilitate the study's purpose. Participation in this study is completely anonymous. No identifiable information will be collected or noted. Responses will be analyzed in a group format; therefore no links will be made to individual participants. There are no foreseeable or expected risks resulting from participation in this study.

On completion of the questionnaire, a debriefing statement will be provided further explaining the study. Should you have any comments or questions regarding your participation in this study please direct them to Dr. Janet Chang at (909) 537-5184. Results and conclusions drawn from this study may be obtained from the Phan Library at California State University, San Bernardino beginning September 2012.

Please read the following to assure your full understanding of participation in this study.

I have read the foregoing information and fully understand what my participation will involve.



I understand that I am free to decline participation in this study and am free to withdraw from participation at any time.

I understand that the responses I provide will be completely anonymous and no direct link will be made back to me.

I understand that there are no foreseeable or expected risks resulting from participation in this study.

I understand that should I have any comments or concerns, I have someone to contact.

Please mark an "X" below to confirm that you have understood the above statements. Also by marking in the space below you are giving your consent to participate willingly in this study.

Place mark here: \_\_\_\_\_ Date: \_\_\_\_\_

APPENDIX C  
DEBRIEFING STATEMENT

## Debriefing Statement

This study you have just completed was designed to investigate what probation officers and social workers consider to be the most influential factors leading youth to reoffend. In this study two professions were assessed: Probation Officers and Social Workers. Differences in responses between each profession were of considerable interest. It is my hope that the results of this study will increase knowledge of critical risk factors that often place juveniles in more heightened risk of reoffending.

Thank you for your participation. If you have any questions about the study, please feel free to contact Professor Janet Chang at (909) 537-5184. If you would like to obtain a copy of the group results of this study, please contact the Phan Library at California State University, San Bernardino after September 2012.

APPENDIX D  
DEMOGRAPHICS

Please take a moment to answer the following questions about yourself. (*fill in or circle one*)

16. What is your gender: 1. Male 2. Female 3. Other

17. How old are you? \_\_\_\_years

18. What is your race/ethnicity?

- |                       |                              |
|-----------------------|------------------------------|
| 1. American Indian    | 4. Black or African American |
| 2. Hispanic or Latino | 5. White/Caucasian           |
| 3. Asian              | 6. Other                     |

19. What is your occupation?

- |                      |                  |
|----------------------|------------------|
| 1. Probation Officer | 2. Social Worker |
|----------------------|------------------|

20. How many years of experience do you have in the above profession? \_\_\_\_years

21. What is the highest level of education you have completed?

1. High School Diploma or Equivalent
2. Associate's/ Some College
3. Bachelor's
4. Master's
5. Ph.D. or other professional degree (J.D., M.D., etc.)

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