Gap Analysis of Programming for Offenders across Maine

Submitted to Maine's Commission to Improve the Sentencing, Supervision, Management, and Incarceration of Prisoners

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EXECUTIVE SUMMARY

This report identified 105 programs for offenders in Maine, presented information on the capacity of those programs, and assessed the quality of services provided through the programs. The findings were drawn from a survey sent to programs across Maine, in conjunction with data on the location of offenders across the state. Research questions examined include the following:

- Identification of programs
  - What programs serve offenders?
  - Where are these programs located, including the number of offenders per program at the county level?
- Program capacity
  - How many clients do these programs serve?
  - Are programs being run to capacity?
  - Who are the clients of these programs in terms of their sex, age group, area of involvement in the criminal justice system, and geographic location?
  - What services are provided through these programs?
  - What is the extent of and types of barriers impeding full use of the programs?
- Program quality
  - What proportions of programs are characterized as having very satisfactory, satisfactory, in need of improvement, and unsatisfactory program quality?
  - What areas of program quality are very satisfactory, satisfactory, in need of improvement, and unsatisfactory?

The major findings of the report are presented below. Recommendations for Maine in their efforts to gain additional knowledge about its programs for offenders, meet the needs of its offenders through adequate program capacity, and improve the quality of available programs are highlighted.

Identification Of Programs And Their Capacity

In the absence of an actual needs assessment, two approaches were used explore the need for services for offenders relative to the availability of the services. The first approach involved calculating ratios of the number of offenders per program at both the state and county levels. The findings include ratios for all offenders to all programs, as well as ratios for adult males, adult females, juvenile males, and juvenile females to the sub-group of programs serving them. The second approach used responses to the survey which asked programs to provide the number of clients they currently service; their own assessment of whether they area running over, under or at capacity; some specifics about the programs' clientele; the nature of services provided; and barriers to their being used to full capacity.

Slightly over half of programs self-assessed themselves as running over capacity. The high portion of programs claiming to be over capacity is consistent with the finding that six of the eleven counties for which ratios of offenders per program could be calculated have over one hundred and twenty offenders per program. The data suggest that more capacity is needed, particularly in the counties of Androscoggin, Kennebec, York, Somerset, Piscataquis and Sagadahoc counties, and for adult male offenders across the state.

Despite half of programs reporting being run over capacity, around eighty percent state that there are at least a few barriers to their being used fully. The most often cited barriers are insufficient funding and lack of transportation for offenders.

The following recommendations are made for enhancing the identification of programs and their capacity:

- *Expand efforts to identify programs in Maine that serve offenders.*
    - *Cross index with other agencies in Maine to develop a database of service providers.*
    - *Obtain mailing lists from professional organizations.*
    - *Contact the programs that responded to the survey to request contact information on other programs that they are aware of in their vicinity that provide services to offenders.*

- *Whether offenders have reasonable access to programs located in neighboring counties should be examined.*

- *Conduct a needs assessment to identify how many offenders are located at the various stages of Maine's criminal justice system, their level of risk, and the services they require (both treatment and non-treatment needs) in order to determine the adequacy of the number of programs serving the differently situated offenders.*

- *To maximize the use of scarce financial resources, client pre-service assessment must be improved, as will be discussed in the program quality section below.*

Program Quality

Overall program quality. Most programs in Maine show substantial room for improvement. Thirty-nine percent are "unsatisfactory", 31.4% "need improvement", 23.8% are "satisfactory", and 6.7% are "very satisfactory". The unfavorable categorizations are driven largely by the program quality areas of "program characteristics", "client pre-service assessment", and "evaluation characteristics". The program quality area of "program implementation" is a strength of Maine programs. The overall quality of offender programming in Maine will improve with the application of recommendations in the program quality areas, which are discussed below.

Program implementation. Overall, most programs in Maine appear to have well qualified, experienced, and involved leadership. Community support also appears to be adequate, although some programs indicated that it could be improved. The one major aspect of program implementation identified as a weakness was funding. The following recommendation is made for the improvement of program implementation in Maine.

- *Steps should be taken to increase funding for programs; however, these increases should be tied to performance measures and improvement of program quality.*

Client pre-service assessment. Despite that fact that Maine has implemented the Level of Service Inventory and Youthful LSI/CMI across the state, offender assessment remains an area that needs improvement for the service providers. Although some risk and need factors are assessed for use in treatment planning, not all major risk/need factors are assessed with standardized instruments designed to predict the likelihood of an offender's recidivism or needs. Several recommendations are in order.

- *There needs to be better sharing of LSI and LSI/CMI results between the DOC and service providers.*

- *Training on the use and application of the LSI and LSI/CMI should also be extended to the service providers.*

- *Uniform case planning tied to assessment protocols should be developed for all service providers that work with an offender population.*

Program characteristics. The program quality area of program characteristics is one of Maine's weakest. No aspect of quality program characteristics consistently is adhered to across the State. Rather, improvements can be made in each of the program characteristics examined in this study. Highlights of the more significant deficiencies with accompanying recommendations are below.

Many of the programs that responded to the survey do not design their services based on an adequate number or range of offenders' characteristics or circumstances that relate to recidivism. While some of the Maine programs employ cognitive interventions, most programs use approaches and interventions that have not demonstrated effectiveness in reducing criminal behavior. The composition of treatment groups and service delivery efforts are often deficient. Additionally, programs' tend to not use rewards and punishment skillfully, do not use role plays regularly for practicing new skills, do not teach relapse prevention concepts and techniques and do not use a structured treatment curriculum. Finally, many programs do not work with offenders' families, are of insufficient duration, and have inadequate aftercare services. The following recommendations are in order:

- *Programs that serve an offender population should increase the criminogenic targets for change. It is recommended that 80 percent of a program's targets and interventions be focused on crime-producing needs such as criminal peer groups, procriminal attitudes, and cognitive skill deficits such as problem-solving and consequential thinking,*

- *Programs in Maine need to adopt more effective approaches, which can include behavioral, cognitive-behavior, family-based, and social learning models. Necessary components of such approaches include the administration of both rewards and punishment (rewards should be given at a rate of four rewards to one punishment), relapse prevention concepts and techniques, and regular use of role plays for practice. All staff should be trained on these models, and treatment manuals and curriculums should be used whenever appropriate. The inclusion of families in the treatment efforts is desirable.*

- *Treatment intensity, or "dosage," should be clearly matched to the offenders' level of risk as measured by a standardized and objective assessment process. Higher risk offenders should receive more intense (more frequent and longer duration) levels of treatment, and should not be grouped with or exposed to low risk offenders, offenders not in treatment, or non-offenders.*

- *Aftercare services should be provided regularly to extend the effectiveness of interventions.*

Staff characteristics. Overall, the staff in Maine had low staff turnover. Around half of programs assess staff on their clinical skills, have staff who are educated in a helping profession, and or have experience working with offenders. Notably deficient aspects of staff characteristics include regular clinical supervision and college educations. The following is recommended:

- *Training for staff needs to be substantially increased. All staff working with offenders should receive formal training in theory and practice of interventions employed by the program, a review of the principles of effective interventions, behavioral strategies such as modeling and the application of reinforcers (both negative and positive), treatment planning, risk and need factors related to criminal conduct, and the use and interpretation of assessment instruments.*

- *Clinical supervision of staff needs to be incorporated into programs. This would include observations of service delivery, and routine staff meetings and documentation of offenders' progress*

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- *Undergraduate degrees should characterize at least 75% of staff, and at least 10% of staff should have advanced degrees.*

Evaluation characteristics. Overall, programs in Maine are lacking in their evaluation efforts. Adequate internal quality assurance mechanisms are missing, offender within program change is not measured, and post-program recidivism is not monitored. A strength in this area is that most programs do survey clients on their satisfaction with services. To improve in this area, programs should follow the recommendations below:

- *Implement internal quality assurance mechanisms including file reviews and problem-oriented records that monitor offenders' progress.*

- *To determine whether interventions are achieving their goals of reducing offenders' criminogenic needs, programs must measure within program change in an objective manner, such as pre and post testing offenders. It is through the reduction and elimination of risk factors that recidivism decreases.*

- *Programs for offenders should collect data on post-treatment recidivism. Ideally, recidivism data is also collected on similar offenders who do not receive the interventions in order to determine whether the treated offenders engage in less criminal behavior than a comparison group.*

In addition to the recommendations for specific program quality areas, it is strongly recommended that the State of Maine develops a system for auditing the quality of programs serving offenders. Not only would such a system regularly assess the quality of programs and hold them accountable for making improvements, but would also provide training and technical support to programs.

INTRODUCTION

Maine's Commission to Improve the Sentencing, Supervision, Management, and Incarceration of Prisoners recognizes the need to identify agencies and programs across the State providing services to its offender population and to assess the quality of services being offered. Such information allows for the location of gaps in the menu of services for offenders and points to areas of service delivery in need of improvement. The University of Cincinnati aided the Commission in the collection, analysis, and interpretation of data on offender programming across the State. This report summarizes information gathered via a mail survey. Specifically, it addresses the following questions:

- Identification of programs
  - What programs serve offenders?
  - Where are these programs located, including the number of offenders per program at the county level?
- Program capacity
  - How many clients do these programs serve?
  - Are programs being run to capacity?
  - Who are the clients of these programs in terms of their sex, age group, area of involvement in the criminal justice system, and geographic location?
  - What services are provided through these programs?
  - What is the extent of and types of barriers impeding full use of the programs?
- Program quality
  - What proportions of programs are characterized as having very satisfactory, satisfactory, in need of improvement, and unsatisfactory program quality?
  - What areas of program quality are very satisfactory, satisfactory, in need of improvement, and unsatisfactory?

In addition to answering the above questions for all programs as a whole, the report often distinguishes between programs based on the sex and age of clients they serve.

Before addressing the questions posed in the study, this report briefly describes the methodology of the study and how the findings are presented. Concluding remarks include recommendations for the Commission.

METHODOLOGY

Data were obtained through a mail survey. The Commission provided addresses of programs across Maine likely to serve offenders. The University of Cincinnati constructed and administered two mailings of the survey, which is presented in Appendix A. Of the 543 programs that received surveys, 167 responded; the response rate was 30.8%. Not all of the programs that responded to the survey provide services to offenders, however. One hundred and five responding programs indicated that offenders are included among their clients. These 105 programs constitute the study's sample.

As one of the purposes of this project was to create an initial list of programs for offenders in Maine, no database of offender programs exists to use as a baseline to determine the extent that these 105 programs represent all offender programs in Maine. Yet, there is no reason to assume that the description of services for offenders in Maine presented in this report does not reflect generally the overall programs available.

The Commission also provided information on the 16,817 individuals currently under some form of criminal justice supervision as of August 22, 2004. The offenders' addresses, sex, and age group (juvenile or adult) allow for the geographical matching of offenders to program availability.

Information obtained through the survey is presented in two ways. Mapping illustrates the location of programs throughout the State and is used in conjunction with the information on offenders' location. Frequencies and percentages indicate the prevalence of programs that have particular characteristics. Because not all programs in the sample responded to each item in the survey, some percentages presented are calculated from sample sizes smaller than the total of 105 programs that responded to the mail survey. Furthermore, in many instances a program meets multiple qualities of a characteristic, such as providing services in both urban and rural areas. For that reason, percentages presented in tables often do not sum to one hundred.

IDENTIFICATION OF PROGRAMS

What programs serve offenders?

As stated above, one of the purposes of this study is to provide the Commission a list of programs in Maine that provide services to offenders. Of the 543 programs identified by the Commission as possibly serving offenders, 105 responded that offenders are included in their clientele. The name and addresses of these programs are presented in Appendix B. An electronic version of this list is available to the Commission.

Where are programs for offenders located?

Ninety-three of the 105 (88.6%) programs serving offenders are represented in the maps and tables discussed in this section[1]. The distribution of all programs across Maine[2], not differentiated by any characteristics of the programs, is discussed first. Programs are then presented according to whether they serve adult male, adult female, juvenile male, or juvenile female offenders. Most maps are reported in conjunction with the distribution of offenders across Maine. Of the 16,817 individuals under the supervision of Maine's criminal justice system, 11,354 (67.5 %) are included in the maps[3].

Distribution of all programs . Map 1 illustrates the distribution of programs serving offenders across Maine. Because in many instances multiple programs are located in a single general location, the dots representing each individual program tend to overlap and may appear to mark only one program. For clarification, refer to Table 1 which provides the actual number of programs in each county.

Programs are concentrated in the following counties: Cumberland (n = 36), Penobscot (n = 21), Somerset (n = 15), and Sagadahoc (n = 8). No programs in our sample are located in specific counties in the west, northwest and southeast sections of the state; Franklin, Oxford, and Washington counties, along with Waldo and Lincoln counties, have no programs serving offenders that our study could identify.

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[1] Some programs could not be mapped because either the only addresses available for them were post office boxes rather than street address or the street addresses provided could not be located by the mapping software.

[2] Readers are reminded that the programs reported on in this report are limited to those programs that responded to the survey, and the exhaustiveness of the sample is unknown.

[3] Some offenders could not be mapped because their addresses could not be located by the mapping software.

Map 1: Distribution of Programs Serving Offenders Across Maine

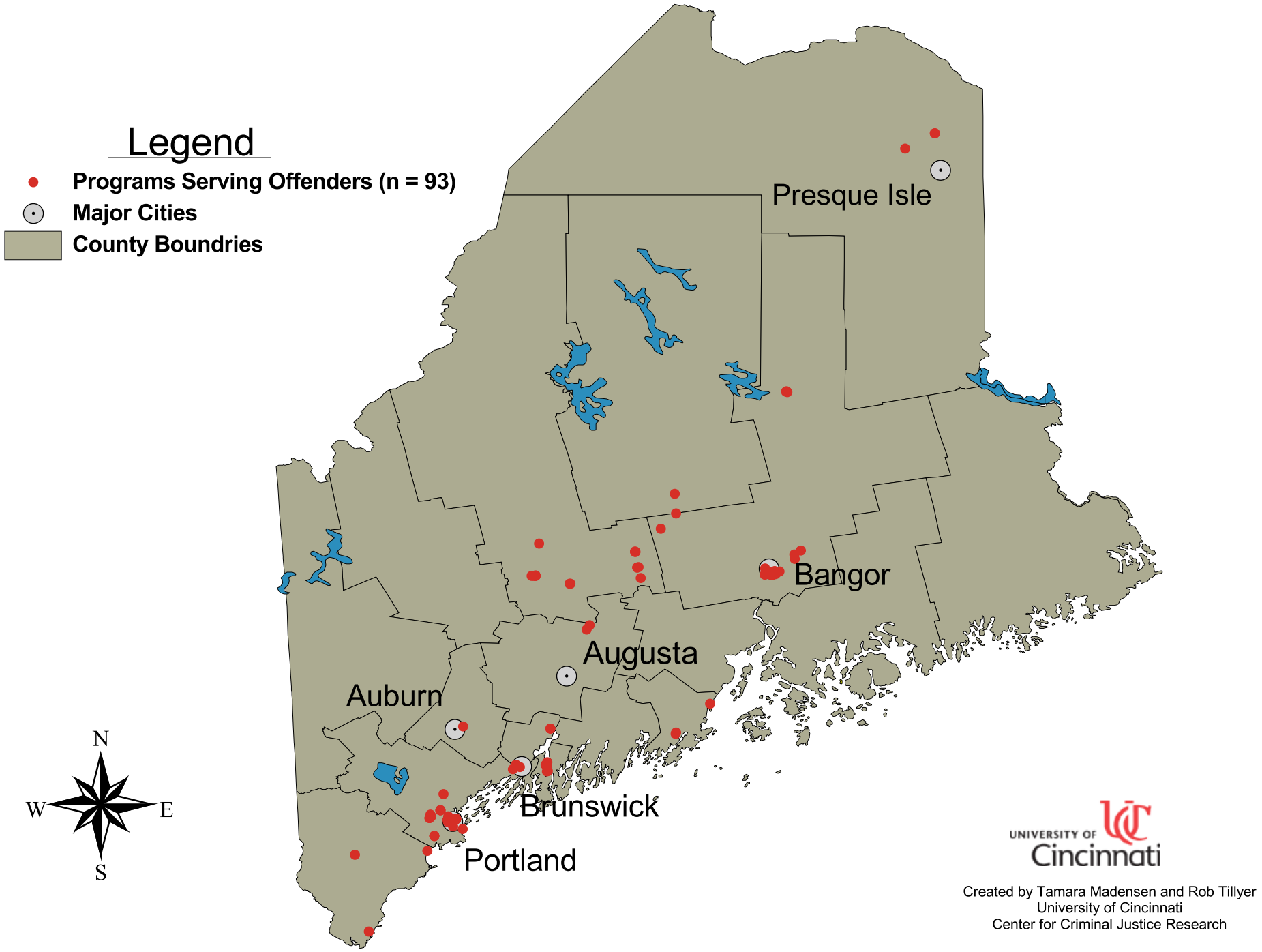

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Table 1. County level analysis of programs and offenders.

	Offenders	Square Miles	Programs	Offenders per Square Mile	Offenders per Programs
Androscoggin	791	496.2	1	1.59	791.0
Aroostook	261	6810.0	3	0.04	87.0
Cumberland	2458	925.7	36	2.66	68.3
Franklin	44	1740.5	0	0.03	-----[A]
Hancock	77	1682.5	2	0.05	38.5
Kennebec	436	948.9	2	0.46	218.0
Knox	303	379.4	3	0.80	101.0
Lincoln	352	469.6	0	0.75	-----
Oxford	206	2172.7	0	0.09	-----
Penobscot	2221	3549.0	21	0.63	105.8
Piscataquis	138	4366.2	1	0.03	138.0
Sagadahoc	985	256.1	8	3.85	123.1
Somerset	2092	4086.6	15	0.51	139.5
Waldo	71	754.2	0	0.09	-----
Washington	9	2739.6	0	0.00	-----
York	852	1016.5	3	0.84	284.0
Total	11296	32394.7	95[B]	0.35	118.9

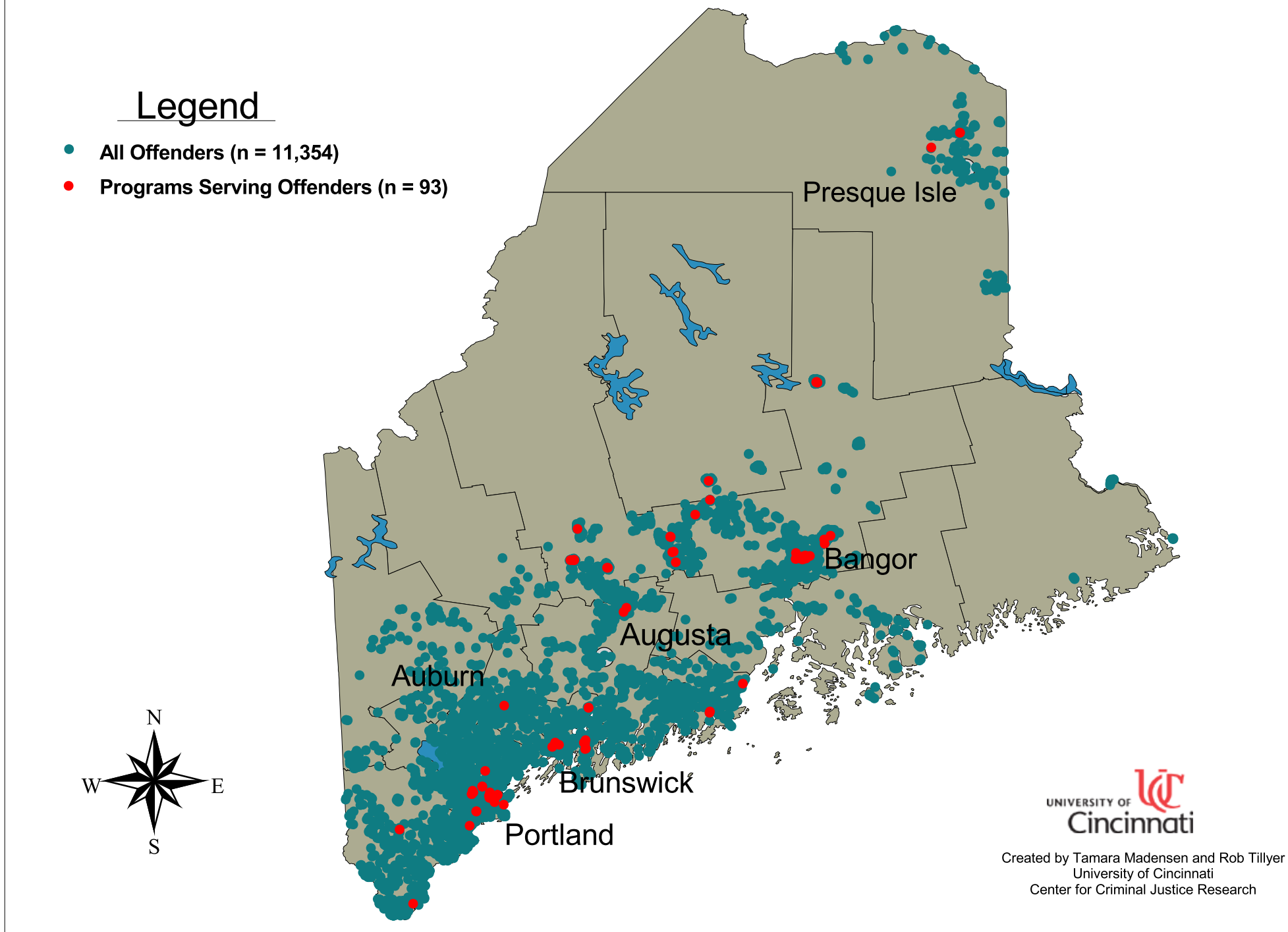
[A] Dashes indicate that a rate could not be computed because there are no programs in those counties.

[B] Two of the 93 programs mapped are located very near county borders. For this reason, they are counted twice, once for each of the counties on which they border.

Whether the geographical distribution of programs meets the needs of their surrounding areas requires an examination of the distribution of offenders across the state. Counties with the greatest number of offenders per square mile are Sagadahoc (3.9), Cumberland (2.7), Androscoggin (1.6), York (.8), Knox (.8) and Lincoln (.8) (Table 1). Counties with less than 0.1 offenders per square mile are Aroostook, Franklin, Hancock, Oxford, Piscataquis, Waldo and Washington.

Taken together, the distribution of programs in conjunction with the distribution of offenders provides the number of offenders per program in each county, as reported in Table 1 and illustrated Map 2. The number of "offenders per program" in each county speaks to whether the density of offenders matches the number of programs available. Counties vary from having 791 offenders per program to 38.5 offenders per program. Appropriately, the high offender-density county, Cumberland, is paired with a high concentration of programs, resulting in 68.3 offenders per programs. However, another offender-dense county, Androscoggin, reports only one program for offenders; there is only one program for 791

Map 2: Distribution of All Offenders and Programs



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offenders. It is likely that the mismatch between the number of offenders and number of programs in Androscoggin is a function of the presence of a jail and the fact that Androscoggin has experience rapid population growth with limited ability to increase services at the same rate. Other counties with high numbers of offenders per program are Kennebec (218 offenders per program) and York (284 offenders per program).

The ratio of offenders per program could not be calculated for the five counties with no programs. Franklin, Waldo, and Washington counties, which did not report running any programs, have very few offenders. However, the other two counties with no programs, Lincoln and Oxford, are home to 352 and 206 offenders, respectively.

Distribution of programs based on the sex and age of their clients. In this section, the number of offenders per program are dissected into the following four configurations (see Table 2): (1) adult male offenders per programs for adult male offenders, (2) adult female offenders per programs for adult female offenders, (3) juvenile male offenders per programs for juvenile male offenders, and (4) juvenile female offenders per programs for juvenile female offenders. The relationships between number of programs and number of offenders are presented at both the state and county levels.

Due to only 70 programs in the sample indicating the sex of clients served, this section of the report focuses on a sub-sample of the 105 programs in the original sample. Included are 37 programs serving adult males, 30 programs for adult females, 33 programs for juvenile males, and 31 programs for juvenile females[4].

The highest number of offenders per program are for adult males. Across the entire state, there is a ratio of 176 adult male offenders per program for adult males. At the county level, several counties have in excess of one hundred adult male offenders per program. Androscoggin has the highest ratio with 452. adult male offenders per program serving adult male offenders, followed by Somerset with 323, Kennebec with 271 and York with 234. In only two counties is the ratio below one hundred. The ratio in

[4] Several programs serve mixed clientele. For example, a single program may serve both adult males and adult females. For this reason, the number of programs does not sum to 70.

Hancock county is 45 and the ratio in Knox is 67. Ratios cannot be calculated for the five counties with no programs reported. Map 3 displays the location of adult male offenders and programs for adult males.

Table 2. County level analysis of programs and offenders by sex and age of clients.

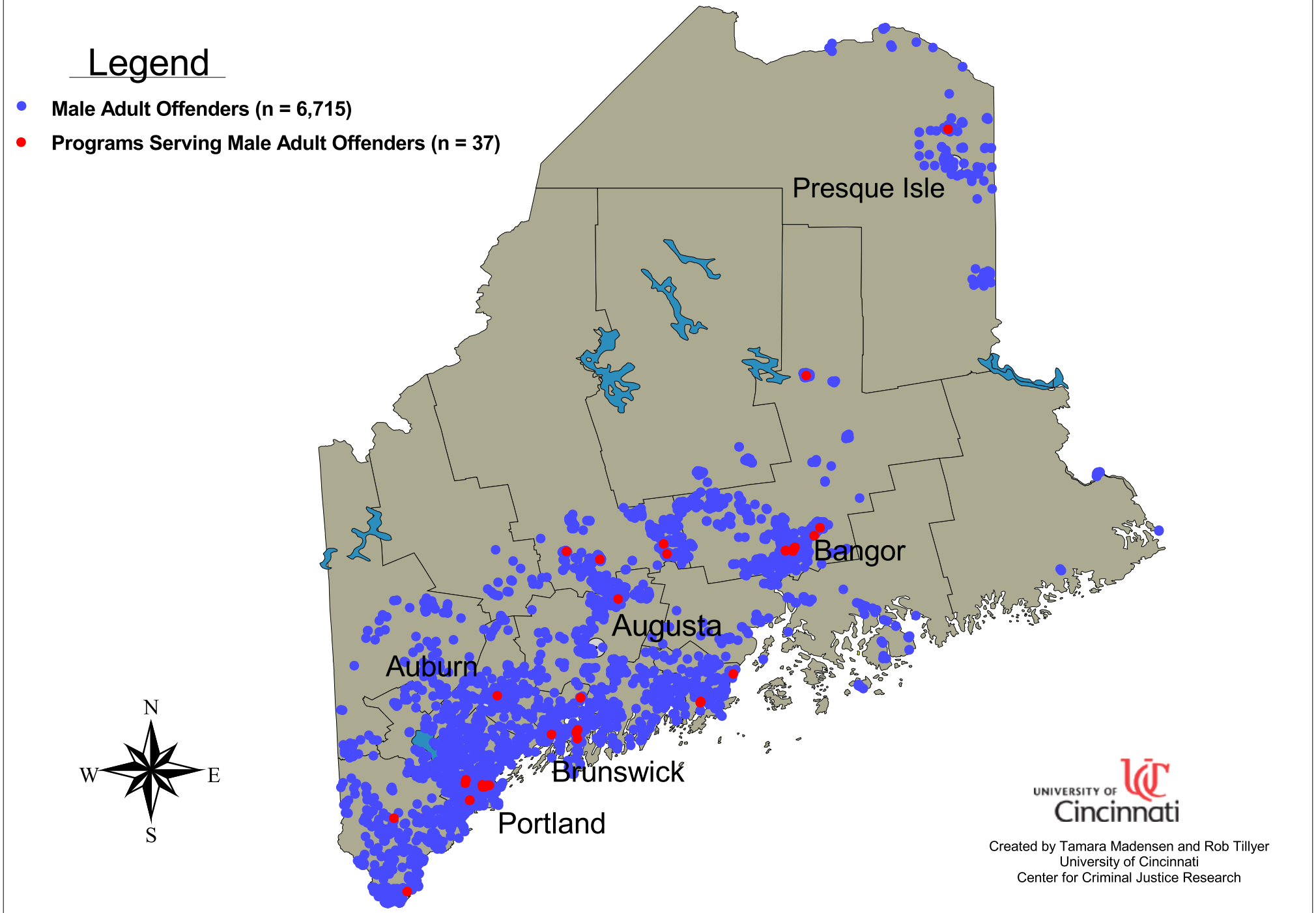
County	Number of adult male offenders per programs serving adult males	Number of adult female offenders per programs serving adult females	Number of juvenile male offenders per programs serving juvenile males	Number of juvenile female offenders per programs serving juvenile females
Androscoggin	452.0	66.0	197.0	76.0
Aroostook	155.0	31.0	30.0	15.0
Cumberland	123.1	33.9	50.4	22.7
Franklin	-----[A]	-----	-----	-----
Hancock	45.0	95.0	-----	-----
Kennebec	271.0	84.0	-----	-----
Knox	67.0	-----	-----	-----
Lincoln	-----	-----	-----	-----
Oxford	-----	-----	-----	-----
Penobscot	146.9	37.5	88.8	30.8
Piscataquis	-----	-----	25.0	8.0
Sagadahoc	123.6	17.2	47.3	14.8
Somerset	323.0	88.3	66.3	22.8
Waldo	-----	-----	-----	-----
Washington	-----	-----	-----	-----
York	234.0	45.5	105.0	41.5
Total	176.0	47.0	72.0	28.0

[A] Dashes indicate that a rate could not be computed because there are no programs in those counties.

The ratios for adult females across the state and in individual counties are considerably lower than ratios for adult males. There are 47 adult female offenders per programs serving adult females across the state. None of the county level ratios exceed one hundred. Rather, the highest number of adult females per program is 95 in Hancock county, followed by Somerset with 88.3 and Kennebec with 84. The majority of ratios fall between 30 and 66. Sagadahoc has the lowest ratio with 17.2 adult female offenders per program for adult females. Again, five counties did not report having programs and therefore are not included in the distribution of ratios for adult females. Map 4 presents the location of adult female offenders and programs for adult females.

The ratio across the entire state of juvenile male offenders to programs serving them is 72. Individual county ratios vary from a high of 197 in Androscoggin to a low of 25 in Piscataquis county. In

Map 3: Distribution of Male Adult Offenders and Male Adult Programs



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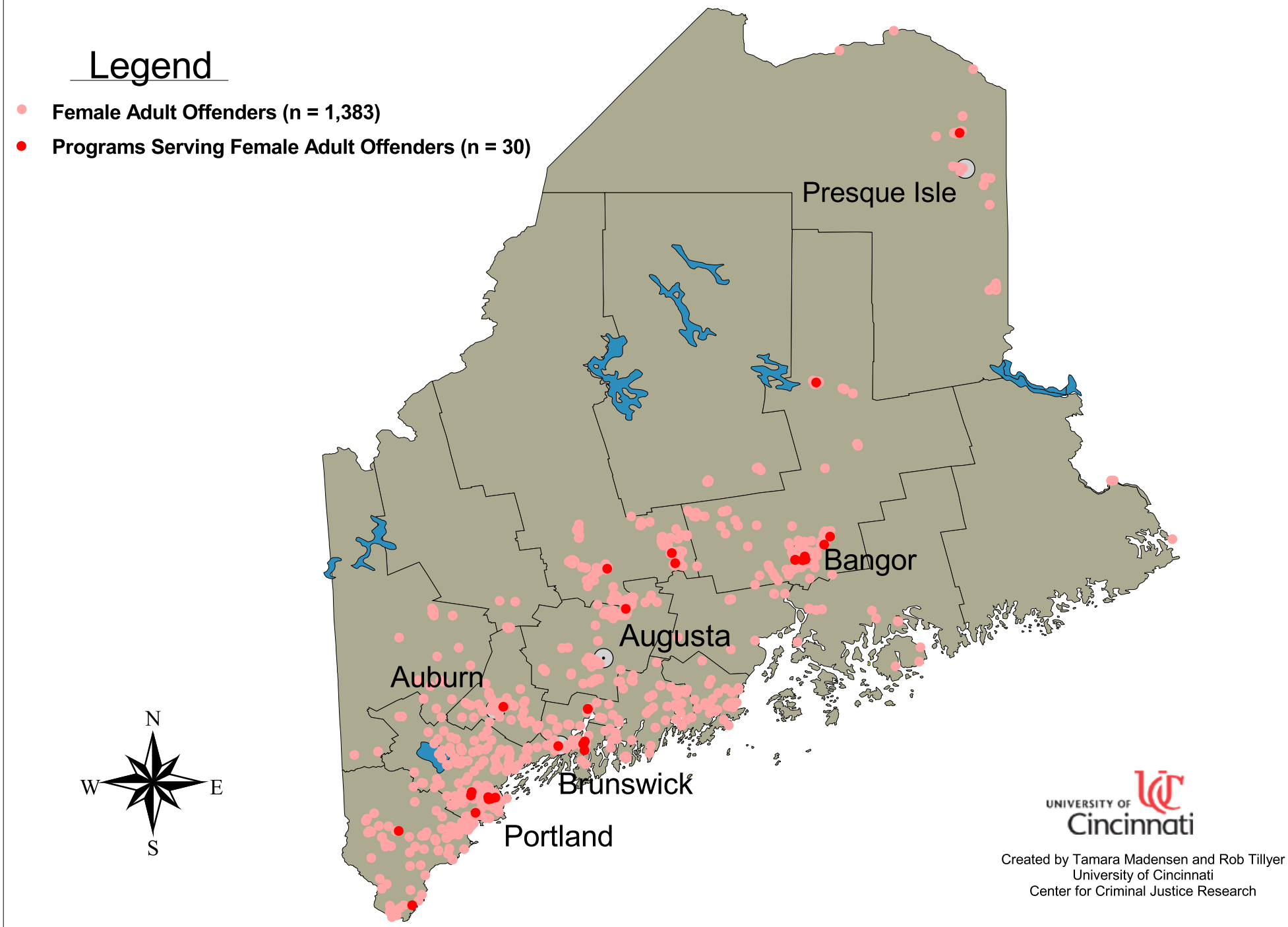
Map 4: Distribution of Female Adult Offenders and Female Adult Programs



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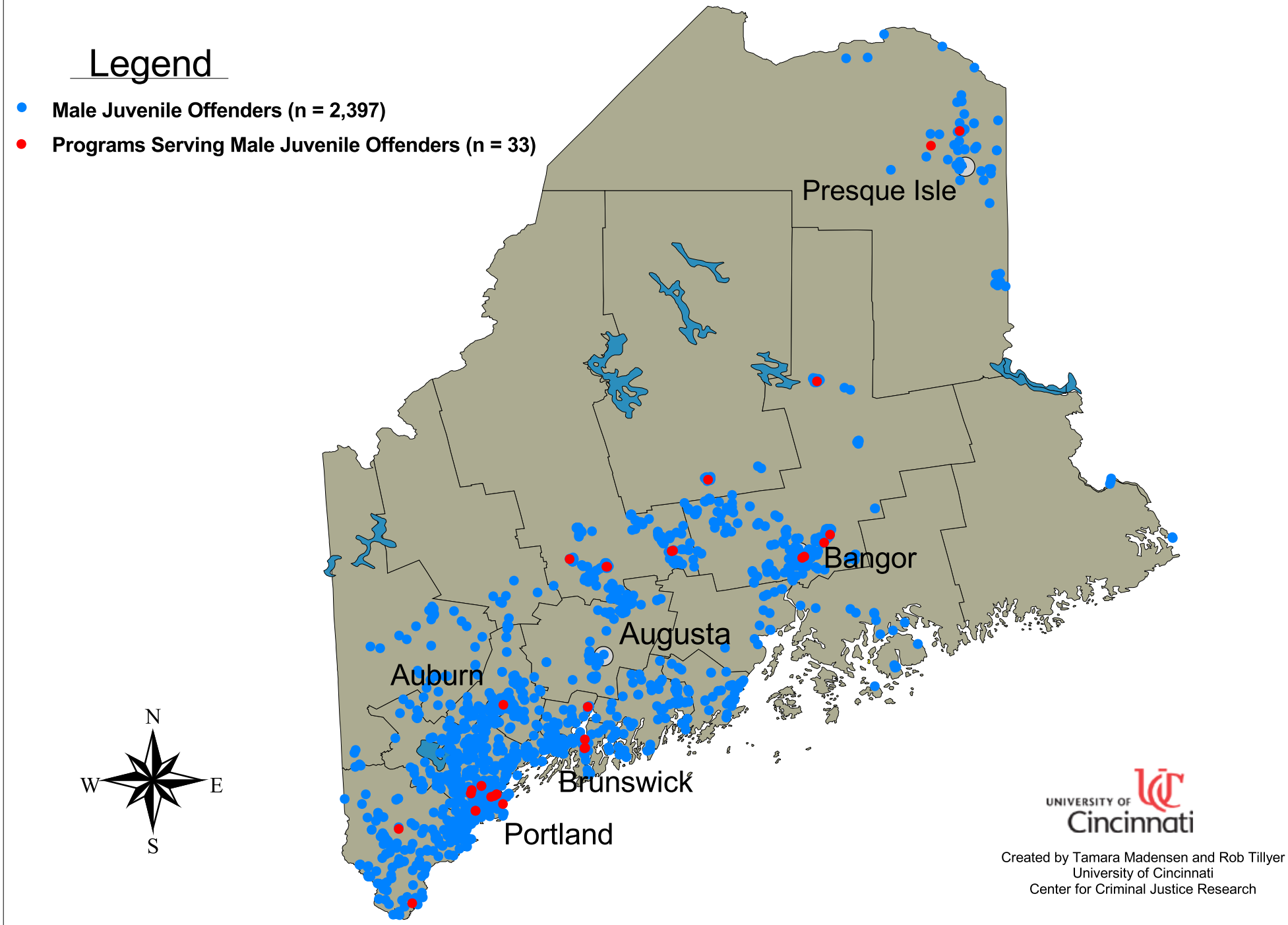
addition to the five counties with no programs at all report, three more indicate they do not have programs juvenile males. See Map 5 for the location of juvenile males offenders and programs serving them.

The lowest number of offenders per program occur in programming for juvenile female offenders. The state level ratio is 28 juvenile female offenders per program serving them. Androscoggin, once again, has the highest ratio, with 76 offenders per program. The second highest ratio is only 41.5 in York county. The remaining six counties with ratios that can be calculated have ratios between 30.8 and 8.0. Similar to the findings for juvenile male programs, ratios cannot be calculated for juvenile females in a total of eight counties. Map 6 illustrates the location of juvenile female offenders and their programs.

Summary

Based on the information available for programs in Maine, there is considerable variation in the ratios of offenders per program. While the state level ratio for all offenders per programs (not differentiating by the sex and age of offenders served) is 118.9, the ratios across counties vary from 791 to 38.5. Once programs are categorized as serving adult males, adult females, juvenile males or juvenile females, it becomes clear that the programs with the highest ratios are those programs serving adult males.

Map 5: Distribution of Male Juvenile Offenders and Male Juvenile Programs



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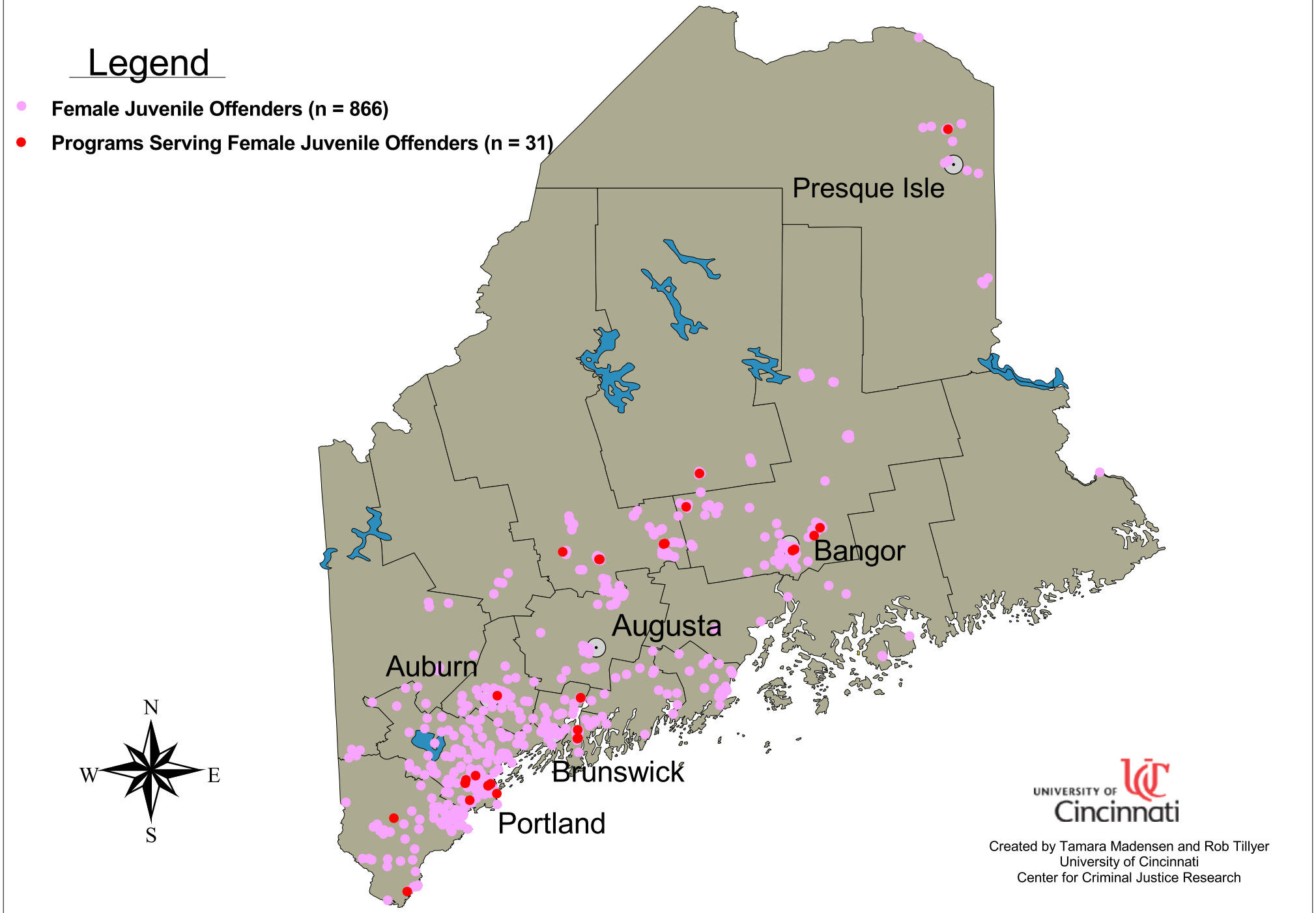
Map 6: Distribution of Female Juvenile Offenders and Female Juvenile Programs



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PROGRAM CAPACITY

This section of the report addresses how many clients are served by the programs that responded to the survey; whether these programs are being run to capacity; who are the clients of these programs; and what services are provided through these programs. The findings are presented first for all of the 105 programs together (see Table 3), followed by comparisons based on the sex composition (see Appendix C) and age composition (see Appendix D) of programs. Finally, this section discusses the extent of and types of barriers impeding the full use of the programs. Information on the barriers experienced is presented for all programs together.

It is important to note that an accompanying needs assessment has not been conducted to determine the types of services needed by offenders in Maine. Such an assessment would lend insight into the extent to which, for example, Maine offenders are in need of treatment for substance abuse or the prevalence of pre-trial detainees across the State. Rather, this discussion of the types of clients composing the programs and types of services offered among the programs is limited to describing the capacity of current offender programming in Maine.

Only 70 (66.7%) programs reported on whether they serve males only, females only, or both sexes. Therefore, throughout this report the description of programs by sex composition represents a sub-sample of the 105 programs. Of those 70 programs, 17 serve male clients only, 5 serve female clients only, and 48 serve both males and females. All 105 programs reported on whether they serve juveniles and or adults. Programs were equally likely to serve juveniles only, adults only, or dual-age groups; 35 programs fall into each program group.

Interpreting the characteristics of programs with both male and female clients or both juveniles and adults must be done with caution. When programs include both sexes or both age groups, a determination of whether services are available equally for men and women or juveniles and adults cannot be made. For example, of the dual-sex programs that treat sexually assaultive behaviors, it is unclear if women as well as men receive treatment in that area. Furthermore, the findings on female only programs should be considered as suggestive rather than conclusive due to the small number of such

programs. Because only five programs are represented, the percentages reported are particularly unstable; the addition of one program having a specific characteristic changes the percentage greatly.

How many clients do these programs serve?

All programs. Of the 105 programs that responded to the survey, 86 indicated the total number of clients they currently serve. Their clientele sums to 13,114. See Table 3, below. One program, Volunteers of America, accounts for 5735 of these clients, leaving a total of 7379 clients served by the remaining 85 programs. Furthermore, half of these programs serve both offenders and non-offenders, and non-offenders are included in the figure.

Programs by sex of clients. Only 62 of the 70 (88.6%) programs reporting on their sex composition provided the number of clients being served currently. Programs for males only are serving 1197 clients, for females only are serving 36 clients, and for both sexes are serving 3853 clients.

Programs by age of clients. A total of 1077 juveniles receive services from the programs serving only juveniles; 3465 adults are included in adult only programs; and 8323 individuals make up the programs for both juveniles and adults. However, 3338 juveniles and 2397 adults in the dual-age programs are from a single program, Volunteers of America. Excluding that one program leaves 2588 offenders in the dual-age programs.

Are programs being run to capacity?

All programs. Around half (54.5%) of the 77 programs that reported on their level of program utilization indicate that their programs are running over capacity. Slightly over a third (37.7%) of programs are at capacity, and 7.8% are under capacity.

Programs by sex of clients. Of the programs reporting on their sex composition and usage (n = 58), very few indicate that they are running under capacity, regardless of the sex composition of their clientele. A greater proportion of programs serving both men and women state that they are over capacity (64.1%), compared to male only programs (35.7%) and female only programs (20.0%).

Table 3. Capacity: All programs.

	N	%
Number of programs serving offenders	105	
Total number of clients served(n = 86)[A, B]	13,114	
Program utilization, number of programs (n = 77)		
Under capacity	6	7.8
At capacity	29	37.7
Over capacity	42	54.5
Composition of programs, number of programs (of the 105 programs)		
Sex (n = 70)		
Women and/or girls only	5	7.1
Men and/or boys only	17	24.3
Men and/or boys and women and/or girls	48	68.6
Age		
Juveniles only	35	33.3
Adults only	35	33.3
Juveniles and adults	35	33.3
Area of criminal justice system		
Supervised community confinement	18	17.1
Probationers	82	78.1
Pre-release	25	23.8
Diversion	39	37.1
Prisoner	31	29.5
Pre-trial	58	55.2
Drug court	3	2.9
Non-offender	55	52.4
Geographical area [C]		
Urban	54	51.4
Suburban	55	52.4
Rural	92	87.6
Characteristics of programs, number of programs (of the 105 programs)		
Setting		
Residential center	29	27.9
Prison	6	5.8
Jail	17	16.3
Community	61	58.7

	N	%
Type of program		
Day reporting	7	6.7
Therapeutic community	6	5.7
Halfway house	7	6.7
Residential	39	37.1
Intensive supervision	9	8.6
Outpatient counseling	32	30.5
Home-based	10	9.5
Drug court	3	2.9
School	2	1.9
Detoxification	2	1.9
Areas of service: Treatment programs		
Anger management	55	52.4
Cognitions	50	47.6
Family	39	37.1
Mental health	60	57.1
Sex offending	11	10.5
Substance abuse	64	61.0
Violence	5	4.8
Areas of service: Other services		
Case management	57	54.3
Community service	3	2.9
Education	61	58.1
Employment	24	22.9
Finances	10	9.5
Housing	2	1.9
Life skills	4	3.8
Medical care	4	3.8
Psychological assessment	29	27.6
Transportation	22	21.0

[A] The number of clients includes both offenders and non-offenders currently served by the programs.

[B] The number in parentheses indicates the number of programs that responded to the item. For example, 86 of the 105 programs indicated the number of clients they currently serve.

[C] Programs may have clients from multiple geographical areas.

Programs by age of clients. Whether programs are being used to their capacity was reported on by 77 (73.3%) of the programs. Juvenile only programs were less likely to be over capacity (40.0%) than programs for adults only (60.0%) or programs for both juveniles and adults (68.2%).

Who are the clients of these programs?

All programs. The programs serve a variety of clients, with many having mixed clientele. As can be seen in Table 3, 17 programs offer services to men only[5], 5 to females only, and 48 to both men and women. Equal numbers of programs serve juveniles only, adults only, and both age groups; thirty-five programs are available for the different age group compositions.

Around half (52.4%) of the programs treat non-offenders as well as offenders. The most commonly dealt with offenders are probationers (78.1%) and individuals awaiting trial (55.2%). Between a quarter and a third of the programs include pre-release offenders (23.8%), people being diverted from the criminal justice system (23.8%), and prisoners (29.5%). A smaller proportion serves supervised community confinement offenders (17.1%). Drug court participants are included in 2.9% of the programs.

Most of the programs (87.6%) serve offenders who live in rural areas of the state. Half include urban (51.4%) or suburban (52.4%) clients.

Programs by sex of clients. Programs differ in terms of the age of clients and their involvement in the criminal justice system based on the sex composition of the programs. Of the five female only programs, three (60.0%) are for juveniles only, compared to 41.2% of male only programs and 27.1% of programs serving both men and women. Slightly over half (52.9%) of male only programs are for adults only, with 5.9% of programs serving both juveniles and adults. In contrast, the programs serving both men and women are nearly equally divided among juvenile only (27.1%), adult only (35.4%) and both juvenile and adult (37.5%) programs.

While probationers make up the largest proportion of the three categories of programs being discussed, differences are noted for the prevalence of most of the remaining areas of the criminal justice systems where clients are located. Diversion clients are underrepresented among the male only programs (29.4%) compared to female only programs (40.0%) and programs serving both men and women (41.7%). Our sample of female only programs includes neither supervised community confinement offenders nor

[5] Only 70 programs reported on the sex composition of their clientele.

any prisoners[6]. Instead, the female only programs are very likely to include non-offenders (80.0%). Drug court clients are found only in programs serving both males and females clients.

Programs by age of clients. The age groups of clients served by programs yield some differences in the sex composition of clients and their involvement in the criminal justice system. The programs serving single age groups report that approximately a third are male only programs, under 15 percent serve females only, and around 60 percent serve both men and women. However, 90% of programs that serve both juveniles and adults include both males and females among their clients.

Programs for juveniles only appear to serve clients from different areas of the criminal justice system than do the adult only programs and programs serving both age groups. Fewer juvenile only programs serve pre-release individuals (11.4%), prisoners (8.6%), and those awaiting trial (25.7%) than do programs serving adults only (31.3%, 45.7%, and 62.9%, respectively) or both age groups (28.6%, 34.3%, and 77.1%, respectively). However, probationers are less likely to be among the clients of adult only programs (62.9%) than the programs serving juveniles only (85.7%) or both age groups (85.7%). Twice as many programs for both juveniles and adults include non-offenders (80.0%) as the juvenile only programs (45.7%) and adult only programs (31.4%).

What services are provided through these programs?

All programs. Table 3 summarizes the setting and types of programs included in the sample, as well as the types of treatment and other services offered. A minority of the programs is set in secure facilities; 5.8% are in prisons and 16.3% are in jails. Residential centers make up 27.9% of the programs and 58.7% of the programs are community-based.

By far, the most common types of programs are residential (37.1%) or outpatient counseling (30.5%). Each of the other program types represented (e.g., day reporting, halfway houses) are characteristic of less than ten percent of the programs.

[6] While it may be assumed that female only programs in secure facilities exist, there is no master list of programming for offenders in Maine to which this finding can be compared.

Among the treatment-oriented services provided by programs in Maine, the most common is substance abuse treatment (61.0%), followed by mental health counseling (57.1%), anger management treatment (52.4%), treatment geared toward modifying cognitions (47.6%), and family counseling and treatment (37.1%). Less common are treatment of sexually abusive behaviors (10.5%) and treatment of assaultive behaviors (i.e., batterer programs) (4.8%).

Case management and education[7] services are the most commonly reported non-treatment services (54.3% and 58.1%, respectively). Between 20 and 30 percent of programs indicate they offer services in the areas of psychological assessment (27.6%), employment (22.9%), or transportation (21.0%). Less than four percent offer at least one of the following service areas: community service, housing, life skills, or medical care.

Programs by sex of clients. Across the three types of programs distinguished by their sex composition, programs set in secure facilities are the least common. None of the female only programs are located in prisons or jails, and between 20 and 30 percent of programs serving males only or both sexes are in secure facilities. While female only programs are equally likely to be in either a residential center or in the community, the greatest proportion of male only programs are in residential centers (47.1%) and the majority of programs serving both men and women are set in the community (60.4%).

The types of programs for single sex programs are limited compared to the array of programs serving both sexes. The majority (52.9%) of male only programs are residential. Other types of male only programs include therapeutic communities (11.8%), halfway houses (11.8%), and outpatient counseling (5.9%). Female only programs are comprised of residential programs (80.0%) and halfway houses (20.0%).

The most noteworthy differences in availability of treatment services across the sex composition of programs are in the areas of family treatment, sex offender treatment and treatment for assaultive behaviors. Female only programs are more likely to include family treatment, whereas male only programs are more likely to treat sexually and non-sexually aggressive behaviors.

[7] Education services include substance abuse and domestic violence education as well as academic services.

Non-treatment services offered are fairly similar across programs' sex composition. However, there are a few differences. Greater proportions of female only programs provide case management (80.0%), employment services (40.0%), and transportation (60.0%) than the male only programs and programs serving both sexes. Only the dual-sex programs report having community service and offering medical care.

Programs by age of clients. The setting of programs differs across the age groups served by programs. A clear majority (76.5%) of programs serving both juveniles and adults are set in the community, with very few programs being in prisons (2.9%). While the same percent of juvenile only programs are set in prisons, they are nearly equally likely to be in residential centers (45.7%) or the community (51.4%). None of the juvenile only programs are set in jails. Adult only programs are more likely to be in the community (48.6%) than the other settings, yet each of the other settings characterize between 10 and 30 percent of the adult only programs.

The main differences in the types of programs offered across the age groups served pertain to residential programs and outpatient counseling. Juvenile only programs are more likely to be residential (54.3%) than adult only programs (37.1%) or programs for both age groups (20.0%). Outpatient counseling is most common among programs serving both juveniles and adults (60.0%) compared to the juvenile only programs (11.4%) and adult only programs (20.0%).

Treatment-oriented services are more prevalent among juvenile only programs and programs serving both age groups than for adult only programs. Adult only programs are less likely than programs for the other age group compositions to focus on cognitions, family, or sex offending. However, violence (i.e., battering) programs are the focus of only the adult only programs, and substance abuse programs are the least common among the juvenile only programs.

Other types of services are addressed fairly similarly across the various age group compositions. Exceptions are that programs that serve both age groups are more likely to include education (74.3%) and finances (20.0%) than the single age group programs.

What is the extent of and types of barriers impeding full use of the programs?

All programs. In addition to reporting on their program's capacity, who participates in their program, and the nature of services provided, many programs in the study lent insight into the extent of (n = 97) and types of barriers (n = 74) that prevent them from being used fully. As presented in Table 4, while 19.6% of programs indicated there are no barriers to them being used, the remaining 80.4% experience at least a few barriers.

Programs indicated the types of barriers impeding their full usage via open-ended questions. These responses were categorized as referring to barriers characteristics of or within the programs, barriers within the community (either the criminal justice or community at-large), or barriers among their clients. The "within program" barriers include lack of resources such as space and child care (5.4%); being understaffed 12.2%; criteria for participation being too exclusive (17.6%); and lack of funds for the program.(36.5%). Barriers identified "within the community" range from lack of awareness or understanding about the program (4.1%); lack of communication among agencies (8.1%); lack of support for the program (9.5%); and lack of referrals from agencies (18.9%). Client-based barriers cited by programs include lack of client self-referrals (2.7%); lack of stable housing (2.7%); lack of parental or family support (2.7%); lack of financial resources (9.5%); lack of willingness or motivation to participate (9.5%), and finally, lack of transportation (24.3%).

Table 4. Barriers to programs being used to capacity.

	N	%
Presence of barriers (n = 97) [A]		
1 – No barriers	19	19.6
2 – Few barriers	34	35.1
3	22	22.7
4	18	18.6
5 – Many barriers	4	4.1
Types of barriers (n = 74)		
Within program barriers		
Program is under-stafffed	9	12.2
Criteria for participation is too exclusive	13	17.6
Lack of funds for the program	27	36.5
Lack of program resources (e.g., space, child care)	4	5.4
Within the community		
Lack of support within criminal justice community and/or community at large	7	9.5
Lack of awareness/understanding about program	3	4.1
Lack of communication among agencies	6	8.1
Lack of referrals from agencies	14	18.9
Among clients		
Lack of client self-referrals	2	2.7
Lack of client funds	7	9.5
Lack of client willingness to participate	7	9.5
Lack of transportation	18	24.3
Lack of stable housing for clients	2	2.7
Lack of parental/familial support	2	2.7

[A] The number in parentheses indicates the number of programs that responded to the item. For example, of the 105 surveys returned, only 97 indicated the extent of barriers to their program being used to capacity. Nineteen of those 97 reported no barriers.

Summary

One hundred and five programs responded to the survey and indicated that they include offenders among their clientele. Over ten thousand clients (offenders and non-offenders) receive services from the 86 programs that offered that information. Half of program are being run over capacity. Dual-sex programs are more likely than single-sex programs to be over capacity, and juvenile only programs are more likely to be under capacity than the other two age-defined program groups. Seventy programs indicted the sex of their clients; 53 programs serve females either solely or in conjunction with males, and 65 provide services for males either solely or along with females. An equal number of programs treat only juveniles, only adults and both age groups. Probationers are the most common clients served by the

programs, followed by pre-trial detainees and non-offenders. Rurally located offenders participate in nearly all of the programs. Over half of the programs are set in the community. The most prevalent types of programs are residential and outpatient counseling. Programs offering treatment-oriented services focus primarily on anger management, cognitions, substance abuse, and mental health. Non-treatment-oriented services center mainly around case management and education. Barriers impeding the full use of programs were reported by a large majority of program. The most frequently cited barriers are lack of program funding and transportation for clients.

PROGRAM QUALITY

The effectiveness of interventions for offenders depends on the quality of several areas of programming. These program areas include implementation, client pre-service assessment, program characteristics (i.e., what the program endeavors to accomplish and techniques and policies it uses to reach those goals), staff characteristics, and evaluation efforts. Programs across Maine are categorized in this report based on whether their overall program quality is "unsatisfactory", "needs improvement", "satisfactory", or "very satisfactory" by considering how well they meet standards in each of the program areas mentioned above. To illustrate which areas of program quality drive the overall quality categorization, each program area (implementation, client pre-service assessment, program characteristics, staff characteristics, and evaluation) is categorized as being "unsatisfactory", "needs improvement", "satisfactory", or "very satisfactory", as well. To lend further insight into the strengths and weakness which determine the program area quality categorizations, individual items that make up the areas are also discussed.

The program quality categorizations are a function of 45 individual items. Each item is relevant to one of the five program quality areas. The program quality areas are made up of the following number of items: implementation, 10; client pre-service assessment, 5; program characteristics, 20; staff characteristics, 4; and evaluation, 4. If a program has the program quality characteristic described by the item, they receive one point. The percent of program quality characteristics that each program has is then calculated. These percentages are sensitive to whether or not the program responded to questions in the survey that measure the characteristic; if a program provided responses to only 40 of the 45 program quality characteristics, their percent was calculated based on the numerator 40 rather than 45. The percentages are collapsed into categories, with scores from 0 to 49 labeled "unsatisfactory", 50 to 59 labeled "needs improvement", 60 to 69 labeled "satisfactory", and 70 to 100 labeled "very satisfactory".

This discussion of the quality of programs across Maine begins by reviewing the distribution of overall program quality categories for all programs together, followed by examining the five program

quality areas for all programs. The results are then re-examined comparing programs based on the sex and age of clients they serve.

All programs

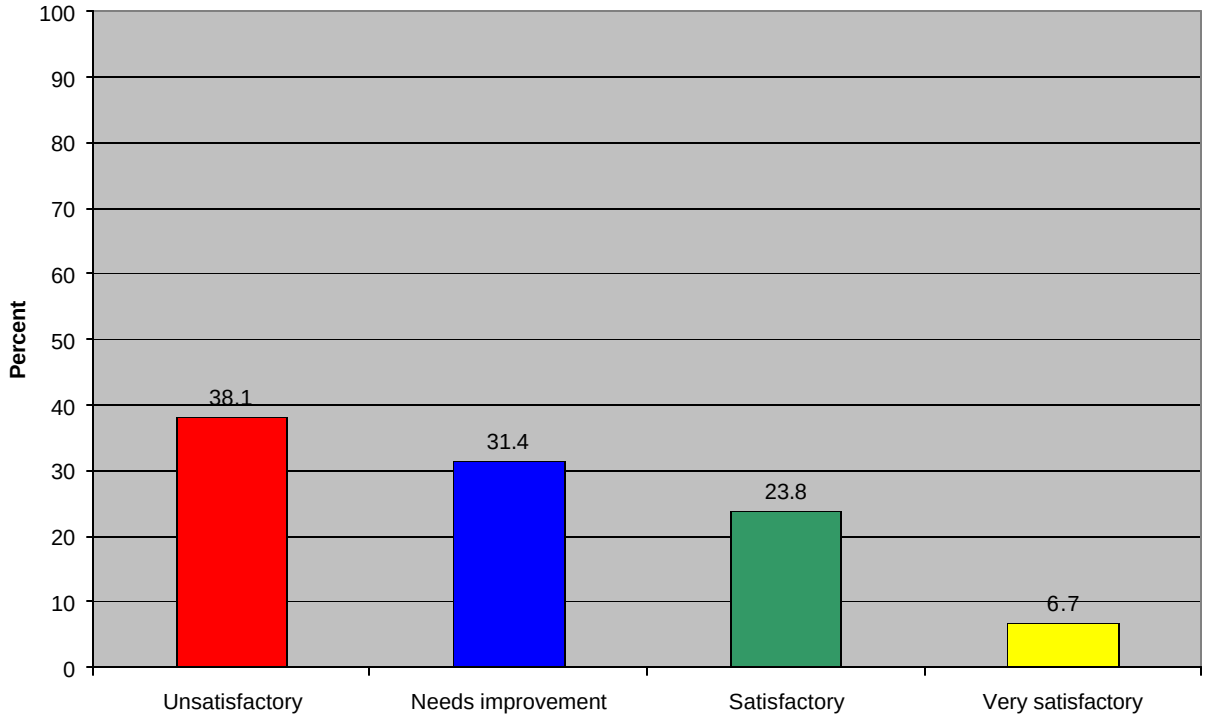
Table 5 summarizes the quality of programs across Maine. This table presents the distribution of overall program quality categories as well as the distribution of how the programs are categorized in the five program quality areas. Figures 1 through 6 graphically present this same information. For an item by item analysis of the findings see Appendix E.

Table 5. Program quality: All programs.

	N	%
Overall program quality		
Unsatisfactory	40	38.1
Needs improvement	33	31.4
Satisfactory	25	23.8
Very satisfactory	7	6.7
Program implementation		
Unsatisfactory	2	1.9
Needs improvement	9	8.7
Satisfactory	13	12.5
Very satisfactory	80	76.9
Client pre-service assessment		
Unsatisfactory	50	47.6
Needs improvement	7	6.7
Satisfactory	37	35.2
Very satisfactory	11	10.5
Program characteristics		
Unsatisfactory	60	57.1
Needs improvement	23	21.9
Satisfactory	12	11.4
Very satisfactory	10	9.5
Staff characteristics		
Unsatisfactory	33	31.4
Needs improvement	35	33.3
Satisfactory	16	15.2
Very satisfactory	21	20.0
Evaluation characteristics		
Unsatisfactory	66	62.9
Needs improvement	27	25.7
Satisfactory	0	0.0
Very satisfactory	12	11.4

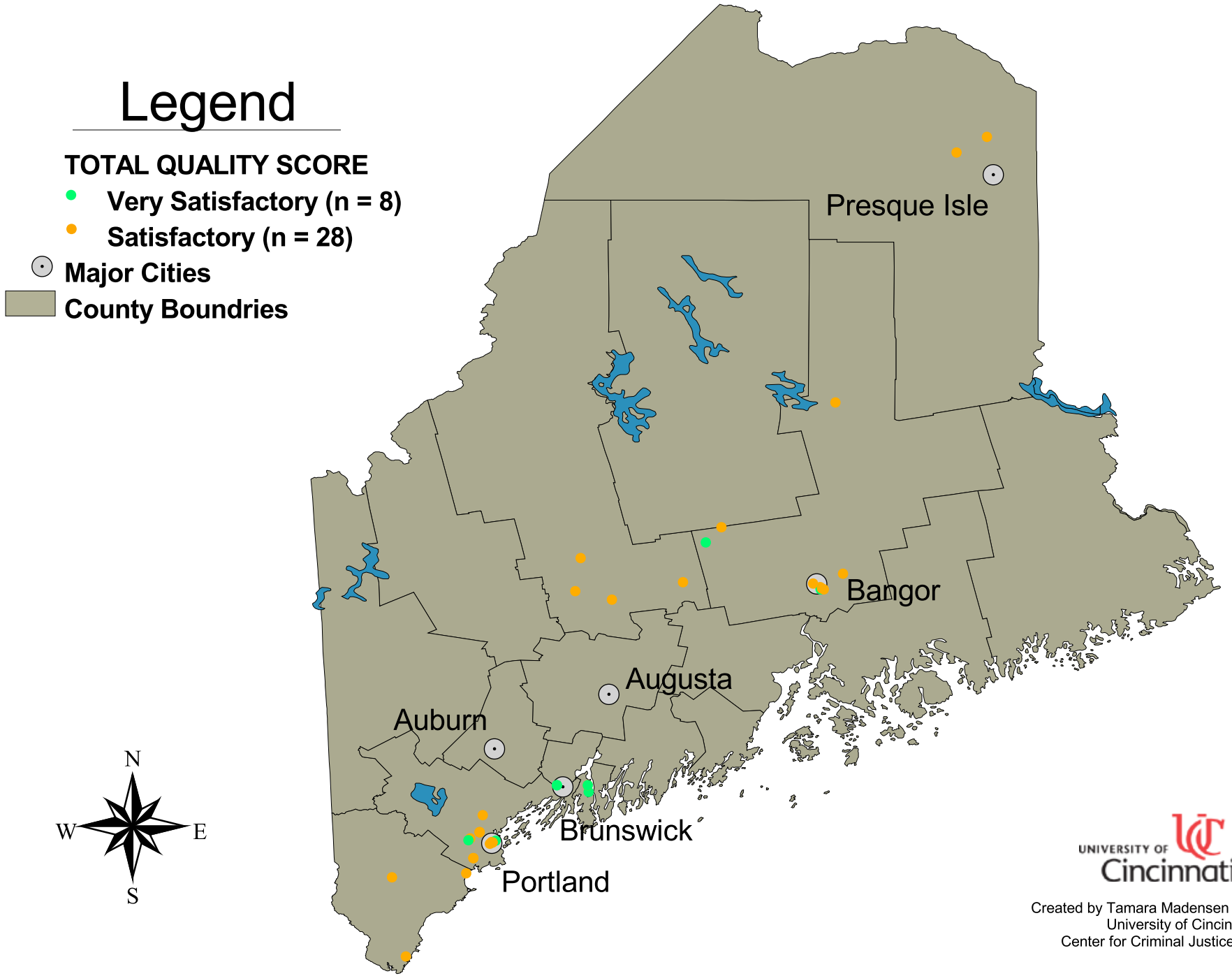
Overall program quality. The greatest portion of programs fall into the "unsatisfactory" category (38.1%), followed closely by "needs improvement (31.4%). Nearly a quarter (23.8%) of programs has "satisfactory" quality, and 6.7% are "very satisfactory". Figure 1 presents this information. Two maps are provided to illustrate the distribution programs across Maine based on their level of quality; Map 7 presents lower quality (i.e., less than satisfactory) programs and Map 8 presents higher quality (i.e., "satisfactory" and "very satisfactory") programs.

Figure 1. Overall Program Quality for All Programs



Program implementation. As a whole, programs in Maine are implemented well. Slightly over three-fourths (76.9%) of programs are categorized as being "very satisfactory". See Figure 2. Appendix E presents the results for individual items used to score the implementation program quality area. Over 80% of programs report that their program director is professionally trained in a helping profession, involved in hiring the program staff, train the staff, and supervise staff. Furthermore, most programs have directors with at least three years of experience working with offenders (70.0%), and the directors provide hands-on services to offenders (57.7%). Similarly, most programs are valued by the community at-large

Map 7: Distribution of Programs Based on High Quality Scores



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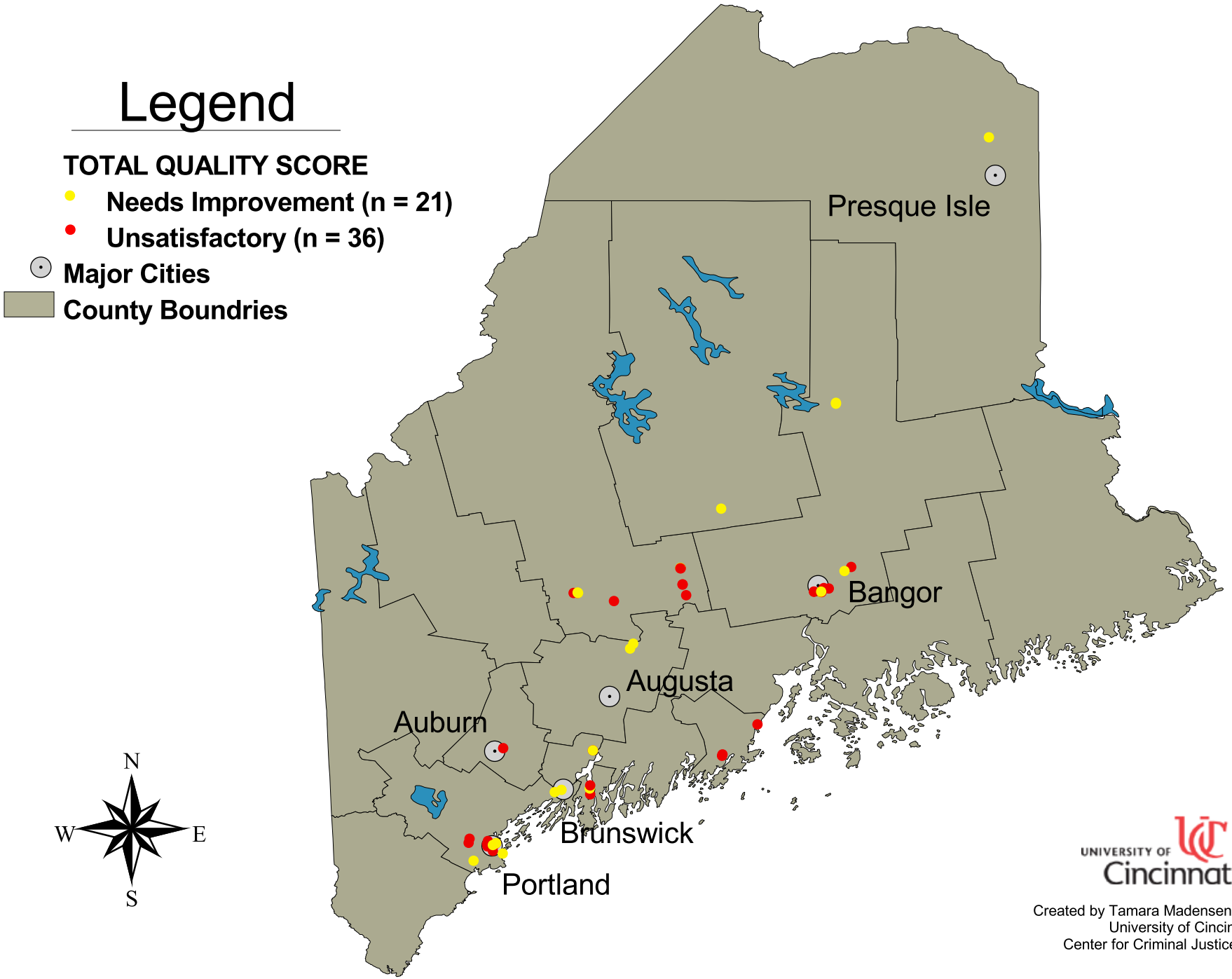
University of Cincinnati
Center for Criminal Justice Research

Map 8: Distribution of Programs Based on Low Quality Scores



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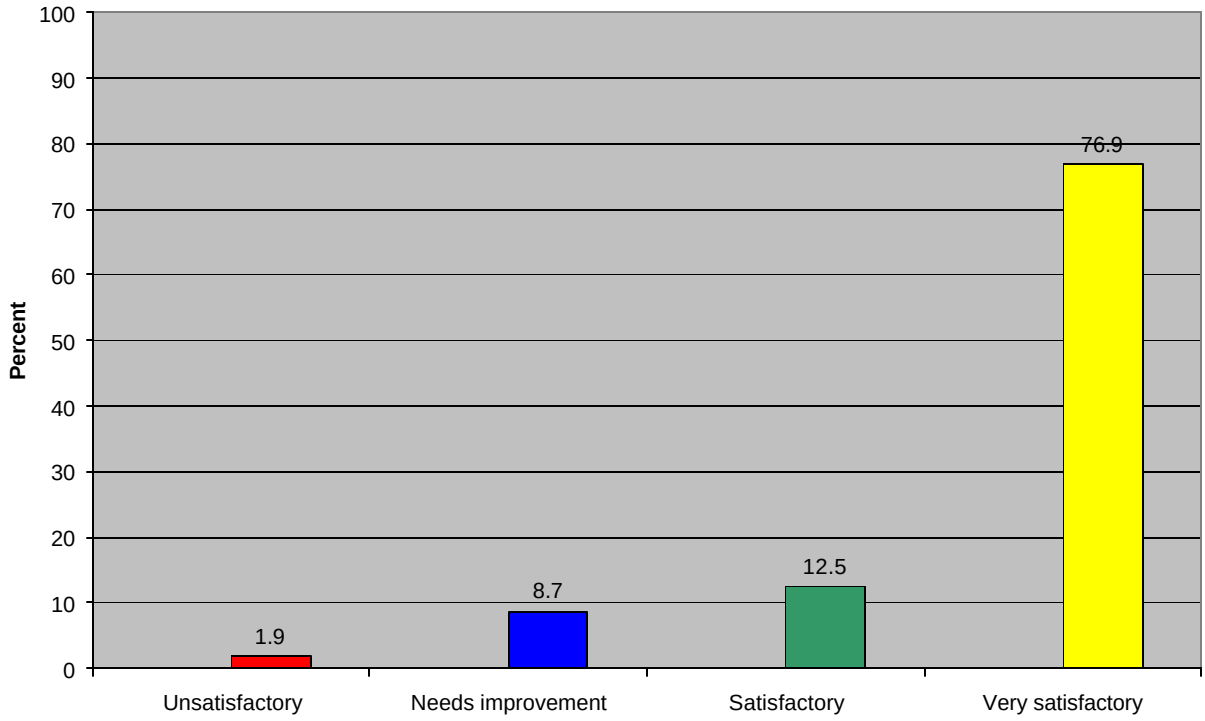
(59.6%), valued by the criminal justice system (66.3%), and are perceived as cost-effective. The one program implementation weakness is funding. Only 29.3% of programs indicated that they have adequate funding.

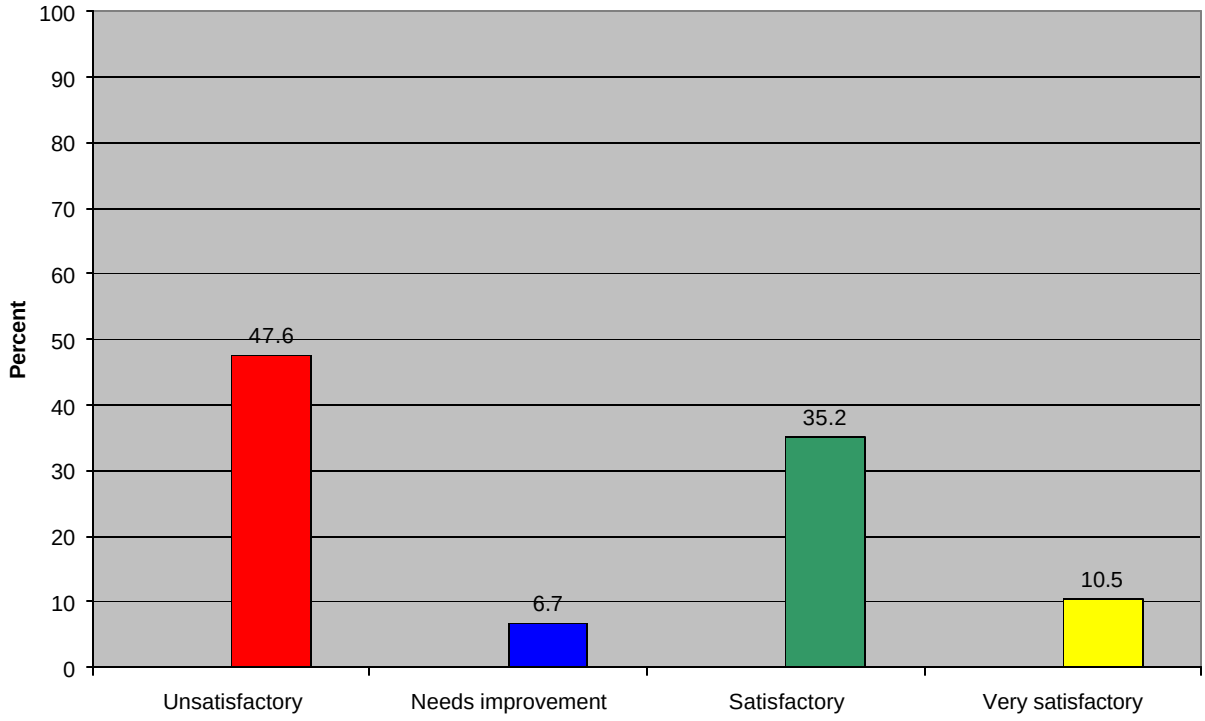
Figure 2. Program Implementation for All Programs



Client pre-service assessment. As can be seen in Figure 3, half (47.6%) of all the programs fall into the "unsatisfactory" category. This unfavorable finding is due to the fact that, despite over 85% of programs assessing clients with a reasonable survey of risk and needs factors (e.g., criminal history, substance abuse) (See Appendix E), only around 10% do so by using standardized actuarial risk and needs assessment tools. Such tools are objective and structured so that whoever performs the assessment of the offenders, similar conclusions are reached. Furthermore, the tools are based on the empirical relationships between offender characteristics examined and offenders' criminal involvement so that scores yielded through the assessment process speak to the offenders' probability of recidivating.

The use of standardized, actuarial assessment tools is essential to quality correctional programming for several reasons. A couple of the most important reasons are (1) identifying accurately the risk factors most prevalent among programs' clients which, in turn, should determine the types of services that the programs offer; and (2) being able to separate systematically and accurately higher and lower risk offenders into different program groups so that higher risk individuals can receive more intensive services without negatively influencing the lower risk individuals. The lack of a standardized risk and or needs instrument results in inconsistent identification of risk and need factors and subsequent identification of higher and lower risk offenders. Hence, resources are often misallocated due to the programs' failure to meet the needs of their offenders and the contamination of treatment efforts due to the mixing of high and low risk offenders.

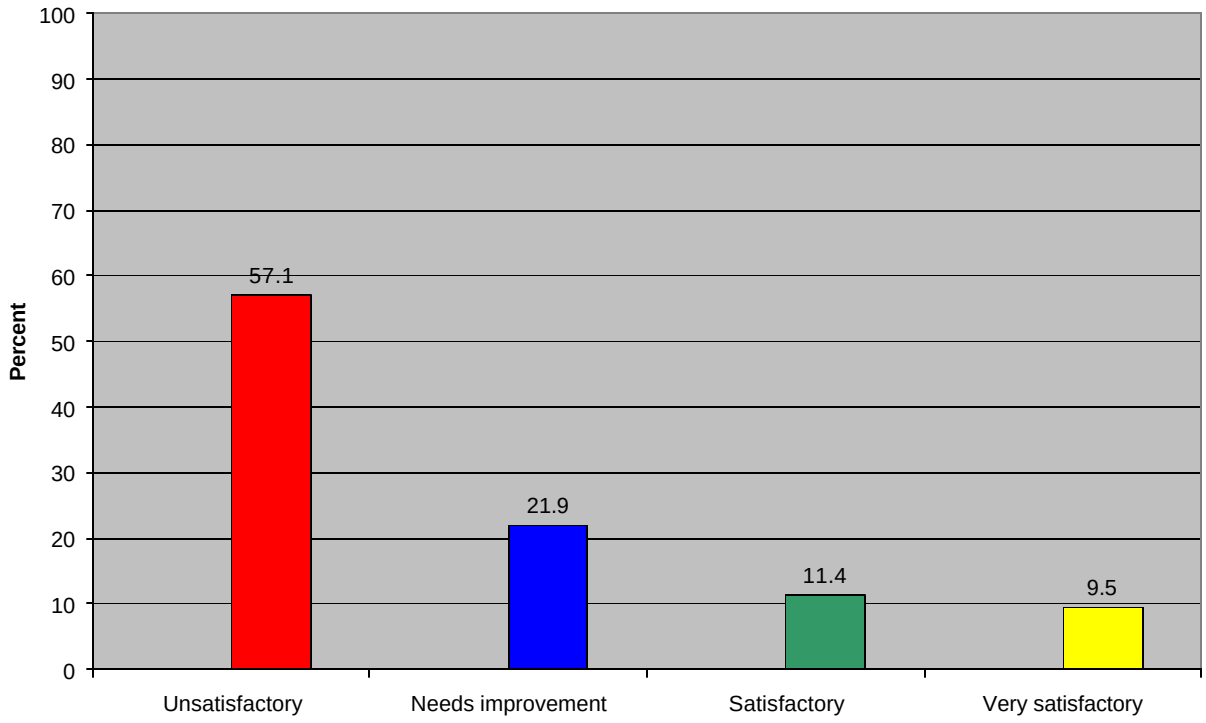
Figure 3. Client Pre-service Assessment for All Programs



Program characteristics. Nearly 80% (79.0%) of programs scored below satisfactory in the program characteristics quality area, as is illustrated in Figure 4. This program quality area includes the

following aspects of programming: whether the offender characteristics being focused on through the program are those shown empirically to be strongly related to recidivism; whether the approach or model used to alter those offender characteristics is one shown empirically to be effective; whether the length of the program is sufficient; whether the program uses a written curriculum, and if so, whether all staff are trained on and consistently follow the curriculum; whether the program includes the application of relapse prevention concepts and techniques; whether role plays are incorporated into the program in order to provide regular opportunities for practice; whether rewards and punishment is used, and if so, whether the administration of rewards appropriately exceeds punishment by a ratio of four to one; whether offenders in treatment are separated from offenders not in treatment, from non-offenders, and by their level of risk; whether offenders have input into the program; whether and in what ways offenders' families are involved in the program; and, finally, whether adequate aftercare is provided regularly.

Figure 4. Program Characteristics for All Programs



The weakest aspects of the program characteristics area are the two most fundamental: targeting criminogenic behaviors and attitudes (17.1%) and use of an effective treatment model (11.5%). These two

aspects speak to what the program is designed to accomplish (i.e., what is it about the offenders the programs endeavors to change in order to reduce the likelihood of recidivism) and how it is designed to achieve those desired outcomes. Effective programs focus their efforts on reducing offenders' risk factors (e.g., faulty cognitions, substance abuse, and involvement in antisocial peer networks) through the application of cognitive, cognitive-behavioral, and or family systems concepts and techniques. It is not enough, however, to employ a sampling of the cognitive, cognitive-behavioral, and family systems concepts and techniques along with samplings of other treatment models, such as client-centered, Freudian, or deterrence-based models. Rather, effective programs adopt an approach shown empirically to reduce recidivism (e.g., cognitive-behavioral approach) and implement the approach fully.

Programs in Maine scored below satisfactory in the areas of treatment targets and treatment model for the following reasons: they failed to focus on any risk factors; they focus on some risk factors, but less so than on an array of offender characteristics not related or weakly related empirically to recidivism (e.g., self-esteem, depression, and nutrition); they fail to adopt an effective treatment approach to any degree; and or they claim to be based on an effective model or approach, but also state they are based on array of other models.

The use of relapse prevention techniques and regular use of role play exercises enhance programs' effectiveness by teaching offenders to anticipate situations that put them at risk of engaging in irresponsible behaviors, teaching them skills for avoiding and managing such situations, and by requiring offenders to practice those skills. Less than half of programs report employing relapse prevention techniques (40.4%) and role playing (42.0%).

Another deficient aspect of the program characteristics quality area is the use of a treatment curriculum (27.6%). The use of a treatment curriculum helps ensure fidelity to a treatment model by increasingly the likelihood that all staff focus on appropriate targets in the same manner. Fortunately, of those programs using treatment curriculums, most report adhering to the curriculum (93.1%) and training all treatment staff on the curriculum (72.4%).

Effective programs are adept at administering consequences, including both rewards and punishment, to offenders so that prosocial behaviors are made more likely to reoccur and antisocial behaviors are extinguished. One important guideline for the use of consequences is that rewards are used four times more often than punishment. Only 52.0% of programs report using rewards, while 74.5% use punishment. Of the programs that use both rewards and punishment, half (52.9%) state that the ratio of rewards to punishment is at least four to one.

The efficacy of a program is dependent upon the composition of the program groups and services. The best case scenarios are that offenders in treatment are separated from offenders not in treatment (e.g., a prison has a unit for prisoners in treatment separate from the general population of the prison), offenders do not receive treatment or other services with non-offenders, program groups are single-sex, and high-risk offenders and low-risk offenders receive their treatment separately. Programs scored well (85.5%) on separating offenders receiving treatment from those who do not. Just over half (57.0%) have offender-only programs; 43.0% of programs deliver their treatment and services to offenders and non-offenders alike. Mixing offenders with non-offenders is problematic because the offenders will model procriminal sentiments and behaviors to the non-offenders and the non-offenders may be victimized by the offenders. Furthermore, offenders tend to be in need of treatment for different underlying reasons than non-offenders, and those reasons (or risk factors) must be addressed in order to reduce recidivism. Sixty-one percent of programs report having single-sex groups. These programs include those serving only one sex and those that serve both men and women but separate the clients by sex for the treatment groups. Finally, only 23.9% of programs have separate groups for higher and lower risk offenders. This failure to separate offenders by risk is necessarily due in part to the lack of adequate assessment to determine the offenders' level of risk (see the discussion on client pre-service assessment above).

The inclusion of offenders' families can enhance the effectiveness of programming through the creation of a system that supports positive changes in the offenders and through addressing the ways that the family may be contributing to the offenders' antisocial behaviors. Roughly a third (36.5%) of

programs state that offenders' families are involved in the program. Of those, 72.0% include the families in actual treatment groups, as opposed to merely meeting with the families in an unstructured manner.

The length of a programs and the availability of adequate aftercare upon termination affect the quality of a program. The standard for effective programs is a duration of three to nine months; only half (51.3%) of programs meet this standard. Aftercare serves to strengthen the impact of a program by providing a structured continuation of needed services at the termination of the program. Not only is aftercare rare (29.5%) among programs in Maine, but very few of the aftercare services available are considered by the programs to be adequate (29.3).

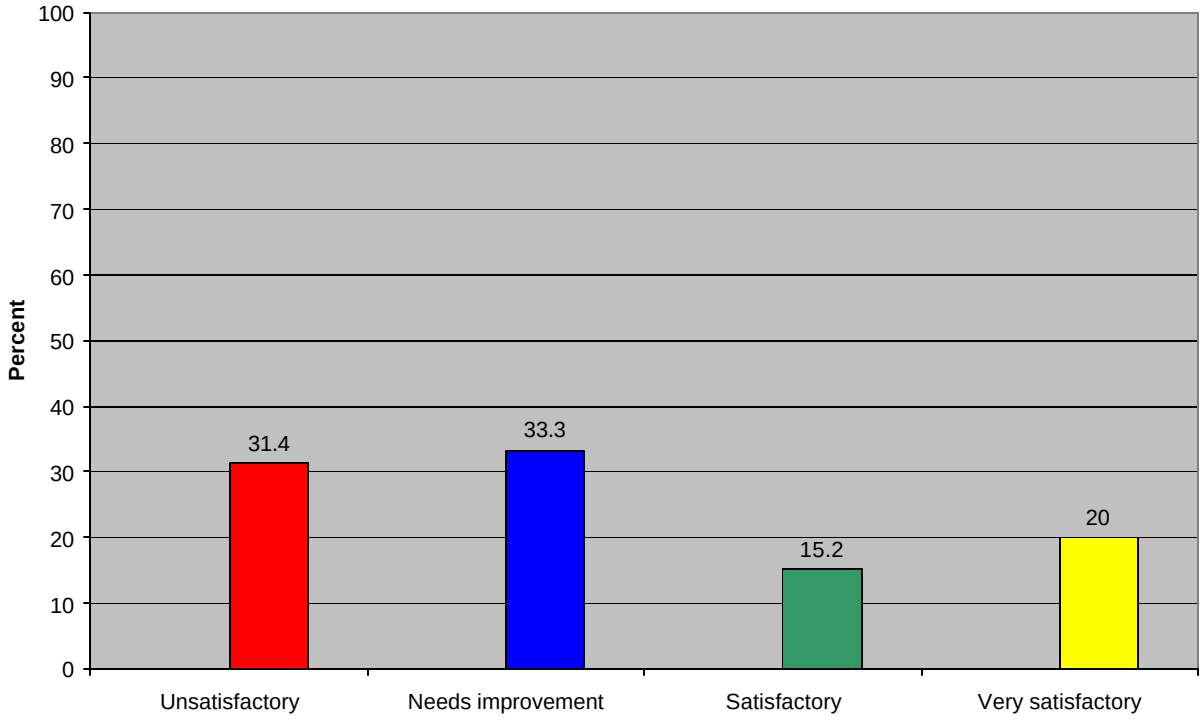
Finally, quality offender programming create ways that offenders can offer input into the operation of the program. Examples of how offenders can contribute input into programming include satisfaction surveys and suggestion boxes. Nearly three-fourths (72.0%) of programs indicate that offenders have input into the program.

Staff characteristics. The distribution of programs categorized as "unsatisfactory", "needs improvement", "satisfactory", and "very satisfactory" is less skewed than the other program quality areas. See Figure 5. A third falls into each of two less favorable categories; 31.4% are "unsatisfactory" and 33.3% "need improvement". Fifteen percent are "satisfactory" and 20.0% are "very satisfactory".

Staff characteristics that comprise this program quality area center on their qualifications, turn-over, and quality assurance pertaining to their performance. The most favorable aspect among Maine's programs is low staff turn-over, measured as 50% of staff being employed by the program for at least two years (79.2%). The quality assurance of the staffs' performance is split. While 66.0% of programs assess staff on their clinical skills, only 38.1% provide regular clinical supervision in the form of being observed while providing treatment and reporting regularly to supervisors on offender progress. Between one third and a half of program responded in the affirmative on items pertaining to staff qualifications. Regarding staff being college educated, 38.5% have staff where 75% have college degrees and 10% have advanced degrees. Fifty-six percent of program report that at least 75% of their staff were educated in a helping

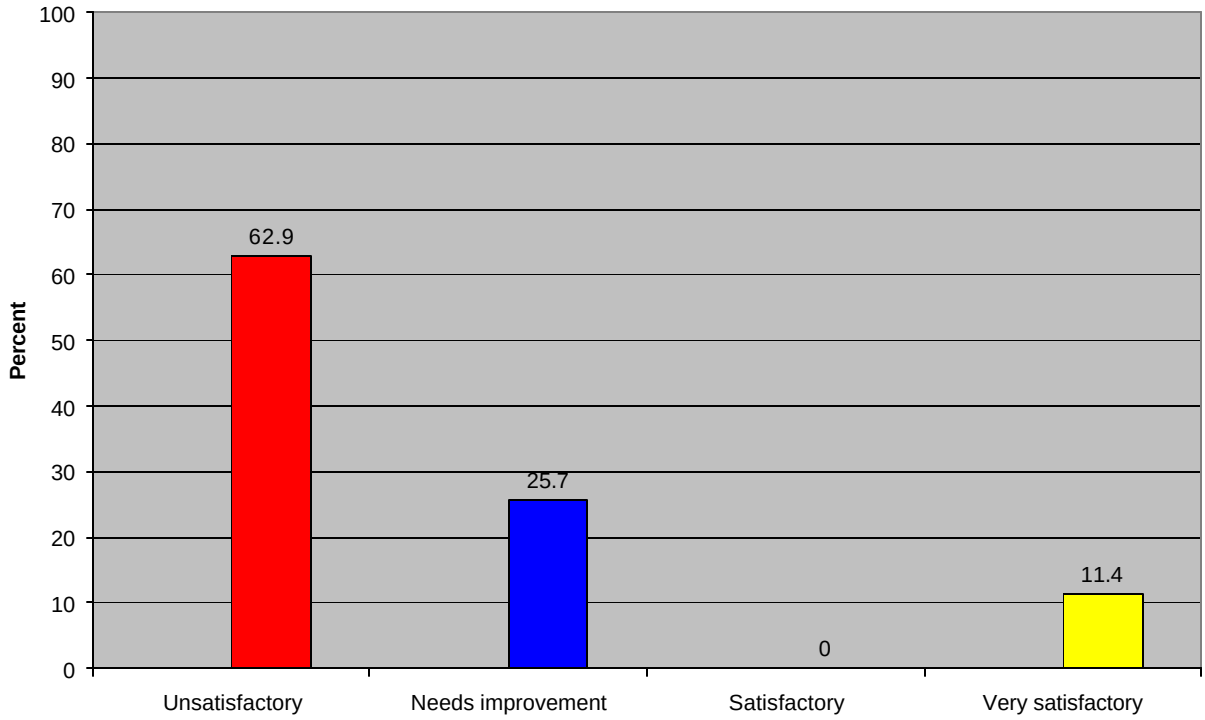
profession, such as social work or teaching. Forty-nine percent have staff with experience working with offenders, measured as 75% working with offenders for at least two years.

Figure 5. Staff Characteristics for All Programs



Evaluation characteristics. The greatest proportion of programs are deficient in their evaluation efforts of all of the program quality areas. Eighty-nine percent of programs are categorized below satisfactory in this area, as is illustrated in Figure 6. Less than a quarter of programs report having adequate internal quality assurance mechanisms in place (21.0%), measuring within program change in an objective manner (e.g., pre-test post-test comparisons) (24.0%) to determine whether treatment efforts resulted in improvements in offenders' risk factors and monitoring post-program recidivism (23.0%). The aspect of program evaluation to score the most favorably is the administration of client satisfaction surveys (63.0%).

Figure 6. Evaluation Characteristics for All Programs



Programs by sex of clients

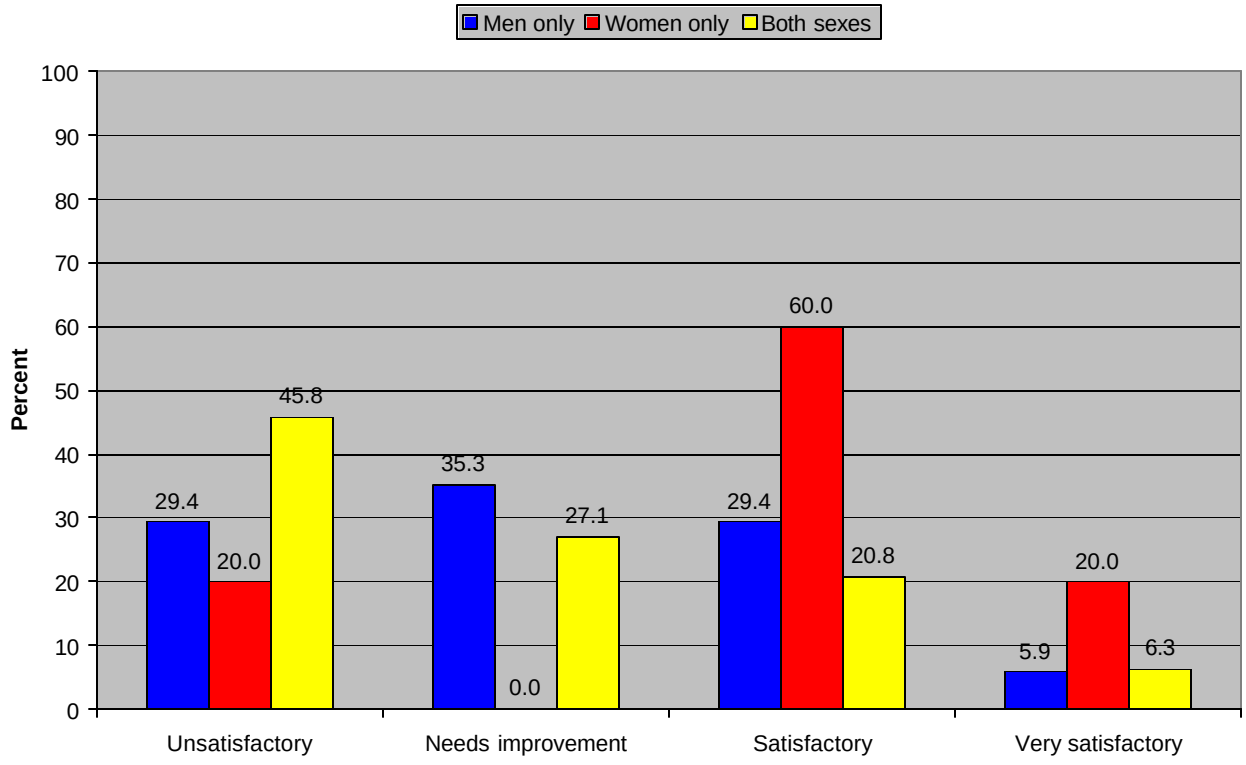
The quality of programs in Maine are now discussed comparing those programs for males only (n = 17), females only (n = 5) and both sexes (n = 48). The distribution of category scores for overall program quality and five program quality characteristics is reported in Table 6. Once again, figures are presented to illustrate the distribution of quality categories for overall program quality and program quality areas. Appendix F present the findings at the item level. As was mentioned in the section of the report on Program Capacity, the findings for programs for females only are particularly sensitive to fluctuations due to the very small number of such programs and should be interpreted with caution.

Table 6. Program quality by sex of clients served.

	# responding programs	Males Only		Females Only		Both Sexes	
	N	N	%	N	%	N	%
Overall program integrity	70						
Unsatisfactory		5	29.4	1	20.0	22	45.8
Needs improvement		6	35.3	0	0.0	13	27.1
Satisfactory		5	29.4	3	60.0	10	20.8
Very satisfactory		1	5.9	1	20.0	3	6.3
Program Implementation	69						
Unsatisfactory		0	0.0	0	0.0	0	0.0
Needs improvement		2	11.8	1	20.0	3	6.4
Satisfactory		3	17.6	0	0.0	5	10.6
Very satisfactory		12	70.6	4	80.0	39	83.0
Client pre-service assessment	70						
Unsatisfactory		8	47.1	2	40.0	23	47.9
Needs improvement		1	5.9	0	0.0	2	4.2
Satisfactory		8	47.1	3	60.0	18	37.5
Very satisfactory		0	0.0	0	0.0	5	10.4
Program characteristics	70						
Unsatisfactory		8	47.1	2	40.0	29	60.4
Needs improvement		4	23.5	1	20.0	10	20.8
Satisfactory		4	23.5	1	20.0	4	8.3
Very satisfactory		1	5.7	1	20.0	5	10.4
Staff characteristics/practices	70						
Unsatisfactory		4	23.5	1	20.0	17	35.4
Needs improvement		6	35.3	2	40.0	16	33.3
Satisfactory		3	17.6	0	0.0	6	12.5
Very satisfactory		4	23.5	2	40.0	9	18.8
Evaluation	70						
Unsatisfactory		10	58.8	1	20.0	35	72.9
Needs improvement		5	29.4	2	40.0	8	16.7
Satisfactory		0	0.0	0	0.0	0	0.0
Very satisfactory		2	11.8	2	40.0	5	10.5

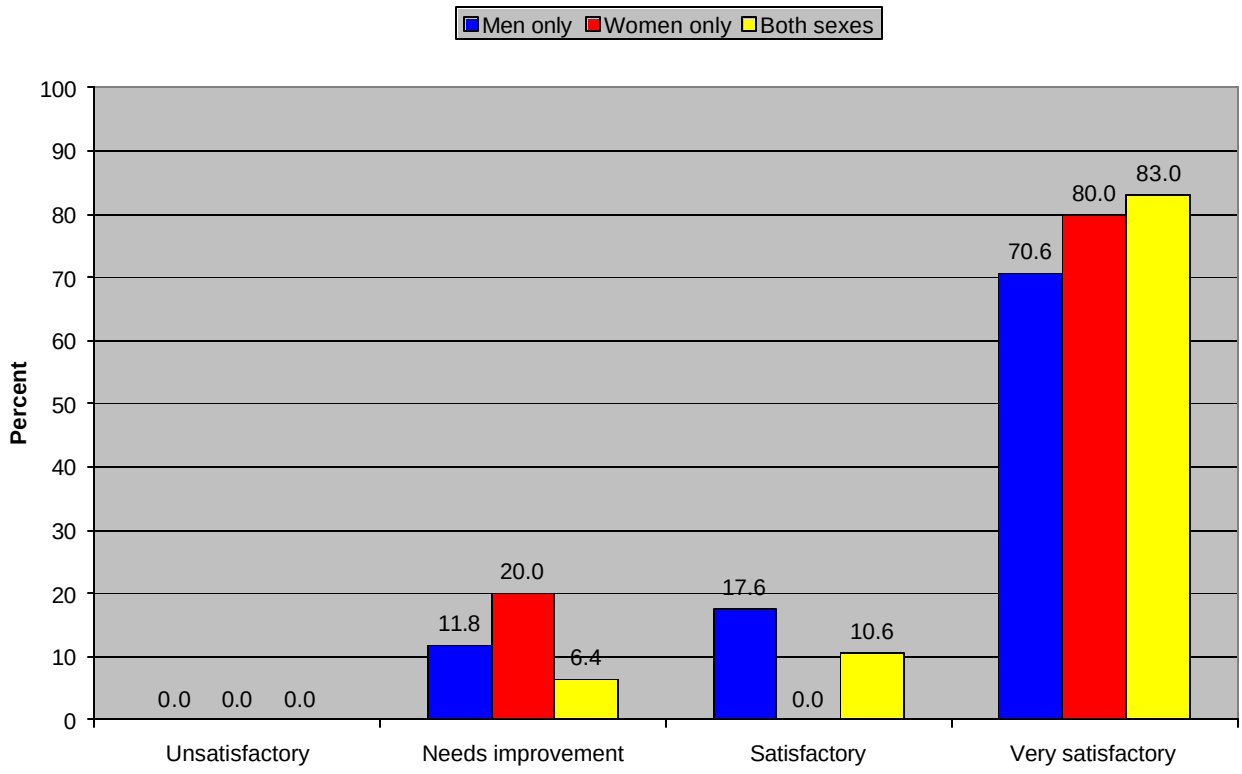
Overall program quality. As Figure 7 illustrates, dual-sex programs have the overall lowest quality. Nearly half (45.8%) of dual-sex programs are categorized as "unsatisfactory", compared to only 29.4% of male only and 20.0% of female only programs. The greatest proportion (35.3%) of male only programs fall into the "needs improvement" category, and the majority (60.0%) of female only programs scored "satisfactory".

Figure 7. Overall Program Quality by Sex of Clients



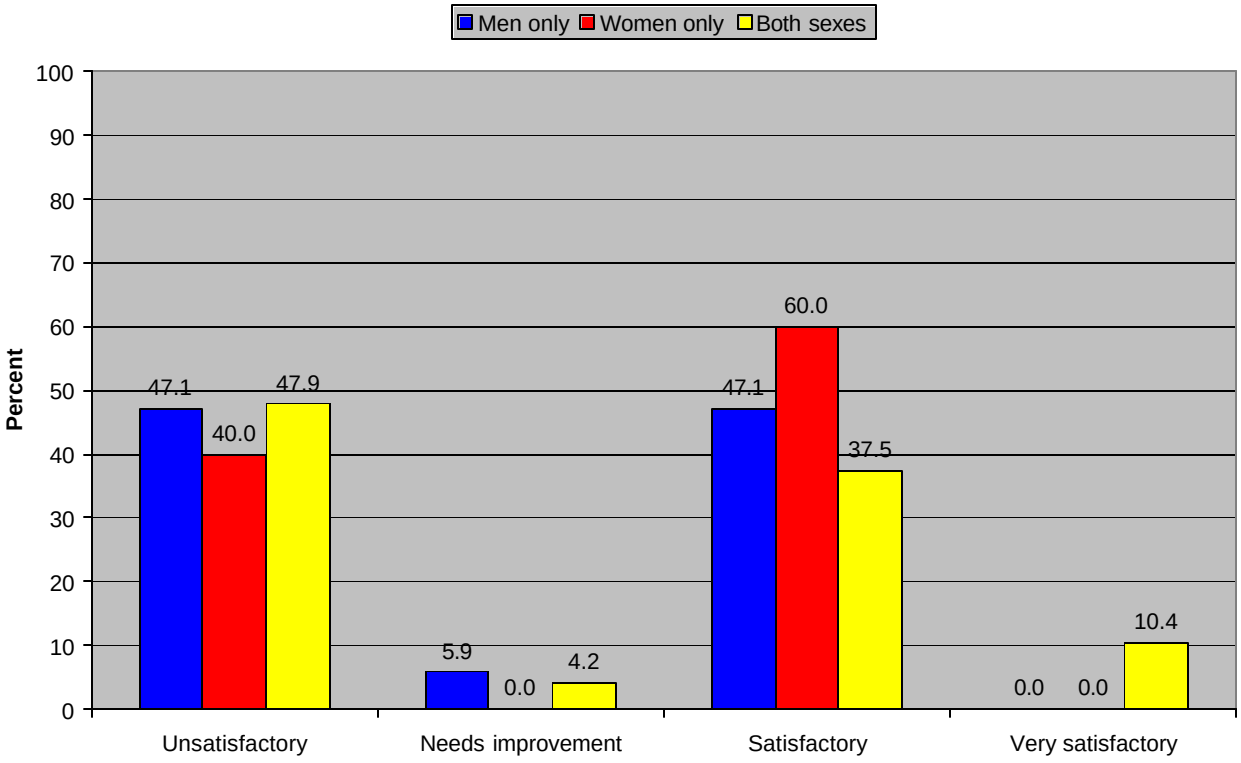
Program implementation. Examining the quality of program implementation across the three configurations of clients' sex yields no substantial differences. Between 70.65 and 83.0% of programs scored "very satisfactory" in this program quality area. See Figure 8 below.

Figure 8. Program Implementation by Sex of Clients



Client pre-service assessment. Only the programs serving both sexes include programs deemed "very satisfactory" in the area of client pre-service assessment (see Figure 9). The 10.4% of dual-sex programs scoring so favorably is attributed to their use of standardized assessment tools. No other remarkable distinctions emerge in the quality of client pre-service assessment across the three program groups.

Figure 9. Client Pre-service Assessment by Sex of Clients

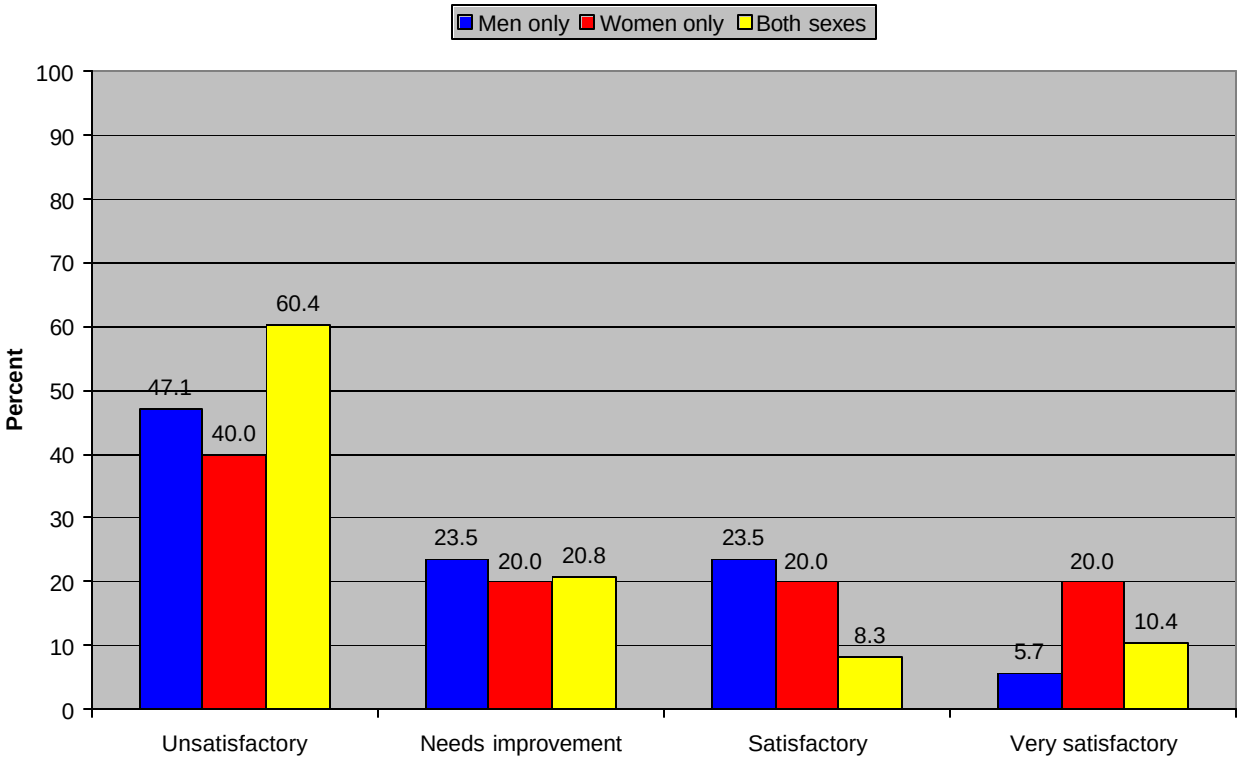


Program characteristics. When examining only the summary score for the program quality area of "program characteristics", it appears that the female only programs scored the most favorably with 20.0% falling into the "very satisfactory" category and that the dual-sex programs scored the least favorably with 60.4% categorized as "unsatisfactory". This distribution is presented in Figure 10.

However, the item level analysis reveals important deficiencies among the female only programs. None of female only programs report targeting criminogenic needs, employing an effective model, nor running separate groups for higher and lower risk offenders. Furthermore, only 33.3% of female only programs administer rewards and punishment at a ratio of four rewards to every punishment. Strengths of the female only programs include a duration of programming between three and nine months (75%), that they use rewards (80.0%) and punishment (100.0%), they involve families (60.0%) and include them in program groups (40.0%), and make regular use of adequate aftercare (40.0% and 60.0%).

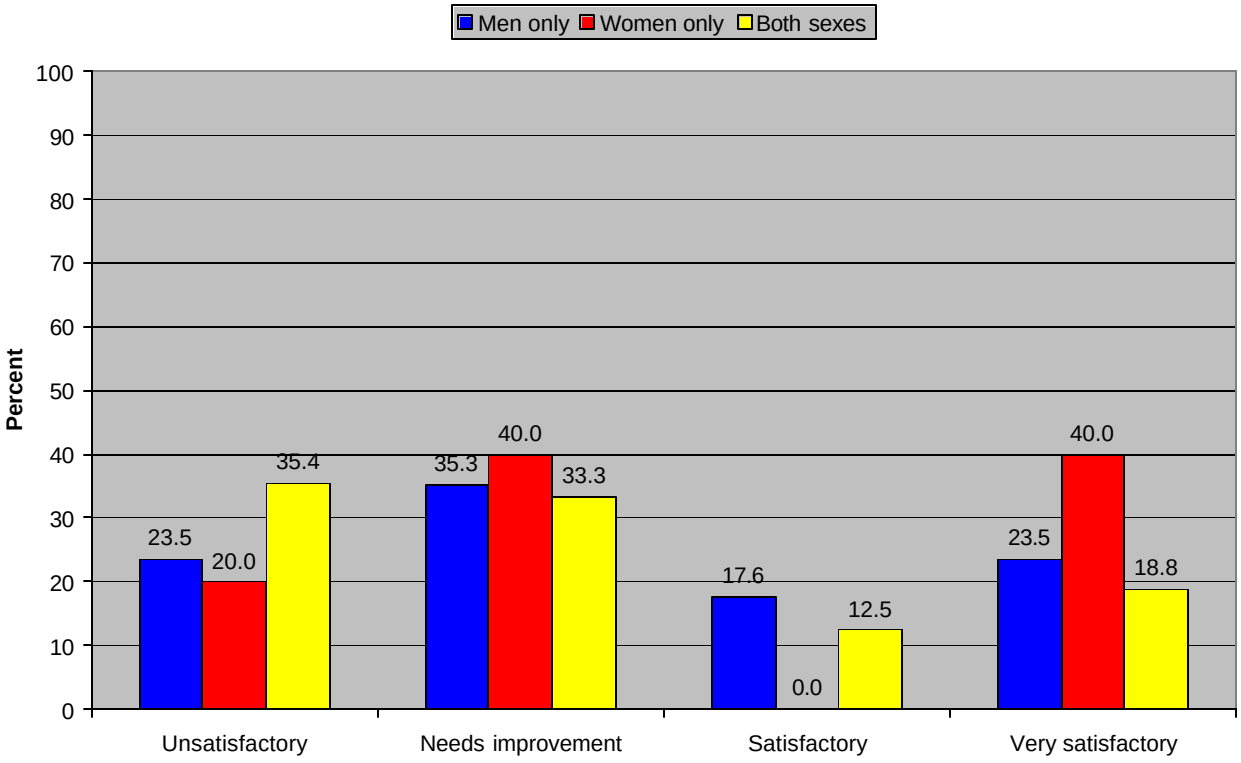
The male only and dual-sex programs score similarly on most items. The aspects of programming where the dual-sex programs that distinguish themselves as being substantially less satisfactory include the use of relapse prevention techniques (28.3%) and running single-sex program groups (48.8%).

Figure 10. Program Characteristics by Sex of Clients



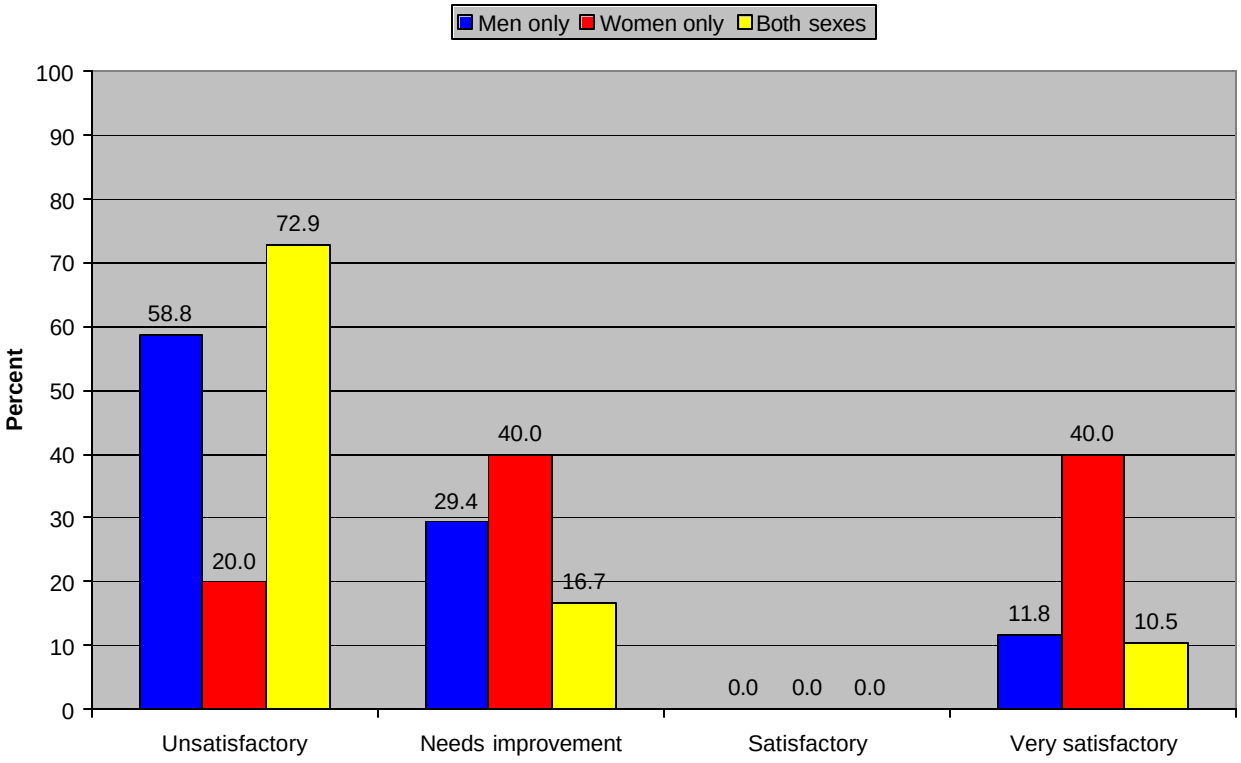
Staff characteristics. Results for the staff characteristics quality area (seen in Figure 11) are quite similar regardless of the sex composition of the groups. Between 59 and 69 percent of each program group scored less than satisfactory in this area. The program groups, however, report strengths and deficiency in different aspects of the program quality area. Female only programs are the least likely to have college educated staff (25.0%) and staff with experience working with offenders (25.0%). Male only programs have the smallest proportion with degrees in helping professions (38.5%), but the greatest proportion of programs with low staff turn-over (92.3%). Dual-sex programs are notably weak in the area of regular clinical supervision (33.3%).

Figure 11. Staff Characteristics by Sex of Clients



Evaluation characteristics. Figure 12 illustrates the quality of evaluation characteristics by the sex of clients served by programs. Female only programs scored more favorably in all areas of program evaluation to generate the greatest proportion of "very satisfactory" programs (40.0%). Male only programs fared better than dual-sex programs due to the fact that they are substantially more likely than the dual-sex programs to have internal quality assurance mechanisms in place; 41.2% compared to 14.6%.

Figure 12. Evaluation Characteristics by Sex of Clients



Programs by age of clients

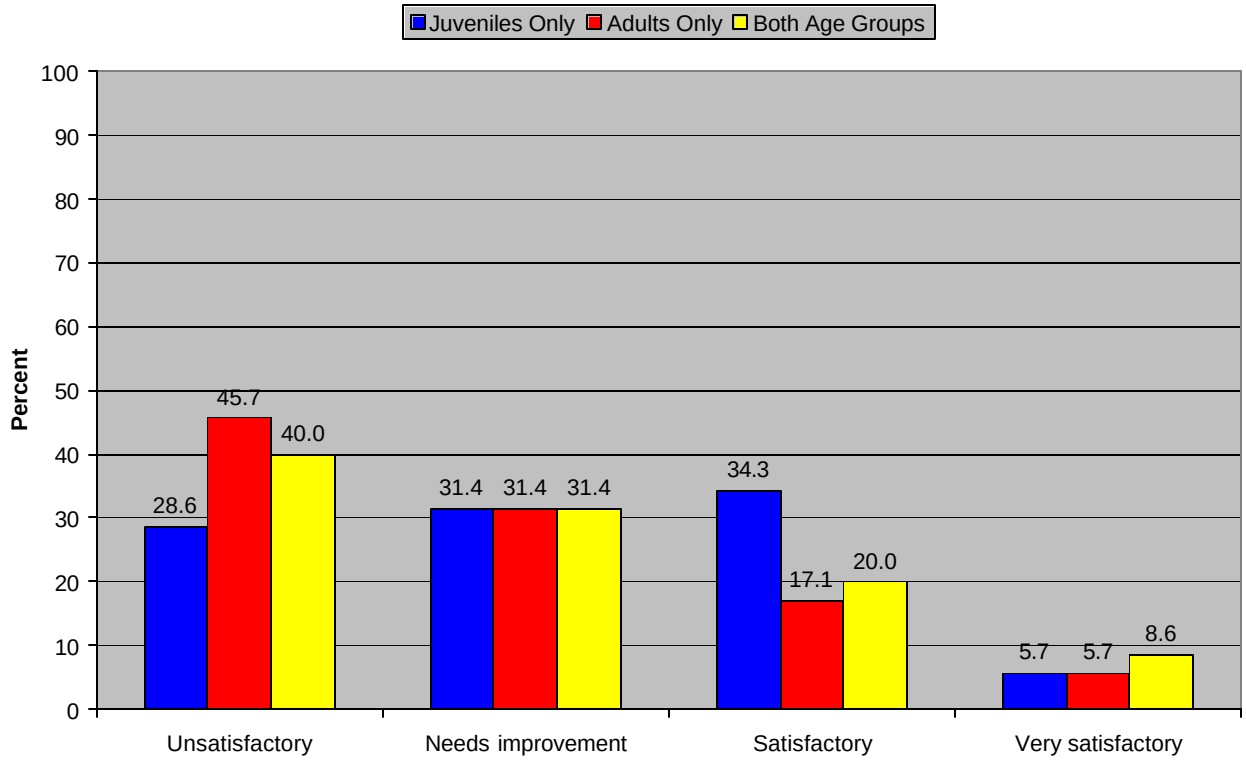
Comparisons are made on the quality of programming in Maine based on the age group(s) served by the programs. Table 7 presents the proportions of each age-defined program group falling into the four levels of program quality for overall program quality and the five program quality areas. To review the results for individual items comprising the summary scores, see Appendix G. Figures are used to illustrate the distributions of scores for the overall program quality and various program quality areas across the program groups.

Table 7. Program integrity summary scores by age of clients served.

	Number of responding programs[A]	Juveniles Only		Adults Only		Both Age Groups	
	N	N	%	N	%	N	%
Overall program integrity	105						
Unsatisfactory		10	28.6	16	45.7	14	40.0
Needs improvement		11	31.4	11	31.4	11	31.4
Satisfactory		12	34.3	6	17.1	7	20.0
Very satisfactory		2	5.7	2	5.7	3	8.6
Program Implementation	104						
Unsatisfactory		0	0.0	0	0.0	2	5.7
Needs improvement		2	5.7	5	14.7	2	5.7
Satisfactory		1	2.9	4	11.8	8	22.9
Very satisfactory		32	91.4	25	73.5	23	65.7
Client pre-service assessment	105						
Unsatisfactory		19	54.3	15	42.9	16	45.7
Needs improvement		1	2.9	3	8.6	3	8.6
Satisfactory		11	31.4	13	37.1	13	37.1
Very satisfactory		4	11.4	4	11.4	3	8.6
Program characteristics	105						
Unsatisfactory		12	34.3	25	71.4	23	65.7
Needs improvement		10	28.6	7	20.0	6	17.1
Satisfactory		8	22.9	2	5.7	2	5.7
Very satisfactory		5	14.3	1	2.9	4	11.4
Staff characteristics/practices	105						
Unsatisfactory		16	45.7	9	25.7	8	22.9
Needs improvement		9	25.7	12	34.3	14	40.0
Satisfactory		4	11.4	7	20.0	5	14.3
Very satisfactory		6	17.1	7	20.0	8	22.9
Evaluation	105						
Unsatisfactory		20	57.1	23	65.7	23	65.7
Needs improvement		11	31.4	8	22.9	8	22.9
Satisfactory		0	0.0	0	0.0	0	0.0
Very satisfactory		4	11.4	4	11.4	4	11.4

Overall program quality. Similar proportions of each program group are categorized as "very satisfactory." Differences emerge in the "satisfactory" and "unsatisfactory" categories. Juvenile only programs were more likely to be "satisfactory" (34.3%), compared to 20.0% of dual-age programs and 17.1% of adult only programs. As a result, the juvenile only programs have fewer "unsatisfactory" programs (28.6%) than the other programs groups. See Figure 13.

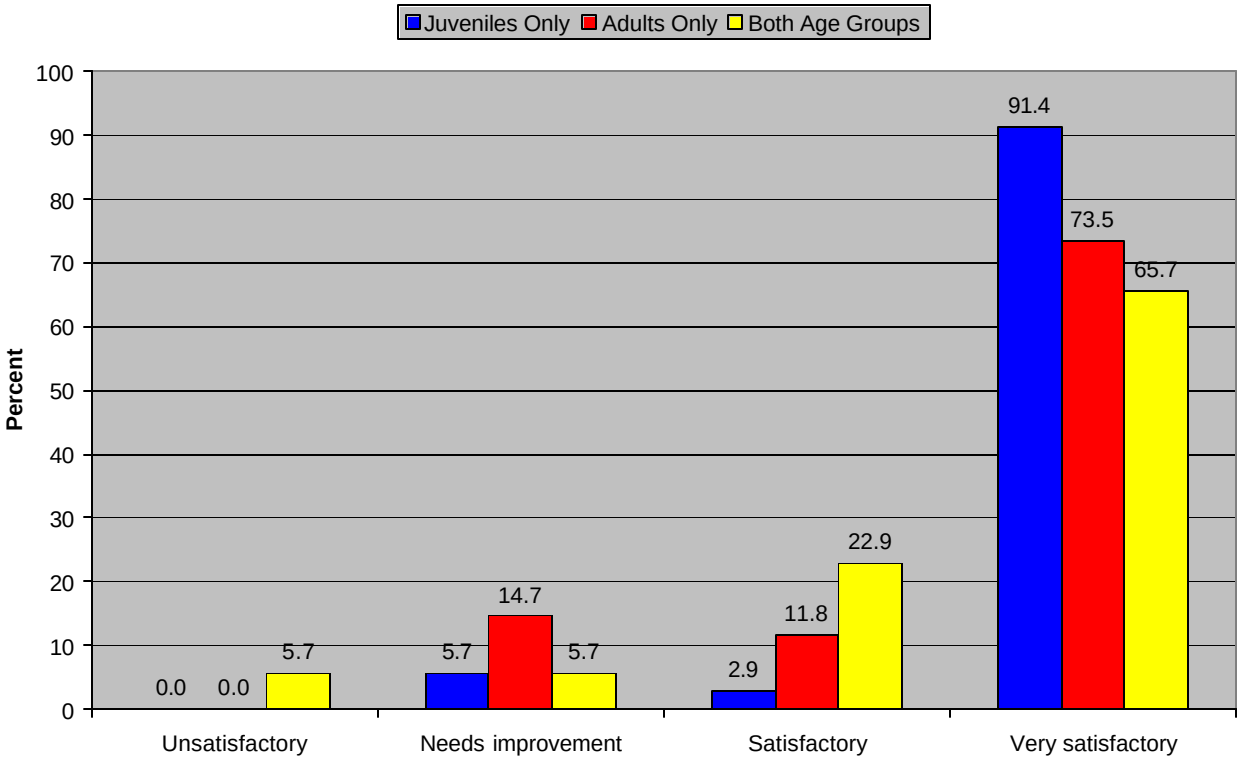
Figure 13. Overall Program Quality by Age of Clients



Program implementation. Figure 14 illustrates the results for the program implementation quality area by the age of clients served by the programs. Nearly all juvenile only programs report "very satisfactory" implementation. Close to three-fourths (73.5%) of adult only programs and 65.7% of dual-age programs are categorized as "very satisfactory" in terms of their program implementation. The aspects of implementation that distinguish the juvenile only programs from the other two groups are how well they are valued by the community-at-large (79.4%) and by the criminal justice system (76.5%). The juvenile only programs actually scored less favorably than the other program groups regarding whether the program

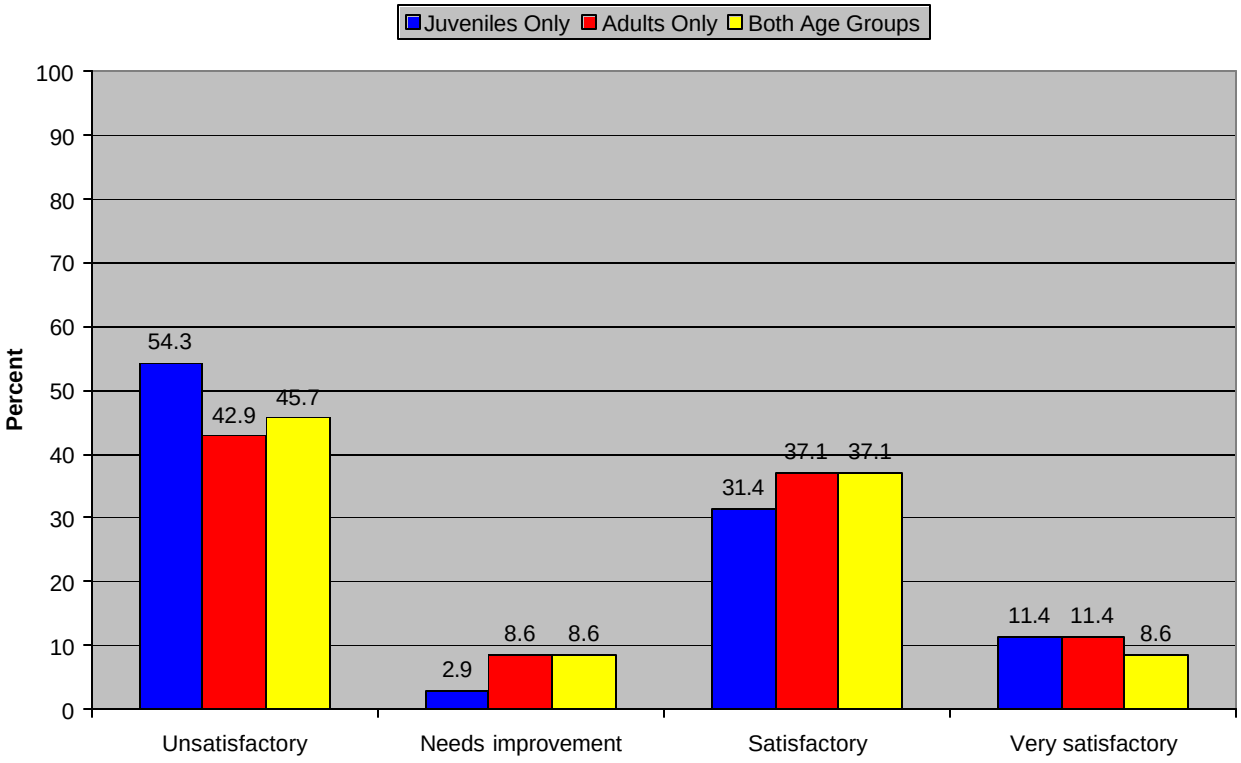
directors are trained in helping professions (85.7%), have at least three years experience working with offenders (64.5%), and providing direct services to clients (48.6%). With the exception of the implementation aspect of being perceived as cost-effective, the adult only and dual-age programs are very similar; dual-age programs are seen as less cost-effective (59.4%).

Figure 14. Program Implementation by Age of Clients



Client pre-service assessment. As can be see in Figure 15, The three program groups based on age of clients have nearly identical client pre-service assessment quality. Not only are there no noteworthy differences in the client pre-service assessment summary score, but the program groups indicate the same item-specific weaknesses.

Figure 15. Client Pre-service Assessment by Age of Clients

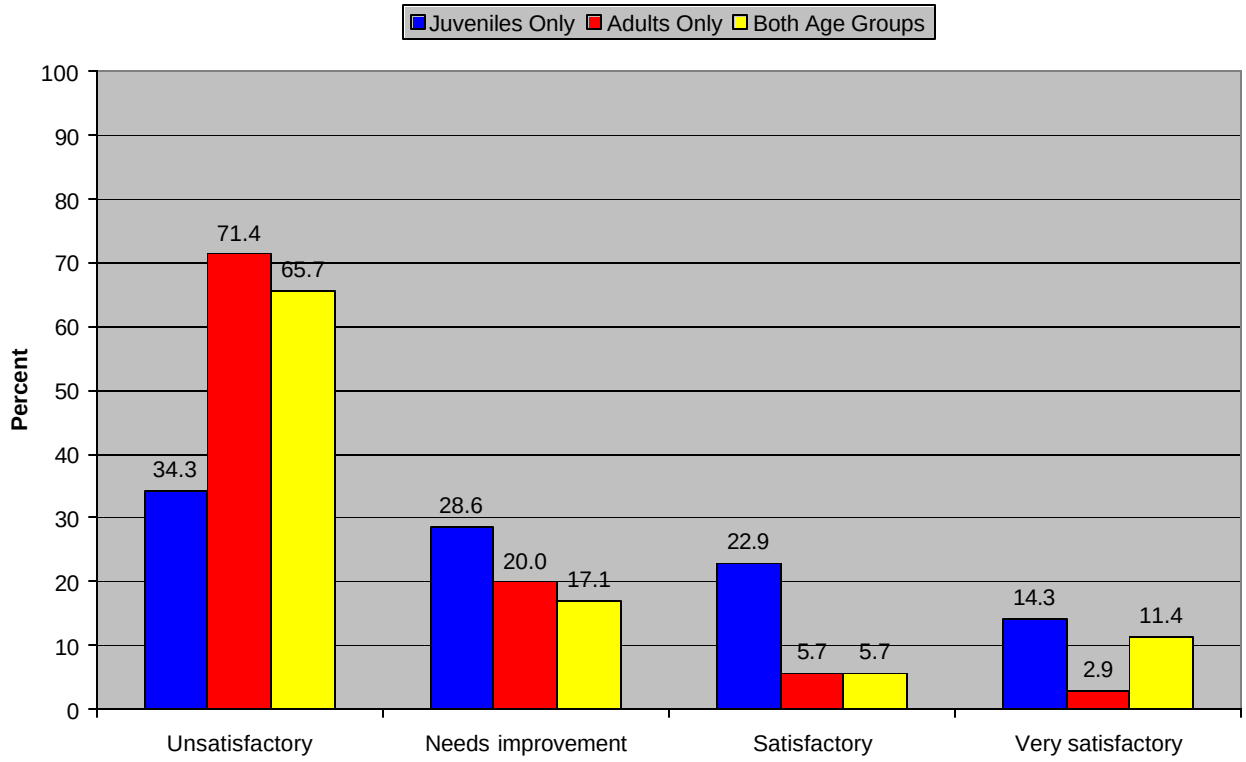


Program characteristics. Programs for juveniles only scored considerably better in the program quality area of program characteristics than did the adult only and dual-age programs. This finding is displayed in Figure 16. Fourteen percent of juvenile only programs are categorized as "very satisfactory" and only 34.3% are "unsatisfactory". This favorable quality classification is compared to adult only programs having 2.9% score "very satisfactory" and 71.4% "unsatisfactory" and the dual-age programs having 11.4% "very satisfactory" and 65.7% "unsatisfactory".

Aspects of program characteristics where the juvenile only programs excelled compared to the other groups of programs include the implementation effective treatment models (22.9%); use of curricula (34.3%); incorporation of relapse prevention concepts and techniques (58.8%); administration of rewards (77.4%) and punishment (87.5%); separating offenders in treatment from offenders who are not in treatment (96.7%); and including families in treatment groups (70.6%). Juvenile only programs were notably deficient in running single-sex groups (44.1%) and separating higher risk juveniles from lower risk juveniles (12.9%).

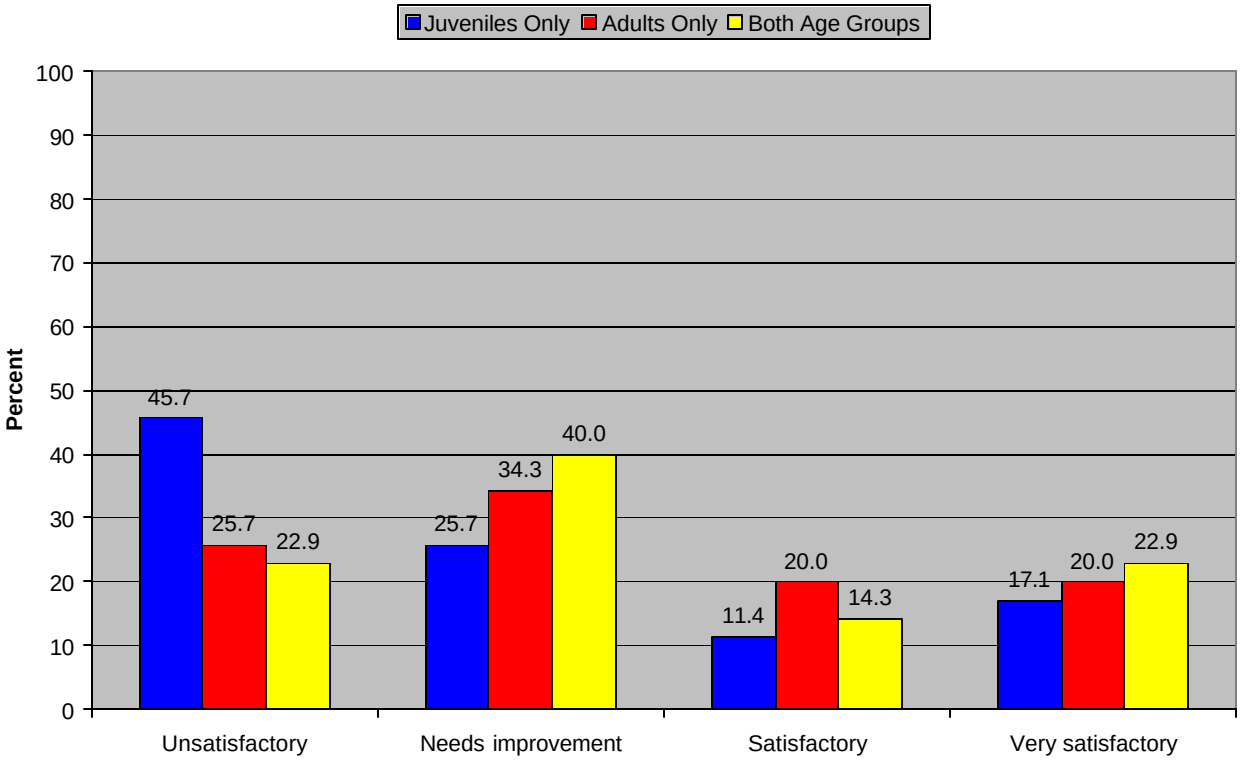
The adult only and dual-age programs distinguish themselves a few areas of programming. Two aspects of program characteristics emerge as particularly weak for adult only programs compared to the other two program groups. Adult only programs very rarely issue four rewards to every one punishment (11.1%) or involve families in treatment (36.6%). The dual-age programs rise above the single age group programs in their regular use of role plays (64.4%) and regular provision of adequate aftercare (37.9% and 41.4%).

Figure 16. Program Characteristics by Age of Clients



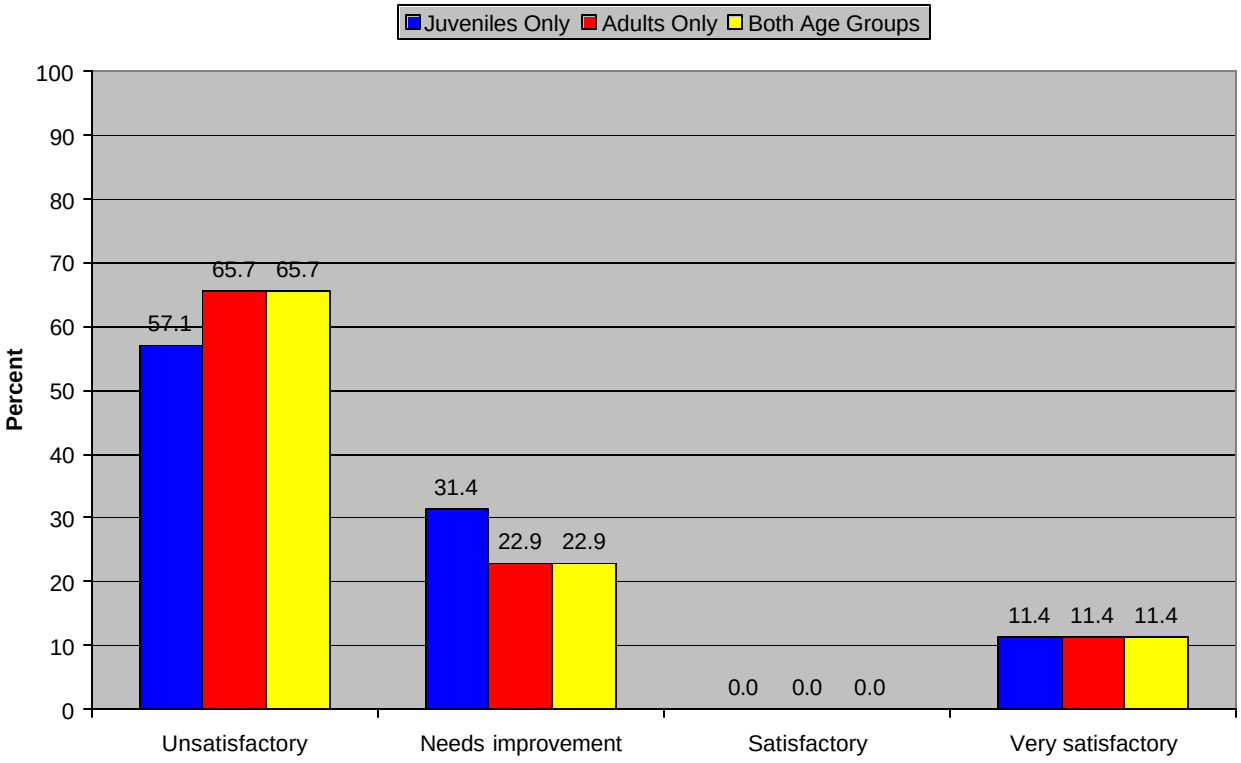
Staff characteristics. Sixty percent of adult only and dual-age programs are categorized as less than satisfactory regarding their staff characteristics. This is compared to approximately seventy percent of juvenile only programs' staff characteristics categorized as "unsatisfactory" or "needs improvement". See Figure 17. The juvenile only programs fall behind the other two program groups due to more pronounced deficiencies in staff being college educated (30.8%), having degrees in helping professions (33.3%), and having experience working with offenders (26.9%). The staffs of juvenile only programs, however, score more favorably in being assessed on their clinical skills (79.4%).

Figure 17. Staff Characteristics by Age of Clients



Evaluation characteristics. The three age-defined program groups are virtually identical in the distribution of the summary scores in the program quality area of evaluation characteristics. Eighty-nine percent of programs scored below satisfactory and 11.4% are "very satisfactory" for all three groups. Differences between the groups exist on individual items, however. Whether programs administer client satisfactory surveys varies from 51.5% for adult only programs to 73.5% for juvenile programs. Dual-age group programs are less likely than the other two program groups to monitor client post-program recidivism (15.2%). See Figure 18.

Figrue 18. Evaluation Characteristics by Age of Clients



Summary

The majority of all programs in Maine have less than satisfactory overall of quality. This unfavorable finding is driven largely by the quality of program characteristic, client pre-service assessment, and evaluation characteristics. The program quality area of program implementation is a strength of Maine programs.

When programs are categorized by the sex of clients they serve, it appears that female only programs tend to have higher overall program quality, with dual-sex programs having the lowest overall quality. The more favorable overall quality categorizations for female only programs are influenced by the higher quality program characteristics and evaluation characteristics of female only programs. Important deficiencies, however, are noted still in the programs characteristics of female only programs, and the analyses of female only programs are based on a very small sample subject to fluctuations. The three types of program groups

are similar in their quality of program implementation and staff characteristics. Dual-sex programs have higher quality client pre-service assessment due to their use of standardized assessment tools.

Findings for programs' level of quality are also differentiated based on the age of clients served. Overall program quality categorizations indicate that more dual-age programs and adult only programs are less than satisfactory then programs for juveniles only. Juveniles only programs have better quality program implementation and program characteristics, yet scored below the other two age-defined program groups in their staff characteristics. The quality of client pre-service assessment and evaluation characteristics are nearly identical across the three program groups.

CONCLUSIONS AND RECOMMENDATIONS

This report identified 105 programs for offenders in Maine, presented information on the capacity of those programs, and assessed the quality of services provided through the programs. The findings were drawn from a survey sent to programs across Maine, in conjunction with data on the location of offenders across the state. Conclusions made throughout the report are limited by the nature of the sample surveyed. Due to the absence of a master list of programs for offenders in Maine, the degree to which the research effort successfully contacted all programs serving offenders is not known. Similarly, how representative the programs that responded to the survey are of all offender programs in Maine cannot be determined. The limits on identifying all offender programs in Maine not only was recognized by the Commission prior to embarking on the research endeavor, but served as a catalyst for the project. Indeed, a primary goal of this study was to begin compiling a list of programs serving clients involved in Maine's criminal justice system.

The major findings of the report are presented below. Recommendations for Maine in their efforts to gain additional knowledge about its programs for offenders, meet the needs of its offenders through adequate program capacity, and improve the quality of available programs are highlighted.

Identification Of Programs And Their Capacity

As was mentioned directly above, the identification of offender programs in Maine served as a primary goal of the Commission from the conception of this study. The survey administered through this study was received by 543 programs, 167 of which responded to the survey. Of those programs that responded, 105 indicated that offenders are included in their clientele. This initial list of offender programs is an important step. However, the State of Maine should continue its efforts to compile their list of programs serving offenders. Until an exhaustive list is formed, insights into whether the availability of programs match the need for programs and how well the existing programs meet the needs of offenders is limited.

In the absence of an actual needs assessment, two approaches were used explore the need for services for offenders relative to the availability of the services. The first approach involved calculating ratios of the number of offenders per program at both the state and county levels. The findings include ratios for all offenders to all programs, as well as ratios for adult males, adult females, juvenile males, and juvenile

females to the sub-group of programs serving them. The second approach used responses to the survey which asked programs to provide the number of clients they currently service; their own assessment of whether they area running over, under or at capacity; some specifics about the programs' clientele; the nature of services provided; and barriers to their being used to full capacity.

Interpreting the findings on the ratios of offenders per program and on program capacity is difficult. While the number of offenders in the state was provided by Maine Department of Corrections and is believed to be accurate, the accuracy of the number of programs is unknown for reasons already discussed. Not only is it possible that the number of programs is under-estimated generally, but there are several counties for which there are no programs indicated; five counties are not represented in the sample of programs that responded to the survey. Adding to the complexity of interpreting these data is the fact that many programs report providing services across county lines. The survey-derived measures of capacity are confounded by the fact that over half of the programs include non-offenders in their clientele and that not all of the responding programs provided information for each item on the survey. The conclusions and recommendations in this area are made with these caveats in mind.

Slightly over half of programs self-assessed themselves as running over capacity. The high portion of programs claiming to be over capacity is consistent with the finding that six of the eleven counties for which ratios of offenders per program could be calculated have over one hundred and twenty offenders per program. The data suggest that more capacity is needed, particularly in the counties of Androscoggin, Kennebec, York, Somerset, Piscataquis and Sagadahoc counties, and for adult male offenders across the state.

Despite half of programs reporting being run over capacity, around eighty percent state that there are at least a few barriers to their being used fully. The most often cited barriers are insufficient funding and lack of transportation for offenders.

The following recommendations are made for enhancing the identification of programs and their capacity:

- *Expand efforts to identify programs in Maine that serve offenders.*

- *Cross index with other agencies in Maine to develop a database of service providers.*
- *Obtain mailing lists from professional organizations.*
- *Contact the programs that responded to the survey to request contact information on other programs that they are aware of in their vicinity that provide services to offenders.*

- *Whether offenders have reasonable access to programs located in neighboring counties should be examined.*

- *Conduct a needs assessment to identify how many offenders are located at the various stages of Maine's criminal justice system, their level of risk, and the services they require (both treatment and non-treatment needs) in order to determine the adequacy of the number of programs serving the differently situated offenders.*

- *To maximize the use of scarce financial resources, client pre-service assessment must be improved, as will be discussed in the program quality section below.*

Program Quality

Overall program quality. Most programs in Maine show substantial room for improvement. When the five program quality areas are considered together to create an overall program quality categorization, 38.1% are "unsatisfactory", 31.4% "need improvement", 23.8% are "satisfactory", and 6.7% are "very satisfactory". The unfavorable categorizations are driven largely by the quality of program characteristics, client pre-service assessment, and evaluation characteristics. The program quality area of program implementation is a strength of Maine programs. The overall quality of offender programming in Maine will improve with the application of recommendations in the program quality areas, which are discussed below.

Program implementation. Overall, most programs in Maine appear to have well qualified, experienced, and involved leadership. Community support also appears to be adequate, although some programs indicated that it could be improved. The one major aspect of program implementation identified as a weakness was funding. The following recommendation is made for the improvement of program implementation in Maine.

- *Steps should be taken to increase funding for programs; however, these increases should be tied to performance measures and improvement of program quality.*

Client pre-service assessment. Despite that fact that Maine has implemented the Level of Service Inventory and Youthful LSI/CMI across the state, offender assessment remains an area that needs improvement for the service providers. Although some risk and need factors are assessed for use in treatment

planning, not all major risk/need factors are assessed with standardized instruments designed to predict the likelihood of an offender's recidivism or needs. Several recommendations are in order.

- *There needs to be better sharing of LSI and LSI/CMI results between the DOC and service providers.*
- *Training on the use and application of the LSI and LSI/CMI should also be extended to the service providers.*
- *Uniform case planning tied to assessment protocols should be developed for all service providers that work with an offender population.*

Program characteristics. The program quality area of program characteristics is one of Maine's weakest. No aspect of quality program characteristics consistently is adhered to across the State. Rather, improvements can be made in each of the program characteristics examined in this study. Highlights of the more significant deficiencies with accompanying recommendations are below.

Many of the programs that responded to the survey do not design their services based on an adequate number or range of offenders' characteristics or circumstances that relate to recidivism. For example, increasing offenders' knowledge about drugs and alcohol, improving their self-esteem, and finding them housing, in the absence of altering their peer associations, procriminal attitudes, and impulsivity, is not part of an effective offender treatment strategy.

While some of the Maine programs employ cognitive interventions, most programs use approaches and interventions that have not demonstrated effectiveness in reducing criminal behavior. Most programs could be described as eclectic at best, and include a wide range of approaches, such as deterrence, drug education, 12 step, and client-centered counseling. There is little empirical evidence that these approaches lead to long term reductions in recidivism.

The composition of treatment groups and service delivery efforts is often deficient. Several programs are inadequate in this area due to one or more of the following practices: mixing higher and lower risk offenders together in treatment groups, providing services to both offenders and non-offenders together, running dual-sex groups, and not separating offender in treatment from offenders not in treatment.

Additionally, programs' tend to not use rewards and punishment skillfully, do not use role plays regularly for practicing new skills, do not teach relapse prevention concepts and techniques and do not use a structured treatment curriculum. Finally, many programs do not work with offenders' families, are of insufficient duration, and have inadequate aftercare services.

The following recommendations are in order:

- *Programs that serve an offender population should increase the criminogenic targets for change. It is recommended that 80 percent of a program's targets and interventions be focused on crime-producing needs such as criminal peer groups, procriminal attitudes, and cognitive skill deficits such as problem-solving and consequential thinking,*

- *Programs in Maine need to adopt more effective approaches, which can include behavioral, cognitive-behavior, family-based, and social learning models. Necessary components of such approaches include the administration of both rewards and punishment (rewards should be given at a rate of four rewards to one punishment), relapse prevention concepts and techniques, and regular use of role plays for practice. All staff should be trained on these models, and treatment manuals and curriculums should be used whenever appropriate. The inclusion of families in the treatment efforts is desirable.*

- *Treatment intensity, or "dosage," should be clearly matched to the offenders' level of risk as measured by a standardized and objective assessment process. Higher risk offenders should receive more intense (more frequent and longer duration) levels of treatment, and should not be grouped with or exposed to low risk offenders, offenders not in treatment, or non-offenders.*

- *Aftercare services should be provided regularly to extend the effectiveness of interventions.*

Staff characteristics. Overall, the staff in Maine had low staff turnover. Around half of programs assess staff on their clinical skills, have staff who are educated in a helping profession, and or have experience working with offenders. Notably deficient aspects of staff characteristics include regular clinical supervision and college educations. The following is recommended:

- *Training for staff needs to be substantially increased. All staff working with offenders should receive formal training in theory and practice of interventions employed by the program, a review of the principles of effective interventions, behavioral strategies such as modeling and the application of reinforcers (both negative and positive), treatment planning, risk and need factors related to criminal conduct, and the use and interpretation of assessment instruments.*

- *Clinical supervision of staff needs to be incorporated into programs. This would include observations of service delivery, and routine staff meetings and documentation of offenders' progress*

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- *Undergraduate degrees should characterize at least 75% of staff, and at least 10% of staff should have advanced degrees.*

Evaluation characteristics. Overall, programs in Maine are lacking in their evaluation efforts. Adequate internal quality assurance mechanisms are missing, offender within program change is not measured, and post-program recidivism is not monitored. A strength in this area is that most programs do survey clients on their satisfaction with services. To improve in this area, programs should follow the recommendations below:

- *Implement internal quality assurance mechanisms including file reviews and problem-oriented records that monitor offenders' progress.*

- *To determine whether interventions are achieving their goals of reducing offenders' criminogenic needs, programs must measure within program change in an objective manner, such as pre and post testing offenders. It is through the reduction and elimination of risk factors that recidivism decreases.*

- *Programs for offenders should collect data on post-treatment recidivism. Ideally, recidivism data is also collected on similar offenders who do not receive the interventions in order to determine whether the treated offenders engage in less criminal behavior than a comparison group.*

In addition to the recommendations for specific program quality areas, it is strongly recommended that the State of Maine develops a system for auditing the quality of programs serving offenders. Not only would such a system regularly assess the quality of programs and hold them accountable for making improvements, but would also provide training and technical support to programs.