Mentoring Court-involved Youth: For Whom is it Most Effective?

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Conclusions and Discussion of Implications
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For Whom is Mentoring Most Effective?
Campus Corps

Mentors and Mentees

Intentional, Multi-level Mentoring Community

Court-involved Youth: Juvenile Justice

- Adolescent criminal offenders are highly likely to develop life trajectories permeated by 1) substance abuse, 2) delinquent or criminal behavior, and 3) mental health issues.

- As a result, effective interventions that consider the unique needs of juveniles are needed (i.e., structure, support, positive peer and adult relationships).
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A promising intervention: Campus Corps

- After-school, one-on-one, therapeutic mentoring program serving nearly 300 disadvantaged and at-risk youth, ages 10-18, each year.
- Youth are paired with University student mentors in a service-learning course.
- Goals for the youth are to increase graduation rates, improve emotional well-being, and reduce delinquency and substance abuse.
- Goals for the mentors are to prepare students to become highly skilled, civically engaged professionals.
Mentors and Mentees
Who do we serve?

Gender
- 36.4% Female
- 63.6% Male

Ethnicity
- 46.5% Caucasian
- 36.2% Hispanic or Latino
- 6.3% American Indian
- 3.3% African American
- 3.4% Other
- 2.5% Asian American
- 1.8% Pacific Islander

Youth (ages 10-18) who are vulnerable to school dropout, substance use/misuse, and delinquent behavior
Juvenile Charge Information

- Alcohol or Drug Charge: 19.80%
- Other Charge: 46.20%
- No Charge: 34%
Who are the Mentors?

Undergraduate students from over 80 majors, including:

- Human Development & Family Studies
- Psychology
- Health and Exercise Sciences
- Spanish
- English
- Education
- Social Work
- Sociology
- Biomedical Sciences
- International Studies

- 28.7% of students identify as First Generation students
- Mentors are accepted and screened before enrolling in the course
- Students participate in an initial training, as well as ongoing training/supervision to be well versed in mentoring at-risk youth
- Opportunity for leadership roles as mentor coaches, research or teaching assistants
Intentional, Multi-level Mentoring Community
Campus Corps Program Schedule

• 12-weeks, 4 evenings per week
• Sessions each Fall, Spring, and Summer

Daily Schedule

• 3:00-4:00 pm - Pre-Lab
• 4:00 pm - Youth Arrive
• 4:00-4:30 pm – Walk & Talk
• 4:30-5:30 pm – Supporting School Success
• 5:30-6:00 pm – Dinner
• 6:00-7:00 pm – Pro-social Activities
• 7:00-8:00 pm – Pro-social Activities
• 8:00 pm – Youth Depart
• 8:00-9:00 pm – Post-lab
The Impact of Campus Corps

- Quasi-Experimental Pre-Post pilot study with 410 youth revealed that, as compared to the comparison group, participants of Campus Corps:
  - Used alcohol and marijuana less frequently
  - Participated in delinquent and truant behavior at lower rates
  - Held more appropriate attitudes toward problem behavior and substance use
  - Felt less lonely
  - Reported feeling happier
The current study

Goal 1: To determine whether males and females were differentially impacted by Campus Corps

Goal 2: To determine whether the impact of Campus Corps differed by the presence of behavioral and mental health issues.

*Presence of Behavioral and Mental Health Issues was determined by a single question completed by the youth's caseworker.*
Note. *Higher loneliness scores indicate less feelings of loneliness.

Models control for baseline scores and key covariates.
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Models control for baseline scores and key covariates.
Note. Higher scores are more desirable. Models include baseline scores and key covariates.

Note. Lower scores are more desirable. Models include baseline scores and key covariates.
Post-intervention Autonomy from Marijuana

Note. Higher scores are more desirable. Models include baseline scores and key covariates.
Post-intervention Attitudes Toward Substance Use

Note. Lower scores are more desirable. Models include baseline scores and key covariates.
**Campus Corps**

**Mentors and Mentees**

**Intentional, Multi-level Mentoring Community**

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**Court-involved Youth: Juvenile Justice**

- Adolescent criminal offenders are highly likely to develop life trajectories permeated by 1) substance abuse, 2) delinquent or criminal behavior, and 3) mental health issues.

- As a result, effective interventions that consider the unique needs of juveniles are needed (i.e., structure, support, positive peer and adult relationships).
Fostering Healthy Futures

Court-involved Youth: Child Welfare

- Many children placed in out-of-home care experience grief at the separation from their biological parents. Many struggle as they try to adjust to new and often changing environments.
- As a result of maltreatment and placement, children are at increased risk for behavioral, mental health, cognitive, and academic problems.
Court-involved Youth: Child Welfare

• Many children placed in out-of-home care experience grief at the separation from their biological parents. Many struggle as they try to adjust to new and often changing environments.

• As a result of maltreatment and placement, children are at increased risk for behavioral, mental health, cognitive, and academic problems.
A preventive intervention: Fostering Healthy Futures (FHF)

- The FHF theoretical model assumes that maltreatment and placement in foster care interact with a number of risk and protective factors resulting in increased risk for poor developmental outcomes.
- Therefore - the FHF program targets psychological, social, and behavioral domains to promote child well-being and competence and to prevent adverse outcomes.
- Consists of time-limited (9 months) mentoring and 30 weekly skills groups for children (9-11) recently placed in out-of-home care.
Unique Program Components

Time-limited mentoring provided by graduate students in Social Work. Attention is given to relationship and skill building, positive youth development, and promoting resilience. Mentors receive individual and group clinical supervision.

Weekly skills groups combine traditional cognitive-behavioral skills group activities with process-oriented material. Topics include: Emotion Recognition, Dealing with Worry, Perspective-Taking, Cultural Awareness, Change and Loss, Abuse Prevention, Future Orientation, and much more.
FHF Methods & Procedures

• All 9-11-year-old children from Denver metro counties who were court-ordered into out-of-home care due to maltreatment during previous 12 mo were recruited for study (≈93% recruitment rate) from 2002-2006

• Participants were randomly assigned to conditions
• Total N ≈ 144 (50.7% female; Mean age = 9.92; racially/ethnically diverse)

• Children-, caregiver-, and teacher- report data, as well as administrative data collected at pre-intervention and several timepoints post-intervention
FHF Impact on Mental Health

• Using a rigorous design, participants of FHF, as compared to the control group, demonstrated:
  • fewer mental health problems and trauma symptoms (i.e., posttraumatic stress and dissociation)
  • better quality of life and more social support
• FHF was named a research- and evidence-based program by the Administration for Children, Youth, and Families and the Washington State Institute for Public Policy
But, is it more effective for some youth?

Goal: Determine whether the impact of the program depends upon children's level of baseline risk.

*Cumulative Risk*

- The accumulation of risk factors increases likelihood of mental health problems
- Cumulative risk scores are powerful predictors of mental health

Measured by empirically-validated measure of baseline risk found to predict mental health (i.e., the greater the number of risk factors, the greater likelihood of mental illness and associated outcomes)
## Baseline Risk Factors (\(N = 144\))

<table>
<thead>
<tr>
<th>Factor</th>
<th>Scored</th>
<th>Received a '1' if...</th>
<th>Prevalence</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physical abuse</td>
<td>0 or 1</td>
<td>Physical abuse was indicated in the case file</td>
<td>32.60%</td>
</tr>
<tr>
<td>Sexual abuse</td>
<td>0 or 1</td>
<td>Sexual abuse was indicated in the case file</td>
<td>11.80%</td>
</tr>
<tr>
<td>Single-parent home</td>
<td>0 or 1</td>
<td>The child was removed from a single parent/caregiver</td>
<td>65.30%</td>
</tr>
<tr>
<td># of caregiver transitions</td>
<td>0 or 1</td>
<td>The child experienced 6+ caregiver transitions</td>
<td>25.70%</td>
</tr>
<tr>
<td># of school transitions</td>
<td>0 or 1</td>
<td>The child experienced 6+ school transitions</td>
<td>23.60%</td>
</tr>
<tr>
<td>Exposure to com. violence</td>
<td>0 or 1</td>
<td>The child witnessed violence ~ 2+ times in their neighborhood</td>
<td>21.50%</td>
</tr>
<tr>
<td>Sum of Risk Factors</td>
<td>Number of Participants</td>
<td></td>
<td></td>
</tr>
<tr>
<td>---------------------</td>
<td>------------------------</td>
<td></td>
<td></td>
</tr>
<tr>
<td>0</td>
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<tr>
<td>1</td>
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<td></td>
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<tr>
<td>2</td>
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<td>3</td>
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</tr>
<tr>
<td>6</td>
<td>0</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Does the impact of FHF differ by child's level of baseline risk?

<table>
<thead>
<tr>
<th>Mental Health Variables</th>
<th>N</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mental Health</td>
<td>Y</td>
</tr>
<tr>
<td>Posttraumatic Stress</td>
<td>Y*</td>
</tr>
<tr>
<td>Dissociation</td>
<td>Y*</td>
</tr>
<tr>
<td>Quality of Life</td>
<td>N</td>
</tr>
<tr>
<td>Social Acceptance</td>
<td>N</td>
</tr>
<tr>
<td>Coping</td>
<td>N</td>
</tr>
<tr>
<td>Self-worth</td>
<td>N</td>
</tr>
<tr>
<td>Social Support</td>
<td>N</td>
</tr>
</tbody>
</table>

Note. Models control for baseline scores and key covariates
Note. Model included baseline scores and key covariates.
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Post-intervention Dissociation by Risk and Group

![Bar graph showing post-intervention dissociation by risk and group with levels of cumulative risk on the x-axis and scores on the y-axis. The graph compares control and intervention groups.]

Note. Model included baseline scores and key covariates.
Conclusions and Discussion of Implications

- Court-involved children and adolescents benefit from structured, time-limited mentoring programs.
- Among youth at risk of criminal involvement, mentoring can make a difference in problem behavior, substance use, and emotional quality of life.
- Among a high-risk sample of maltreated children, mentoring can make a difference on children's mental health and associated outcomes.
- The positive impact of FHF on posttraumatic stress symptoms and dissociation is greater for children with low to moderate levels of cumulative risk (among an already high-risk sample).
- The impact of Campus Corps on emotional quality of life is greater for males. The impact on substance use and autonomy from marijuana use is greater for youth who begin the program with behavioral and emotional difficulties.

Implications
Court-involved children and adolescents benefit from structured, time-limited mentoring programs
Among youth at risk of criminal involvement, mentoring can make a difference on problem behavior, substance use and emotional quality of life.
The impact of Campus Corps on emotional quality of life is greater for males. The impact on substance use attitudes and autonomy from marijuana use is greater for youth who begin the program with behavioral and emotional difficulties.
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Implications
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