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Services for Youthful Offenders: Rural Challenges

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Services for Youthful Offenders: Rural Challenges

by

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MSW Clinical Research Paper

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The Clinical Research Project is a graduation requirement for MSW students at St. Catherine University/University of St. Thomas School of Social Work in St. Paul, Minnesota and is conducted within a nine-month time frame to demonstrate facility with basic social research methods. Students must independently conceptualize a research problem, formulate a research design that is approved by a research committee and the university Institutional Review Board, implement the project, and publicly present the findings of the study. This project is neither a Master's thesis nor a dissertation.

Table of Contents

ABSTRACT.....	3
SERVICES FOR YOUTHFUL OFFENDERS: RURAL CHALLENGES.....	4
LITERATURE REVIEW	5
CONCEPTUAL FRAMEWORK	9
METHODS	10
FINDINGS.....	14
DISCUSSION	21
CONCLUSION	27
REFERENCES.....	29
APPENDIX A: PHONE SCRIPT FOR GETTING SUPERVISOR/DIRECTOR CONTACT INFORMATION.....	32
APPENDIX B: EMAIL SCRIPT FOR PERMISSION FROM ORGANIZATIONS	33
APPENDIX C: EMAIL SCRIPT AND SURVEY CONSENT FOR PARTICIPANTS.....	34
APPENDIX D: SURVEY QUESTIONS.....	36

Abstract

This paper examines the experiences of service providers that coordinate and provide services for youthful offenders in rural areas. With juvenile offender recidivism rates around 41% (Wilson & Hoge, 2013) and limited resources to put towards aftercare, it is important to understand the challenges faced during community reentry after a correctional placement in order to best focus resources. This research utilized an electronic qualitative survey that was administered to professionals who work with youthful offenders and are employed by agencies in rural Minnesota counties. The study found that while there are benefits to working with youthful offenders in small communities, the lack of services in those communities present a significant challenge.

Services for Youthful Offenders: Rural Challenges

Every day, adolescents are sent to juvenile detention centers, residential treatment centers, and other similar facilities where they are away from family, school, and community. Some programs are treatment-based and focused on "at risk" youth and troubled teens, with the intention of mentoring and counseling them to attempt to change their behaviors, while others are correctional-based, with programming focused on chemical use or deviant behaviors. But what happens to youth after they've been incarcerated and then released from a juvenile detention center?

Many of these adjudicated youths are provided with few resources upon their departure from these facilities. They might receive a written aftercare plan or phone numbers to call if they find themselves in need of resources. If they are lucky, they will be assigned an aftercare worker that is likely seldom heard from (Christian, 2003). With so few resources to ease their transition back into the community, it's no wonder a meta-analysis completed by Wilson and Hoge (2013) found an average juvenile recidivism rate of 41.3%.

A number of studies have been done on factors predicting youth recidivism. More recently, studies have been done on protective factors and programs geared towards reducing recidivism. Some qualitative studies have focused on youth experiences in residential placements or in programming. While these studies have been successful in identifying some consistent recidivism risk factors, the efficacy of programming on reducing recidivism remains mixed. In addition, rural areas provide a distinct set of challenges and benefits for youthful offenders that do not often appear in available literature. Very few studies have focused on the experiences of youth or the professionals that provide services during their transition, and even fewer have looked at differences in experiences between rural and urban youth.

In order to provide community-based services as effectively as possible, the experiences of and challenges faced by community-based service providers must be understood. This study will focus on gaining perspective on the experiences of professionals in a rural area working with incarcerated youth reintegrating into the community.

Literature Review

Youth that commit crimes tend to have a number of things in common that put them at risk for criminal behavior. Often, youthful offenders have substance abuse and mental health concerns. Many have a number of cognitive distortions that lead to their law-breaking behavior, such as thinking their actions are justified, believing that many people engage in similar acts, or feeling a strong need to protect themselves, their friends, or their family (Jewell, Malone, Rose, Sturgeon, & Owens, 2015). Victims of abuse and neglect commit criminal offenses at higher rates than children and adolescents without an abuse or neglect history (Ryan, Williams, & Courtney, 2013). Barrett and colleagues (2014) found that in addition to early maltreatment, being in foster care and having a learning disability or an emotional/behavioral disorder also contribute to risk for delinquent behavior. They also found the strongest predictor of delinquency is having a mental health diagnosis related to aggressive behaviors.

Recidivism Risk Factors

With such a high rate of youthful offender recidivism, it's important to determine if factors other than those above contribute to increased risk to commit a subsequent crime. A great deal of research has been done on youth recidivism with varying results. Many factors, such as educational achievement and post-release schooling (Blomberg, Bales, Mann, Piquero & Berk, 2011) and perception of procedural justice (Penner, Viljoen, Douglas & Roesch, 2013), have been studied in an attempt to find the best predictors of recidivism. Blomberg and

colleagues' (2011) study on educational achievement showed a younger age at first offense, minority race, male sex, and number and severity of prior offenses to be strong predictors for recidivism. This is consistent with other literature, including Penner and colleagues' (2013) study, which showed association with delinquent peers, substance abuse, and age at first offense to be predictors of recidivism. Penner and colleagues' (2013) study also showed that youths' perception of procedural justice predicted self-reported re-offense at a time period of 0-3 months, but not at 3-6 months.

Mulder and colleagues (2010) found that out of 70 individual factors studied, the factors that best account for the recidivism data include antisocial behaviors, psychopathology, sexual problems, family problems, specific characteristics of the youth's offending (high number of past offenses and young age at first conviction), intellectual capacity, social skills and social network, and substance use, with psychopathology and family problems associated with higher levels of re-offense severity. Many of these factors line up with those found by Blomberg and colleagues (2011) and Penner and colleagues (2013), listed above.

Calley (2012), on the other hand, found that out of nine specific variables (including offense type, age at first involvement in the justice system, involvement in the child welfare system, termination of parental rights, parent criminal history, level of family support, treatment program completion status, length of treatment stay, and placement after discharge), the only variable that had a significant impact on recidivism on the study's subject was offense type. Youthful offenders that committed a general or substance-related offense were more likely to reoffend than youth that had committed a sex offense.

Recidivism Protective Factors

Studies of protective factors show more mixed results. Blomberg and colleagues (2011) reported a significant negative correlation between educational achievement and attendance and rate and severity of re-offense. The study measured educational achievement while incarcerated, school attendance post-release (at 12 and 24 months), and re-arrests at 12 and 24 months. It found that educational achievement while incarcerated is positively correlated with a youth's return to and attendance at school following his release, and that school attendance following release was negatively correlated with rates and severity of re-offense. This suggests that focusing on educational achievement during incarceration may potentially help lower re-arrest rates.

Another protective factor seems to be family involvement. Ryan and Yang (2005) studied different types of familial involvement with youthful offenders incarcerated at a residential facility in Michigan, and found that visits initiated by family, counseling that took place in the family home, and in-home contacts by a family worker were associated with a reduced risk of recidivism. Family involvement, especially family counseling in the youth's home, can help address factors that are not addressed in an individual treatment plan alone and ease the transition back into the home environment.

Rural versus urban youth. Very few studies compare rural youthful offenders to urban youthful offenders in order to identify specific challenges or protective factors for either population. Nelson, Coleman, and Corcoran (2010) found that urban and rural adjudicated male youth had similar risk and protective factors, but that the impact of factors was different across location. Family and school variables impacted rural youth more intensely than they impacted urban youth, while urban youth were more affected by personal and peer risk. While this study has limitations, it is a good starting point for further research that is sorely needed.

Residential and Transitional Programs

A qualitative study by Abrams (2006) sought to understand youthful offenders' experiences with different styles of treatment programming in residential treatment. The study focused on youth in two different types of treatment facilities. A treatment-focused facility focused on using therapeutic interventions, while a deterrence-focused facility utilized strict routines, rules, and consequence systems to alter behaviors. Interviews with youth in the separate facilities showed some similarities, such as mixed feelings on staff, confusion about the purpose of written assignments, and feeling uncertain about transitioning out of the facility. The therapeutic facility seemed to leave more room for manipulation and "faking it", but also allowed more positive staff-youth relationships to develop. The deterrence based facility allowed for less manipulation, but also for fewer positive relationships and less mental health support and individually created treatment goals.

A similar study done by Abrams and colleagues (2007) used mixed methods to evaluate a new transitional program at a residential facility. The qualitative aspect of this study found a similar report from both youth and staff: There were many positives, such as learning skills and forming relationships, but there was simply not enough time to prepare for release and not enough follow up after release. As in Abrams's (2006) study, youth in the transitional living program sometimes struggled to understand the importance of tasks and assignments and felt unprepared for transition. Given the feelings of the youth and staff, it makes sense that the quantitative aspect of this study showed that the program was not successful in reducing recidivism.

The Missing Link

While aspects of the articles, such as differences in operationalizing “youth” and collective re-offense data, can make them difficult to compare, one thing is certain: youth leave residential facilities largely unprepared for transition into the community. In the last two and a half decades, Intensive Aftercare Plans (IAP) have been researched, developed, and finally implemented at various secure facilities across the country to be evaluated (Altschuler & Armstrong, 1996). Though not much research has been done on the efficacy of such programs, IAP for youthful offenders has shown some promising results in early studies, and it is suggested that many negative results are due not to program failure, but problems with implementation (Young, 2004).

Resources are fewer in rural areas (Bischoff et al, 2014), which suggests that providing supportive aftercare services to youth that are transitioning to a rural community may be more challenging. Considering that rural areas have higher rates of many mental health related issues (such as substance use, child maltreatment, depression, suicide attempts, and domestic violence) than urban areas (Bischoff et al, 2014), and many of those same factors contribute to the risk of youthful offending or recidivism (Mulder et al 2010; Penner et al, 2013), improving the provision of services and collaboration between providers in these areas is necessary.

Conceptual Framework

While it would seem that the aforementioned intensive aftercare plans could be part of the answer to the recidivism problem, knowing where to focus services could be a barrier. Some of the factors most likely to predict recidivism--such age at first arrest and biological sex, amongst others (Penner et al, 2013)--are structural issues that can not be addressed through treatment or supervision. While the research has shown that it is important to focus on education achievement (Blomberg et al, 2011), family involvement (Ryan & Yang, 2005), and decreasing

substance abuse and associations with offending peers (Penner et al, 2013), there is a gap in the literature regarding youth and community-based service providers' experiences working with youth to provide services focused on enhancing protective factors and reducing risk factors.

Ecological systems theory views human behavior as a product of the interactions of people (micro), groups (mezzo), and various environments (macro) within a person's life (Hutchinson, 2011). Based on this theory, a variety of factors, including school, family, community, neighbors, service providers, etc., impact a youthful offender's actions and whether those actions lead to recidivism or to remaining law abiding. All systems must be considered and taken into account when creating a treatment plan and putting supports in place.

Due to limited correctional facility resources allocated to aftercare, partnering with community providers would help bridge the gap between the correctional facilities and the community, providing youth with continuity of care and increasing their chances at success. In order to effectively address all systems in play, comprehensive wraparound services or coordination between multiple service providers would be necessary. To most efficiently partner correctional facilities and community based service, the experiences of all parties must be understood in order to address challenges and facilitate communication. The limited resources in rural areas add an extra challenge to consider when supporting youthful offenders. This study seeks to explore the experiences of community-based professionals that work with youthful offenders reintegrating into the community, along with the related challenges associated with working in a rural community.

Methods

Research Design

This study utilized a qualitative electronic survey (via Qualtrics). The survey consisted of both closed-ended and open-ended questions. Once the completed surveys were received, they were coded and analyzed utilizing conventional content analysis methods.

Sample

For this study, a sample of the following community providers were asked to complete an online questionnaire: children's mental health case managers, juvenile probation officers, child protection case managers, community therapists, and CTSS skills workers. The community providers asked to participate were required to work in a rural county and currently provide or have provided services to incarcerated youth aged 11-18. An ideal target sample size of 45 respondents was identified; however, only 4 people responded.

A convenience sample of agencies already known to this researcher, plus agencies found via a Google search or through word of mouth, was used. The agencies were all in Minnesota counties that fit the Office of Management and Budget's definition of rural. These agencies were contacted to get contact information for the supervisor or director of the agency or department (please see Appendix A for phone script) when necessary. An email request for permission (please see Appendix B) was sent to the supervisor. Once they granted permission, an email with the link to the questionnaire was sent to the supervisor to pass on to their staff (please see Appendix C).

Inclusion criteria. The targeted community providers were those that have experience working with youthful offenders in rural areas. Only agencies in rural Minnesota counties were targeted.

Exclusion criteria. Providers that only have experience working in urban settings, or those that are currently working in an urban county in Minnesota were excluded. Providers that do not have experience working with incarcerated youth aged 11-18 were also excluded

Protection of Human Subjects

A consent statement was presented prior to the respondents beginning to answer survey questions (see Appendix C for consent statement). The consent statement informed the respondents that the survey questions will require approximately 40-50 minutes to complete. They were informed that the answers will be analyzed by this interviewer, and that the findings will be shared with students, faculty members, and community members via visual and oral presentation. Respondents were not required to report their names, therefore no names will be attached to the data. The respondents were assured of anonymity to the extent that technology allows and informed that their names or their agencies' names will not appear anywhere in the written or presented material. Contact information for the researcher and the supervising faculty member was provided if respondents had questions. The statement informed respondents that by clicking on the link to the survey and answering survey questions, they were thereby giving consent.

Data was kept in a password-protected folder on the researcher's laptop. Because the data is anonymous, it does not need to be destroyed at the completion of the project. Raw data was not made available to anyone besides the researcher and the research chair. This study was approved by the Institutional Review Board (IRB) at St. Catherine University.

Data Collection

Data was collected by an electronically administered survey via Qualtrics, using questions that had been created based on the research in the literature review and preapproved by the research committee (Please see Appendix D for questions). The questions were a mix of closed-ended to determine inclusion or exclusion and gather demographic data, and open-ended in order to encourage the respondents to give as much information as possible. The surveys were expected take approximately 40-50 minutes, but respondents completed them in 10-30 minutes.

The questions in the survey were developed after examination of existing literature on youthful offenders, recidivism, and transition into the community from residential or correctional placement. The respondents were asked to describe their agencies and their roles, and confirm that they have (or have had) clients fitting the targeted population of youth 11-18 reintegrating into the community after correctional placement. Survey questions focused on the types of services that are recommended for youthful offenders reintegrating into the community, respondents' interactions with other agencies and professionals during coordination of services for youthful offenders, challenges in setting up services for youth reintegrating from correctional placements, and the challenges and benefits of coordinating and providing services in a rural community.

Analysis Technique

The completed qualitative surveys were coded using conventional content analysis methods. The information from the Qualtrics software was transcribed into Word documents for coding purposes. Nearly each sentence or phrase was given an initial code. Following initial coding, a read through was conducted to discover overall themes in the data for analysis. Six overall themes and four subthemes emerged through the coding process.

Findings

Six overall themes emerged within the coded data: communication across agencies, rapport and relationships, benefits of rural locations, challenges, similar barriers for youthful offenders who remain in the community, and what is needed/helpful. Subthemes were also identified within the overall themes: the importance of being on the same page emerged as a subtheme to communication, community involvement was identified as subtheme under benefits of rural locations, and lack of services/support and logistical barriers were identified as subthemes to the overall theme of challenges.

Respondents were from three different agencies: two different county agencies and one private community mental health agency. All of the agencies are located in non-metro Minnesota counties. Respondents were a children's mental health case manager, a mental health therapist and director, a juvenile probation officer, and a truancy officer. Three respondents had bachelor's degrees and one had a master's degree. The respondents' number of years of experience ranged from 4 years to 20 or more years.

Communication Across Agencies

In coordinating services across agencies for any client, communication is key. The reviewed literature demonstrates that often, youthful offenders have many varied needs, which increases the potential number of service providers involved with the youth. The importance of communication when working with youthful offenders was highlighted throughout the responses of all four participants. All respondents talked about the importance of communication between agencies, and in response to a question asking what has worked well or has been the most helpful in coordinating with other agencies during a youthful offender's reintegration process, one

respondent stated, “Continued communication and follow through to keep everyone informed regarding the child’s behaviors and planning for their success.”

Another respondent identified that being able to have a plan in place that is consistent across coordinating agencies is something that has worked well or has been the most helpful when coordinating with other professionals, while another responded that a team approach is most helpful. One respondent noted the importance of getting information from other agencies in a timely fashion, as well. All of these responses demonstrate a need for communication across agencies.

The importance of being on the same page. In taking communication one step further, respondents also identified the importance of being on the same page. One respondent stated, “The most challenging part of coordinating with other professionals is being able to coordinate the correct services/treatment when 2 providers do not share the same recommendations for the client.” When recommendations differ, it is difficult to know what services to coordinate for youthful offenders or how to prioritize them.

One respondent identified “not being on the same page” as one of the things that has been challenging in coordinating services across agencies, while another reported agencies being unwilling to work together as a challenge.

Rapport and Relationships

Though similar to communication, rapport and relationships was identified as a separate theme due to its occurrence not only in responses to questions about coordinating with other agencies, but throughout the entire survey. Respondents identified the importance of rapport and

relationships in working with other agencies, working with youth and their families, and as a benefit of their agencies' rural locations.

When asked what has worked well or has been the most helpful in coordinating with other agencies and service professionals, one respondent acknowledged the importance of rapport and relationships and how it is beneficial to his or her work:

I feel that building good rapport with other professionals has been helpful. Since we have a good relationship with the county and/or other providers, it seems to be easier to get returned calls and responses when needing help or information regarding our client.

It appears that forming good relationships with other service providers can help lead to better communication—the importance of which is highlighted above.

In addition to striving for good relationships with service providers, respondents also recognized the importance of forming good relationships with the youth they work with. When asked “What would/does make your experiences working with youth transitioning out of correctional placement effective?” one respondent said:

I think positive rapport with the youth is very important. I need to be understanding of the situation and start over from a clean slate. I have made the mistake of reiterating what the client has done wrong and lost all hopes of building a positive relationship because now they see me and [sic] someone who gives consequences instead of someone who helps come up with solutions.

Youth who have been in correctional placement are no strangers to consequences, and this response demonstrates the importance of approaching from a collaborative and empathetic

standpoint in order to build relationships with the youth instead of simply providing further consequences for their behavior.

Benefits of Rural Locations

Benefits of rural locations is a theme that was unexpected following a review of the literature, however, this theme was common throughout the responses. Three of four respondents answered “yes” when asked if there were any benefits associated with working with clients transitioning from a correctional setting due to the rural location of their agencies. The theme also occurred throughout other answers in the survey.

When asked if there are benefits associated with working with clients transitioning from a correctional setting due specifically to the rural location of the agency, one respondent answered, “Smaller communities = more personalized care.” Another respondent highlighted the benefits of being able to be more tuned in to what is happening in clients’ daily lives: “We tend to know who is a ‘bad’ influence and since the school is smaller I think we tend to know when they are starting to spiral downward faster than in a bigger community.” If a service provider is aware that a client is beginning to struggle, intervention can happen earlier.

Community involvement. One benefit of coordinating and providing services to youthful offenders in a rural area is community involvement. One respondent stated:

Benefits are that in a rural community there is [sic] a lot of community members who help keep an eye out for other parents and inform them when they see their child doing something they are not suppose [sic] to. There can be relationships formed between Law enforcement and families who can understand a clients [sic] history and may be more lenient depending on the circumstances.

This quote highlights the important role that small communities—and the people that reside and work in them—play in supporting successful reintegration of youthful offenders.

Challenges

Despite the benefits of being in a small community, rural locations also hold many challenges for youthful offenders and the professionals that support them. Some challenges are specific to rural locations, such as a lack of services due to the small community, while other barriers are not necessary specific to rural locations, but still present barriers to youth getting the services and support that they need.

In order for services to be effective, a client must be engaged in and actively utilizing the service. One respondent acknowledged the struggle of coordinating services for youth that are not committed to engaging in them:

The biggest challenge is getting the youth to commit to doing the services. If it is court ordered it [sic] easier to get them to attend and participate in any service you set up for them, however if they are not court ordered they can refuse to see any providers.

This quote highlights the unpredictable nature of coordinating services for involuntary clients.

Another challenge which service providers have no control over is the youth's peer interactions and daily activities. A respondent pointed out this challenge by saying, "Coming out of a [correctional] facility there is going to be minimal change if the client starts hanging out with the same peer group as they did before they were incarcerated."

Logistical barriers. At times, despite the best service coordination and provision, there are barriers that result from logistical challenges. Barriers such as lack of parental involvement,

not having transportation to activities or services, and low or no funding for services and supports were discussed by two respondents.

Lack of services/support. This subtheme was common through all four respondents' transcripts. When asked what the most challenging aspect of finding and coordinating services for incarcerated youth re-entering the community, all four respondents spoke to the lack of resources and services in their area, with responses of: "The most challenging is the lack of services provided in the clients [sic] community," "not having the services local is the biggest challenge," "limited resources in area," and "shortages of mental health staff."

Respondents listed the specifics, such as, "no outpatient CD [chemical dependency] anymore, limited counselor [sic] for kids in the area," and "limited community activities to get the child involved in." One respondent stated he or she hasn't "seen any aftercare programs in quite a few years." Another respondent pointed out a potential result of limited services: "There may be a waiting list to get services and in the meantime the client may not get the proper support he/she needs and can easily fall back into their old patterns."

While the shortage of mental health staff is not limited to small communities, one of the respondents hypothesized about the shortage as it relates to rural areas:

I think many counselors have left private practice because of the paperwork involved in MA [Medical Assistance] and insurances. They were doing more paperwork then [sic] counseling. They went to cities with an agency that has accounting specifically for that reason. same [sic] with outpatient treatment for juveniles if [sic] the numbers aren't there they cut the program here.

Similar Barriers for Youthful Offenders Who Remain in the Community

Respondents were asked, “If you also work with youth that are not incarcerated, what is different?” The consensus in this area was that the challenges in working with any youthful offenders are the same, regardless of their incarceration status. One respondent speculated on the impact of limited services on out of home placements: “The struggles for finding services are no different for those that have been placed out of the home and who have not. I think we would have less out of home placements if we had more services.” This response illustrates the need for more resources and services related to youthful offenders. A reduction of correctional placements would free up more resources to direct towards preventing incarceration of youthful offenders.

What is Needed/Helpful

Answers to the question, “What would/does make your experiences working with youth transitioning out of correctional placement effective?” varied greatly among respondents. One respondent stated, “a good aftercare program really helps.” Another responded, “Lots of support for those children and finding healthy activities to replace the unhealthy activities they were involved in.” A third respondent reported that “consistency” would/does make his or her experiences working with youth transitioning out of correctional placement effective. The final respondent took a different direction and replied with what he or she personally does that is effective: building relationships and rapport with the youth he or she is working with and becoming a person who has solutions to problems, rather than consequences.

One respondent also addressed the importance of community activities, “such as youth groups, 4-H, etc,” in order to “replace the unhealthy activities they [the youth] were involved in [prior to incarceration].” In support of the need for positive community activities, another respondent discussed the challenges of youth “fall[ing] back into their old patterns,” and

suggested that going back to spending time with the peers they were associated with prior to incarceration was a hindrance to change. By engaging in new, positive activities, youthful offenders could have opportunities to form relationships with new peers that are supportive of positive behaviors.

Discussion

The importance of communication is a theme that was expected based on the research reviewed. The need for a variety of services to meet various needs of at-risk youth is well documented (Barrett, et al, 2014; Ryan, et al, 2013, Unger, 2005) and complicated (Ouellette, Briscoe, & Tyson, 2004), and this was further demonstrated through the responses of participants, who all highlighted the need for timely and cooperative communication across agencies. However, participants also cited poor communication and not being on the same page as a significant challenge in their work with youthful offenders. Often, in rural areas where resources are fewer, professionals have caseloads that are larger than they should be and allow less time for care coordination. However, poor care coordination can lead to duplication of work, inefficiency amongst agencies, missed steps, and mixed messages presented to clients and families. This increases workload and frustration for professionals, creates confusion and frustration for clients and families, and potentially contributes to essential parts of the care process being overlooked. One respondent also stated that good relationships with other agencies fostered positive communication and coordination.

The importance of rapport and relationships in work with clients is widely accepted throughout social work practice. It was not surprising to find that theme throughout the participants' responses, related both to working with clients and with other agencies. Though accepted, this can be difficult to execute effectively—especially in rural areas where treatment

providers are limited and referring to a colleague who is a “better fit” for a client isn’t always possible. Good rapport with other agencies can also be difficult given heavy workloads. In addition, in rural areas, other collaborating agencies can be in different cities or counties and most communication must be done via phone or email, which makes creating a good working relationship more difficult. Despite this, respondents stated that forming good relationships with other agencies has been one of the things that has worked well and been most helpful in their work with youthful offenders.

An unanticipated theme was the benefit of working in a rural area, which was acknowledged by three of the four participants. Participants cited closer relationships with other agencies (particularly probation), being more in tune with potentially problematic peer groups, and having assistance from the community with informing families of their children’s activities as benefits to being a rural area. This provides a promising framework for increasing service efficacy with youthful offenders in rural areas.

Existing literature demonstrates a general unpreparedness for discharge from correctional and residential treatment facilities (Abrams, 2006; Abrams, 2007; Christian, 2003) and the importance of aftercare (Altschuler & Armstrong, 1996; Young, 2004). Because of this, the availability of services and supports such as mental health services, chemical dependency treatment and aftercare, and social supports through community activities and positive peer groups is of great importance to youthful offenders reintegrating into the community after a correctional placement. Yet every respondent listed a lack of appropriate services as a significant challenge to their work with youthful offenders—with some stating it repeatedly throughout the survey responses. Respondents blamed lack of local services, shortages of mental

health professionals and long waiting lists, program cuts, limited funding and other resources, and limited community organizations and activities for this barrier.

The shortage of social work and mental health providers is well documented both in the United States (Wilson, 2005) and elsewhere (Huxley, Evans, Webber, & Gately, 2005) and it is forecasted to increase significantly in the next 15 years (Lin, Lin, & Xiaoming, 2016). This is not a challenge specific to working with youthful offenders, but the effects are felt throughout the system. Long waiting lists, providers not taking new clients, having to travel to neighboring cities to receive services, and insufficient service hours are common throughout much of Minnesota. One respondent specifically discussed lack of funding and program cuts for youthful offenders, and stated that he or she has not seen any aftercare programs in “quite a few years”. When a concern is that a lack of services could potentially be contributing to high recidivism rates, it is important to consider ways to maximize resources and use them efficiently to provide the best care possible.

Other challenges that were reported by respondents were logistical barriers, such as a lack of transportation and lack of parental involvement. These are barriers that are not uncommon to working with youth, whether they are youthful offenders or not. Respondents reported the same barriers of agencies not being on the same page, lack of services, lack of transportation, lack of funding and programming, and lack of parental involvement both for youth that had been incarcerated and youth that had not.

Responses to the question of what is needed to make their work with youthful offenders transitioning into a rural community after a correctional placement were consistent with themes throughout the rest of the survey and information found in existing research. Respondents reported a need for consistency, community activities for youth, positive relationships with

youth, and aftercare programs. Community activities promote positive peer relationships and provide a link to prosocial hobbies, peers, and adults, all things that are supported in existing research as protective factors for at-risk youth and youthful offenders.

Implications for Social Work Practice

The importance of communication and the struggle when service providers are not on the same page has significant implications for social work practice. Good care coordination should be a routine part of service provision. In addition, better agency collaboration for referral and division of necessary tasks in relation to mutual clients could alleviate some workload, as there often isn't need for numerous providers to be duplicating work. Improving professional relationships between service providers could lead to increased communication.

Given the shortage of service providers and general lack of resources, in order to provide the best services possible with what is available, social work agencies should be providing and/or encouraging attendance at trainings specific to the populations that the employees are working with. Continuing education should be viewed as an integral part of providing good service, not just a requirement to fulfill to maintain licensure. With set reimbursement rates and pay often controlled either directly or indirectly at the county, state, or federal level, providing training opportunities and conference stipends and encouraging growth in employees is one way to attract employees. Employers—especially in rural areas—must look at alternative ways to make their agency attractive to potential employees.

Implications for Policy

In order to allow time for thorough care coordination, policy changes that encourage care coordination should be enacted. Looking at policies that cap caseloads and allow for care

coordination to be billed where applicable and appropriate would be a good start. Some of these policies are in place but should be reevaluated in light of the staffing shortages in mental health and social work.

Policy change to address insurance reimbursement rates for billable services along with low wages in the field of social work is one way to address the shortage of mental health and social work staff. Some policies are already in place in some areas to focus on attracting staff to rural areas (such as student loan forgiveness for those working in underserved areas), but these policies could potentially be expanded to improve in this area. Legislation addressing tuition costs could be addressed as well, in order to encourage more students to get graduate degrees in lower paying fields such as social work.

Implications for Research

In order to best support improved communication across agencies, research should be done to determine what works well and what specific challenges are in relation to care coordination and communication regarding youthful offenders. Qualitative research would be helpful to determine professionals' experiences with communication and care coordination, along with quantitative research to find correlations between factors related to good communication and care coordination and poor communication and care coordination. If correlations are determined, it could help influence policy changes.

In order to address the shortage of social workers and mental health professionals, research should be done to determine what attracts people to that work, what deters people from pursuing it, and what attracts and deters people from working in rural areas. This research can be used to inform policy change to make social work and mental health employment more attractive, and to help bring more people to rural areas. Research on alternate ways of providing

some of these services or ways to bridge some of the gaps (with volunteers, for example) should also be conducted.

Further research on reintegration of youthful offenders should also be conducted to better understand the experiences of professionals, youthful offenders, and their families in order to influence practice and policy to decrease the recidivism rate. Quantitative research can be conducted to examine existing programs and interventions to determine what is most effective in order to appropriately concentrate limited resources.

Strengths and Limitations

One strength of this study is the anonymity of participants. As the information was collected online via Qualtrics, study participants were able to remain anonymous to the extent the technology allows. Because the only contact with agencies was with the supervisors, any names of other staff that the survey was distributed to or that may have participated were not available to the researcher.

As there is very little research on service provision in rural areas related to youthful offenders, this study sought to add more knowledge in this area. Due to the limited number of respondents, not much knowledge was gained, however, this study does highlight potential future research that needs to be done in this area.

In addition, this study received input from a variety of types of service providers (a therapist, a children's mental health case manager, a truancy officer, and a probation officer), which provided a varied overview of experiences. Though the data is limited, similar codes and themes emerged across professions, highlighting similar areas of need in working with this population, regardless of professional role. The respondents also were varied in age and years of

experience in the field, with responses ranging from four years experience to 20+ years of experience.

There are also several limitations to this study. The most profound limitation is the small number of participants. An ideal target of 45 participants was identified prior to beginning data collection, and only four participants responded to the survey. The very small sample size provided less data and makes the data that was received less generalizable.

Because the study was completed as an electronic qualitative survey rather than an in-person interview, the researcher lost the ability to ask follow up questions or provide clarification on the existing questions. This led to a number of very short or unclear answers and no way to clarify or to gather more information. There were also some instances in which it appeared the respondent may not have understood the question properly, as the answer did not seem related to the question. The amount and quality of data was limited because of this.

Because the sample is a convenience sample and not a random sample, the data is biased based on those willing to participate and agencies that are easy to find and contact. This makes the information received more difficult to generalize. Having supervisors distribute the link to the survey to their employees, in order to protect anonymity, may have created inadvertent coercion as well.

Conclusion

This study examined professionals' experiences in working with youthful offenders reintegrating into the community in rural areas. Common themes found in the responses were communication across agencies, rapport and relationships, benefits of rural locations, challenges, similar barriers for youthful offenders who remain in the community, and what is needed/helpful.

Respondents identified positive communication between providers, consistency, aftercare programs, and positive relationships with youth as beneficial to their work. All four participants acknowledged a lack of resources in their areas, and reported this as a major challenge.

Unexpectedly, three of four respondents also identified benefits to their rural locations, such as community involvement and good rapport between providers.

This study resulted in several implications for practice, policy, and research. The importance of good care coordination and communication was highlighted. The impact of service provider shortages could potentially be mitigated by training to be sure that professionals in areas of need have the knowledge and skills to work with youthful offenders. Policies to increase reimbursement rates and make positions more attractive could help increase service availability as well. Further research should be conducted to gain a better understanding of what works and does not work during the reintegration process in order to best utilize limited resources.

References

- Abrams, L.S., (2006) Listening to juvenile offenders: Can residential treatment prevent recidivism? *Child and Adolescent Social Work Journal*, 23(1), 61-85. doi: 10.1007/s10560-005-0029-2
- Abrams, L.S., Shannon, S.K.S., Sangalang, C. (2008) Transition services for incarcerated youth: A mixed methods evaluation study. *Children and Youth Services Review*, 30, 522-535. doi: [10.1016/j.chilyouth.2007.11.003](https://doi.org/10.1016/j.chilyouth.2007.11.003)
- Altschuler, D. M., & Armstrong, T. L. (1996). Aftercare not afterthought: Testing the IAP model. *Juvenile Justice*, 3(1), 15-22.
- Barrett, D. E., Katsiyannis, A., Zhang, Dalun, & Zhang, Dake. (2014). Delinquency and recidivism: A multicohort, matched-control study of the role of early adverse experiences, mental health problems, and disabilities. *Journal of Emotional and Behavioral Disorders*, 22(1), 3-15. doi: 10.1177/1063426612470514
- Blomberg, T.G., Bales, W.D., Mann, K., Piquero, A.R., & Berk, R.A. (2011). Incarceration, education and transition from delinquency. *Journal of Criminal Justice*, 39, 355-365. doi: 10.1016/j.jcrimjus.2011.04.003
- Calley, N. G. (2012). Juvenile offender recidivism: An examination of risk factors. *Journal of Child Sexual Abuse*, 21, 257-272. doi: 10.1080/10538712.2012.668266
- Christian, S. (2003). Out of lock-up: Now what?. *State Legislatures*, 29(10), 21-23.
- Hutchison, E. D. (2011). *Dimensions of human behavior: Person and environment* (4th ed.). Thousand Oaks, CA: Sage Publication.

- Huxley, P., Evans, S., Webber, M., & Gately, C. (2005). Staff shortages in the mental health workforce: the case of the disappearing approved social worker. *Health & Social Care In The Community, 13*(6), 504-513. doi:10.1111/j.1365-2524.2005.00575.x
- Jewell, J. D., Malone, M. D., Rose, P., Sturgeon, D., & Owens, S. (2015). A multi-year follow-up study examining the effectiveness of a cognitive behavioral group therapy program on the recidivism of Juveniles on Probation. *International Journal of Offender Therapy and Comparative Criminology, 59*(3), 259-272. doi: 10.1177/0306624X13509065
- Lin, V. W., Lin, J., & Xiaoming, Z. (2016). U.S. Social Worker Workforce Report Card: Forecasting Nationwide Shortages. *Social Work, 61*(1), 7-15. doi:10.1093/sw/swv047
- Mallett, C. (2014). Youthful Offending and Delinquency: The Comorbid Impact of Maltreatment, Mental Health Problems, and Learning Disabilities. *Child & Adolescent Social Work Journal, 31*(4), 369-392. doi:10.1007/s10560-013-0323-3
- Mulder, E., Brand, E., Bullens, R., & Van Marle, H. (2010). A classification of risk factors in serious juvenile offenders and the relation between patterns of risk factors and recidivism. *Criminal Behaviour and Mental Health, 20*, 23-38. doi: 10.1002/cbm.754
- Nelson, D., Coleman, D., & Corcoran, K. (2010). Emotional and Behavior Problems in Urban and Rural Adjudicated Males: Differences in Risk and Protective Factors. *Victims & Offenders, 5*(2), 120-129. doi:10.1080/15564881003640710
- Ouellette, P. M., Briscoe, R., & Tyson, C. (2004). Parent-School and Community Partnerships in Children's Mental Health: Networking Challenges, Dilemmas, and Solutions. *Journal Of Child & Family Studies, 13*(3), 295-308.
- Penner, E. K., Viljoen, J. L., Douglas, K. S., & Roesch, R. (2013). Procedural justice versus risk factors for offending: Predicting recidivism in youth. *Law and Human Behavior.*

Advance online publication. doi: 10.1037/lhb0000055

- Ryan, J. P., Williams, A. B., & Courtney, M. E. (2013). Adolescent neglect, juvenile delinquency, and the risk of recidivism. *Journal of Youth & Adolescence, (42)*, 454-465. doi: 10.1007/s10964-013-9906-8
- Ryan, J. P., Yang, H. (2005) Family contact and recidivism: A longitudinal study of adjudicated delinquents in residential care. *Social Work Research, 29(1)*, 31-40. doi: 10.1093/swr/29.1.31
- Ungar, M. (2005). Resilience Among Children in Child Welfare, Corrections, Mental Health and Educational Settings: Recommendations for Service. *Child & Youth Care Forum, 34(6)*, 445-464. doi:10.1007/s10566-005-7756-6
- United States Department of Agriculture Economic Research Services (2015, May 16): *Rural classification: What is rural?* Retrieved from: <http://www.ers.usda.gov/topics/rural-economy-population/rural-classifications/what-is-rural.aspx>
- Wilson, A. M. (2005). Trained Volunteers as Mental Health Counselors: Addressing the Enormous Shortage of Trained Counselors. *Affilia: Journal Of Women & Social Work, 20(4)*, 476-484. doi:10.1177/0886109905279803
- Wilson, H. A., & Hoge, R. D. (2013). The Effect of Youth Diversion Programs on Recidivism: A Meta-Analytic Review. *Criminal Justice & Behavior, 40(5)*, 497-518. doi:10.1177/0093854812451089
- Young, D. (2004). First Count to Ten: Innovation and Implementation in Juvenile Reintegration Programs. *Federal Probation, 68(2)*, 70-77.

Appendix A: Phone Script for Getting Supervisor/Director Contact Information

Hello. My name is Jessica Mertins, and I'm a Masters of Social Work student at the University of Saint Thomas/St. Catherine University. I'm conducting research on the challenges of working with incarcerated youth that are transitioning back to a rural community. I'm interested in responses from social workers, case managers, child protection workers, school staff, probation officers, juvenile detention center staff, therapists, other mental health practitioners, and other professionals that work with incarcerated youth.

I'm gathering information via an electronic survey that consists mostly of open-ended questions. The survey should take about 40-50 minutes to complete. I would like to contact the supervisor of (department) to request permission to distribute this survey to his or her staff. Could I please have his or her email address or phone number?

Appendix B: Email Script for Permission from Organizations

Dear _____,

My name is Jessica Mertins, and I'm a Masters of Social Work student at the University of Saint Thomas/Saint Catherine University. I'm conducting research on the challenges of working with incarcerated youth that are transitioning back to a rural community. I'm interested in responses from children's mental health case managers, child protection workers, school staff, probation officers, juvenile detention center staff, therapists, other mental health practitioners (such as CTSS skills workers), and other professionals that work with incarcerated youth. Your agency has been selected due to its location in a non-metro country. Eligible professionals should have experience providing or coordinating services (housing, education, mental health, chemical health, medication management, etc) with youth that are transitioning from a correctional placement back into the community in a rural area.

I'm gathering information via an electronic survey that consists mostly of open-ended questions. The survey should take about 40-50 minutes to complete. The survey is anonymous and confidentiality will be maintained to the degree permitted by the technology. Once the surveys are completed, I will be analyzing the data to look at the challenges faced by professionals in rural areas. The information gathered will be presented orally and visually during the University of St. Thomas/Saint Catherine University MSW Clinical Research Paper Presentation Day on May 16, 2016, then the completed research paper will be entered in a University of St. Thomas/St. Catherine University clinical research paper database.

I am requesting permission to send you a link to my survey to distribute to your staff. Your decision whether or not to participate will not affect your relationships with the researchers, University of St. Thomas, or St. Catherine University. If you have any questions about this project, please contact me at mert6433@stthomas.edu. You may also contact Doctor Pa Der Vang, my research chair and faculty supervisor, at pdvang@stkate.edu or Dr. John Schmitt (Institutional Review Board Chair) at jsschmitt@stkate.edu.

Please respond if you would like to give permission for me to send the link to my survey.

Thank you,
Jessica Mertins
UST/SCU Masters of Social Work student

Appendix C: Email Script and Survey Consent for Participants

Hello,

My name is Jessica Mertins, and I'm a Masters of Social Work student at the University of Saint Thomas/Saint Catherine University. I'm conducting research on the challenges of working with incarcerated youth that are transitioning back to a rural community. I'm also interested in contrasting experiences working in urban and rural areas for those who have both experiences. I'm interested in responses from social workers, case managers, child protection workers, school staff, probation officers, juvenile detention center staff, therapists, other mental health practitioners, and other professionals that work with incarcerated youth. Your agency has been selected due to its location in a non-metro country. Eligible professionals should have experience providing or coordinating services (housing, education, mental health, chemical health, medication management, etc) with youth that are transitioning from a correctional placement back into the community in a rural area.

You are invited to participate in this project because of your work with youth from rural areas that have been in correctional placements. This project is being conducted by Jessica Mertins, an MSW student at the University of St. Thomas/St. Catherine University. This project is supervised by Dr. Pa Der Vang, a social work faculty member. The purpose of this survey is to gather information about community professionals' experience in working with youth that have transitioned from a correctional placement back into the community. The survey includes items about your experiences, challenges, and gaps in services. It will take approximately 40-50 minutes to complete.

Your responses to this survey will be anonymous. The information will be transcribed and analyzed by the researcher. The results will be presented to students, faculty members, and community members via a visual and oral presentation at the conclusion of the study on May 16, 2016, and a written copy will be entered in the University of St Thomas/St Catherine University databases for future access. The results will be presented in a way that no one will be identifiable. Confidentiality will be maintained to the degree permitted by the technology used. Specifically, no guarantees can be made regarding the interception of data sent via the Internet by any third parties. The anonymous data will be stored in a password-protected folder on my laptop until the completion and presentation of the project.

The study has no risks and no direct benefits.

Your decision whether or not to participate will not affect your relationships with the researchers, University of St. Thomas, or St. Catherine University. If you decided to stop at any time you may do so. You may also skip any item that you do not want to answer. If you have any questions about this project, please contact Jessica Mertins at mert6433@stthomas.edu, Dr. Pa Der Vang at pdvang@stkate.edu, or Dr. John Schmitt (Institutional Review Board Chair) at jsschmitt@stkate.edu. By responding to items on this survey you are giving us your consent to allow us to use your responses for research and educational purposes.

If you would like to take the survey, please click on the link below. By clicking on the link you are giving consent to participate in this study.

Thank you,
Jessica Mertins
UST/SCU Masters of Social Work student

Appendix D: Survey Questions

1. Do you work or have you ever worked with incarcerated youth (aged 11-18) that are re-entering the community in a rural area?
 - a. Yes
 - b. No; If not, please discontinue the survey. Thank you for your time.

2. What type of agency do you work for?
 - a. School
 - b. Child Protection
 - c. Mental Health Case Management
 - d. Community Corrections
 - e. Detention Facility
 - f. Community Mental Health
 - g. Other, please describe:

3. What is your position at your agency?

4. In your work with incarcerated youth re-entering the community, what other types of agencies or professionals do you work with? Please check all that apply:
 - a. Schools
 - b. Child Protection
 - c. Mental Health Case Management
 - d. Community Corrections
 - e. Detention Facility
 - f. Community Mental Health
 - g. Other, please describe:

5. In coordinating with the agencies/professionals selected in question 4 (schools, child protection, mental health case management, community corrections, detention facility, community mental health, other), what has worked well or been the most helpful?

6. In coordinating with the agencies/professionals selected in question 4 (schools, child protection, mental health case management, community corrections, detention facility, community mental health, other), what has been challenging?

7. Generally, what kinds of services or support do you recommend or try to set up for your clients that are transitioning out of a correctional placement?

8. Do you ever run into challenges in finding and setting up services and support for these clients?
 - a. Yes
 - b. No; if not, please skip to question 11.

9. If you answered “yes” to number 8, please describe the challenges you’ve faced in finding and setting up services for incarcerated youth re-entering the community.

10. Of the challenges mentioned in number 9, which has been the *most* challenging?
11. Do you think that there are challenges associated with working with clients transitioning from a correctional setting due specifically to the rural location of your agency?
 - a. Yes
 - b. No; if not, please skip to question 13
12. If you answered “yes” to question 11, what do you think those challenges are?
13. Do you think that there are benefits associated with working with clients transitioning from a correctional setting due specifically to the rural location of your agency?
 - a. Yes
 - b. No; if not, please skip to question 15
14. If you answered “yes” to question 13, what do you think those benefits are?
15. If you also work with youth that are not incarcerated, what is different?
16. What would/does make your experiences working with youth transitioning out of correctional placement effective?

I would also like to consider the differences between urban and rural settings. If you have also worked in an urban setting, please complete questions 17-20. If not, please skip to question 21.
17. When working in an urban setting, were there challenges that were different than the challenges faced in rural settings?
 - a. Yes
 - b. No; if not, please skip to question 19
18. If you answered “yes” to question 17, please describe the challenges:
19. When working in an urban setting, were there benefits that were different than the benefits to working in rural settings?
 - a. Yes
 - b. No; if not, please skip to question 21
20. If you answered “yes” to question 19, please describe the benefits:
21. Age:
 - a. 18-24
 - b. 25-30
 - c. 31-35
 - d. 36-40
 - e. 41-45

- f. 46-50
- g. 51-55
- h. 56-60
- i. older than 60
- j. Prefer not to answer

22. Years in the social services field:

23. Years working with incarcerated youth:

24. Level of Education:

- a. High school diploma or GED
- b. Associates Degree
- c. Bachelors Degree
- d. Masters Degree
- e. Doctorate Degree
- f. Prefer not to Say