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Research-Practitioner Partnerships

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Executive Director/ CEO's Message

This edition on partnerships is great. In the field of community corrections, collaborations are essential. I really enjoyed reading the articles and I've taken a stab at summarizing them, mainly for my future reference.

First, Dr. Cassandra Atkin-Plunk emphasizes that those in the criminal justice field and academia who want to collaborate on research projects must take the correct steps in order to overcome barriers and build an effective and sustainable partnership. She presents useful strategies that include "engaging in action research" and ensuring that research outcomes are presented effectively to stakeholders and other audiences. Importantly, this article also brings up the importance of translating research findings into practice. This is edition on partnerships is great. In the field community corrections, collaborations are essential. I really enjoyed reading the articles and I've taken a stab at summarizing them, mainly for my future reference.

The need to develop effective researcher-practitioner partnerships is also discussed by Dr. Robert Cramer, Dr. Lewis Peiper, and Andréa R. Kaniuka. Due to concern about the issue of self-directed violence (suicide and other self-injury) in the North Carolina Division of Prisons, a work group from the Division of Prisons collaborated with suicide prevention experts from the University of North Carolina at Charlotte. This article explains the importance of finding a partner with the desired expertise, identifying shared values, and ensuring "buy-in" on the part of those working in the prison by including their input in project planning. Importantly, the authors emphasize that translating science into practice does not happen overnight.

That point about allowing enough time to see results is at the heart of the article by Dr. Alexandra Walker and Johanna Leal. They explain how failure to understand this need can cause legislatively mandated "reforms" to criminal justice programs to go off the rails. Many promising new policies fall short due to faulty implementation. Indeed, implementation science has shown time and again that simply having the desire and a rudimentary strategy is not enough. Effective implementation also requires personnel, training, research, persistence and—crucially important—adequate funding and time. It is counterproductive to abandon initiatives that are still in the baby-step stage in order to plow ahead with something new due to a premature and possibly erroneous conclusion that previous efforts didn't work. This all-toocommon pattern has a deleterious effect on organizational morale, stakeholder engagement, and ultimate outcomes.

Build tracks and stay on them!

Finally, we present two articles that discuss quite different needs in the criminal justice field-providing substance abuse treatment and increasing family contact for those who are incarcerated. Both include an overview of the issue and discuss promising



VERONICA CUNNINGHAM, M.S. EXECUTIVE DIRECTOR/CEO

solutions. At the same time, they both point to the need for additional research.

Dr. Dana Hubbard addresses the important issue of obtaining effective community services for probationers and parolees who need to achieve and maintain abstinence. In particular, he discusses the nature of AA programs and how effective they can be. He emphasizes that research on such programs has shown positive outcomes and that AA programs often include many of the important components for promoting behavioral and cognitive change that are described in "what works" literature. The article concludes that AA deserves a second look by both community supervision professionals and researchers rather than being prematurely discounted by those who do not necessarily understand what is happening in meetings.

Beatriz Wronski and Dr. Lori Lovins present the results of a study examining whether use of video visits increases the quantity and quality of family contact for women confined in a correctional facility. They make the case that opportunities for interaction with family members are often much too limited for those who are incarcerated, especially for women. They describe the benefits augmented video visitations had on study participants, such as sustaining them and helping to prepare for successful reentry, and they also present the necessary implementation steps—a roadmap, as it were—to aid any agencies opting to start a similar program. The article notes that more research in this area is needed, especially research that includes the capacity to assess long-term post-release impact.

As always, I am impressed by the quality of these articles and appreciative of the work of all these researchers for the value added to the field.

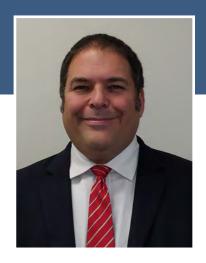
board president's message

appy New Year! The new year always brings with it a time to reflect over the past year's events while looking forward to the opportunities a new year brings us all. The past year has been tough for many of us. We have lived through the lingering issues with a national pandemic. We felt the effects of the great resignation, with many departments having a difficult time filling positions that were frozen during COVID. We exposed ourselves to the brutal honesty that the system we work in has systemic inequities and disparate outcomes for brown and black folks. We started taking a hard look at some of the core underpinnings of the way our system operates including drug testing, conditions of supervision, and fees/fines. All while continuing to help people on supervision find pathways forward.

This work is difficult. I am reminded every day that systems were built for status quo—ensuring that the equilibrium is maintained regardless of who comes in or out of the system. But as the people who make up the system, we have the power to change the system. It just takes momentum. It takes perseverance. It takes grit.

Grit. Coined by Angela Duckworth, grit is the human resolve to continue working hard at something, even in the face of adversity. As Dr. Duckworth discusses grit, it becomes obvious that our society is often focused more on "natural talent" than we are on hard work and development. To understand this in corrections, we don't have to look any further than how the conditions of supervision are designed in many jurisdictions. We often take people who are identified as moderate to high risk and give them a list of conditions that they must follow right away or face the risk of revocation. We put people on supervision with serious substance use issues and then immediately test them for drugs and issue a sanction often before we have even built rapport. We put people who have extensive barriers to obtaining employment

and tell them they need to have a job right away and if not, they once again are in violation of their conditions of supervision. If we take the time to reflect on our work, we will see that much of our system is designed for natural talent, or what we sometimes call self-



BRIAN LOVINS, Ph.D
BOARD PRESIDENT

correction, then it is on hard work and determination.

Even as employees, we are often expected to know what we are doing before we are trained. We are hired and given a caseload within 30 days. We are promoted and given a team of staff to support and supervise without any training. We are expected to know the answers and not make mistakes. Many of us coming to work every day, hoping that today is not the day that someone on our caseload does something that hits the front page of the paper.

As we reflect on the previous year and plan for the next, I challenge us to remember that life takes grit, hard work, and determination. Very few of us just show up and everything falls in place. This includes those that work in the system as well as those that move through the system. These days I find myself giving grace more than ever before. Recognizing that people are trying to do their best and that sometimes the conditions in which we make decisions impact the decisions we make, more than bad intentions. So, as we move forward this year, let's try to remember to give ourselves and others grace. Let's focus a little less on getting things perfect and a little more on learning, growing, and developing great skills. Let's focus a little more on grit.

Bmd how

editor's notes

Information produced from localized evaluations in community corrections agencies is central to employing evidence-based practices. Many corrections agencies have the capacity to develop robust research evidence for their program implementation, but many others require the support of external research partners. This researcher-practitioner partnership becomes inextricable link to understanding successful implementation of practices and identifying the gaps in adoption, adaptation, and fidelity.

In this issue of Perspectives, curated by committee member Dr. Eileen Ahlin (Penn State Harrisburg), we highlight the important work of these researcher-practitioner partners in community corrections settings. Across these articles readers will get a behind the scenes view of how these relationships form and work to create a better understanding of research in practice.

First, Dr. Cassandra Atkin-Plunk provides a glimpse into the development of relationships with research partners from an academic's perspectives, and the vital responsibility of sustaining the relationship, with special attention to conducting action research and translational outputs for practitioner and public audiences. Next, Drs. Robert Cramer, Lewis Peiper, and Andréa Kaniuka, offer direct insight into the results of a researcher-practitioner partnership attending to issues of properly training staff to address self-directed violence inside prison. In particular, the workgroup formed by the North Carolina DOC partnered with the authors to develop a tool for staff that combined the academic expertise of the researchers in the area of self-directed violence and the expertise of corrections staff about the realities of the environment and population. Together, they produced and tested the use of the rating tool, training, and other efforts to assist staff in suicide prevention.

Drs. Beatriz Wronsk and Lori Brusman Lovins examine the result of a collaborative project related to video visitation for incarcerated women. Their article reveals the process by which they engaged with a corrections organization to design, resource, implement, and evaluate electronic alternatives to visitation. This became an essential project during the COVID-19 pandemic, and the authors give insight to lessons learned from this experience.



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Next, Dr. Dana Hubbard reviews the corrections literature around Alcoholics Anonymous to offer a counter-perspective to critiques that AA is not evidence-based. Specifically, Dr. Hubbard offers that a robust body of qualitative research supporting the impacts of AA on maintaining sobriety and challenges readers to consider the role of lived experience in our understanding of what constitutes evidence.

Finally, Alexandra Walker and Johanna Leal discuss how effective implementation is the missing link in actualizing meaningful and important change in pursuit of social justice. In their article, the authors explain that it's not just what practices we do, but how we do them, that matters in the effort to be evidence-based organizations. To bolster this assertion, Walker and Leal present analysis of nearly 200 legislative bills, identifying that while legislation aims to account for aspects of implementation, it often has unrealistic expectation of the timing and process by which such provisions should be accomplished. The authors highlight tools to attend to this, but most important is using an implementation science lens.

This issue of Perspectives offers an array of real-life experiences and insights into the work of bringing correctional interventions to life—especially in how practitioners and researchers can combine their respective expertise into meaningful change for the systems and populations we serve.

Ja Yunvans

instructions to authors

Perspectives disseminates information to the American Probation and Parole Association's members on relevant policy and program issues and provides updates on activities of the Association. The membership represents adult and juvenile probation, parole, and community corrections agencies throughout the United States and abroad. Articles submitted for publication are screened by an editorial committee and, on occasion, selected reviewers, to determine acceptability based on relevance to the field of criminal justice, clarity of presentation, or research methodology. *Perspectives* does not reflect unsupported personal opinions.

Articles must be emailed to <u>perspectives@csg.org</u> in accordance with the following deadlines:

- Unless previously discussed with the editors, submissions should not exceed 12 typed pages, numbered consecutively, and double-spaced. All charts, graphs, tables, and photographs must be of reproduction quality. Optional titles may be submitted and selected after review with the editors.
- All submissions must be in English and in American Psychological Association (APA) Style.
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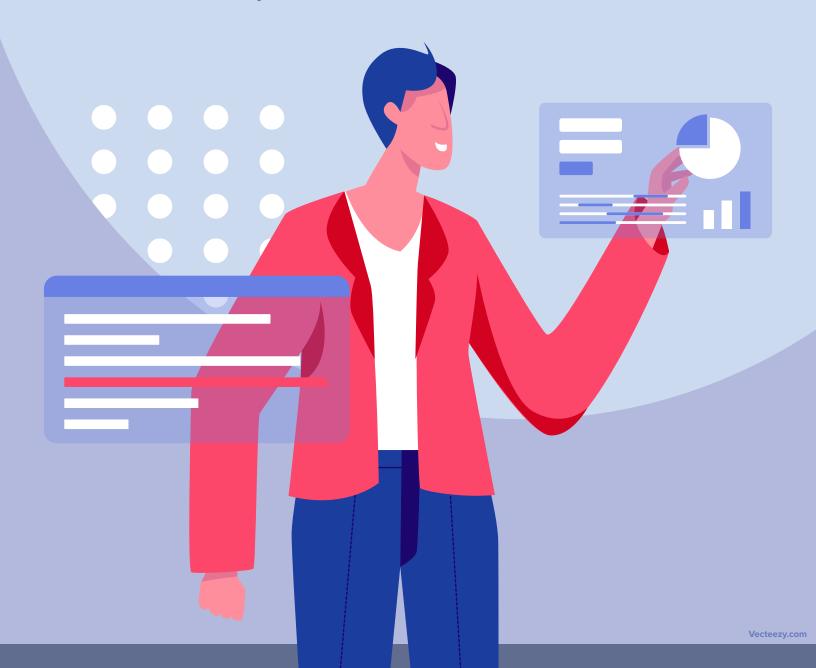




FROM OUTSIDER TO INSIDER:

An academic's experience in developing successful and sustainable researcher-practitioner partnerships

By Cassandra A. Atkin-Plunk, Ph.D.



FROM OUTSIDER TO THE INSIDER: AN ACADEMIC'S EXPERIENCE IN DEVELOPING SUCCESSFUL AND SUSTAINABLE RESEARCHER-PRACTITIONER PARTNERSHIPS

Abstract

Collaborations between researchers and practitioners are an essential means of improving policy and practice in the criminal justice system. Although there are barriers that both researchers and practitioners encounter when working together, the benefits of collaborative partnerships outweigh the costs—particularly when the partnerships lead to positive system change and improve our communities and the lives of justiceimpacted individuals. For those interested in developing collaborative and mutually beneficial researcherpractitioner partnerships, it can appear to be a daunting task. In this article, I discuss strategies for identifying collaborators and building partnerships for those new to the world of collaborating with the other side. I also provide strategies for sustaining successful researcherpractitioner partnerships, which include engaging in action research, writing for stakeholders and different audiences, and helping organizations translate research findings into practice. These strategies additionally served as talking points for practitioners engaged in collaborations with academics as they collectively develop evaluation plans.

Introduction

Collaborations between academic researchers and boots-on-the-ground practitioners are important. and at times necessary, means of improving policy and practice in criminal justice. Funding agencies, including the Bureau of Justice Assistance and the National Institute of Justice, often require independent evaluations of newly implemented programs and interventions, and such requirements, out of necessity result in researchers and practitioners working together (Lane et al., 2004). Many universities also encourage their faculty to partner with the community at large. For example, Florida Atlantic University (the university at which I am employed) "embodies a culture of strategic and collaborative community engagement [emphasis added] that results in mutual benefit to the institution and the diverse internal and external communities [emphasis added] that it serves" (Florida Atlantic University, 2022). Partnerships can also emerge out of a mutual desire to address a social issue (Rudes et al., 2014)

Whether seeking to collaborate due to funding requirements, to benefit your organization, or for personal interests, there are numerous benefits to researchers and practitioners engaging in collaborative partnerships. These include, but are not limited to. validating practices, identifying promising programs, improving crime prevention strategies, examining intervention cost-effectiveness, and providing legitimacy to both institutions (Backes, 2009). Additionally, collaborations remove researchers from the Ivory Tower, expose them to the operations and inner workings of agencies and organizations, and increase the practicality and utility of their research (Backes, 2009; Drawbridge et al., 2018; Rudes et al., 2014). Practitioners, on the other hand, gain an increased appreciation for research, can incorporate evidence-based practices into their operations, and can better serve their community and clients (Drawbridge et al., 2018).

Despite the benefits, researchers and practitioners come to the table with different—yet complementary—perspectives, skills, priorities, and goals (Bales et al., 2014; Lane et al., 2004), which results in complex relationships. There may also be longstanding distrust between universities and governmental agencies and their surrounding communities (Lane et al., 2004; Rodin, 2007; Rudes et al., 2014), further complicating collaborations. Luckily, research suggests, and my personal experience also demonstrates, that it is possible to overcome these barriers and build and sustain successful and mutually beneficial researcher-practitioner partnerships that lead to positive change for the system and justice-impacted individuals.

In this article, I will begin by discussing strategies for identifying collaborators and building partnerships for those new to the world of collaborating with the other side. I will then provide some strategies for sustaining successful researcher-practitioner partnerships that I have learned along the way while also drawing on the experiences of others who have published in this realm. While I am an academic writing this from the perspective of the researcher who is passionate about evaluative and community-based action research, particularly in the area of re-entry, I hope my experiences presented herein are helpful to both researchers and practitioners alike.

Building Relationships

Previous research (Sullivan et al., 2013) and experiences reported by researchers (Bales et al., 2014; Rudes et al., 2014) both suggest that successful collaborations are built upon preexisting relationships. This has also proven true for me, but only after working tirelessly to establish a network of connections over the last eight years. Only some, though, have the luxury of preexisting relationships. When I arrived in South Florida—1,200 miles away from the community in which I had lived for a decade—my only connections were with my new colleagues, whom I barely knew, which meant I had to go about building relationships from scratch. For those who do not have preexisting relationships on which to build, various methods can be utilized to find collaborators, including, but not limited to, talking with colleagues who have experience partnering with practitioners (or researchers), seeking out gatekeepers who can grant access to people and organizations, and joining local task forces or coalitions (Rudes et al., 2014; Sullivan et al., 2013).1

I used a mix of the above methods to establish and grow my network. Indeed, one of my colleagues proved fruitful in opening doors at the outset. He was nearing retirement and invited me to assist with evaluating a reentry initiative that a corrections agency was implementing in a nearby city. Despite the minimal funding for the evaluation, I agreed to partner on the project, as I saw the future potential of working on this project—and funding is not everything early on, as there are other tangible benefits to formulating partnerships. When he retired, I became the principal investigator for this project, my first real foray into the messy but rewarding world of researcher-practitioner partnerships.

Simultaneously evaluating the above reentry initiative, I began attending public meetings of the Palm Beach County (PBC) Criminal Justice Commission and Reentry Task Force to network with local gatekeepers. I initially observed, listened, and worked to understand the county's local politics and reentry landscape. Despite being an emerging expert in evidence-based correctional and reentry practices, I was not an expert in the realities and real-world operations of reentry in PBC: I had much to learn. Given this fact, and being aware of practitioners' mentality toward researchers—stuck in the Ivory Tower, too theoretical, intimidating, and pretentious (Rudes et al., 2014; Sullivan et al., 2013)—I deliberately listened and learned without interjecting. I then introduced myself

to the players and developed rapport with those I saw as gatekeepers. When asked, I offered information and evidence based on research in a transparent manner and with an understanding of the practicalities and constraints of providing reentry services in PBC.

Once I established myself as a "normal human" who was "not like other academics" (the number of times I have heard statements like these continues to amaze me and further speaks to the off-putting reputation of academics) and showed that I was invested in improving reentry practices in PBC, I was invited to become an advisory member to the PBC Reentry Task Force. This ultimately led to being the independent evaluator for a Bureau of Justice Assistance Innovations in Reentry Initiative grant awarded by the PBC Department of Public Safety. As other scholars have also found (e.g., Rudes et al., 2014), my involvement over the years with the PBC Reentry Task Force as well as my collaboration with and record of conducting vital, translatable research for the PBC Department of Public Safety, laid the foundation to partner with other local criminal justice agencies and non-profit organizations.

Strategies for Sustaining Successful Researcher-Practitioner Partnerships

Research is complicated. Research that brings together academics and practitioners adds a dynamic that makes the process even more complex. There are practices, however, that both sides can embrace to reduce stress and anxiety and increase the likelihood of productive and fulfilling partnerships. Rudes and colleagues (2014), for example, suggest that creating formal agreements, engaging in collaborative goal setting, and being receptive to continual feedback, among other strategies, are essential components to sustaining successful researcher-practitioner partnerships. Lane and colleagues (2004) argue that the critical factors for successful partnerships lie in less tangible qualities, including compatible personalities, mutual respect, continued communication, willingness to compromise, and attending to the relationship. Because others have already highlighted and commented on these strategies (see also Drawbridge et al., 2018), I will not do the same. Instead, in this section, I will provide separate strategies that have worked in my collaborative community-based partnerships. These include engaging in action research, writing for stakeholders and other audiences, and helping organizations translate research findings into practice.

Engage in Action Research

According to Stringer and Aragón (2021), action research is "an approach to investigation that uses continuing cycles of observation, reflection, and action to reveal effective solutions to issues and problems experienced by people in their everyday lives or in times of crisis" (p. 4). In other words, action research is a methodology wherein all stakeholders, including the research and non-research counterparts (e.g., agencies, practitioners, subjects, etc.), take an active role and work collectively throughout the research process. This includes identifying the problem and theorizing why it is occurring, planning and implementing a course of action (i.e., intervention), evaluating the effectiveness, and modifying the intervention based on the evaluation findings. In the case of action research, researchers do not come into an organization, identify problems, obtain administrative data (or collect data for their purposes), and write academic manuscript. Instead, action researchers investigate real-life social issues, accept insights and inquiries from practitioners, involve those impacted by the issue, provide continual and iterative feedback, and formulate effective solutions (Stringer & Aragón, 2021). Successful researcherpractitioner partnerships will only occur if there is buyin to the research process and those closest to the problem are included when looking for a solution to the problem. Indeed, as noted by Lune and Berg (2017), "all individuals involved in the study, researchers and subjects alike, [should be] deliberate and contributing actors in the research enterprise" (p. 137). Ultimately, all players should have a stake in the game.

The action research process requires researchers and practitioners to connect early and communicate often. Lane and colleagues (2004) further highlight the importance of researchers and practitioners collaborating early in the research process, especially if submitting applications for grant funds to implement an intervention and conduct an independent evaluation. Regardless of who is applying for the grant—the practitioner or the researcher—both sides should be involved from the beginning and work collaboratively to develop the program and research designs. This can help reduce the differing views that are otherwise likely to occur regarding program implementation, data collection, outcome measurement, and dissemination of findings (Lane et al., 2004). Essentially, make sure everyone is on the same page from the beginning.

In addition to connecting early, the importance of continual communication between all stakeholders cannot be overstated. Research partners, for example, should be included in all planning and implementation, training and technical assistance (TTA), and policy team meetings. On the other hand, practitioners should be included and consulted throughout the entire research process, including study design, sample identification, data collection, the definition of outcomes, and reviewing and providing feedback on reports.

Write for Your Audience

One aspect of a successful researcher-practitioner partnership that tends to be glossed over is writing for your audience. According to Sullivan et al. (2013), "practitioners need products that are translatable and written in lay language" (p. 17). Like many other academics, while in graduate school, I was taught to write scholarly manuscripts for publication in peerreviewed academic journals. Much less attention was paid to public policy training and teaching graduate students to write for practitioners and project stakeholders. As such, I taught myself how to write evaluation reports for and disseminate research findings to my community-based, non-academic partners. To do this, I asked my grant TTA partners to provide examples of well-written and organized evaluation reports and, in addition read many publicly available evaluation reports. I also looked at a local agency and organizational annual reports. Although not research-oriented, these agency reports allowed me to see how community-based organizations and agencies write for their organization. Moreover, I simply asked my practitioner counterparts what was most beneficial to them and what they wanted to see in a report.

Through trial and error and listening to my partners, I have learned what they find helpful in reports and what is not. For example, while it is necessary to report the research methodology, analytic procedures, and statistical findings in reports, as academics, we must remember that practitioners likely do not know (and do not necessarily care) what hierarchical linear modeling, logistic regression, or area under the curve entails. Therefore, when reporting techniques and findings to non-academic partners, consider placing the scientific details in footnotes or an appendix so they do not detract the reader from the main findings. If researchers are not asking these questions about what is needed in a report,

practitioners should take the initiative to communicate to their research partners what report information is essential to their agency and stakeholders.

Additionally, practitioners (and even stuffy academics) appreciate and have an easier time understanding data and information if presented using appropriate graphical representation (i.e., data visualization), such as charts, graphs, and maps. There are many useful (and free!) tools that I utilize when writing evaluation reports, including Canva, Venngage, and Piktochart. Furthermore, short executive summaries are essential to any report. It is unlikely that more than a handful of people will thoroughly read a 100-page final report. Therefore, all reports should include an executive summary that clearly and concisely summarizes the report's key points. This is what practitioners will read.²

Translate Findings into Practice

Another often overlooked aspect of successful researcher-practitioner partnerships is the ability and willingness of researchers to work with practitioners to translate research findings into actual policy and practice. In my experience, successful partnerships are long-term and continue beyond producing a final report. I fully expect my research to lead to more than just a publication in an academic journal, and I work with practitioners to implement change based on the findings of my evaluations. While this entails many actions on my part, it also requires organizational leadership and front-line staff to be supportive of making data-driven decisions and changes to existing practice (Pesta et al., 2019). If agencies are resistant to change and unwilling to implement recommendations that stem from the research, collaborations are unlikely to be perceived as successful (Sullivan et al., 2013).

When there is buy-in from those in the position to implement change, researchers must do their part to facilitate the translation of research into practice. This requires communicating and disseminating findings in multiple ways, particularly in ways that are helpful to practitioners. This can include but is not limited to, presentations to stakeholders and at practitioner-oriented conferences, as well as the creation of fact sheets, practice/policy briefs, and manuals/toolkits (Sullivan et al., 2013).

Another factor, according to Pesta and colleagues (2019), is that "knowledge translation is facilitated

when research is detailed and locally applicable" (p. 500). As I mentioned above, academics are primarily taught to write for academic audiences. Much of the research is inaccessible to practitioners and only found through pay-walled, jargon-laden journal articles filled with cumbersome and challenging to interpret the writing. Therefore, when translating research findings into practice, the research partner must define a course of action for practitioners to take—precise, specific, realistic, directly applicable to practice, and considers the local context (Pesta et al., 2019). This also means that research findings may not fully translate to other contexts without consideration of local norms and practices. Researchers should also consult with their practitioner counterparts when developing recommendations, as this will help ensure that recommendations are practical and align with the inner workings of the agency and intervention. Indeed, multiple practitioners I work with have informed me that they appreciate clear and concise reports that provide tangible actions to take moving forward.

Conclusion

Researcher-practitioner partnerships are a complex yet rewarding way to enact research- and data-driven system change. However, developing such partnerships can seem daunting when someone is new to the world of collaboration or to a community. There are multiple methods, though, that researchers and practitioners can utilize to identify collaborators—all of which worked for me when I established my network in South Florida. This included talking with colleagues who had experience partnering with practitioners, seeking out gatekeepers who could grant access to organizations, and joining the local Palm Beach County Reentry Task Force, and attending Criminal Justice Commission meetings.

Once collaborators are identified, both sides must work together to ensure that the partnership is mutually beneficial and satisfying to all parties. Previous research has outlined personal characteristics practitioners and researchers find essential to successful collaborations. These include mutual respect, trust, strong interpersonal and communication skills, willingness and ability to adapt, and being open to constructive feedback, among others (Lane et al., 2004; Pesta et al., 2019; Sullivan et al., 2013). Beyond personal characteristics, research also suggests that written agreements, buyin at all levels (from leadership to front-line staff), and

collaborative goal-setting and planning are important to successful collaborations (Rudes et al., 2014). This article sought to add to this dialogue by highlighting how engaging in action research, writing for your target audience, and translating research findings into practice can also facilitate successful researcher-practitioner partnerships. While this article is not exhaustive in providing ways in which partnerships can be built and sustained, I hope that both researchers and practitioners can take some of the insights provided and apply it to their colthemborative efforts.

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ADDRESSING SELF-DIRECTED VIOLENCE IN PRISONS

Lessons from a corrections-academic partnership in North Carolina

By Robert J. Cramer, PhD Lewis J. Peiper, PhD Andréa R. Kaniuka, MA



ADDRESSING SELF-DIRECTED VIOLENCE IN PRISONS: LESSONS FROM A CORRECTIONS-ACADEMIC PARTNERSHIP IN NORTH CAROLINA

Self-Directed Violence in the Correctional Setting

Self-directed violence (SDV), including suicide, suicidal ideation, suicide attempt, and non-suicidal self-injury (Crosby et al., 2011), is a significant public health concern in correctional settings. Suicide is the leading cause of death within jails in the United States and the third leading cause of death in state prisons (Carson, 2021a, 2021b). Further, engagement in non-suicidal self-injury, or selfharm without intent to die, has a weekly prevalence of 85% in prison systems (Appelbaum et al., 2011). Within North Carolina state prisons, rates of suicide over the past 10 years have averaged 16.6 per 100,000 and are essentially identical to the state average for adults (17 per 100,000; 2011-2020) in the community for that same period (Centers for Disease Control and Prevention, 2022). Per the North Carolina Department of Public Safety (NC DPS), NC state prisons experienced an average of 3,212 SDVrelated events annually from 2017 to 2019, comprising self-injurious and non-injurious overtures of self-harm (NC DPS, 2020). This average SDV event total converts to a crude population rate for the prison system equal to 8,786 per 100,000 incarcerated persons from 2017 to 2019 (36,560 average daily prison population). As these data demonstrate, suicide and the entire spectrum of SDV present a significant challenge to prison systems.

Although the North Carolina prison system had a 10-year average suicide rate similar to the community rate for adults, that trend began to shift in 2016. The state prison suicide rates from 2016 through 2021 increased to an average rate of 22.4 per 100,000 incarcerated persons. This upward trend in prison suicide rates was not limited to North Carolina, as rates of suicide in state prisons rose across the country. According to data from the U.S. Department of Justice, state prisons had a national suicide rate average of 18 per 100,000 in 2015, which rose to 27 per 100,000 incarcerated persons in 2019 (Carson, 2021a). To address this trend, the North Carolina Department of Public Safety (NC DPS) and Division of Prisons Behavioral Health Services formed the Suicide Prevention and Self-Directed Violence Workgroup in 2018 (NC DPS, 2020). This team consisted of nine NC DOP behavioral health clinicians (including the director, LJP) across different state prison facilities.

The workgroup identified priority project areas that included screenings and suicide risk assessment practices, suicide and suicide attempt data collection and dissemination, and training of behavioral health staff. As the workgroup studied and reviewed internal SDV-related data trends, they noticed the issue's complexity. For instance, of the SDV-related events, only 39% involved carrying out a self-harm action, with the remaining involving some type of communication of a threat, plan, or desire to self-harm. Furthermore, only 13% of the SDV events involved a suicidal action or attempt (NC DPS, 2020). To better understand the complexity of this data and the impact it might have on training, the workgroup consulted with Dr. Robert Cramer of the University of North Carolina at Charlotte (UNC Charlotte), given his expertise in core competency training for suicide prevention. This consultation led to forming a communityacademic partnership between the North Carolina Division of Prisons (NC DOP) and UNC Charlotte.

Addressing Correctional SDV Through a Corrections-Academic Partnership

Community-academic partnerships entail jointly developed teams focused on deriving projects and solutions to help the community (Drahota et al., 2016). Defining features of such vital partnerships include, but are not limited to, (a) fostering an equitable partnership at all research stages, (b) demonstrating mutual understanding and respect (e.g., respect for cultural needs and values), (c) focusing equally on knowledge generation and practice-focused change, (d) creating co-owned dissemination, and (e) creating a sustainable partnership (Drahota et al., 2016; Wright et al., 2011). Our community-academic partnership is not the first documented in the corrections or healthcare literature. For example, Boghossian and team members (2012) outlined a corrections-academic partnership in Oregon. We drew on the principles they espoused. For instance, they outlined three necessary elements for a successful corrections-academic partnership: (a) listening, (b) sustainability, and (c) dissemination. As we discuss in the following sections, both NC DOP and UNC Charlotte conversed in a meaningful two-way dialogue to identify mutual needs regarding improving SDV prevention and practice in correctional settings while also gathering pertinent information that would have an impact on future endeavors (e.g., long-term goal of a SDV prevention

training program). Further, we assembled teams and agreements wide enough to account for sustainability by adding new team members and identifying a strategy for the sustainable use of new tools or training in the future. Finally, we jointly devised dissemination activities to allow for scientific, laypeople, and corrections stakeholder engagement, including this article.

Overview of Partners

It will be helpful to at the outset to provide an overview of the two partners and the needs and goals they brought to this collaborative endeavor.

North Carolina Division of Prisons (NC DOP)

NC DOP is a division of the Department of Public Safety and consists of 55 state prisons across North Carolina. The prison system had an average daily population of just over 36,000 for 2017 through 2019; however, the population dropped during the pandemic related to additional release practices and is currently just over 30,000. North Carolina state prisons, like other prison and jail systems across the country, experience a unique spectrum of SDV, including various instrumental motivations in many instances. For this reason, the practical assessment, intervention, and management strategies for SDV in the NC DOP are a top priority. A challenge identified by the NC DOP partners was that the professionals on the ground with first-hand knowledge of SDV in prison are not typically equipped or prepared to complete the level of scientific study and peer-reviewed dissemination of research on this topic. Similarly, the published research on SDV in non-correctional populations often falls flat when applied to a prison context. The misfit between the literature and corrections work exists because the correctional population and socio-environmental context of the prison setting and culture are genuinely unique from clinical and community settings. In this regard, the NC DOP partners sought to identify academic experts in the study of SDV in prison and to combine their understanding of the prison population and setting with the expertise of academic partners.

University of North Carolina at Charlotte (UNC Charlotte)

The academic team at UNC Charlotte involved in this project formed with the following goals. First, we sought to bring methodological and statistical expertise to the partnership. Second, we aimed to provide up-to-date

SDV theory, research, and practice knowledge that could be used and adapted to suit NC DOP's needs. Third, we wanted to create a sustainable set of contributors focused on problems and solutions relevant to NC DOP's needs. Following the initial consultation stages discussed below, in order to ensure that these three goals were achieved, a primary academic team was put together comprised of three members of the university faculty and two doctoral students with complementary expertise in suicide prevention, non-suicidal self-injury, electronic health record data work, and advanced quantitative methods. Subsequent participating team members were added based on project-specific needs or interests in expanding research and practice questions. For instance, another faculty scholar and graduate student joined the team with specific expertise and focus on carceral issues for women.

Steps in Engaging in Our Corrections- Academic Partnership

Partnership Step 1: Workgroup Consultation

The NC DOP Suicide Prevention and Self-Directed Violence Workgroup (NC DPS, 2020), as referenced above. was formed after an increase in suicides in 2018. This increase was reflected nationally in the Bureau of Justice Statistics (BJS) mortality statistics showing an average increase in state prison suicide rates from 18 in 2015 to 26 in 2018 and 27 per 100,000 incarcerated persons in 2019 (Carson, 2021a). Throughout the workgroup's review and project development process, one clear idea formed: we needed a validated training model that could (a) be tailored to our population, staff, and procedures and (b) be sustainably updated over time for continued use with NC DOP staff. Toward this idea, the workgroup contacted and established an initial consultation with Dr. Cramer. Through the consultation, we were able to identify areas of strong fit for his published Core Competency Model for Suicide Prevention training (Cramer et al., 2013, 2019), as well as areas for adaptation to a correction environment and the spectrum of SDV events in prison (Cramer, Peiper, et al., 2022). This initial consultation set the groundwork for a multi-step collaboration to evaluate the existing self-injury risk assessment process within our prison system and build toward evidence-based assessment and practices that could be further integrated into a validated training model for SDV in corrections.

Partnership Step 2: SIRAP-C Development

A Data Use Agreement (DUA) was executed between NC DOP and UNC Charlotte, which established both parties' understanding of the scope of work to be included in the community-academic partnership. The DUA was found to cover two related projects: (1) the self-injury risk assessment analysis and (2) suicide prevention training for NC DOP staff. Responsibilities of UNC Charlotte included obtaining Institutional Review Board (IRB) approval; composing data security plans; completing data analyses; and disseminating findings via written summary, journal articles and conference presentations, and training materials. In addition, NC DOP agreed to assemble and securely transfer data, oversee the NC DOP research committee review process, provide subject matter expertise, ensure stakeholder engagement and feedback, and collaborate on dissemination activity.

One of the first steps of the NC DOP-UNC Charlotte partnership was the development of the Self-Injury Risk Assessment Protocol for Corrections or SIRAP-C. NC DOP's goal was to refine their current self-injury risk assessment protocol. The existing risk assessment protocol comprised documentation of the SDV event, a mental status exam, an assessment of 43 risk and protective factors, and treatment recommendation(s). With subject matter expertise assistance from NC DOP, UNC Charlotte conducted data analyses to refine the existing risk assessment protocol and generate a revised clinicianadministered structured tool, the SIRAP-C, which includes a rating sheet and user guide for implementation. The SIRAP-C rating sheet covers dynamic (e.g., depressive symptoms) and static (e.g., history of SDV) risk factors as well as protective factors (e.g., coping skills). The SIRAP-C is designed to aid clinical decision-making, including suicide and self-injury risk classification and intervention recommendations. NC DOP and UNC Charlotte have engaged in a variety of dissemination methods, including: (a) peer-reviewed publication (Cramer, Peiper, et al., 2022) of the SIRAP-C development, (b) presentation of findings at an academic conference (Kaniuka et al., 2022), and (c) a stakeholder engagement presentation at NC DOP in March of 2022. Future research directions include investigating gender variation in risk assessment and using the SIRAP-C to aid research with incarcerated persons who engage in persistent self-injury.

Looking Ahead: Putting Science into Clinical Practice

A critical next step to build on the SIRAP-C development will be to ensure it is translated into practice through systematic implementation and training. The goal of putting the SIRAP-C into practice through training is consistent with community-academic partnership principles (e.g., Bohossian et al., 2012; Boutin-Foster et al., 2008). For example, through partnerships, SDV assessment and prevention training may improve care for underserved, difficult-to-reach populations, namely incarcerated adults in the state of North Carolina. Further, creating a technology-based training program revised after feedback from corrections stakeholders will ensure that NC DOP has a program for new staff and train-the-trainer materials. Thus, we will ensure sustainable use beyond this stepwise project partnership.

The Core Competency Model (CCM) of the suicide prevention training program (Cramer et al., 2013, 2019) provides a framework for planning the next steps of our partnership. The CCM results from a comprehensive review of expert sources in suicide prevention clinical best practices. This review resulted in the following ten key clinical and self-care skills required for effective overall suicide prevention practice:

- Manage personal attitudes and reactions to suicide
- Maintain a collaborative stance toward the client
- Elicit evidence-based risk and protective factors
- Focus on the current suicide plan and intent of suicidal ideation
- · Determine the risk level
- Enact a collaborative, evidence-based treatment plan
- Notify and involve other persons
- Document risk, plan, and reasoning for clinical decisions
- Know the law concerning suicide
- Engage in debriefing and self-care

The CCM has been translated into various training formats, from half-day workshops to a semester-long graduate course (e.g., Cramer et al., 2016, 2017; La Guardia et al., 2019). Across training formats, the CCM entails social-cognitive or cognitive-behavioral training techniques such as psychoeducation, practice tool resource provision, and case study-based skill practice. Reflection through self-assessment is critical; Cramer and colleagues (2020)

created the Suicide Competency Assessment Form (SCAF), a self- or observer-rated tool capturing perceived mastery of the core competencies. The SCAF is usable within the self-reflective practice, supervision, consultation, and program evaluation contexts. CCM-based trainings have been studied in community mental health, university counseling centers, online training, and undergraduate and graduate student courses. Overall trends show positive impacts of provider suicide prevention knowledge, stigma reduction, and perceived skill mastery (e.g., Cramer et al., 2016, 2017, 2019; La Guardia et al., 2019). Based on recent evidence, results are promising in recommending best practices that will have a real impact in terms of improved use of suicide screeners (Hager et al., 2021).

A fundamental CCM principle is flexibility. The 10 core competencies are transferrable and adaptable by clinical population and setting. For instance, the lead author (RC) is currently funded to pilot the Core Competency Model for Military (CCM-M) for the United States Navy. Our team recently outlined what CCM for Corrections (CCM-C) would look like regarding training format, content, and other key design considerations (Cramer et al., in press). We put forth the scientific publication (Cramer et al., in press) and a recent conference proceeding (Cramer, Kaniuka, & Peiper, 2022) to reach a broad audience including legal and correctional practitioners, mental health providers, and researchers. In the curriculum outline (Cramer et al., in press), the CCM can be adapted in numerous vital ways to meet the correctional partner needs. First, we shifted to the broader focus of SDV because of the high rates of non-suicidal self-injury and suicide in carceral settings (see review above). Second, we integrated correctional SDV literature throughout the CCM-C training curriculum. For instance, we adapt general risk/protective factor reviews to focus on corrections-specific literature. We also feature the SIRAP-C throughout relevant competencies (e.g., risk determination, and treatment planning). While a full review of the training curriculum and implementation considerations are beyond the scope of this article, we refer interested parties to the Psychological Services article (Cramer et al., in press) and, in the spirit of dissemination and corrections-academic partnership, welcome further inquiries.

The Psychological Services curriculum serves as the foundation for recording, implementing and evaluating a future CCM-C pilot project. Although the adaptations to the CCM for Corrections have been identified, the piloting of the adapted training model is just beginning.

To achieve the full implementation and evaluation of the CCM-C, a grant-funded project pilot is projected to start in 2023. This partnership phase will include a two-year timeline of implementation, review, evaluation, and revision of the adapted model. The outcome of the grant-funded pilot will be a validated SDV training model adapted for a correctional setting and a sustainability plan that includes a train-the-trainer component. Finally, policy and procedure revisions resulting from the integration of the SIRAP-C will be integrated into the full roll-out of the CCM-C in the North Carolina prisons.

Lessons for Corrections-Academic Partnerships

We learned several important lessons that may benefit future corrections-academic partnerships.

- 1. Identifying and Carrying Out Shared Values and Solutions. The community-academic partnership literature highlights the importance of a shared vision between community and academic partners. Given the challenges faced by carceral institutions, we believe this shared approach is particularly crucial to successful corrections-academic partnerships. Indeed, the shared vision should move beyond mere common goals, data, and work products. Early in our partnership, the leaders (RC, LJP) held conversations with corrections stakeholders and academic team members to ensure a shared understanding and values. For instance, we focused on the shared value of equal credit and visibility, as evidenced by simple matters such as ensuring corrections partners received appropriate recognition (e.g., authorship) and access to work products. Other shared values included open communication and patience. Be it through regular meetings or contractual writing such as a Memorandum of Understanding (MOU); we strove for role clarity, rigor over expediency, and a mutual understanding that each project step in the timeline may require flexibility. We continue with an overt emphasis on joint ownership of project data and work products. For instance, we have received several external inquiries about using the SIRAP-C. Team leaders (RC, LJP, AK) have collaborated on joint responses in each instance.
- 2. Identify Necessary Expertise and Gain Buy-In. Prison systems have developed a reputation for being leery of anything that needs to be explicitly corrections-based or corrections-initiated. The development of this partnership from the initial consultation stage through the generation of

DUAs and MOUs occurred with a healthy respect for and inclusion of the voices, input, and perspectives of those who work inside the prisons. Those comprising the Suicide Prevention and Self-Directed Violence Workgroup were all chosen from among internal representatives in the prisons. During the process, ongoing updates and briefings were provided to DOP executive leadership, including ongoing monthly briefings to a DOP project manager by the prison lead in this partnership. Our efforts to build the foundation of this partnership using input from internal experts with frontline correctional experience, and our emphasis on regular briefings to executive leadership, have been successful and thereby prove the value of having a solid foundation from the beginning. This has facilitated our work and implementation of new training and procedures, and all participants acknowledge the importance of maintaining the strength of that foundation as we collaborate in this process.

3. Understand That It Takes Time to Translate Science into Practice. Good clinical science takes time. The development of the SIRAP-C, from the initial data, use agreement and human subjects review through data analysis publication, was a two-year process. This was to develop the instrument, worksheet, and short user guide. We continue the clinical science portions at the time of this writing by disseminating the clinical materials and preparing to implement the SIRAP-C within the NC DOP electronic health record. Anticipating that it would require considerable time and effort, we began the funding search for training development during the clinical science phase. This was a correct assumption. Through collaboration with state agencies and grant developers, it took more than a year to identify and attain funding for the CCM-C training. As a precursor, we strategically developed presented, and published the CCM-C curriculum to provide a tangible example to funders and other potential stakeholders. At the time of this article, we anticipate receipt of funding to conduct a two-year CCM-C design and pilot evaluation. Patience can pay off in creating a sustainable, evidencebased solution for the correctional partner.

4. New Opportunities Will Arise, So Maintain Flexibility. Our success is largely a function of remaining agile. During the life of the collaboration, several instances occurred where new ideas, issues, and questions arose that required flexibility and new team members. For example, in discussing the clinical observations by prison mental health providers and results of preliminary SIRAP-C analyses, we observed that a small number of persons accounted

for a high percentage of self-injury risk assessments. As a result, we jointly developed a secondary goal to identify characteristics associated with those engaging in persistent self-injury risk to further target finite prison resources to higher-risk individuals. Doing so required us to expand our team to include an NC DOP intern with public health experts as well as a UNC Charlotte faculty scholar and doctoral student with requisite statistical and non-suicidal self-injury expertise, respectively. Our agile approach to partnership produces additional meaningful information to improve clinical approaches to SDV for NC DOP, other networking and training opportunities for team members, and contributions to the broader correctional healthcare literature.

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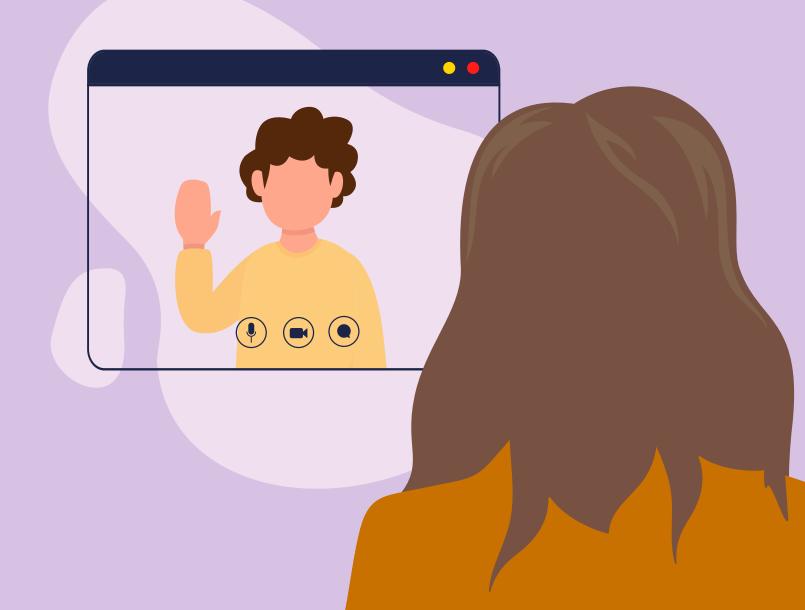
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THE USE OF VIDEO VISITATION IN A COMMUNITY CORRECTIONAL FACILITY FOR WOMEN:

LESSONS LEARNED

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THE USE OF VIDEO-VISITATION IN A COMMUNITY CORRECTIONAL FACILITY FOR WOMEN: LESSONS LEARNED

Introduction

The current project was designed to explore the impact of increasing family contact during confinement via the use of video-visitation. By arranging weekly video chat sessions between confined women and those in their support systems, the research team explored how this affected family connectedness and successful reentry. The current pandemic underscores the need for correctional agencies to offer an array of mechanisms for keeping confined individuals connected to family members. This paper discusses the relative ease with which this program was implemented in hopes that other correctional sites can use similar programs to safely connect residents to the community rather than revert to telephone and letters as the only contact mechanisms. Below we describe the benefits that having augmented video-visitation contact had on participants of the program, and we also share information on our step-by-step implementation of this project, as that may be of assistance to any agencies who are at the decision point regarding whether they will implement similar initiatives,

Background

Among the negative aspects of the prison experience, social isolation is identified as one of the most significant detriments of confinement (Adams, 1992). Hence, visitation is paramount to provide detained individuals with social support from loved ones. Research clearly demonstrates that individuals benefit from regular contact with support persons while incarcerated (Cochran, 2012), and visitation even helps people in prison resist deviant subcultures (Duwe & Johnson, 2016).

Evidence of specific interest to correctional staff shows that frequent visits lead to improved behavior (Cochran, 2012; Jiang & Winfree, 2006). Beyond the prison walls, a positive relationship exists between family support and successful reentry (Bales & Mears, 2008; Duwe & Clark, 2013; Mears, Cochran, Siennick, & Bales, 2012). Studies have also shown visitation to benefit recidivism reduction (Bales & Mears, 2008; Mears et al. 2012; Mitchell et al. 2016), although a more recent study found the relationship to be more tenuous (Cochran et al., 2020).

While male facility visitation rooms are often filled with girlfriends and wives, female facility visitation rooms tend to be occupied with close relatives such as mothers, sisters, and children (Jiang & Winfree, 2006). Jiang and Winfree

suggest that this difference reflects women's more social and conventional relationships with families. Research also suggests that visitation may be equally crucial for the children visiting their incarcerated parents, helping them deal with the separation and the harm caused by it (Tasca et al., 2016). Poehlmann et al. (2010) argue that allowing a child to maintain attachment with an incarcerated parent improves the child's social and emotional functioning. Despite this need, and even though women tend to be the children's primary caregiver, incarcerated women are less likely to receive visitors than men, leaving letters and phone calls as their main outlets for connecting with family members while confined (Arditti & Few, 2006). Families often face barriers—such as lack of economic resources. difficulties with work schedules, or lack of proximity to the institution—that impede their ability to make visits (Rubenstein et al., 2021; Mauer & Chesney-Lind, 2002), which is especially problematic for confined females.

Even at baseline, the visitation needs of women are often not being met. Adding to the problem was that the onset of the COVID-19 pandemic caused many facilities to have to ban or limit their use of face-to-face visitation to control the spread of the disease (Hanna, 2020). This unprecedented situation underscored the need for facilities to explore various ways to connect confined individuals to their families so that programs can better address the support needs of those they serve. This project explores the impact of video-visitation to augment family contact opportunities in a residential treatment program.

The Project

Table 1 provides an outline of how the video-visitation project was designed. This project was implemented before the onset of COVID--19, but data collection continued until July of 2020, just after the onset of COVID-19, allowing us to experience the impact of video-visitation during these two distinct phases.

Materials Needed for Implementation

We acquired 15 iPads with 15 headsets to be used in a semi-private space to allow multiple clients the ability to participate in the video chats at once.1 Internet access was provided with the use of two hotspots. A portable storage/ charging cart was purchased to store the iPads securely, and sanitizer wipes were needed to disinfect the equipment between uses. The total cost to provide video-visitation opportunities for participants approximated \$7,000, with an

Table 1: Overview of Video-Visitation Project Design

Who	This project targets female probationers sentenced to a 120-bed secure residential substance abuse treatment facility for a 4-6 month period. A requirement for program participation was that the woman had support person(s) in the community with access to a smartphone, tablet, or computer.
What	Typically, women in the program participate in a weekly 1-hour face-to-face visitation with approved visitors and one weekly 7-minute phone call ^a . This project offers women one additional weekly 15-minute video-chat session with support persons of their choice. From March to July 2020, face-to-face visitation was suspended, and additional video-visitation or phone calls were allowed.
When	Planning for this project began in early 2018 after receiving grant funding. The first subjects were signed up for participation in February 2019. Data collection concluded in July 2020.
Where	The project was implemented in collaboration with an adult probation agency in a large urban southwest city.
Why	The goal of this project was to increase family connectedness by using technology to provide clients with additional contact opportunities so that skills being learned in the program could be used to improve family relationships and to provide women with additional support to aide in program engagement and reentry planning/success.
How	Individuals were invited to participate via a group meeting with a researcher, typically within one month of intake. Participation was ongoing throughout their program stay. Each participant signed a written consent and completed pre and post-tests and a short post-visitation survey following each weekly video-chat to collect data on what occurred during the weekly video call.

^aParticipants may earn additional phone privileges for facility jobs or as reinforcers.

additional \$75 in monthly hotspot fees. Importantly, none of these costs were incurred by participants.

Programming

A curriculum was introduced to the program to give clients skills specific to developing strong family relationships. Counselors working at the program participated in a two-day training session to become facilitators of the Cognitive-Behavioral Interventions for Improving Family Relationships (CBI-IFR)2 curriculum. The CBI-IFR is a skills-based curriculum designed to assist clients in identifying family-based risk factors and the importance of healthy connections with prosocial family members or supports as a tool for successful reentry. Clients were encouraged to

utilize strategies they learned in this and other programming during their video-visitations as an opportunity for in-vivo skills practice. Family members themselves, however, were not directly involved in this programming

Video-Chat Calls

Video call times were scheduled in the evening to avoid interruption of other program activities, such as treatment and education. Ultimately a three-hour time-block was used to connect roughly 100 clients and their families or supports once each week. Clients used program-associated FaceTime or Skype accounts that allowed them to communicate with any support person who had access to an iPhone, Android, tablet, or computer. Although some clients did decline study

participation, contrary to our expectations, accessibility for family members was not a frequent barrier to participation in the project. Women unable to connect with nuclear or extended families could access other community supports.

For the video-chat sessions, clients were sorted into several groups of up to 15 clients. Groups were assigned according to clients' preferred time to connect with family and support systems, with priority given to those with younger children who had a set bedtime or families with limited contact windows. Each video-visitation session lasted for 15 minutes. During the allotted time, clients were authorized to video-chat with as many people as they desired. Following a two-minute warning, clients were told to finish their calls. Once time was up, they immediately filled out a post-visitation survey. A researcher, a direct care monitor, and an assigned client worker assisted with organizing and overseeing the weekly calls. The worker's main responsibilities were alerting clients about their call times and guaranteeing that all of them were present in the assigned room at their assigned time. Workers were chosen by program managers based on their behavior, relationship with other clients, and knowledge of technology.

Methods

Sample

Data analyzed for the present study were collected through the self-administered assessments completed by a sample of women on probation (N = 347) residing in a residential treatment facility. The treatment facility holds a range of programs designed to serve high to moderate-risk probationers who will return to a community supervision caseload following the successful completion of the program.

Assessments/Measures

Before implementation, the research team obtained informed consent from participants. The research team developed two tools. First, a needs assessment tool was designed to collect data on family make-up, technology access, support system, and the clients' relationships with their children (young and adult) and significant others. Second, a post-visitation assessment was created to collect information about whom clients were contacting, how the call time was spent, which skills were utilized (if any), and emotions felt after each call. Finally, this project utilized the Family Adaptability and

Cohesion Scales-IV (FACES-IV) as a validated tool to assess family functioning in both pre- and post-program participation (Olson, 2011). A total of 249 women were administered this tool at both intakes and just before discharge3 for a total of 498 assessments.

Analysis

The study used a prospective study design to examine the impact of increased family contact via the use of weekly video-visitation. Univariate descriptive data on the post-video visitation surveys (n=3870) will be presented, along with bivariate analysis (N=498) using one-way ANOVA to evaluate differences in mean scores between the FACES pre and post tests.

Results

Each week, 78% of the participants connected with families/supports. The most common reason for lack of participation was the unavailability of family/support during the allotted call time. Participants on loss of privilege status could not participate in the calls per the rules of the facility. When connections were made (Figure 1) women were most likely to contact children (28.1%), a parent (24.5%) or a significant other (23.7%).

When on calls (Figure 2), participants typically discussed what was happening in the household (26.8%), followed by furlough/release (20.5%) and then myself/recovery (12.3%).

The post-visitation survey asked women what skills they learned in programming that they were able to use during their video chat sessions. Figure 3 shows that women most often marked that communication (35%) and relationship building (31.7%) skills were used during the call, followed by social/coping skills (27%) and new thinking (24.9%). Women were also asked to mark from a list of feelings what emotions they felt immediately following the video-chats. Figure 4 highlights that participants reported a high proportion of positive feelings. Roughly 65% of participants felt happy, and 52% felt loved, while only 4% of the women reported feeling upset and 2% depressed following their video calls. Hence, emotive responses following calls where they could see their family and support were largely positive; most of the

¹ Funding for these was obtained via a grant issued by the Simmons Foundation of Houston, Texas.

² This curriculum was developed by University of Cincinnati Corrections Institute, as part of their Cognitive Behavioral Intervention series.

³ Women who were unsuccessfully discharged, successfully discharged before a posttest could be administered, or discharged in haste due to COVID-19 protocols were not administered a post-test. Only women administered both a pre- and posttest were examined in this sample.

Figure 1: Who are the women reaching out to?

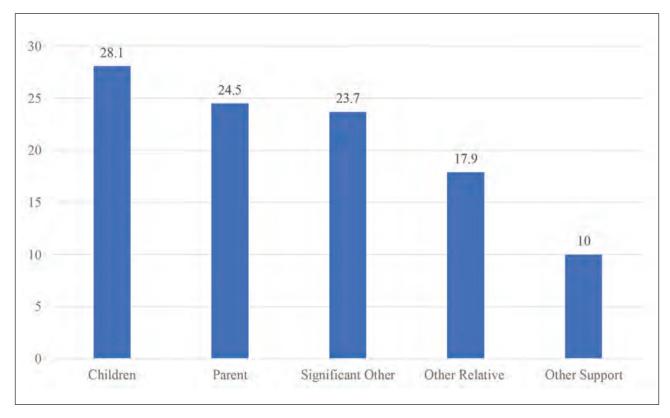
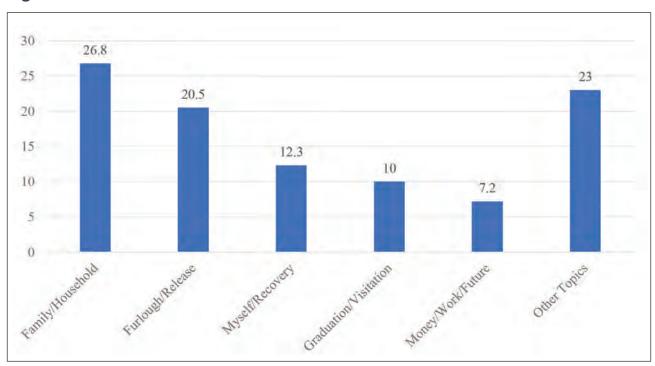


Figure 2: What was discussed?



negative emotions occurred when the women tried but were unable to connect to support or when women were feeling anxious (19.2%). When asked to record why they marked these feelings (positive or negative), women wrote responses such as the following:

- "because I am able to let my family see how well I'm doing and they can see for themselves"
- "because I can visually see my child"
- "because I get a chance to see my house and watch my dog run around and play"
- "because I have been worried about her, seeing her was a big relief, my mom always brings joy to me and make me happy"
- "because I have mixed emotions"
- "because I was able to share my feelings about the next step in my recovery with my family and they are proud of me"
- · "because it heals me"
- "because it reminded me I have people to go home to so I need to finish the program"
- "because it took forever to connect"
- "because this is the longest I've ever gone without seeing my kids.

Finally, the pre/post assessment conducted using the FACES-IV evaluation indicated improvement in perceived healthy family functioning by the participants. Figure 5 shows significant improvement in mean balanced flexibility (60.4 vs. 65.9) and balanced cohesion score (66.6 vs. 70.1) after program participation. Simply put, weekly video visits increased participants' ability to deal with familial problems, define and clearly communicate rules and boundaries, and balance individual interests with active participation in the lives of other family members.

Regarding the unbalanced/unhealthy scales, most scales saw no changes; however, the mean rigid scale did significantly increase from pre- (44.4) to post-assessment (49.3), suggesting an improvement in participants' ability to organize family affairs and efficiently address rule-breaking behaviors. In addition, the overall mean family satisfaction (49.1 vs. 60.8) and family communication scale (64.4 vs. 70.8) also significantly increased post-assessment. Hence, there were improvements on several of the scales related to family cohesion, adaptability, and functioning after the intervention was applied.



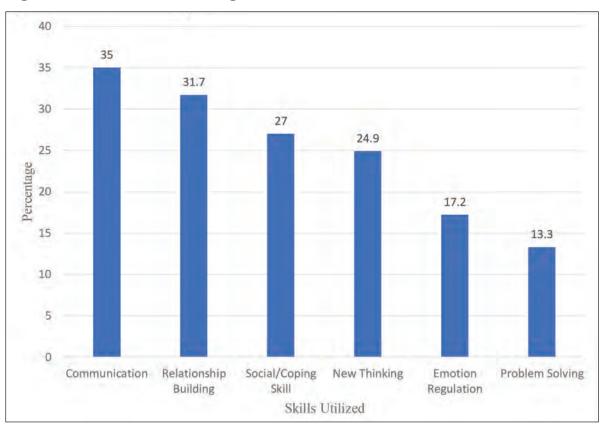


Figure 4: Feelings expressed following video chat

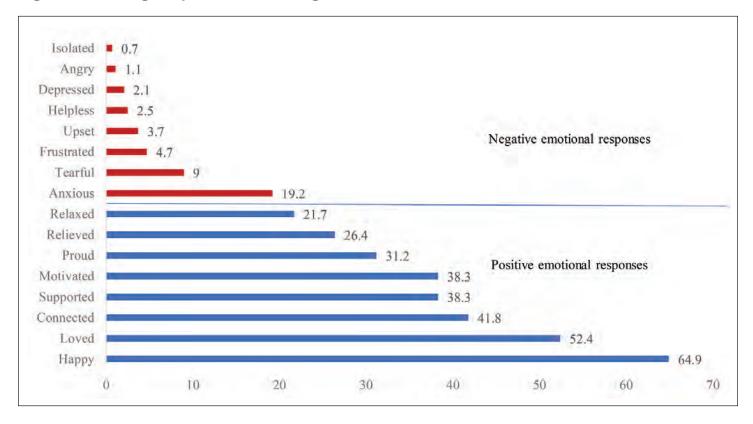
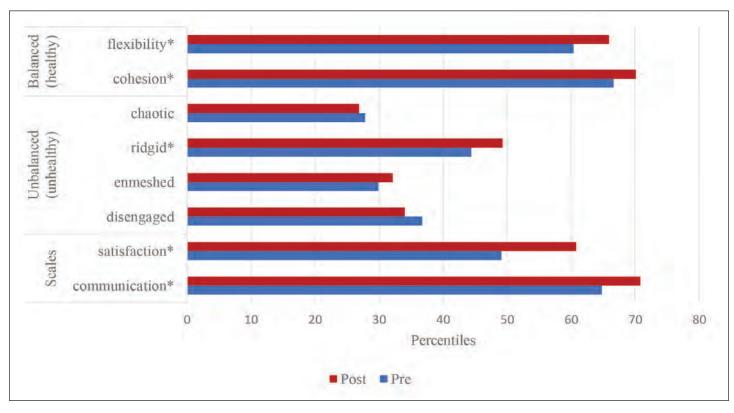


Figure 5: Impact on family connectedness – results of FACES IV



Discussion

Although prison visitation primarily operates as a black box (Liu et al., 2016), recent empirical work suggests that maintenance of social support increases the likelihood of successful reentry and readjustment to society. We do not argue that solely using video-visitation suffices for creating and maintaining the social bonds between incarcerated individuals and their support systems. Instead, we suggest that video visits play an essential role in the lives of those who are less likely to be visited due to distance from the facility, costs of travel, or unavailability of time off. Increasing the frequency and mode of contact with community support allows programs to meet the needs of a heterogeneous population. This is important given that not all clients have families who can attend face-to-face visits, mainly in female programs. At the same time, it must be recognized that not all families have access to the technology needed for videovisitation, nor were women in this study interested in giving up face-to-face visitation.

Other benefits of the addition of video-visitation were positive emotional responses following the calls. This is consistent with prior research finding that visitation helps with adjustment to confinement and increases prosocial feelings (Liu et al., 2016). Our study also showed that video-visitation provided in-vivo opportunities to practice the relationship skills these individuals are learning with their families. This was reported in the post-visitation summary and was demonstrated via improved family cohesion and adaptability scores on the FACES postassessment. The potential for increasing the transfer of knowledge from the program to the community upon release improves the likelihood of successful reentry, which again aligns with prior literature in this area (Bales & Mears, 2008; Duwe & Clark, 2013; Mears, Cochran, Siennick, & Bales, 2012).

Despite the positive impact of introducing the video chats, several lessons were learned in implementing a video-visitation program.

Lessons Learned

Set up and Security

The initial set up for the iPads posed more difficulties than anticipated. The challenge rested in ensuring that the devices were used only for the intended purpose of the video-chat calls. Calls between two Apple devices (e.g., iPad and iPhone) were simple, as FaceTime is standard on each iPad, and only a phone number is needed to connect the devices. However, to ensure that individuals with Android devices, computers, or other tablets could participate in the project, Skype was also downloaded onto the iPads, which required a unique

Skype account with a valid email or phone number for each device. Ideally, video-chat management should have been designed so that one "master" iPad was used to operate the other 15 linked devices, similar to what might be found in a school or other educational setting. This would have aided in both securities of the individual devices and call management (i.e., calls could easily be disconnected from the master device after a warning was issued and call time had expired). Given the scale of this study and the technical expertise required, this additional step was not taken.

Security concerns are among the primary reasons agencies hesitate to adopt video call tools in correctional facilities. While the use of technology puts a halt on the flow of contraband, such devices still have the potential to connect justice-involved individuals to antisocial peers or victims. Further, devices with Internet access may be used for unintended and undesirable purposes; hence, safeguards are necessary to avoid these issues.

In addition to removing unnecessary apps from each device as a security measure, each researcher or staff member oversaw 15 clients during the calls. Calls were not recorded, but staff members were instructed to end a call if problematic behavior was witnessed. At all times, other than the video-call sessions, the devices were kept in a locked cabinet where they could be securely stored and charged for the next session. Only the research team and facility staff had the lock combination.

Even though iPad misuse was infrequent, more sophisticated control methods were eventually put in place to restrict access to other applications for use in non-video chat activities, such as browsing, checking social media accounts, or sending instant messages. A passcode and thumbprint were created to restrict unauthorized usage further; passcodes were entered by the staff member facilitating the video calls just before each resident call. Parental controls were also placed on each device so that only FaceTime and Skype were accessible.

With that said, these devices could have also been expanded for other clinical uses, such as additional family sessions with therapists and extended videovisitation times, as part of the program's reinforcement structure or for all participants. Educational or treatment activities could have been uploaded to the devices and used by participants with proper monitoring. Clients nearing discharge also could have been given less restricted access to better prepare for reentry.

Technology Challenges

Connectivity issues were a barrier often faced during the weekly video calls. Despite efforts to correct

problems (i.e., purchasing two hotspots, choosing a Wi-Fi plan according to the best coverage for the area, and conducting connectivity tests to determine the best location inside the facility for the calls), connectivity issues still occurred. Feedback from focus groups with participants suggested that women were often excited before, during, and after their calls – primping before the calls, introducing children and other loved ones to one another during the calls, and updating one another on family happenings following the calls. Hence, unexpectedly canceling sessions due to connectivity issues resulted in evident disappointment in the unit. Such programs should consider alternative/make-up times should disruptions occur.

Program staff and management supported the project, regularly helping to address barriers clients faced in participating in the program. Staff gave new enrollees an extra weekend phone call so that clients could get the information needed to set up the video-chats and be prepared for the first call. Staff developed and distributed a simple one-page information form that contained step-by-step instructions for downloading and setting up a Skype account. This form was made available at face-to-face visitation sessions and was sent to families who struggled to connect with program participants.

Unforeseen Challenges from COVID-19

A year into data collection, a total lockdown was put in place due to the coronavirus. A pause in new admissions and early discharges led to a rapid decrease in the population. In addition, in accordance with guidelines from the Centers for Disease Control and Prevention (2020), the facility determined that all visitations would be suspended until further notice, and the administrators quickly made the decision to replace the weekly face-to-face visit with either an additional video-chat session or phone call.

The fact that the video-chat technology was already available speaks to the timely implementation of the project. It is interesting to note, though, that more clients initially chose the extra phone call rather than an extra video-chat, as they could reliably reach more loved ones via phone to check on their welfare. This highlights one of the challenges to use of video technology in a correctional setting. However, in subsequent weeks, the number of clients opting for video chats increased substantially, and the ability to provide some visual contact in the absence of on-site visitation highlights this technology's usefulness.

Study Limitations

While this study points to several benefits of augmenting video-visitation in residential or other confined correctional settings to improve healthy family connections, study limitations should be noted. First, there was no way to untangle the impact of the video-visitation from other program elements, as participation was not randomized. Likewise, the sample was limited to one geographic space and an all-female population. Moreover, data collection was affected by the onset of COVID-19, which also resulted in a significant number of early discharges and produced dramatic changes in programming and facility management for the women still confined, all of which affected study findings. Finally, we did not follow the women who participated in the study after their discharge from the facility.

Conclusion

A significant number of individuals in America find themselves incarcerated, but many facilities offer limited opportunities for clients to interact with families or other individuals who offer social support. The study presented above used simple technology to increase the quality and quantity of family contact during confinement. Our goal was to improve reentry success by enhancing family relationships and supporting family connectedness during periods of confinement.

The current global pandemic has made this project timely, as many correctional facilities had to suspend face-to-face visits to protect the confined individuals and staff. However, we learned from the women who lost face-to-face visits after COVID-19 that video-visitation is not an adequate replacement for face-to-face visits. The current study findings were consistent with prior research suggesting that visitation improves adjustment and wellbeing while confined and improves family relationships. We recommend that video-chats be utilized to augment, not replace, phone calls and face-to-face visitation. Video-chats should become part of the continuum of family connection opportunities for confined individuals. We recommend that programs strive to keep participants connected to family members by as many means possible, at no cost to the participants. Doing so will help support and prepare participants for transition to the community. This paper provides a roadmap for designing similar programs that offer more humanistic environments while in custody and help prepare individuals for successful reentry and reunification with family members.

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EXAMINING ALCOHOLICS/ NARCOTICS ANONYMOUS THROUGH THE LENS OF THE CORRECTIONAL REHABILITATION LITERATURE



EXAMINING ALCOHOLICS/NARCOTICS ANONYMOUS THROUGH THE LENS OF THE CORRECTIONAL REHABILITATION LITERATURE

Substance abuse is a pressing problem for individuals under correctional supervision and the agencies who serve them. Prevalence of drug and alcohol abuse among probationers and parolees is much higher than in the general population. According to Feucht and Gfroerer (2011), 60%-80% of people under correctional supervision struggle with substance abuse. Belenko et al. (2016) found that probationers with substance abuse problems are more likely to have their probation revoked. Finding appropriate and effective interventions for this population is difficult due to a lack of effective substance abuse treatment options in the community, long wait lists, and high costs. Given these challenges, many probation and parole agencies use Alcoholics Anonymous (AA) and Narcotics Anonymous (NA) to address clients' substance abuse problems. For many jurisdictions, especially in rural communities, AA/NA is the only option available.

According to AA literature, on which Narcotics Anonymous is based, "Alcoholics Anonymous is a fellowship of people who come together to solve their problems with alcohol" (www.aa.org). While AA's primary goal is to help members become abstinent or "sober," research has found that AA also provides attendees opportunities to explore or focus on social identity, personal narratives, thoughts, feelings, and problem-solving, and such aspects of personal development have been found in the literature to be necessary for change.

Despite AA's availability and potential benefits, it has been widely discounted within the correctional rehabilitation literature that focuses on "what works" or "evidence-based" practice. Some common criticisms include that it lacks empirical evidence of effectiveness, that it is unstructured, and that AA is a "religious" program designed to be voluntary. In this paper, I argue that AA and programs based on AA, such as NA, should be reconsidered in the "what works" and more considerable correctional rehabilitation literature. I contend that those who criticize AA as an ineffective treatment intervention and claim that it should only be used as an adjunct to "effective substance abuse treatment" have not been

introduced to the recent body of evidence and qualitative studies that have found support for the processes within AA that can that promote change within law violators.

About AA

AA is said to have millions of members across 181 countries (Kelly, Abry, et al., 2020). The meetings are widely available and are free to attend. Recent scholarship has moved away from the term "alcoholism," and instead, "substance abuse" is used. AA literature recognizes this, and while the program is based on alcohol, all people who misuse or abuse substance are welcome to attend.

There are many AA meetings, and members are encouraged to choose meetings based on their needs. One type of meeting is called a lead meeting or speaker meeting. A lead meeting allows members of AA to speak about their lives dealing with substance abuse problems. Members are encouraged to listen to the speakers' personal stories about "what it used to be like, what happened to change them, and what it is like today" (The AA Big Book, 2002). Through these personal narratives, members are encouraged to identify with each speaker's story and consider life without substances. Another type of AA meeting is referred to as a discussion meeting. These meetings provide opportunities for people to discuss their struggles and come up with solutions to sobriety obstacles. Finally, there are meetings where various populations can find specific support and comfort. These include atheist/agnostic meetings where God and religion are not mentioned, LGBTQ (Lesbian, Gay, Bisexual, Trans, and Questioning) meetings, dual diagnoses meetings, and those meetings more open to discussing drug abuse.

Those who attend AA meetings are encouraged to regularly attend meetings, engage in fellowship with others, and find a sponsor to help them through the program. The basis for the AA program is rooted in its 12-step approach to achieving sobriety.

THE 12 STEPS ARE:

We admitted we were powerless over alcohol and that our lives had become unmanageable.

We Came to believe in a power greater than ourselves. (This is not a mandatory part of the program, and many meetings are available for people who are atheists and/or agnostic. In addition, many in AA use the "group fellowship" as their higher power.)

Making a decision to turn our will and our lives over to the care of God (something external to ourselves) as we understand him (as we know him/her is an essential aspect of AA).

Made a searching and fearless moral inventory of ourselves.

Admitted to God, ourselves, and another human being the exact nature of our wrongs. (Again, for many people in AA, God is only a term for external control.)

We were entirely ready to have God (something external to ourselves) remove all these character defects.

Humbly ask him (or anyone external to themselves) to remove our shortcomings.

Made a list of all persons we have harmed and became willing to make amends to them all.

Made direct amends to such people wherever possible except when to do so would injure them or others.

Continued to take personal inventory, and when we were wrong, promptly admit it.

Sought through prayer and meditation to improve our conscious contact with God as we understand him, praying only for knowledge of his will for us and the power to carry it out.

Having had a spiritual awakening due to these steps, we tried to carry this message to alcoholics in all our affairs.

Effectiveness of AA

Studies focusing on whether AA is effective at reducing substance abuse have produced some positive results, although overall, the conclusions from such studies have been mixed. Nonetheless, when Kelly et al. (2020) looked at 27 evaluation studies containing 10,565 participants, they found that AA was just as effective as other treatment programs, such as motivational enhancement theory and cognitive behavioral strategies. In addition, AA was found to be more effective at maintaining abstinence. In another systematic review of AA evaluations, Kaskutas (2009) found rates of abstinence were much higher among those who attend versus those who do not. At the same time, there is research in this area.

In other studies, qualitative researchers have demonstrated that AA can facilitate the change of members in different important dimensions that may be important in reducing recidivism. For example, Glassman et al. (2022) provided a review of findings that suggests AA can improve new social identities and boundaries.

Glassman et al. (2022) interviewed members of AA about their sense of belonging associated with membership. They found that having a sense of belonging was indeed helpful and achieved by AA members. Given these findings, there is reason to support AA's continued use within probation and parole. In the next section of this paper, I argue that AA also supports the suppositions of the two popular models of correctional intervention.

Models of Correctional Intervention/ Rehabilitation

The "What Works" Literature

The "What Works" literature, often called "evidence-based/effective intervention," suggests that if certain principles of effective intervention and classification are followed, programs can reduce the recidivism of justice-involved individuals. Originally formulated in the early 1990s by Andrews, Bonta, and Hoge (1992), the Risk-Need-Responsivity Model suggested that standardized, established, and validated risk assessments should be utilized in corrections to determine the "what, when, and how" to intervene with people who engage in crime.

This literature has produced additions and revisions known as the "What Works" model of correctional intervention. These principles of effective interventions were embraced by the field of corrections because they challenged the early views that "nothing works" (Martinson, 1974) to reduce recidivism. Now, instead of interventions and procedures based on gut feelings about what an individual's risk and needs are and what types of interventions should be implemented, today, there are practical steps that correctional programs can follow and implement. Correctional supervisors set forth to implement these changes and to demonstrate that their programs are effective. Often funding was attached to such implementation.

What has followed is a large amount of continued research based on evaluation studies with randomized, controlled samples--the gold standard for demonstrating whether a program "worked." Much of this research came from the University of Cincinnati, led by Ed Latessa and Frank Cullen and their graduate students. This "What Works" literature, often called the Principles of Effective Intervention, provides a blueprint for corrections practitioners to follow to reduce recidivism and change behavior. Many of these principles were developed by researchers using a quantitative research method called meta-analyses.

While there are many principles of effective intervention, some of the principles are listed below (Lovins & Latessa, 2018):

Treatment effectiveness should be determined through evaluation research and extensive, systematic, quantitative reviews of these studies. Controlled randomized evaluation studies are the gold standard in finding "what works."

Programs for people who offend should target areas related to recidivism, such as antisocial attitudes and associates, family problems, and substance abuse.

Programs should use standardized assessment tools to determine the specific individual's risks and needs. Based on the assessment, the intensity and duration of the intervention should be determined.

The treatment intervention should be cognitivebehaviorally based, in which individuals are confronted with their thinking and the behaviors associated with that thinking, given problem-solving and coping skills, and opportunities to practice new behaviors. Cognitivebehavioral programs have been found throughout various disciplines to change behavior effectively.

As stated earlier, these principles of effective intervention have been found in numerous studies and systemic reviews of this research to reduce recidivism. Many probation departments have been trained in these principles, initially led by the Corrections Research Center based at the University of Cincinnati, and procedures and policies based on these principles have been implemented around the country as well as around the world.

Desistance Research

Another emerging body of research regarding correctional intervention is desistance. It is based on a theory of why law violators desist (or stop) criminal behaviors. Desistence is "the long-term abstinence of criminal behavior among those who previously have engaged in a pattern of crime" (Maruna, 2001, p. 21). Initial desistance research focused on the aging-out or maturation process that naturally occurs with law violators over time. These theorists and researchers found that most people who offend will likely stop their law-violating and substanceabusing behaviors through prosocial, naturally occurring events. Sampson and Laub (1993) found that these events create "turning points or trajectories" in people's lives that cause desistance from criminal behavior and substance abuse. For example, finding a good job, getting married, and associating with law-abiding friends, have all been related to reductions in recidivism.

In the last 20 years, desistance research has emphasized the role of cognitive transformations in altering life trajectories. In the research of Maruna (2001), for example, formerly justice-involved men and women from Liverpool, England, were characterized by similar "condemnation scripts" or risk factors (e.g., poverty, delinquent associates, weak social bonds) that are known correlates of criminal behavior. However, what differentiated criminal "persisters" from "desisters" was not background factors but the extent to which they were able to cognitively "rewrite their narratives" and find meaningful roles in the community. Moreover, the desisters, Maruna (2001) reported, had a more positive outlook for the future and a stronger sense of control over their lives.

Similarly, in a long-term follow-up study of males and females who committed serious law violations, Giordano

et al. (2002) found that cognitive shifts in identity and attitudes toward crime were determining factors in desistance. Although changes in social relationships and other environmental factors provided "hooks for change," it was "cognitive and identity transformations and the actor's role in the transformation process" that led to sustained patterns of desistance.

In addition to these critical findings in the desistance literature, researchers have criticized "what works" literature as being too narrowly focused on their definition of effectiveness. For example, they argue that while large quantitative studies provide helpful information, qualitative studies where law violators are encouraged to discuss their motivations, justifications, and cognitive shifts/frames are also helpful. In addition, data gathered using longitudinal studies can be important in the search for changing behavior, and such types of research should be included in determining whether a program is "effective."

The remainder of this paper examines AA through the lens of these theoretical models. It proposes ways to integrate AA more fully into probation/parole programs as a viable option for addressing substance abuse issues. Even now, AA participation is often imposed as a mandated condition of probation. However, some take the position that, given the spiritual nature of the program, it cannot and should not be required. I argue that while AA does utilize God in its material, those who criticize AA for this aspect of the program have never sat in and observed AA meetings. In my research, I have found that AA is consistent with the theories and principles of effective interventions mentioned above, does not mandate belief in God, is cost-effective, and works to change behavior. Therefore, AA should be included in the list of programs that are "effective."

During my career as a criminologist, I have had the opportunity to engage in various research pertinent to corrections and substance abuse interventions. Most of my early work was rooted in the "what works" literature. More recently, I have been involved in qualitative and ethnographic research on women struggling to maintain sobriety and stay out of the criminal justice system. As a result of \my research, I have observed AA meetings for over 20 years. I have had the opportunity to interview and casually converse with people actively engaged in AA. Through this lens, I can discuss what happens behind

the doors of AA and how members perceive the benefits and weaknesses of the program.

One of my consistent observations has been how much AA utilizes cognitive behavioral strategies for change. According to the Applied Behavior Analysis website, "Cognitive behavioral intervention relies on processes whereby people learn to become experts of their behavior, while examining their thoughts and emotions and then applying several strategies" (AppliedBehaviorAnalysisEdu. org). A strategic undertaking for AA participants is to challenge their thoughts contributing to substance abuse and devise alternative ideas and responses to these challenging instances. One person in my study said, "this is a thinking program; our thoughts lead us to alcohol." Another person in AA said, "AA taught me how to change my thinking by playing the tape through in my head and recognizing the consequences of my actions." These are clear cognitive behavior concepts played out in AA every day.

Commonly found in criminological theories is the concept that relationships are related to why people commit crimes and desist from crime. Another goal of AA is to encourage members to find other sober friends, find a sponsor to support them in and throughout the AA program, and enjoy fellowship with other AA members. Another participant in my study claimed, "AA has given me a family and a sense of belonging. I wouldn't be able to quit drinking without my sponsor and support group." A woman in my study conveyed her happiness in having sober people to hang out with.

An additional important component of AA is to reframe past behavior into something that allows a person to move out of the guilt phase and into the change process. For example, a 50-year-old woman I have followed consistently for over 20 years often fretted over how she had let down her kids and wasn't a good mother. After AA participation, she could reframe past behavior and create a new identity. The woman told me she learned "she wasn't a bad mom; she was a sick mom." Redemption scripts tend to be done by the leads or speakers of the meetings when they tell their stories. A script that speakers are supposed to follow includes "what the past was like, what happened, and what it is like today." These scripts allow for redemption for the past and contribute to a new identity.

Conclusion

AA should be considered a viable tool for probation and parole professionals. Research using quantitative and evaluation methods has found that AA works at achieving abstinence from alcohol. In addition, AA includes many of the important components of behavioral and cognitive change found to be necessary among law violators and those who want to change behaviors. I argue that the program should be reconsidered in the eyes of the "what works" researchers. Finally, I believe that AA could be more effective if corrections practitioners trulygenuinelyrstand what is happening in the meetings to help facilitate change.

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IMPACTFUL LEGISLATION



IMPACTFUL LEGISLATION: MAKING THE CASE FOR IMPLEMENTATION AND EVALUATION SUPPORTS IN JUSTICE

Introduction

The legislative season often brings mounting pressure to implement meaningful changes to the criminal legal system. From proposed amendments to criminal codes to the introduction of promising interventions, legislators, leaders, and practitioners alike try to use the legislative process to deliver sustainable reform. Regardless of the original intent, legislation outcomes are often unclear, and the effectiveness of reforms remains in question, creating in some the perception that the criminal legal system is immune to socially significant change. Luckily, implementation science suggests otherwise, as it has helped us understand that a strategy is not enough to effect change. Instead, we need to consider how a strategy is implemented. Effective implementation is, in fact, crucial for actualizing socially significant outcomes.

Decades of research have helped us know more about effective change strategies today than at any other time in history (Bonta & Andrews, 2016; Gendreau et al., 2017; Latessa & Lowenkamp, 2005; Maruna et al., 2013; Taxman & Caudy, 2015). The tremendous amount of scientifically based knowledge that has demonstrated better outcomes for people is leaps ahead compared to the days of "nothing works" in the 1970s (Martinson, 1974). As a result, leaders seeking to improve outcomes are faced with an overwhelming number of options (and, at times, competing options) for promising and best practices, inventories of programs, new approaches, strategies, and tools. The sheer volume of new ideas and innovations is daunting and alluring to others.

History has demonstrated that what policies or practices are chosen may not move the needle toward the desired results as much as how they are integrated into daily work (Burrell & Rhine, 2013; Fixsen et al., 2019; Rhine et al., 2006; Tapia & Walker, 2020). Despite good intentions and a tremendous number of resources, years of the policy change and new ideas are piling up, with only a small number being implemented in a way that can demonstrate outcomes to scale. Pressure to do something new or different is commonplace. Implementation challenges, including competing/ shifting objectives and resource issues, create barriers to effective, systemic change.

As we look to new and better ways of doing business, we must consider the value and practicalities associated

with providing proper implementation support--support which, in part, involves aligning the policies, practices, and programs connected with our strategies. This article argues that effective implementation is needed to ensure better outcomes in criminal legal and human service systems. Without building capacity and infrastructure for this work, legislatively mandated changes in criminal legal reform will continue to produce inconsistent and limited results.

Legislative Patterns Tell Us a Lot About Our Outcomes

Much is undoubtedly happening legislatively; this can be readily confirmed by looking at the record. What is less certain is whether the legislative activity is yielding the intended outcomes. Unfortunately, with the pace of change, the nature of the legislative process, and the pressure for legislators to, well, legislate, it is rare to have the time to pause and take stock of how new ideas, programs, and innovations are panning out in practice. For example, in the last five years in one midwestern state, more than 200 bills were passed related to the criminal legal system, comprising approximately 10% of the 2000-plus pieces of legislation impacting the state overall that the legislature in that state passed during the same time frame.

Legislation is usually designed to serve people, communities, and systems better. Yet no one can benefit from legislative changes that they do not experience. Those changes must be put into practice whenever legislation requires some form of change, whether it be a slight shift or a new way of doing business. Indeed, Fixsen and colleagues emphasize the importance of effective implementation for any change to achieve improved system outcomes. Implementation, or how we put things into practice, directly impacts fidelity and sustainability—an impact that has been shown across disciplines (Fixsen et al., 2019). It is worth noting that more than 20 years ago, the Harvard Business Review reported that 70% of implementation efforts fail, whether they are driven from the top, the bottom, or with critical mass (Beer & Nohria, 2000), and that statistic has remained constant (Fixsen et al., 2019). While it is clear that planned and purposeful implementation has a noticeable impact on the efficiency, effectiveness, and sustainability of change efforts, legislation is rarely

crafted to allow the time, effort, and evaluative resources necessary to let changes stick. Instead, due to time, resource, and structural constraints, the intent of the legislation is often diluted over time or shifts entirely, only to be discovered years later, down the road, as another problem to fix legislatively.

Current Study

Five years of criminal legal legislation in one midwestern state were analyzed using an implementation framework and perspective. First, each bill was reviewed, and implementation-specific criteria (detailed below) were cataloged. Specifically, the review looked at the types of changes required by the legislation and whether there were implementation support components included within the bill. Additionally, the extent to which funding and staffing were sufficient to support the work appropriately was documented.¹

As mentioned above, between 2017 and 2021, more than 200 bills related to criminal legal issues were passed (Table 1), a significant and telling number from an implementation standpoint. Although bill drafters are generally very careful to allow for flexibility, the amount of time, effort, and resources required to do new and different things, to learn from them, iterate the process and try again differs for every agency and every piece of legislation. Such factors are rarely accounted for when agencies are expected to implement multiple changes, big and small simultaneously.

Even significant resource investments in initiatives have not resulted in socially substantial outcomes. This is because sustainable implementation efforts require considerable focus and intentionality on aligning agency practices, developing people, and constructing organizational cultures that support these initiatives long term. However, in many cases, so many change initiatives are passed that organizations are depleted of the human and organizational capital required to support the work. It must also be mentioned that the vast array of required legislative changes passed in any given year all too often includes mandates that are misaligned or in direct conflict with one another, which creates considerable complexity and ambiguity for those responsible for carrying out those changes. These various challenges reinforce the need for expertlevel implementation supports to be infused into public policy from the beginning. Otherwise, most legislative

change efforts are destined to be ineffective without removing significant portions of existing work from those organizations to create space for new and different ways of doing business.

Table 1: Passed Criminal Legal Legislation in a Midwestern State, 2017-2021

	2021	2020	2019	2018	2017
Passed Criminal Legal					
Legislation	36	18	46	50	55
	ТО	TAL: 205			

While 200 pieces of legislation in five years is considerable, it should be noted that many people impacted by the criminal legal system are also entangled with the behavioral health system and social services. As shown in Table 2, when legislation in these two additional areas during the same five-year period is included, the overall number of bills signed into law that impacted justice-involved populations and the agencies designed to serve them increases to over 300.

Table 2: Legislation Impacting Justice-Involved Individuals and Agencies, 2017-2021

	2021	2020	2019	2018	2017
Passed Criminal Justice Bills	36	18	46	50	55
Passed Behavioral Health					
Bills	9	7	10	11	8
Passed Social Services Bills	23	15	11	19	15
TOTAL	68	40	67	80	78
	TC)TAL: 333			
Implementation Criteria Con	siderations	1			Yes/No
The shift in requirement(s): r	equires a ch	ange to curre	ent ways of	doing business	
and includes verbiage such as o	change, mod	lify, permit,	reclassify, re	quired to	
consider, redefine, add, and up	dates.				
New requirement(s): requires	that contem	porary pract	ice, policy, o	or procedure be	
implemented within an existing	g system. La	nguage inclu	ides such thi	ngs as needed,	
new, allow, create, or prohibit					
New program/fund/office/tas	k force: the	creation of a	new progra	m, fund, office	,
commission, or task force					
Pilot program: requires the de	velopment o	of a pilot pro	gram		
Evaluation: requires that an ev	aluation be	completed a	s a part of th	e legislation	
Expansion: the addition of state	ff to an exist	ting entity or	the addition	of inclusion	
criteria regarding those who are	e served				
Implementation capacity and	infrastruc	ture conside	rations		Yes/No
Full-Time Employees (FTE)					
Funding appropriations					

For this study, 179² criminal legal bills passed in one midwestern state were reviewed during the five years between 2017 and 2021. Figure 1 provides an overview of the rubric used to document each bill's implementation components as described in the yearly Digest of Bills prepared by the Office of Legislative Legal Services. Criteria include changes that depart from standardized practice and require implementation support for people to operationalize, evaluate, and scale in practice. In many cases, multiple implementation criteria were needed within a single piece of legislation.

Figure 1: Implementation Criteria Considerations Rubric

Yes/No
Yes/No

Findings

All legislation reviewed required some degree of implementation at the state and local level and most required multiple implementation components. Every mandated change has its implementation challenges, resource demands, and expectations. The work of Fixsen

and colleagues (2019) demonstrates that implementation efforts for a single new policy/procedure can require upwards of 4 to 17 years to be fully completed if successful. When change efforts are compounded with layered, intricate, and varied requirements, this adds to the complexity, resource intensiveness, and time needed to implement with any quality measure fully. The results demonstrate how organizations are, in many ways, fighting a losing battle, as each year brings about hundreds of new requirements, shifts, and changes that all demand implementation supports.

Much of the reviewed legislation required shifts in existing practice along with new requirements, programs, or accountability for further processes. Interestingly, up to 7% of reviewed legislation included evaluation components in any given year, and not even 5% included a pilot program phase provision. The omission of evaluations creates situations where organizations are unlikely ever to know whether the changes they are making are having an impact if their efforts are efficient and practical, even if the changes are taking place in practice at all. It also leaves a lot of room for creative reporting processes and a gap between what we believe is happening versus what is happening in practice. Leaders often need more time or capacity to carry out verification efforts. They must move quickly from one implementation effort to the next to keep up with all the yearly changes.

It comes as no surprise that less than 50% of the legislation enacted during the review period included appropriations to provide funding. Leaders may be motivated during the legislative process to report that no additional funding will

be necessary, as funding requirements often decide whether a piece of legislation passes. Since many leaders do not openly discuss organizational barriers, challenges, limitations, and costs when it comes to desired legislation, the result is commonly referred to as "unfunded mandates." These are extremely difficult to accommodate with existing resources and place an

¹ State and local agencies are often asked to participate in the fiscal note review process to identify whether funding and employees are necessary to complete the work. It has been the experience of these writers that agency heads are not always able to share open and honest information about the impact of pending legislation. In many cases, reporting that there will be fiscal needs associated with changes results in important legislation failing through the process. Therefore, many agency heads are under pressure to report back to the legislature that there is no fiscal impact when the truth may be far different. As such, the data on funding and FTEs in this study should be reviewed with discernment as it may represent what was required to pass the bill as opposed to what was needed to support it.

² 26 bills were excluded from review as they were written to clarify existing language, and/or move things around in statute.

incredible burden on agencies and stakeholders who are forced to do more with less. While maximizing resources can be considered a best practice when changes are aligned, the realities of the array of legislation passed in any given year make that very difficult, if not unlikely. To appreciate the scope of this problem, consider that 31% of passed legislation in 2021 included funding/appropriations. That translates to 24 "unfunded" bills in just one year, whose implementation expenses must be covered by existing resources. Moreover, on average, 25% of bills enacted between 2,017 and 2021 included funding/appropriations. That translates to more than 150 unfunded mandates over five years stretching organizational capacity and creating misalignment and competition for existing resources.

Table 3: Implementation Considerations of Criminal Legal Legislation in a Midwestern State

	2021	2020	2019	2018	2017
Imp	lementation	Criteria Co	nsiderations	S	
Shift in					
requirement/practice	80%	47%	67%	57%	75%
New requirement/practice	51%	35%	49%	36%	20%
New program, fund,					
office, commission, and/or					
task force	9%	24%	4%	10%	3%
Pilot program	3%	0%	0%	2%	3%
Evaluation	3%	6%	2%	7%	0%
Expansion of existing	3%	6%	2%	0%	5%
Implementation	on Capacity	and Infrastr	ructure Con	siderations	
Funding/Appropriations	31%	12%	40%	26%	10%
Specified FTE	9%	6%	4%	2%	0%

Most agencies impacted by legislation must have existing infrastructure and the capacity to implement significant changes well, and most legislation does not include these considerations. Without the necessary implementation capacity and infrastructure, most change efforts, legislative or otherwise, are at significant risk of failure, costing taxpayers and the community millions. Without purposeful leadership and support, full implementation, defined as 50% of the people engaged in the change have met a measure of fidelity (Fixsen et al., 2019),

can take more than a decade to accomplish, with some studies indicating it can take even longer—if it happens at all. Understanding this gap illuminates why our efforts to make change through legislation alone have a limited impact on system outcomes. As each legislative session approaches full swing, agency heads and legislators must consider how they craft, structure, and design legislation so they are set up for success. This requires an implementation framework to account for the people, data, organizational culture, leadership, and feedback dynamics involved. Tools such as The Legislation Impact Tool³ are necessary to facilitate dialogue and discussion between legislators and corporate leaders about the realities of legislation and its impact on the people and the work.

Barriers to Implementing Legislation

Developing and replicating effective policies, practices, and programs requires considerable attention from diverse groups of stakeholders, implementation experts, and applied researchers over sufficient periods (Fixsen et al., 2019; Wolfe, 1995). In many cases, ten years or more are needed to clearly understand organizational outcomes (Fixsen et al., 2019). Only when an organization reaches some level of fidelity (doing things consistently and with quality) can there be a consistent way to judge whether a program exists in practice and a way to interpret results and outcomes. Given this, one factor standing in the way of implementation is that more time should be allowed. Demands on legislators and those in leadership roles compel them to pass more and more bills and implement more and more changes, making it impossible for those responsible for implementation to keep up with the pace of new demands. As a result, large

departments or entire organizations are put in the position of trying to implement ideas from previous leadership or legislation without understanding why or analyzing whether they align with other efforts. It could be said that many of today's challenges are a direct result of yesterday's ideas.

Another barrier to impactful legislation stems from the desire of many state decision-makers and agencies to replicate what is working somewhere else. An illustrative

³ Gain access to The Legislation Impact Tool here: https://acji.org/legislation-impact-tool

example of this was brought to light by an L.A. Times editorial on what was intended to be a therapeutic rehabilitation facility for youth in L.A. County (Times Editorial Board, 2021). Looking to reform their approach and improve outcomes for justice-involved youth, local leaders borrowed ideas from model programs in other states and contexts, expecting the same outcomes for some of the most challenging youth cases in their county.

Reform efforts started with Senate Bill 81 (SB 81), also known as the "Juvenile Justice Realignment" bill. SB 81 limited certain types of commitments to a state youth correctional facility and provided funding to county probation to support youth who had committed serious offenses. Seeking opportunities to implement SB 81, the Los Angeles County Probation Department leveraged SB 81 funding to demolish a county-operated juvenile camp in Malibu called Camp Kilpatrick and build a new cottage-style facility guided by the Missouri Youth Services Institute (MYSI) model.

Stakeholders wanted to offer a different way of rehabilitating youth and depart from the typical boot camp style and institutional approach of traditional county youth camps. The goal was to provide a therapeutic community through a home-like environment with a wide range of individualized programming emphasizing trauma-informed care in a small-group setting. More than \$50 million was spent on a state-ofthe-art residential campus, and optimistic leaders coined the term "L.A. Model" for this project, only to have it closed four years later by the governor. In addition, an evaluation report presented to the county by an outside non-profit group, Evident Change (2021), revealed that it was unclear what outcomes the L.A. Model could have achieved because it was never properly implemented in the first place.

The failed implementation of the L.A. Model is a case study of the troubling, costly, and all too common gap between leaders' vision and what happens in practice. Just because something has worked in one state, community, or agency does not mean it will perform the same in another locale. We must consider the context, culture, needs, and people involved and create flexibility, implementation supports, and evaluation supports that balance the need for fidelity to the practice with the unique needs of the context in which it is being implemented (Fixsen et al., 2019). When the new policy or innovation is not aligned with the existing priorities of the implementing agency, the gap between what legislation is trying to accomplish and what is happening

in practice grows wide and deep.

Another common barrier to the successful implementation of legislation is that very seldom do we take the time to check in on the implementation of legislation after initial installation. Suppose we follow up on legislation through sunset reviews or new reporting structures. In that case, the focus is almost always on outputs or metrics that show progress, with little discussion or attention given to the inherent barrier and alignment issues in any implementation effort. As a result, legislators and agency heads are busy and move on to tackle the next pressing issue, missing out on the opportunity to improve processes, adjust practices, align and blend efforts with existing systems, learn from mistakes, and consider reprioritizing or stopping doing certain things altogether. The goal of implementation is the full and effective use of new ways of doing business in practice. Simply creating legislation or developing a new policy strategy does not guarantee results.

Unfortunately for all of us, legislation and the large bureaucracies and agencies tasked with implementation are at risk of policy "workarounds" that prevent people from changing what they do in day-to-day practice. Consider the efforts that many states have taken to reduce technical violations. When these efforts began en masse, the focus was predominantly on creating structured tools as decision-making supports when providing sanctions and incentives. These new processes were implemented haphazardly, quickly shifting to an administrative process, documenting what staff already wanted to do with their clients. Soon after, many states moved to more prescriptive processes to reduce technical violations, removing discretion from staff to make violation decisions and placing that responsibility either with leadership or with blanket policies that restricted anything other than the desired outcome.

Yet, even after all this effort, and for many organizations, a tremendous amount of work placed on leadership to review individual cases, technical violations have remained primarily unchanged. At the same time, some were reduced in the short term only to return to the status quo soon after. Regarding parole in Colorado, Senate Bill 2019-143 was crafted after years of trying to address this issue internally within state organizations and through the legislature. By 2019, considerable frustration with poor outcomes existed among leaders, legislators, and other critical stakeholders. As a result, SB19-143 was prescriptive about what behaviors were eligible for a return to prison and the alternatives for

other violations, significantly limiting the options available. Outside of new crimes and behaviors involving people with sex offenses, the only remaining way to return a person on parole to prison was due to a violation related to electronic monitoring devices. This resulted in a policy that echoed legislation and an organizational culture that already proved resistance to changing its approach to breaches. Once an electronic monitoring violation became one of the only remaining avenues for revoking a person's parole, it should have come as no surprise that the use of electronic monitoring skyrocketed because of the change initiative.

Reform efforts often bump up against organizational culture and mindsets or habits that resist new procedures and ways of working, even when required by law. From this perspective, one can think of those mindsets and habits as the "last mile problem" in the implementation of reform legislation. Intelligent, passionate, and dedicated people can craft legislation. But getting that to translate into practice requires agencies large and small to operationalize the reform into new job functions, mindsets, and habits that change the way they do their work. What we learned in Colorado was that reforming the approach to the work took more than simply new laws and policies. In Colorado specifically, legislative reform to address violation behavior had been occurring for more than a decade starting in 2010 with HB 1360, in 2015 with SB 124 and HB 1172, in 2017 with HB 1308 and HB 1326, and then again in 2019 with SB 143.

Implementation as a Priority

Data on change initiatives across disciplines is clear; they are most likely to fail. In the human service field, most legislation requires that people within organizations either shift their focus or completely change the way they do business. Either way, the data on people-dependent change initiatives is even less promising, with 80-90% of initiatives failing to reach full implementation (Fixsen et al., 2019). This translates to well-intentioned policies and practices never actualizing results for the people they are supposed to serve. Without guided and directed implementation support, most legislative initiatives are merely a well-intentioned exercise in futility. Scientific and strategic implementation work requires formal tools and structured interventions to guide organizations, leadership, and people to systematically make impactful changes. Without it, people are relegated to legacy strategies, best guesses, and personal agendas to guide the work. As the legislative session approaches, legislators can reconsider how they craft, structure, and design legislation to support success. This requires

using an implementation framework to account for the people, data, culture, leadership, and feedback dynamics involved.

Effective implementation involves five dynamics: people, data, culture, leadership, and feedback. These dynamics guide the purposeful and intentional actions required to reach full implementation (i.e., as mentioned above, having at least 50% of practitioners delivering new policies, practices, and programs with fidelity) (Fixsen et al., 2019). Together they create alignment between an ideal state and what is happening on the ground.

While each dynamic is essential, the people dynamic is especially critical, as people are the most important and valuable resource within organizations. They are responsible for executing the policies, practices, and programming that drive intended results—and they often create barriers, both intentional and unintentional, to full implementation. It is critically important who is selected to support the change effort, how they are supported, and how new champions for the work are developed over time. This translates to the need for legislation to include timeframes that support selecting the right people, training, and coaching for proper skill development, and supporting mid-level staff to champion the work beyond changes at the highest leadership level. It takes more time, energy, and effort to engage in new processes and service delivery than to maintain the status quo. As such, organizations need time to prepare their people, letting them become familiar with new practices and procedures and building a foundation that supports the work. Of equal importance is creating avenues for people to exit should they find themselves unable to align with the change.

Implementation of any change requires data to drive decisions about both progress and quality. Too often, organizations are situated either within a data desert, where they have very little data to show the impact of their work, or are experiencing data saturation, where there is so much data that people do not know what exists, how to engage with it, or how to connect data points to understand the impact. The data dynamic requires that organizations build the capacity to become data-driven about the things that matter most. This means identifying the core components of legislation and measuring both the implementation process and the progress, or the change that is taking place. Too often initiatives are adjusted or replaced before they have been properly implemented, suggesting that what was changed could have been more effective when, in truth, it was likely never fully implemented in the first place.

The culture dynamic pertains to the habits, rules, mindsets, and conversations that occur within an organization. When legislated mandates rub up against or clash with organizational culture, making a meaningful change can be even more difficult. Organizational culture is often invisible to the people on the inside yet can be a powerful driver of progress or lack thereof. Organizational culture characteristics that drive implementation success include flexibility, innovation, professional development, risk-taking, and trust. Possession of these characteristics must extend beyond the leader of an organization to the staff within it—those who are ultimately responsible for making changes happen in their day-to-day work. These characteristics are in direct conflict with the culture of many government and justice agencies, where process, bureaucracy, a chain of command, and control tend to be emphasized. Legislation should support the efforts of organizations to step outside of their proverbial comfort zones by creating flexibility and risk-taking in the implementation process, thereby allowing changes to be adapted and tailored to meet the needs of the organizations and those they serve.

The leadership dynamic is also powerful when it comes to creating lasting change within organizations and communities. The very nature of executive leadership positions within the government, often at-will positions that change erratically, can destabilize even the bestresourced efforts. When organizations experience multiple leadership changes in quick succession, staff can experience a series of confusing, sometimes incompatible visions that may or may not align with the legislative intention. Consider too that the nature and design of the legislature can be a source of destabilization as well, for legislatures are prone to political pendulum shifts and passage of agenda-based bills that may or may not be explicitly clear. As discussed above, the legislature can also put pressure on agencies to implement numerous, sometimes incompatible, legislated mandates at the same time, creating misalignment within agencies. Agencies must have highly skilled leaders who can integrate these requirements into a clear and comprehensive vision for the future.

Implementation science, at its foundation, presumes that strategies and processes will change over time through experimentation and feedback. Through recursive feedback loops, organizations can look for opportunities to get information about their work in practice and the impact it has, not just for themselves but for other stakeholders and the people they serve. The feedback dynamic is about creating processes that help leaders and teams determine what is being implemented and

the impact it is having internally and externally. It is not uncommon for leaders to overestimate what is happening at the ground level. Without feedback, it can take years for organizations to realize that what was believed to be happening at the ground level is, in fact, not taking place and that they have fallen far short of what was required of them.

Conclusion: A More Impactful Approach to Legislation

There is no shortage of great ideas, many of which would make a substantial difference in the functioning of the criminal legal system IF they were implemented well. The challenge here is that implementation takes time, considerable effort, and long-term commitment to the process—all of which are in short supply in the rapidly changing policy landscape. Committing to sustainability is hard. Change and possibilities are far more energizing and fascinating.

Sustainability is critical to our success and requires fighting the urge to introduce the next new shiny thing because things "aren't working" even though they have not been fully implemented yet. Abandoning or shifting programs before full implementation is costly and counterproductive, creating considerable challenges with organizational culture, affecting stakeholder engagement, and causing communities to suffer with each failed or retracted change. A lack of clarity and insufficient data on whether newly adapted practices are working causes the reinvention of reforms (over and over again) and an assessment of practices believed to be the problem.

As our implementation knowledge base increases, so does our commitment to using effective implementation strategies in practice. If this occurs, socially significant improvements in the criminal legal system can be expected in the next few decades (Fixsen et al., 2019). This study's rudimentary review of legislation clearly demonstrates that all legislation requires implementation. Therefore, change via legislation requires considerable support and time baked into the process. Two to four years of dedicated resources, expert implementation teams, and a "hyperfocus" on singular implementation efforts are minimal requirements for implementing each legislative requirement well and with high quality and ultimately understanding whether it has made a meaningful impact. Leaders must commit to comprehending and developing their knowledge and skills related to implementation and leading change efforts to avoid common pitfalls that are costly and destructive.

As hard as it is to admit, accurate implementation takes

time. Most implementation efforts fail. Change that requires people to modify what they think, believe, and how they show up at worse, even less likely to succeed. When change initiatives fizzle, fade, and fail because of poor implementation, cynicism and belief that nothing makes a difference are fueled. As such, change initiatives that come about via legislation must be adequately funded to include implementation supports related to people, data, organizational culture, leadership, and feedback. Legislators must provide funding for and require updates on implementation process outcomes. It is also important to resist the urge to evaluate program outcomes before the program is fully implemented. This leads to a misunderstanding of whether the program "works" or not. A program cannot work as intended if it is never fully implemented. Consider asking questions about fidelity, probing for unintentional workarounds, and ensuring that policy makes it into practice in the first place while avoiding mandates and demands for the program and/or practice outcomes early on.

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Biographical note:

With over 20 years of experience, Dr. Alexandra (Alex) Walker has considerable background implementing innovative justice reform strategies in organizations big and small. As a Founding Member of the Alliance for Community and Justice Innovation, she partners with agencies to address alignment and implementation. This work focuses on clearly identifying desired outcomes and building innovative systems to support the people, data, culture, and leadership factors that aid the work. Leveraging her experience as a public speaker and implementer, Alex specializes in facilitating small and large group workshops, presentations, and engagement events to identify and address alignment and adaptive challenges when implementing transformational change.

Johanna Leal has 20 years of experience leading innovative justice reform efforts in community and government agencies. As a Founding Member of the Alliance for Community and Justice Innovation, she provides training, support, and technical assistance to community and faith-based organizations across the



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