



Research on Effective Interventions

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1



What outcomes do you
consider success in
delinquency cases?



RNR Model

Risk = risk of reoffending (low, moderate, high)

Need = dynamic criminogenic needs
(procriminal attitudes, antisocial personality, procriminal associates, history of antisocial behavior, substance abuse, circumstances pertaining to family/marital, school/work, and leisure/recreation domains)

Responsivity = variation in strengths and deficits that impact effectiveness of particular interventions

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3



Core Research Finding

- System processing leads to negative impacts for youth who are not high risk
- Crossroads study
 - 1261 youth, 5 years, 3 sites
 - First offense, offenses that were diverted 50% of the time

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4



Crossroads Study Findings

Youth who were formally processed were more likely to be:

- re-arrested,
- incarcerated,
- engaged in more violence

They reported

- greater affiliation with delinquent peers,
- lower school enrollment,
- less ability to suppress aggression

They had lower perceptions of opportunities

They were less likely to graduate high school within 5 years

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5



Crossroads Study Findings

Formal processing was NOT related to

- general offending
- physical aggression
- employment
- internalizing problems
- interpersonal callousness
- Impulse control
- consideration of others
- sensation seeking
- future orientation
- exposure to violence

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6



Crossroads Study Findings

Formal processing was never related to better outcomes in any domain tested

In no instance was informal processing related to worse outcomes

Formal processing for an adolescent charged for the first time with a relatively moderate offense does more harm than good

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7



Risks, Protective Factors, and Strength-Based Services

Youth Protective Factors Study

- Over 32,000 youth in 3 sites, 5-year study period
- Retrospective research on risk factors most associated with reoffending
- Connection of protective factors and strength-based services to reoffending
- Implementation of the RNR model

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8



Key Youth Protective Factors Study Findings

- Top risk factors that predicted person/violent reoffending
 - Personality and attitudes that condone crime
 - Family problems
 - Negative peers
 - School behavioral problems
- Top protective factors
 - Self-control and self-efficacy
 - Social support from caregivers
 - Prosocial engagements
- Important for younger youth only
 - Substance use (14 and under)
 - School connectedness (9-12)

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9



Evidence Based Interventions

Interventions to improve self-control and reduce disruptive behaviors:

- social skills training targeting personal responsibility, conflict resolution, model behavior, and attention training
- family-based interventions such as skill building with parents and youth (e.g., Parent Management Training or Multisystemic Therapy)

(Youth Protective Factors Study)

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10



Evidence Based Interventions

OJJDP Model Programs Guide
<https://ojjdp.ojp.gov/model-programs-guide/all-mpg-programs#all-mpg-programs>

- Delinquency Offending (rated effective):
- Adolescent diversion project (Michigan State University)
 - FFT
 - Group Violence Reduction Strategy
 - MTFC-Adolescents
 - MST
 - Operation Ceasefire

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Table 1. Summary of Evidence-Based Interventions for Use in an RNR-Model Juvenile Justice System.

	Multisystemic Therapy (MST)	Functional Family Therapy (FFT)	Multidimensional Treatment Foster Care (MTFC)
Target population	Youth ages 12–17 with chronic antisocial and delinquent behavior, at high risk for out-of-home placement	Youth ages 11–18 with moderate to high risk of out-of-home placement	Youth ages 12–17 with chronic delinquency and antisocial behavior issues warranting out of home placement
Target behavior	Antisocial and delinquent behavior	Antisocial and delinquent behavior	Antisocial and delinquent behavior
Curricula	Restructure youth's environment across systems; e.g., improve peer social network; increase capacity for employment; improve family system	Use applied behavioral analysis techniques to develop family's motivation and hope for change	Place youth with highly trained and supervised foster family that implement behavior management programs, supervise daily behaviors, and limit exposure to delinquent peers
Dosage of treatment	MST therapists meet at least weekly with families over a 3- to 5-month period and are available to them 24 hours a day	Approximately 30 hours' worth of family visits in a 90-day period	Youth receive at least an hour each week of individual and family therapy for 6–9 months; the foster home also serves as a therapeutic environment for youth
Skills learned	Improved problem-solving, social, and communication skills; additional job-related skills to increase vocational opportunities	Communication and problem-solving skills, self-sufficiency, self-respect	Interpersonal skills, prosocial behavior, family management skills, problem-solving skills



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Evidence Based Trauma Treatment

- NC Child Treatment Program - <https://ncchildtreatmentprogram.org/evidence-based-treatments/>

Provider roster (search by zip code):
<https://ncchildtreatmentprogram.org/services/roster/>



13

Effective Probation Conditions

- Conditions should be limited in number and written in developmentally appropriate language
- Research has shown a negative relationship between the number of conditions and successful compliance
- Incentives, graduated responses, and restorative practices are more effective than punitive sanctions, including detention, probation extensions, fines and fees, or more restrictive probation conditions.



Research and Resource Companion for High-Risk Youth and Challenging Cases Bench Cards,
 Council of State Governments and National Council
 of Juvenile and Family Court Judges

14

Potential Strategies

- Review hearings and
 - Time phasing interventions
 - Incentives (eliminate curfew, shorten probation, praise, what else?)
- Order proven EBP when need indicated in CCA in lieu of general therapy
- What else?



15



16