Saving Children and Young People from a Life of Crime

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Risk-Focused Prevention

- Identify key risk factors for offending and implement prevention techniques designed to counteract them
- Identify key protective factors and implement techniques designed to enhance them
- Public health method. For example:
  - Key risk factors for coronary heart disease include smoking, a fatty diet, lack of exercise
  - Therefore, encourage people to stop smoking, eat more healthily, take more exercise
Saving Children From a Life of Crime

- Book by David P. Farrington and Brandon C. Welsh (Oxford University Press, 2007)

Later article:

Key conclusions:

- Crime can be reduced by intervening early in life to tackle key risk factors
- Key individual, family, peer, school, and community risk factors are reviewed
- Effective individual, family, peer, school, and community interventions are reviewed
- There is a need to establish a national strategy or national agency for early prevention in all countries
Important Risk Factors for Delinquency

- Individual: impulsiveness/hyperactivity/risk-taking, low school attainment, low empathy
- Family: poor supervision, harsh/erratic discipline, cold/rejecting attitude, low parental involvement, child abuse/neglect, broken families, criminal parents, young parents
- Peer: delinquent siblings, delinquent friends
- School: high delinquency rate school
- Socio-economic: low income, poor housing
- Community: high crime neighbourhood

Effective Prevention Programs

- Home visiting (Olds)
- Pre-school (Schweinhart)
- Parent training (Sanders)
- Skills training (Augimeri)
- School-based (Salmivalli)
- Home/community programs with older children (Alexander, Chamberlain, Ross)
- Multi-systemic therapy (MST) (Borduin)

Leena Augimeri (Toronto)

* Target boys aged 6-11 referred by police
* Based on skills training, cognitive problem solving, self-control, anger management: aim to control impulsiveness
* SNAP: Stop now and plan. Snap fingers
  * Stop: calm down, take deep breaths, count to 10
  * Now and: use coping statements, think what to say to remain calm: this is hard but I can do it!
* Plan: effective solutions to interpersonal problems
* Teach children to identify triggers: what makes them angry or upset
12 week program; group of about 7 children meet for 90 mins with facilitator (6-7, 8-9, 10-11)

Social skills, self-control, group discussion, modelling, behavioural rehearsal, role playing, relaxation training, home practice exercises

Topics include: joining in, dealing with anger, avoiding trouble, dealing with peer pressure, apologising, stopping stealing

Evaluation by Koegl et al. (2008): program is effective

Independent evaluations by Lipman (2008) d=.41; Burke & Loeber (2015) d = .40
Cost-benefit analysis of SNAP program of Augimeri

Program costs $4,641 per boy on average (2012 $)

Effect size $d$ between .2 and .4

Corresponds to 18% to 33% decrease in offending

Saves 1.25 to 2.29 convictions per boy (age 12-20) based on convictions of 376 SNAP boys

Saves $9,493 to $17,404 per boy (discounted)

Benefit: cost ratio 2.1 to 3.8 for convictions

Scaling up to self-reports: benefit: cost ratio 17 to 32
Systematic Reviews

- Campbell Collaboration Crime & Justice Group: freely available reviews at:
  - www.campbellcollaboration.org
- What doesn’t work? Deterrent strategies: Scared Straight (Petrosino), Boot Camps (Wilson), Official processing (Petrosino)
- What does work? Parent training (Piquero), child skills training (Losel), mentoring (Tolan), self-control programs (Piquero), bullying prevention (Ttofi), cognitive-behavioural interventions (Lipsey)

- 50 systematic reviews of individually-based, family-based, and school-based interventions
- All types of programs were effective
- Median odds ratio = 1.46, corresponding approximately to a one-quarter reduction in prevalence
- Family-based programs were most effective, followed by individually-based programs, with school-based programs somewhat less effective
Since there are multiple risk factors, there should be multiple-component interventions targeted on child, family, peers, schools and communities.

Generally, these are more effective than single component interventions.

But hard to identify active ingredients and decide which elements of a package are more effective.

How learn from experience and improve multiple-component interventions?

Important multiple-component intervention: Communities That Care (CTC)
Key community leaders meet and agree to implement CTC

Set up Community Board to take charge of CTC on behalf of the community

Audit of problems and risk and protective factors using surveys (school, community) and records (police, school, social, census)

Assess existing resources, choose programs from a menu of strategies that have been proved to be effective in high-quality evaluations

Implement programs, evaluate effectiveness
The Menu of Strategies

- Prenatal/postnatal home visiting programs
- Preschool intellectual enrichment programs
- Parent training
- Child skills training
- Teacher training/curriculum development
- Anti-bullying programs
- Media campaigns
- Situational prevention
- Policing strategies

- 24 communities: 12 matched pairs
- One community in each pair randomly assigned to CTC, one control
- Student surveys from grades 5-10 (ages 10-15)
- Over 4000 E & C students followed up to grade 10
- Find decreases in:
  - Alcohol use 11%
  - Cigarette use 15%
  - Delinquency 11%
  - Marijuana use 11%
- Kuklinski (2015) benefit-to-cost ratio is 8.22 to 1
Offenders differ significantly from non-offenders in many respects, including impulsiveness, empathy, low intelligence and low school achievement, poor parental supervision, child physical abuse, punitive or erratic parental discipline, cold parental attitude, parental conflict, disrupted families, antisocial parents, large family size, low family income, antisocial peers, high delinquency-rate schools, and high crime neighbourhoods.

More longitudinal studies are needed in different countries, with frequent measurement of risk factors and offending, to study within-individual changes in risk factors and in offending, to establish what are the most important causes of offending.
Police-reported data show that young adults aged 18-24 have the highest rates of criminal offending of any age group in Canada (Allen, 2014).

Therefore, reducing offending in the young adult years should be a priority and should have a big impact on the total crime rate.

How can the transition from juvenile delinquency to young adult offending be prevented most effectively?

Program Recommendations

* Effective programs should be implemented in Canada to prevent the transition from juvenile delinquency to young adult offending, preferably targeting the most important risk and protective factors
* Research is needed on how to make juvenile court processing more rehabilitative and less damaging
* The most effective programs are skill building programs such as cognitive-behavioural therapy and counselling programs such as mentoring
* Specific programs include Reasoning and Rehabilitation, Enhanced Thinking Skills, Aggression Replacement Training, Functional Family Therapy, Multisystemic Therapy, and Multidimensional Treatment Foster Care. Other effective programs include Job Corps, restorative justice, and drug treatment programs
New methods of dealing with young adult offenders could be piloted in Canada. These could include: (1) increasing the minimum age for adult court; (2) applying a “maturity discount” to young adult offenders, which involves giving them less severe dispositions if their judgment is immature; (3) establishing special courts for young adult offenders; (4) establishing special correctional facilities for young adult offenders; and (5) using risk/needs assessment and screening of young adult offenders to assess risk and protective factors and the maturity of brain functioning.
It is important to implement interventions in childhood to prevent the onset of offending, and interventions in adolescence to prevent the continuation of offending into the young adult years. It is important to evaluate the impact of interventions using high quality experimental and quasi-experimental designs. It is important to measure the financial benefits and costs of interventions.