Executive Summary

The Impact of Redemption Reintegration Services

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In Collaboration with:
Peter Frampton, Andrew Holton, Robyn Hoogendam
Redemption Reintegration Services conducted a nine-month study to compare the effects and expense of the RRS culturally-specific reintegration model with usual and institutional reintegration services.

“The research being conducted in partnership with Dr. Gina Browne and our organization is the first of its kind! RRS is excited to be a part of a study which is providing tangible evidence that the hard work of our youth is paying off.”

– Victor Beausoleil, Founder and Executive Director of RRS
Summary findings

What follows is a summary of the findings from the study. In all, it is clear that those who use Redemption Reintegration Services have better outcomes than those who do not.

The Problem and What This Study Adds

The over representation of African Canadians in federal custody has increased by 50%, especially in the last 4 years. Challenges and failures to reintegrate individuals back into society results in high rates of recidivism. A majority of the literature focuses on recidivism and treatment of deficits and fails to measure individual talents, strengths and other variables that can meditate and moderate outcomes. An effective reintegration service and its evaluation would focus and measure these variables.

Objective

To compare the effects and expense of an African Canadian culturally specific reintegration service, Redemption Reintegration Services (RRS) with usual and general reintegration services.

Design

This study was a 3-year prospective randomized clinical trial with an economic evaluation of 2 approaches to reintegration of young African Canadians post incarceration. There was a 95% retention at the 9-month follow-up of those randomized (n=230). 10 of 11 candidates lost to follow-up were in the usual care group leaving 114 candidates in the RRS group and 105 in the Usual Reintegration Service group.

Intervention Groups

Usual Reintegration Services: The Usual Care (the comparable service to RRS Care) refers to the existing reintegration services within the City of Toronto. Usual Care provides reintegration services for youth in conflict with the law within the City of Toronto. Generally speaking, reintegration services are limited by a time constraint for the direct reintegration service. This is
necessary to manage a saturated case load of clients who require reintegration care. Case managers specializing in reintegration usually have to close client files after a period of 3-6 months (regardless if clients have obtained required benchmarks or reached an ideal level of progress and attainment).

**RRS Program:** RRS is focused on culturally reflective services for the African-Canadian community, taking in mind traditional African practices and provides a solid foundation on self-identity based curriculum focused on the needs of the broader African Diaspora. The reintegration worker, in collaboration with the candidate continually explored the candidate’s talents, interests and behaviours. Using the four pillars of the RRS Integrated Model of Care as a foundation, the reintegration worker developed an individual progress plan, which was utilized within candidate case management and on-going recidivism reviews. Candidates participated in the development of a personalized plan which involved a variety of workshops and programming which included activities such as: The TDSB/RRS Transitional School, African Book Collaborative, Employability Sessions (resume development, mock interviews, professional development skills), and internal employment opportunities such as: Focus on Youth, Social Enterprise development, Gender-specific sessions including RITES of Passage, partaking in our quarterly Durbar (African homecoming after release from correctional facility), cooking nutrition classes, culturally appropriate counseling and health care, peer mentor program-Making the Connection, arts (photography, poetry, film and editing, sketching, song, and dance) history & cultural ancestry classes, parenting & family engagement programs, lectures, Physical fitness activities such as – Qi Gong, Capoeira, basketball, and other organized sports and martial arts. Once an ideal level of progress is made, active case management ceases and the RRS candidate relates to RRS supports as needed.

**Measures**

Measures included socio-demographic characteristics, and types of recent offenses at intake. After random assignment and during the first week of enrolment into study groups and 9 months later, proposed mediating and moderating variables were measured: reported Personality Strengths (Littauer), Developmental Assets (Search Institute), Meaning in Life Questionnaire (Steger & Frazier), the Structured Assessment of Violence Risk in Youth (SAVRY), Behaviour Checklist Youth Report (Achenbach), Psychosocial Living Environment (Toronto United Way) and expenditures for use of all health, social and intervention services (Browne et al). The primary outcomes were changes in the participants’ life situation (recidivism, school enrolment, stable housing, and use of social assistance).

**Results**

Representativeness: The baseline characteristics of n=219 candidates completing the 9-month follow-up were similar to the 11 non-completers on 25 of 29 socio-demographic characteristics on low levels of all developmental assets, low meaning in life, low levels of positive personality attributes, low levels of emotional support, exposure to a high degree of community crime, poverty, violence, problems with behaviour, and absence of protective factors. Completers were proportionally less exposed to extremely violent offenses and had a lower proportion
of charges for theft under $5,000 (7.8% vs 27.3%). Completers had a greater proportion of persons discharged from incarceration for robbery (15% vs 0%), possession of weapons (9.6% vs 0%), trafficking, drug possession with intent to sell (10% vs 0%). These findings could be due to chance. However with a greater loss of candidates exposed to high violent offenses and risk in the usual care group, this would render a control group with less baseline risk at 9 months and this could potentially underestimate any differences found between study group at 9 months.

**Effectiveness**

As hypothesized, study groups were equivalent at baseline on all but one of the study variables. After 9 months, RRS candidates demonstrated improvements in all internal and external developmental assets (protective factors) of 116% compared to a -12% to -15% deterioration for usual service candidates (Table 1). In addition, RRS candidates reported:

- A greater proportion (38.3%) of youth endorsing significant gains in 26 self reported personality strengths (Table 2) versus 20.8%.
- A 25% improvement in both the presence (Table 3) and search for meaning (Table 4) vs. -5% deterioration.
- 38% to 58% improvement in reduced presence of social and individual risk factors compared to a deterioration or a greater number of risk factors ranging from 1.61% to 3.98% (Table 5).
- A 71% to 119% improvement in behaviour (prosocial, emotional/anxiety, conduct, aggression, hyperactivity, compared to an 8 to 19% worsening of these behaviours (Table 6).
- A 12% greater participation in groups outside of neighbourhood (Table 7).
- More favourable changes in life situation such as new or changed jobs (65.8% vs 4.8%), secured stable housing (80.7% vs 12.4%), acquired certifications (38.6% vs 1.9%), enrolled in school or training (60.5% vs 12.4%) (Table 8).

![Table 1](image1.png)

**Mean and Percent Change at 9 Months in Internal and External Developmental Assets by Study Group**

<table>
<thead>
<tr>
<th></th>
<th>RRS n=114</th>
<th>Usual Care n=105</th>
</tr>
</thead>
<tbody>
<tr>
<td>Baseline</td>
<td>15.4</td>
<td>15.8</td>
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<tr>
<td>9 Months</td>
<td>33.3</td>
<td>13.6</td>
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<tr>
<td><strong>Change</strong></td>
<td>116%</td>
<td>-14.0%</td>
</tr>
</tbody>
</table>

![Table 2](image2.png)

**Average Percent Gain by 9 Months in 28 of 36 Personality Strengths**

<table>
<thead>
<tr>
<th></th>
<th>RRS n=114</th>
<th>Usual Care n=105</th>
</tr>
</thead>
<tbody>
<tr>
<td>9 Months</td>
<td>38.3%</td>
<td>20.8%</td>
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</table>
Table 3
Mean and Percent Change at 9 Months in Presence of Meaning in Life by Study Group

<table>
<thead>
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<th></th>
<th>RRS</th>
<th>Usual Care</th>
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<tr>
<td>Baseline</td>
<td>18.3</td>
<td>18.3</td>
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<tr>
<td>9 Months</td>
<td>23.0</td>
<td>17.3</td>
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RRS n=114 +25.26% improvement
Usual Care n=105 -5.36% deterioration
p<.0001

Table 4
Mean and Percent Change at 9 Months in Search for Meaning by Study Group

<table>
<thead>
<tr>
<th></th>
<th>RRS</th>
<th>Usual Care</th>
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<tr>
<td>Baseline</td>
<td>18.6</td>
<td>18.5</td>
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<tr>
<td>9 Months</td>
<td>23.6</td>
<td>17.6</td>
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</table>

RRS n=114 +28.65% improvement
Usual Care n=105 -5.02% deterioration
p<.0001

Table 5
Mean and Percent Change at 9 Months in Total SAVRY Risk Factors by Study Group

<table>
<thead>
<tr>
<th></th>
<th>RRS</th>
<th>Usual Care</th>
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<tr>
<td>Baseline</td>
<td>33.3</td>
<td>32.6</td>
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<tr>
<td>9 Months</td>
<td>33.4</td>
<td>33.4</td>
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RRS n=114 +38.11% improvement
Usual Care n=105 -2.33% deterioration
p<.0001

Table 6
Mean and Percent Change at 9 Months in Prosocial Behaviour by Study Group

<table>
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<th>RRS</th>
<th>Usual Care</th>
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<tr>
<td>Baseline</td>
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<td>8.3</td>
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<tr>
<td>9 Months</td>
<td>17.2</td>
<td>7.6</td>
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RRS n=114 +119.0% improvement
Usual Care n=105 -9.0% deterioration
p<.0001
Efficiency

- Recidivism or recently charged: RRS candidates 3.5% vs. 45.7%, p<.0001 (Table 9).

- Reduction in the use of social assistance (8% vs. 44%, p<.001) (Table 9).

- Expenditures of use of services: As one would expect, study groups were statistically equivalent at baseline in every category of direct, indirect and cash transfer expenditures. By 9 months, the RRS group were, as planned, higher and appropriate users of primary care services, laboratory investigations, and other health and social professionals (particularly due to the use of RRS workers).

In contrast, RRS participants at 9 months generated significantly less per person per annum expenditures for law enforcement services (=604.28 vs $2529.56, p<.0001); housing services =$73.34 vs $199.93, p=.01; and all direct costs including hospital services (=2172.19 vs $2790.16, p<.0001) (Table 10). This does not include the cost of reincarceration of 3.5% for RRS and 45.7% for usual care (Table 9).

- The 2010-2011 average annual cost per person (Appendix Bd) for incarceration was $114,364 x 48 (45.7% of n=105) = $5,489,472 for usual care versus $114,364 x 4 (3.5% of 114) = $457,456 for RRS. This 5.5 million dollar higher cost for usual care represents an 11-fold potential savings in correction service alone favouring RRS.

Discussion

This original study has documented the effectiveness of a culturally specific multi-level reintegation program post incarceration for African Canadian Youth in comparison to usual and general reintegation services. It offers original information on the many changes in a person's identity, life, skills, attitudes and meaning that can result with more intense culturally specific and proactive and comprehensive full-time support such as RRS. It is postulated that it is these variables that protect African Canadian youth from reoffending. These outcomes were achieved for less cost to society as the cost of the multi-faceted and intense RRS service paid for itself by averting recidivism and re-incarceration in comparison to usual reintegation services.

The findings add information about the importance of changing environments, activity and culturally specific positive youth development, and their relationship to changes in self identity and choices.

The list of personality strengths was used to elicit the respondent’s view of their strengths. Their view of their weaknesses was deliberately omitted to be consistent with the strength-based approach of positive youth development. While this wasn’t a personality test, it does provide information on the respondents’ view of themselves. It provides detail on the respondents’ changing view of their strengths and as such contributes information on the association between the respondents’ improved identity and the growth in their developmental assets and behavioural choices. In addition, this information documents the effect of a changed and culturally specific positive environment and involvement in constructive activity on the development of a positive self identity of RRS respondents compared to those receiving usual care.
The findings fill some of the gaps identified by Andrews in the meta-analysis of literature about community correctional rehabilitation services. This randomized clinical trial eliminates biases in existing quasi experimental studies because the: randomization process ensured the verified equivalence of study groups at the outset on most measures, the sample size ensured the power of the test that adds confidence in the findings the reliable and valid measures of factors known from the literature to mediate and moderate rates of recidivism and foster positive lifestyle changes the emphasis on candidates total set of needs, strengths, cultural identity and intense involvement as opposed to the emphasis on avoidance of problems in usual care, the exceptionally high retention rate of 95% and the assessment of the representativeness of those candidates that completed (n=219) the study compared to 11 who were lost to follow-up.

Limitations of the study were the absence of a blind assessment of mediator and moderator variables, and the reliance on self reports using a structured interview guide. However the primary outcomes were hard measures of recidivism and favorable changes in life situation. The one measure SAVRY relied on case worker judgment. During training for this study, the inter rater reliability on this measure was substantial. The data analyst was independent of the investigative team.

While there was a “main effect” of the RRS intervention, future analyses could identify the combination of mediating and moderating variables and characteristics of clients that interact with approach to reintegration that explains outcomes at what cost? While there was a low loss of study participants after random assignment (n=11) out of 230, the majority of this loss (n=10) was from the usual care group and 5 of those lost were re-incarcerated for a 2% re-incarceration rate to be added to the 45.7% 9-month re-incarceration rate for usual care completers. These lost participants were exposed to more violence with an earlier history (< age 11 years) of onset of high acts of violent behaviour yet exhibited less physically aggressive behaviour and less anxiety, emotional and hyperactive or inattentive behaviour. The effect of these biases would be that it would
make it somewhat easier for recipients of usual care, still enrolled in the study and functionally better off, to improve in time, minimizing any observed difference between groups in re-incarceration rates.

**Conclusion**

The policy implications of these findings are that it is costing society more each year to provide uniform, general and under funded reintegration services for poor incarcerated African Canadians. Reintegration efforts must address the full mix of candidate needs, offer more intense and culturally specific programming long enough with structured emphasis on client strengths and opportunities for growth and change in life circumstances that protect youth from reoffending. The service should be place-based allowing reintegrating candidates full-time access to a more positive and protective alternative environment.
Redemption Reintegration Services has demonstrated "... it can be otherwise."
Reference List


Figure 1: RRS Candidate Model of Care
Key Factors in decreasing Recidivism

The Four Pillars of the RRS Integrated Model of Care

<table>
<thead>
<tr>
<th>IDENTITY</th>
<th>ACCOUNTABILITY</th>
<th>RESILIENCY</th>
<th>OPPORTUNITY PROVISION</th>
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<td>Culturally specific programs &amp; services</td>
<td>Surety initiative</td>
<td>Assessment of assets upon intake</td>
<td>Internal Employment Initiatives</td>
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<tr>
<td>African-centred texts &amp; curriculum</td>
<td>Collective case management presentations</td>
<td>Self reflective sessions: Positive-decision making/Anger mgmt.</td>
<td>Social Enterprise Development</td>
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<td>Culturally Reflective staff &amp; volunteers w/ lived experience</td>
<td>Parent and Guardian Engagement</td>
<td>Peer mentor program Supportive Peers</td>
<td>Training &amp; Certificationss</td>
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<td>Culturally appropriate counseling &amp; health care</td>
<td>Recidivism review</td>
<td>Quarterly Durbars (African homecoming) after release from correctional facility</td>
<td>Internal Educational Attainment – RRS Transitional School</td>
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Revised Spring 2013, RRS Mgmt Team.
### Figure 1: RRS Candidate Model of Care

#### Key Factors in decreasing Recidivism

- **Effective case management programs and services developed and informed by our strategic objectives, and advocating with our partners for policy reform and systemic transformation for our candidates.**

### Figure 2: RRS Service Offering

#### The Four Pillars of the RRS Integrated Model of Care

- **Decreasing Recidivism Through...**

<table>
<thead>
<tr>
<th>Case Management</th>
<th>Programs</th>
<th>Services</th>
<th>Advocacy</th>
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<td>• Reintegration Workers</td>
<td>• Drugs Oppress People Everyday (D.O.P.E.)</td>
<td>• Inmate Support Services</td>
<td>• South Etobicoke Reintegration Committee (S.E.R.C.)</td>
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<td>• Intake Coordinator</td>
<td>• Employability Sessions</td>
<td>• ANEW~U</td>
<td>• Youth Anti-Violence Committee (Y.A.V.)</td>
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<td>• Registered Nurse</td>
<td>• Rise To the Occasion (R.T.T.O.)</td>
<td>• African Book Collaborative (A.B.C.)</td>
<td>• African Canadian Coalition of Organizations (A.C.C.O.)</td>
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<td>• Peer Mentor Leaders</td>
<td>• TDSB/RRS Transitional School</td>
<td>• Employment Supports</td>
<td>• Premier Council</td>
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<td>• Volunteers</td>
<td>• Focus on Youth (F.O.Y.)</td>
<td>• Housing Assistance</td>
<td>• Literacy in Correctional Facilities Working Group</td>
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<td>• Placement Students</td>
<td>• Youth Justice Certification</td>
<td>• Health &amp; Wellness</td>
<td>• Bridging the Gap</td>
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<td>• Micro-Loan Programs</td>
<td>R.N. Walk-in Services</td>
<td>• Aboriginal &amp; African Canadian Youth Justice Working Group</td>
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<td>• Madame C.J. Walker</td>
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<td>• RMYC Education Committee</td>
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<td>• Volunteer &amp; Intern Placements</td>
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<td></td>
<td>• Youth Justice Fellowship</td>
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<td>• Civic Action Black Youth Initiative</td>
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*Revised Spring 2013, RRS Mgmt Team.*
Redemption and Reintegration Services (RRS) grew out of the community it serves, working to provide youth offenders with the programs and services they need to become skilled, active and engaged members of the community. RRS focuses on youth as assets to society, and works to increase resilience, capacity and agency among youth.
Learn more about RRS and sign up for regular updates at reintegra\_tion.ca.