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Childhood Intervention Programs and Crime Reduction

Childhood intervention programs throughout the United States and around the world utilize a variety of methods with similar goals to fostering proper child development into early adulthood. A meta-analysis of childhood intervention programs in relation to crime reduction has revealed the efficacy of various programs in increasing positive outcomes for children such as academic achievement, and social integration and participation.¹ Accompanying these outcomes, the meta-analysis observed reductions in criminal offending in adolescence and adulthood to a lesser, although still significant, extent. While some programs have been able to observe changes in delinquency and crime in early adulthood, there appears to be inadequate data following participants in childhood intervention programs throughout their lives to fully assess the strength of these programs on reducing the overall occurrence of crime.

In the rest of this report, we examine research on programs promoting proper child development, that may or may not have had the direct intention of reducing future crime, and their impact on crime reduction. The programs discussed in this report include:

- The Caroline Abecedarian Project (ABC);
- Carolina Approach to Responsive Education (CARE);
- Children at Risk Program (CAR);
- Head Start: The Chicago School Readiness Program (CSRP);
- Fast Track Program; and,
- Balanced and Restorative Justice (BARJ).

¹ Maja Deković, Meike I. Slagt, Jessica J. Asscher, Leonieke Boendermaker, Veroni I. Eichelsheim, Peter Prinzie, “Effects of early prevention programs on adult criminal offending: A meta-analysis,” *Clinical Psychology Review*, 31 (June 2011): 532-544, <https://doi.org/10.1016/j.cpr.2010.12.003>.

The Caroline Abecedarian Project (ABC) and Carolina Approach to Responsive Education (CARE)

The ABC and CARE programs were two controlled trials administered by the Frank Porter Graham Center at the University of North Carolina that aimed to mentally, socially, and academically prepare children for school by increasing contact between educators and students.² In the “Early Education and Childhood Crime” study García et al. report that the CAR and ABC programs maintained between a one-to-four and one-to-six teacher-student ratio throughout the initiative. ABC and CARE provided medical examinations, meals, and social and educational assistance. Both programs studied 143 children total between the ages of eight weeks and five years from disadvantaged families between 1972 and 1980. Eligibility for both programs was determined by a Frank Porter Graham-developed high-risk index. Examples of high-risk indicators are maternal IQ and paternal presence. In the ABC program, follow-ups were conducted at ages 12, 15, 21, 30, and 34. In the CARE program, follow-ups were conducted at ages 15, 21, 30, and 34.³ Both studies used self-reported and administrative crime data.

Of the 143 individuals observed between CARE and ABC, 75 committed at least one crime.⁴ The average number of crimes committed for men was 11.7 and the average number of crimes committed for women was 1.2. According to García et al., the female group that received the ABC/CARE treatment program committed a lower mean number of crimes than the female control group on a statistically significant level. The difference between the mean number of crimes committed in the male control group compared to the male group that received the treatment was not statistically significant. Despite the early childhood programs having a greater effect on females, the financial benefit from the childhood intervention program was greater from the reduction of male crime—a \$466,318 2017 benefit from reducing male crime compared to a \$32,790 for reducing female crime. These numbers included incarceration costs.⁵

The article concluded that regardless of gender, the CARE and ABC programs had a statistically significant effect on the most disadvantaged children among both male and female participants.⁶ However, another journal analyzing the ABC and CARE programs pointed to various problems with the ABC and CARE programs’ collection and interpretation of data. The primary issues included the small sample size, non-negligible non-compliance, and attrition.⁷ According to

² Jorge Luis García, James J. Heckman, and Anna L. Ziff, “Early childhood education and crime,” *Infant Mental Health Journal*, vol. 40, (2019): 141-151, <https://onlinelibrary.wiley.com/doi/epdf/10.1002/imhj.21759>.

³ Luis García, et al., “Early childhood education and crime.”

⁴ Luis García, et al., “Early childhood education and crime.”

⁵ Luis García, et al., “Early childhood education and crime.”

⁶ Luis García, et al., “Early childhood education and crime.”

⁷ Frances A. Campbell, Gabriela Conti, James J. Heckman, Seong Hyeok Moon, Rodrigo Pinto, “The Effects of Early Intervention on Human Development and Social Outcomes: Provisional Evidence from ABC and CARE,” University of Chicago, Department of Economics, (2013): 1-155, https://cehd.uchicago.edu/wp-content/uploads/2019/12/abccare_2013-03-01b_jsw.pdf.

Campbell et al., many children in the control groups had various types of care outside of the home before age 5. At the end of school-age intervention, of both trials, ABC had a retention rate of 74% and CARE had a retention rate of 91% in the same period. Campbell et al. accounted for the contamination bias of the control group and found that the ABC preschool treatment had lasting effects on crime. However, the authors found that treated males showed lower levels of criminal activity in adulthood, whereas benefits for female participants primarily included cognitive development and educational attainment. Campbell et al. further reported that treated males had a significant reduction in how many times they were arrested and how long they remained in jail, but this was insignificant for females.⁸

Children at Risk Program (CAR)

The CAR program was an experimental pilot program implemented in 1989 by the US Department of Justice in five cities: Austin, Texas; Bridgeport, Connecticut; Memphis, Tennessee; Savannah, Georgia; and, Seattle, Washington.⁹ CAR was an intervention program with the intention of preventing drug use and delinquency in at-risk youths by decreasing the amount of at-risk factors that adolescence may face.¹⁰ There were many services included within the CAR program such as case management, education programs, restorative criminal justice programs, and community intervention programs.¹¹ CAR was developed and monitored by the National Center on Addiction and Substance Abuse at Columbia University with the financial support of the U.S. Justice system.

When interviewed one year after the end of the program, participants in the program were significantly less likely to have used drugs, sold drugs, or committed crimes.¹² The incidents of property crimes were the same in both CAR recipients and the control group, with no change in self-esteem and no reported decrease in personal problems.¹³ Since the one-year results at the end of the CAR program, no further studies have been completed to report the effects of the program throughout the years. At this time, CAR is still operating in Texas.

⁸ Frances A. Campbell, et al., "The Effects of Early Intervention on Human Development and Social Outcomes: Provisional Evidence from ABC and CARE."

⁹ Sara Davies, Sarah Fisher, "Reducing Crime with Childhood Intervention Programs" Vermont Legislative Research Service, (2000): 1-3, https://www.uvm.edu/d10-files/documents/2024-06/Current_Programs.pdf.

¹⁰ Adele Harrell, Shannon Cavanagh and Sanjeev Sridharan, "Evaluation of the Children at Risk Program: Results 1 Year after the End of the Program," *National Institute of Justice*, (November 1, 1999): 1-12, https://www.researchgate.net/publication/234679593_Evaluation_of_the_Children_at_Risk_Program_Results_1_Year_after_the_End_of_the_Program_Research_in_Brief.

¹¹ Adele Harrell, et al., "Evaluation of the Children at Risk Program: Results 1 Year after the End of the Program."

¹² Adele Harrell, et al., "Evaluation of the Children at Risk Program: Results 1 Year after the End of the Program."

¹³ Adele Harrell, et al., "Evaluation of the Children at Risk Program: Results 1 Year after the End of the Program."

Head Start: The Chicago School Readiness Program (CSRP)

The Chicago School Readiness Program (CSRP) was an early childhood intervention program conducted from Head Start Centers in 18 Chicago locations from 2004-2006 that focused on students' early education, and their academic development. The study selected Head Start Centers in poverty and crime ridden areas, specifically for how often classes took place, as well as their specific locations in Chicago.¹⁴ The Head Start Centers main goal was improving children's abilities to be successful in their coming years through educational readiness programs, mental health consultant services for children with behavioral and emotional issues, as well as professional development programs for the teachers.¹⁵ The CSRP provided new resources to improve their teaching abilities, and their capability to provide for their students. Students were also supplied with behavioral programs when needed.

The Institute of Educational Sciences conducted a research study 10-11 years after the end of the CSRP to see what effects the program had on the student's continued education.¹⁶ When looking into the program results they recorded changes by academic achievement, behavioral problems, and emotional regulation.¹⁷ In their results, they found that an improvement of the Head Start programs would be beneficial to the children who are already a part of the Head Start programs.¹⁸ They also found a slight positive correlation between the treatment group and executive functions and achievement.¹⁹

Another study was done by a group of independent researchers funded by the Eunice Kennedy Shriver National Institute of Child Health and Human Development also looking for the effects of the CSRP. In the first stages of the program, the children's teachers knew that they were a part of CSRP.²⁰ While they were researching the effects of the CSRP for the second set of the study, the participants teachers were unaware which of their students were original participants.²¹ It was found that 89% of participants in the CSRP were more likely than the control group to show a better ability to pay attention, and deal with difficult social challenges.²²

¹⁴ Dana Charles McCoy, Stephanie Jones, Amanda Roy, and C. Cybele Raver, "Classifying Trajectories of Social-Emotional Difficulties Through Elementary School: Impacts of the Chicago School Readiness Project," *American Psychological Association*, 54 (4), (2018): 1-16, <https://psycnet.apa.org/record/2017-51849-001>.

¹⁵ Tyler Watts, Jill Gandhi, Deanna Ibrahim, Michael Masucci, and Cybele Raver, "The Chicago School Readiness Project: Examining the Long-Term Impacts of an Early Childhood Intervention" *PLOS One*, 13(7), (July 12, 2018): 1-25, <https://journals.plos.org/plosone/article?id=10.1371/journal.pone.0200144>.

¹⁶ Tyler Watts, et al., "The Chicago School Readiness Project."

¹⁷ Tyler Watts, et al., "The Chicago School Readiness Project."

¹⁸ Tyler Watts, et al., "The Chicago School Readiness Project."

¹⁹ Tyler Watts, et al., "The Chicago School Readiness Project."

²⁰ Dana Charles McCoy, et al., "Classifying Trajectories of Social-Emotional Difficulties Through Elementary School."

²¹ Dana Charles McCoy, et al., "Classifying Trajectories of Social-Emotional Difficulties Through Elementary School."

²² Dana Charles McCoy, et al., "Classifying Trajectories of Social-Emotional Difficulties Through Elementary School."

Both studies found evidence of a number of benefits of CSRP though they were unable to prove an overarching causal link between the beneficial outcomes of participating in the program without further research, investigation, and resources.²³ Additionally, the treatment was not found to be useful in preventing more tough forms of emotional and social problems such as aggression and attention issues.²⁴ At present, the CSRP program is no longer running.

Fast Track Program

Fast Track is a preventative intervention program initiated by researchers from Washington University, Vanderbilt University, Duke University, and Penn State University with funding from the National Institute of Mental Health.²⁵ The program began with one cohort each year from 1991 to 1993, each lasting for 10 years, consisting of participants from Durham, North Carolina, Nashville, Tennessee, rural Pennsylvania, and Seattle, Washington. Including all subjects from all three cohorts, 445 children participated in the intervention group and 446 children in the control group. High risk children were identified through screenings performed by teachers and parents to identify the greatest degrees of conduct problems and disruptive, externalizing, and aggressive behaviors.²⁶ These traits observed during kindergarten and first grade have been associated with the development of externalizing and antisocial personalities, and subsequent criminal behaviors later in adolescence and into adulthood.²⁷ Previous programs with similar childhood interventions that did not identify high-risk children have had significant positive effects in reducing the development of criminal records, although not consistently.²⁸

According to the Conduct Problems Prevention Research Group, Fast Track intervention throughout the elementary school phase (grades one-five) was done in schools and through home

²³ Tyler Watts, et al., “The Chicago School Readiness Project.”

²⁴ Dana Charles McCoy, et al., “Classifying Trajectories of Social–Emotional Difficulties Through Elementary School.”

²⁵ Duke Sanford Center for Child and Family Policy, “Fast Track,” accessed September 10, 2024, <https://childandfamilypolicy.duke.edu/signature-programs/fast-track/>.

²⁶ Conduct Problems Prevention Research Group, “Fast Track intervention effects on youth arrests and delinquency,” *Journal of Experimental Criminology*, 6 (2010): 131–157, <https://doi.org/10.1007/s11292-010-9091-7>.

²⁷ Laura G. Hill, John E. Lochman, John D. Coie, and Mark T. Greenberg, “Effectiveness of Early Screening for Externalizing Problems: Issues of Screening Accuracy and Utility,” *Journal of Consulting and Clinical Psychology*, 72 (2004): 809-820, <https://doi.org/10.1037/0022-006X.72.5.809>; Office of the Surgeon General (US), National Center for Injury Prevention and Control (US), National Institute of Mental Health (US), and Center for Mental Health Services (US), *Youth Violence: A Report of the Surgeon General*, 2001, <https://www.ncbi.nlm.nih.gov/books/NBK44294/>.

²⁸ David Hawkins, Rick Kosterman, Richard F. Catalano, Karl G. Hill, Robert D. Abbott, “Promoting Positive Adult Functioning Through Social Development Intervention in Childhood: Long-term Effects From the Seattle Social Development Project,” *Archives of Pediatrics & Adolescent Medicine*, 159 (2005): 25-31, <https://jamanetwork.com/journals/jamapediatrics/fullarticle/485897>; Rachel Boisjoli, Frank Vitaro, Éric Lacourse, Edward D. Barker, and Richard E. Tremblay, “Impact and clinical significance of a preventive intervention for disruptive boys,” *The British Journal of Psychology*, 191 (2007): 415-419, <https://doi.org/10.1192/bjp.bp.106.030007>.

visits through tutoring, social skills training, and parental assistance offered to all families.²⁹ The goals of these interventions were to promote socialization, emotional appropriateness, and literacy while decreasing aggression. Fast Track intervention throughout the middle and early high school phase (grades six-ten) consisted of many similar elements but also incorporated mentoring and group meetings to discuss and guide students on topics such as substance use, sexual activity, budgeting, and vocational opportunities. Participant and family participation in the services offered decreased as the child got older.³⁰

In statistical analyses during and following the Fast Track program, Sorenson and Dodge discovered that intervention was most strongly associated with decreases in conduct problems and improvements in academic and social skills in the elementary school phase.³¹ The authors found that observable differences between the control and intervention groups decreased throughout grades six-seven and those in the intervention group during eighth grade were more likely to be engaged with peers that participated in deviant behavior. In addition, Sorenson and Dodge observed that after eighth grade, intervention was associated with decreases in self-reported delinquency. Over the 10-year course of intervention, a 27% lower incidence of self-reported delinquency compared to the control group was detected by the authors. Extending beyond the period of intervention, the authors found that those in the intervention group were 39% more likely to not have been arrested by the age of 20, and 34% more likely to not have been arrested by the age of 25.³² The Fast Track program has been implemented in several countries and can currently be implemented with the help of the program directors.³³

Balanced and Restorative Justice (BARJ)

The Balanced and Restorative Justice Program (BARJ) is a youth-focused program with intentions of increasing restorative juvenile justice within Vermont communities.³⁴ In 1996, Vermont was one of 24 states that had incorporated the BARJ model into their juvenile services.³⁵ BARJ stresses the importance of community responsibilities, as those who commit violations are encouraged to recognize the impact of, and take responsibility of their actions, as

²⁹ Conduct Problems Prevention Research Group, “Fast Track intervention effects on youth arrests and delinquency.”

³⁰ Conduct Problems Prevention Research Group, “Fast Track intervention effects on youth arrests and delinquency.”

³¹ Lucy C. Sorensen, Kenneth A. Dodge, and The Conduct Problems Prevention Research Group, “How Does the Fast Track Intervention Prevent Adverse Outcomes in Young Adulthood?” *Child Development*, 87 (2015): 429-445, <https://doi.org/10.1111/cdev.12467>.

³² Lucy C. Sorensen, et al. “How Does the Fast Track Intervention Prevent Adverse Outcomes in Young Adulthood?”

³³ Fast Track Project, “Frequently Asked Questions,” accessed September 11, 2024, <https://fasttrackproject.org/faq/>.

³⁴ Vermont department of Children and Families, “Balanced and Restorative Justice (BARJ),” accessed September 11, 2024, <https://dcf.vermont.gov/fsd/youth/BARJ>.

³⁵ Office of Juvenile Justice and Delinquency Prevention, *Balanced and Restorative Justice Project (BARJ)*, July 1996, <https://ojjdp.ojp.gov/library/publications/balanced-and-restorative-justice-project-barj>.

well as make amends with community members effected by their actions. The communities are also encouraged to facilitate the restorative process through supporting victims and those committing acts of delinquency. Restorative circles, panels, and family group conferences permit interaction between community members and those committing acts of delinquency.³⁶

The Youth Assessment and Screening Instrument is used to identify adolescents at various levels of risk for developing juvenile activity.³⁷ When utilized in New York in a sample of 3,294 youth participants, the Youth Assessment and Screening Instrument was used to classify participants into six groups of varying risk levels where negative outcomes two years later were positively associated with risk level.³⁸ The state of New York found that of those determined to be at the lowest risk, 29.6% had negative outcomes, and of those determined to be at the highest risk, 59.3% had negative outcomes.³⁹ Screening can guide the allocation of case management services and skills development classes. Case management services consist of home visits, therapeutic meetings, and drug and alcohol testing. Skills development classes cover topics such as communication, social skills, conflict resolution, and community service.⁴⁰

Although the BARJ program has been utilized in Vermont and other states since 1996, no statistical analyses on the relationship between BARJ and crime rates have been reported.⁴¹

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³⁶ Vermont department of Children and Families, “Balanced and Restorative Justice (BARJ).”

³⁷ Vermont department of Children and Families, “Balanced and Restorative Justice (BARJ).”

³⁸ New York State Division of Probation and Correctional Alternatives, *Long-Term Validation of the Youth Assessment and Screening Instrument (YASI) in New York State Juvenile Probation*, November 2007, <https://www.criminaljustice.ny.gov/opca/pdfs/YASI-Long-Term-Validation-Report.pdf>.

³⁹ New York State Division of Probation and Correctional Alternatives, *Long-Term Validation of the Youth Assessment and Screening Instrument (YASI) in New York State Juvenile Probation*.

⁴⁰ Vermont department of Children and Families, “Balanced and Restorative Justice (BARJ).”

⁴¹ Vermont department of Children and Families, “Balanced and Restorative Justice (BARJ).”