Impact Evaluation of the Adolescent Behavioral Learning Experience (ABLE) Program at Rikers Island

SUMMARY OF FINDINGS • JULY 2015

PROGRAM DESCRIPTION

In 2012, the City of New York launched the Adolescent Behavioral Learning Experience (ABLE) program, a large-scale initiative serving 16- to 18-year-old youth detained at New York City's Rikers Island jail. The ABLE program aimed to break the cycle of reincarceration for adolescents in the jail using Moral Reconation Therapy (MRT), an evidence-based intervention that focuses on improving social skills, personal responsibility, and decision making. The project employed an innovative social impact bond funding mechanism to support the provision of services.

VERA'S ROLE

The Vera Institute of Justice served as the program's independent evaluator. Vera employed rigorous research methods to determine whether the program led to reductions in recidivism for

A SOCIAL IMPACT BOND is

an innovative form of pay-for-success contracting that leverages private funding to finance public services. In a social impact bond, private investors fund an intervention through an intermediary organization—and the government repays the funder only if the program achieves certain goals, which are specified at the outset of the initiative and assessed by an independent evaluator.

youth passing through the jail. Specifically, the evaluation was designed to assess whether the program reduced recidivism by 10 percent or more, the pre-defined threshold of success at which the city would have to pay Goldman Sachs back for its investment in the program.

RESEARCH DESIGN

To determine if the ABLE program met the threshold for success, Vera assessed "recidivism bed days" (RBDs), a measure that captures the number of days that members of the study group were held in the jail during the 12 months following their release from Rikers. Vera used a quasi-experimental design to do this evaluation. (A randomized control trial, which would have compared a treatment group randomly assigned to receive ABLE with a control group that did not, was not feasible, because adolescents are frequently moved between different housing units at Rikers, which would have confounded the treatment and control groups.)

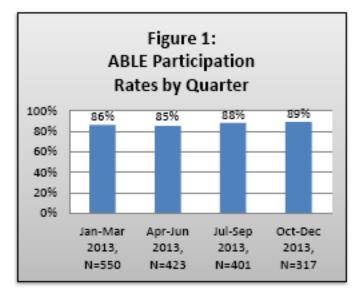
The quasi-experimental approach compared RBDs for 16- to 18-year-olds who were eligible to participate in the ABLE program during 2013 with a matched historical group who passed through the jail before the program was established (from 2006-2010). To ensure an "apples to apples" comparison, these groups were matched on a variety of factors including charge, criminal history, gender, and age using a statistical technique called propensity score matching.

Rates of recidivism fluctuate over time, and therefore differences in recidivism between the groups may be the result of factors that are unrelated to the program, such as citywide changes in crime rates or changes in policing practices. To control for these external factors, researchers also tracked RBDs for 19-year-olds over the same periods and then adjusted the results of the analysis accordingly. Nineteen-year-olds were chosen for this purpose because they were not eligible to receive ABLE services and historical data demonstrate that trends in recidivism for 16- to 18-year-olds and 19-year-olds were closely aligned.



RATES OF PARTICIPATION IN ABLE

The ABLE program reached most of the 16- to-18-yearolds entering the Rikers Island jail during 2013. As Figure 1 shows, of the 1,691 adolescents who entered the jail during this time and were held for seven or more days, the overwhelming majority (87 percent) attended at least one ABLE session. (Jail intake and housing policies meant that adolescents who were housed in the jail for fewer than seven days rarely had the opportunity to receive ABLE services.) Of the adolescents who participated in the ABLE program during the study period, 44 percent reached a programmatic milestone found in prior studies to be associated with positive outcomes.



FINDINGS

Vera determined that the program did not lead to reductions in recidivism for participants. The change in recidivism for the eligible 16- to 18-year-olds, adjusted for external factors, was not statistically significant when compared to the matched historical comparison group. Furthermore, the 19-year-olds and the study group (16- to 18-year-olds) displayed similar trends in rates of recidivism over time, indicating that any shifts were the result of factors other than the ABLE program. The program did not reduce recidivism and therefore did not meet the pre-defined threshold of success of a 10 percent reduction in recidivism bed days.

A complete technical report is forthcoming. For more information, contact Mary Crowley, director of communications, Vera Institute of Justice, (212) 376-3031, mcrowley@vera.org.

