

SAMPLE 1

Fresh Start for Women

This study evaluates the process as well as the impact of the Family ReEntry “Fresh Start for Women” non-residential reentry program in Bridgeport, Connecticut. This program is designed to serve women at York Correctional Institution who are returning to the greater Bridgeport region. Offenders who are excluded from this program are, serial violent and/or predatory offenders; offenders convicted of first or second-degree arson; offenders with serious psychiatric illness; offenders convicted of predatory and/or violent sexual assault. Fresh Start is an evidence-based program, which uses a continuity of care design. The effects of gender responsive services provided to female inmates pre and post incarceration are intended to reduce recidivism rates and improve overall quality of life of these inmates moving forward.

Appendix I

Program Being Evaluated:

Appendix I
in bibliography

Fresh Start Non-Residential for Women

Fresh Start for Women is a gender-responsive, evidence based program from prison to family and community. The program is designed to serve women at York CI who are returning to the greater Bridgeport region. The clients undergo valid and reliable assessments and reassessments specifically designed for women. They receive a lengthy pre-release component targeted to specific needs and case management as well as tailored groups focused on substance abuse recovery, trauma, mental health, family and parenting issues. Women are reassessed prior to release to the community and, in planning for a seamless transition, they are involved in services identified in the community reentry plan and possibly the BHN department for clinical services.

Pre-Release Planning

- Prepares prisoners 3 to 6 months before release
- Paves the way for reconnecting with family and securing employment
- Working with successful ex-offender mentors

Post-Release Services

- Creative solutions to employment challenges
- Intensive case management and family support
- Behavioral health and substance abuse service
- Supportive community network built by ex-offenders

Continued Support

- Offers support from successful ex-offenders
- Provides drop-in services as needed
- Shifts responsibility for success to the individual and their supportive network

Community Partners: Fresh Start is operated in partnership with the CT Department of Correction. Family ReEntry is a founding member of the Bridgeport Reentry Roundtable. For more information, please contact:

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Keep the
same
format
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SAMPLE 2

March 2, 2016

Isolation?

This paper evaluates effectiveness of the Department of Correction's Driving Under the Influence Home Confinement Program. In order to determine its effectiveness, the paper analyzes the program for offenders who have committed a DUI offense. It will also study how the program is run. The program has three levels: the first level, the second level, and the highest level of intervention. The first level consists of meeting 15 times for and alcohol education class. This level can take about 2 to 3 months to complete. The 2nd level is for offenders/inmates that have a history with substance abuse. This session meets for thirty-one times, while the education continues until he/she is considered fit for release on home confinement. Counselors have the ability to recommend other programs to help the patient. The highest level is considered Tier 4 of the substance abuse program. This is for inmates with very chronic severe histories that take 6 months. These inmates don't usually get considered for home confinement for their protection and safety to others. This paper will also discuss variables, like the length of the program and the environment these inmates are surrounded on.

Either use the level term or tier

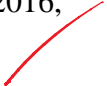
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SAMPLE 2

Appendix I

Bibliography

Department of Correction DUI Home Confinement Program, (n.d.). Retrieved May 25, 2016,
from http://www.ct.gov/doc/lib/doc/pdf/dui_home_confinement_program_6_13.



SAMPLE 2

Appendix II

Department of Correction DUI Home Confinement Program:

Effective February 14, 2012 the Department of Correction (DOC) began assessing inmates for the Driving under the Influence Home Confinement Program (DUI HC Program). The first inmates were released to home supervision in March of 2012. Inmates who qualify for this program are those who are sentenced for Driving under the Influence (DUI) charges or for Driving a Motor Vehicle after Suspension.

The criteria for participation are strict. An inmate may be “eligible” for the program but he or she may not be “suitable” to be released on home confinement. The program is designed for those inmates who have a history directly related to DUI or Driving after Suspension. Those inmates who have a long criminal history, a history of violence or disciplinary problems may be “eligible” for the program but not “suitable” for release into the community on this type of supervision. Inmates who are admitted with minor concurrent charges may be considered for the program if the concurrent charges will be satisfied before the sentence for DUI or Driving after Suspension is satisfied.

There are generally three levels of programming and intervention offered to inmates incarcerated on the two charges. The first level of intervention is a 15 session alcohol education class. It can take 2-3 months from when the inmate enters the system to the time he or she is able to complete the program. Classification Counselors process the community release paperwork for the DUI/Driving after Suspension inmate and the facility Warden makes the final determination to approve or deny community release.

The second level of intervention is for inmates who have a longer history of substance abuse and need more education before being considered for release on home confinement. Generally the inmate will participate in The Department of Correction Tier 2 Substance Abuse Program. This is a 31 session outpatient drug and alcohol program. The substance abuse counselor may also recommend other programs to the inmate to address other needs.

The highest level of intervention is to recommend the inmate participate in The Department of Correction Tier 4 substance abuse program. This program is for inmates with severe substance abuse histories. This is a six month in-patient program. There is a high chance that an inmate recommended to the Tier 4 program may not be suitable for release on home confinement due to his or her criminal or substance abuse history. Our substance abuse counselors have an ethical responsibility to insure treatment is offered to all inmates and in this case, especially to those with severe substance abuse problems.

Once an inmate completes the program he or she is reviewed for release on HC by the Warden. If approved, the Parole Manager of the DUI HC Unit will be notified and her staff will begin the release process. Supervision on DUI HC release is strict. The inmate is restricted to his or her home except for work and pre-approved treatment related programs. Spot checks are conducted regularly by Parole Officers. If an inmate on HC drinks or uses illegal substances he or she is remanded back to prison and will have no further opportunity for release until the sentence imposed by the courts is completed.

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An inmate with a lengthy sentence for DUI will remain in the facility and do programs until he or she is closer to their discharge date. The program allows offenders to be supervised in their homes in the later portion of their sentence. Inmates with a substantial sentence will not be released to the HC Program until they are approximately 6 months from their Voted to Parole date or their maximum release date. Inmates with sentences of over two years will need to have a decision rendered by The Board of Pardons and Paroles before being considered for the HC Program.

Source: Department of Correction DUI Home Confinement Program, (n.d.). Retrieved May 25, 2016, from http://www.ct.gov/doc/lib/doc/pdf/dui_home_confinement_program_6_13.

This paper aims to evaluate how current Connecticut competency examinations specified in Connecticut Code Section 54-56d Part D address the issue of mental illness in the Criminal Justice System (See Appendix). These variables include the foundational aspects which create Connecticut Code Section 54-56d Part D, the effectiveness of treatment, availability of resources, and issues related to consistency. This paper is organized according to a division of Connecticut Code Section 54-56d Part D created for the purposes of this paper. The divisions are the competency to stand trial standard, the examination of the defendant, and options for treatment if a defendant is found incompetent.

Rephrase for clarity

SAMPLE 3

Appendix

2005 Connecticut Code - Sec. 54-56d. (Formerly Sec. 54-40). Competency to stand trial.

Sec. 54-56d. (Formerly Sec. 54-40). Competency to stand trial. (a) Competency required. Definition. A defendant shall not be tried, convicted or sentenced while he is not competent. For the purposes of this section, a defendant is not competent if he is unable to understand the proceedings against him or to assist in his own defense.

(b) **Presumption of competency.** A defendant is presumed to be competent. The burden of proving that the defendant is not competent by a preponderance of the evidence and the burden of going forward with the evidence are on the party raising the issue. The burden of going forward with the evidence shall be on the state if the court raises the issue. The court may call its own witnesses and conduct its own inquiry.

(c) **Request for examination.** If at any time during a criminal proceeding it appears that the defendant is not competent, counsel for the defendant or for the state, or the court, on its own motion, may request an examination to determine the defendant's competency.

(d) **Examination of defendant. Report.** If the court finds that the request for an examination is justified and that, in accordance with procedures established by the judges of the Superior Court, there is probable cause to believe that the defendant has committed the crime for which he is charged, the court shall order an examination of the defendant as to his competency. The court may (1) appoint one or more physicians specializing in psychiatry to examine the defendant, or (2) order the Commissioner of Mental Health and Addiction Services to conduct the examination either (A) by a clinical team consisting of a physician specializing in psychiatry, a clinical psychologist and one of the following: A clinical social worker licensed pursuant to chapter 383b or a psychiatric nurse clinical specialist holding a master's degree in nursing, or (B) by one or more physicians specializing in psychiatry, except that no employee of the Department of Mental Health and Addiction Services who has served as a member of a clinical team in the course of such employment for at least five years prior to October 1, 1995, shall be precluded from being appointed as a member of a clinical team. If the Commissioner of Mental Health and Addiction Services is ordered to conduct the examination, the commissioner shall select the members of the clinical team or the physician or physicians. If the examiners determine that the defendant is not competent, they shall then determine whether there is substantial probability that the defendant, if provided with a course of treatment, will regain competency within the maximum period of

SAMPLE 3

any placement order under this section, and whether the defendant appears to be eligible for civil commitment, with monitoring by the Court Support Services Division, pursuant to subdivision (2) of subsection (h) of this section. The court may authorize a physician specializing in psychiatry, a clinical psychologist, a clinical social worker licensed pursuant to chapter 383b or a psychiatric nurse clinical specialist holding a master's degree in nursing selected by the defendant to observe the examination. Counsel for the defendant may observe the examination. The examination shall be completed within fifteen days from the date it was ordered and the examiner or examiners shall prepare and sign, without notarization, a written report and file such report with the court within twenty-one business days of the date of the order. On receipt of the written report, the clerk of the court shall cause copies to be delivered immediately to the state's attorney and to counsel for the defendant.

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This research study aims to determine whether or not domestic violence offenders who participate in Connecticut's EXPLORE program are less likely to recidivate than those who do not? In the state of Connecticut there are three major intervention programs that domestic violence offenders can partake in if one, they qualify and if two, they choose to do so. The three court-mandated family violence intervention programs offered in Connecticut are: The Family Violence Education Program, the EXPLORE program, and the EVOLVE program. Each intervention program has different techniques and procedures, but they all have the same goal of reducing the rate of recidivism among this specific group of offenders. Connecticut's EXPLORE program is a twenty-six week program for male batterers who have been convicted of family violence offenses against female intimate partners. The program consists of twenty-six, ninety-minute group sessions that take place once per week that each start with a check-in period. In order to be able to participate in the EXPLORE program an offender must be referred by the court or attendance to the intervention program is a condition of their probation. The program was originally placed into thirteen court locations in Connecticut until 2012 when it was placed into all existing court locations. The EXPLORE program is based on a cognitive behavioral therapeutic framework in which its purpose is to foster behavioral change through developing awareness, building positive interpersonal skills, and promoting an understanding of the harmful effects of family violence on victims and children.

Connecticut's EXPLORE program directly looks at male perpetrators, not both males and females which may differ from different intervention programs throughout the country. Since the EXPLORE program deals directly with males, it is not necessary to compare males to females in this review of previous literature. In order to determine whether or not the EXPLORE program is in fact having a positive effect on the reduction of recidivism rates in domestic violence offenders, it is important to look at the type of session that is being offered to the participants, the length of the program, and how the EXPLORE program compares to the Duluth model intervention program. By taking a closer look at these three variables one can better understand why or why not the EXPLORE program is successful in its ultimate goal of reducing domestic violence in male offenders.

Appendix I EXPLORE Program

Appendix II

EXPLORE is a 26-week 26 session post-conviction and post-plea program for male family violence offenders (1.5 hour sessions, once per week) based on a cognitive behavioral therapeutic framework. Its purpose is to foster behavioral change through developing awareness, building positive interpersonal skills, and promoting an understanding of the harmful effects of family violence on victims and children. EXPLORE was available in 13 court locations until 2012, when it was then placed in all court locations.

Each session starts with a check-in procedure consisting of welcoming newcomers to the group and then asking each member to report on their use of violence, controls, and/or abuse. Check-in also provides participants with the opportunity to talk about their daily struggles (e.g., stress, relationships, drug/alcohol usage) and how they are applying the knowledge and skills acquired since the last group session. During check-in, group members are also encouraged to challenge each other when using minimization, denial, justification, or externalization of blame for their actions. As such, the intervention relies upon participants' honesty to share personal information about their personal life.

Initial sessions lay the framework for the most essential tenets of the program. Legal definitions of family violence and applicable laws are reviewed first. The participants are then broadly educated about the harmfulness and progression of abusive behavior and its various forms. Immediate and simple coping mechanisms are emphasized as ways to break the cycle of violence and take a time-out so that anger does not lead to aggressive behavior.

The next set of sessions focus on cognitive restructuring. In order to initiate behavioral change in participants, cognitive distortions that may have led these individuals to commit domestic violence against their intimate female partner are targeted. The objectives of these sessions are to rebuild trust and establish personal accountability. Once participants accept their responsibility, topics are introduced that inhibit changes in behavior such as utilizing positive self-talk to combat negative thoughts and feelings.

The core of the program curriculum focuses on socialization, in which the significance of cultural influences, gender roles, familial influences, and relationship roles as well as the effect of other institutions in shaping patterns of behavior are highlighted. Through role-play and fictional scenario illustrations, a variety of topics and related skills are covered. For instance, a series of sessions examine the effects of domestic violence on the victim and participants are taught skills such as developing empathy, compassion, and equality for their partner. Parenting skills are also incorporated into the lesson plans to help participants understand the harmful effects that domestic violence may have caused on their children.

The last component of EXPLORE is teaching communication skills to foster a more positive and non-violent atmosphere in the home. In addition, the program curriculum seeks to prepare participants for the possibility their intimate relationship/marriage may be over. In cases where children are involved, participants are strongly encouraged to craft a positive relationship with

SAMPLE 4

their former spouse/partner. Skills such as active listening, non-coercive, assertive communication, and implementing a cost-benefit analysis before acting are taught through more role-play and scenario dialogues. Lastly, stress management is discussed and a number of healthy relaxation techniques are presented. The program concludes with an overview of the cycle of violence and a discussion of how these negative concepts can be cognitively transformed into healthy, pro-social behaviors.

A 26-week program for male batterers of female intimate partners. There are 26 90-minute group sessions, once per week, each starting with check-in period.

Check-in consists of welcoming new members to the group and then asking each member to report on use of violence, control, and/or abuse. Stressful situations/close calls and how they handled themselves. Relationship updates, new arrests, drug/alcohol usage, skills used since last group or how they used what they have learned.

Sessions (key concepts and techniques utilized will be summarized)

1. 1) Defining “intimate violence” and identifying how domestic violence laws apply when

you have hit, hurt, or seriously threatened violence against family members, member of household, former spouse, person with whom you have recently lived, person with whom you have a child, a person with whom you are in or have recently been in a dating relationship with. Dividing domestic violence into physical violence, emotional abuse, threats, intimidation, isolation, sexual abuse, and use of children, economic abuse, and use of male privilege. Participants conceptualize different types of violence and abuse and clinician writes responses on board while informing the group of topics not identified. The main point of session one is to educate group about the harmfulness and progression of abusive behavior and to show what behavior is illegal.

2. 2) Review of “control log” which had members identify specific acts about how they have used control against their partner and their specific intent behind the act. Pointing out to the group that these behaviors and beliefs can be changed. Explore the feelings/emotions before and during the incident.

Power and Control wheel: participants will provide examples of specific behaviors for each category of the wheel. Intimidation, emotional abuse, isolation, minimization, denial, blaming, using children, male privilege, economic abuse, coercion and threats.

Cycle of violence: honeymoon period > tension building period > violent/abusive > incident > honeymoon period.

Participants will generate opinions for other means of handling the situation and their feelings. Emphasis on time-out as a way to initially get enough space to gain perspective. Breaking the cycle.

3. 3) Anger cues – Anger and underlying feelings. Emphasis on avoiding situations that are likely to lead to violence/abuse and when they cannot be predicted to take a time-out. Have group identify bodily responses to anger and behaviors that result when they are angry.

Emphasis is on identifying the feelings that underlie the anger and anger being a secondary emotion. Pointing out that anger is an emotion that can result from vulnerable feelings and that the expression of this anger is what may have led to their arrest. Anger does not have to lead to aggression. Idea of sharing “vulnerable feelings” with partner and taking responsibility to teach her what he needs and wants when sharing these feelings with her.

4. 4) Time-out process: eliminate violence and abuse by avoiding situations likely to lead to it. Time-out is a way of rebuilding trust a little bit at a time. Not driving, not drinking/drugging, leaving the building for a set period of time that is agreed upon with partner. It is a way of rebuilding trust and facilitating effective communication not to be used as another way to control their partner.
5. 5) Excuses/Justifications – Accountability/Personal Responsibility. Group will identify reasons/excuses that explain their violence and abuse. Transitioning thought process from excuses to personal accountability i.e. without verbally minimizing the extent or externalizing the blame.
6. 6) Accountability letters – Review of homework which was designed to have members accept responsibility for abusive, violent, and controlling behavior and the impact it had on the victim rather than justifying/blaming others.
7. 7) Jealousy, thoughts, feelings, behaviors, positive self-talk. Cognitive restructuring exercise: situation > thoughts > feelings > behaviors (identified by group) and then present alternatives that apply topics which were previously reviewed including behaviors and thoughts. Positive self-talk can be used as a way of influencing the entire chain.
8. 8) Substance abuse/domestic violence connection. Focus on the detrimental effects on children and the family dynamics. Importance of addressing substance abuse issues independently from the domestic violence issues.
9. 9) Socialization of violence – Emphasis on different socialization processes and cultural impact. Identifying a group consensus of the causes of violence (genetic/learned) how group believes violence can be learned. Places, family, culture, media, church, courts, sports, religion, military – learning that violence is accepted or expected.
10. 10) Gender socialization –Identifying what men believe their role is in society, how it differs between cultures and their roles in relationships. Differing between socialization messages and healthy messages
11. 11) Socialization role plays – Group members perform role play scenarios illustrating domestic violence and controlling behavior. Once role play is completed, group members are asked “what kind of man do you want to be?” The purpose is to illustrate the negative behaviors exhibited and call for change which acknowledges women’s rights.

12. 12) Sexuality and Violence/Sexual Respect –“Unit Overview” – Facilitates understanding of healthy sexual habits in relationships. Identifies several different scenarios and provides guidelines for better sexual communication and respect.
13. 13) Effects on the victim: Developing empathy and understanding – Illustrates the woman’s perspective on violence from a first person account. Pointing out cognitive distortions (denial, minimization, and blame) to avoid taking responsibility and trying to turn these distortions into empathy.
14. 14) Effects on the victim: Anger and trust – Assist men in understanding the damaging effects of violence on their relationships, recognizing and respecting their partner’s anger and mistrust, and developing strategies for improving. Multiple scenarios are reviewed preparing participants to let go of their partner and/or not force themselves upon their partner.
15. 15) Effects on the victim: Recognizing your partner as separate and distinct from you. Recognizing partner’s separateness and identifying and dealing with issues that arise when a partner chooses to end a relationship. More scenarios.
16. 16) Effects on the victim: Separation, divorce, and letting go. Scenarios reviewed dealing with issues that arise when a partner chooses to end the relationship. Teaching participants that they need to employ tactics learned earlier in the program such as time-out and responsibility plans for avoiding violence.
17. 17) Compassion and equality: Emphasis on showing compassion for partner and empathizing. Compassion vs. anger. Equality wheel = negotiation, non-threatening, respect, trust, honesty responsible parenting, shared responsibility, economic partnership.
18. 18) Effects on the victim: Empathy letters – Letter’s written in which group members pretend to be the victim of the same abuse, violence, and/or control that they inflicted on their partner and describe their feelings as the victim.
19. 19) Effects on the children: Informing group about the reality of children being very aware of domestic violence occurring even if the children may have been sleeping at the time. Long list of detrimental effects on children are listed.
20. 20) Non-violent parenting - Abuse of children wheel is explained to contrast good parenting as intimidation, using institutions, emotional abuse, economic abuse, threats, using adult privilege. Nurturing children wheel is trust and respect, promoting emotional security, providing physical security, consistent discipline, give time, encouragement, affection and, care for yourself.
21. 21) Co-parenting – How men can create a more positive relationship with their children’s mother that respects her needs and fears. Crafting a positive relationship over time with your child’s mother that respects the law, her needs, and her fears. Respect court orders and understand how their violence has been a contributor to relationship problems between their children and their children’s mother.
22. 22) Assertive, non-coercive communication – Defining the differences between aggressive, assertive, and passive communication. Uses different vocabulary to illustrate different types of speech. Uses CBT to show how ineffective communication does not achieve the desired result and then shows the benefits of assertive behavior and how to modify cognition to change the behavior.

23. 23) Active listening – the most important element of communication. Group members should be able to describe the situation and be able to paraphrase what the speaker has said.
24. 24) Problem-solving – Discussing how communication and active listening are the keys to the process of solving relationship problems. Scenario is described and different elements are dissected by the group. This shows how to implement problem solving through effective hypothetical communication. Evaluating the pros and cons and utilizing cost- benefit analyses.
25. 25) Stress Management & Relaxation – Stress as an internal response within us to something we perceive as a threat, acute or chronic. Identifies coping skills, positive and negative and the adverse health effects. Breaking the stress cycle.
26. 26) Common characteristics of people who are violent/abusive to their partner – Dependency > jealousy > possessiveness > isolation. Aggressive > low self-esteem > passive. Provides basic summary of how each concept should be dealt with by transforming these feelings into pro-social thoughts and expressions.

Summary: Every session starts with the same check-in procedure which relies upon participant honesty to disclose personal information about their struggles. It also provides participants with the chance to talk about how their lives are and how they are applying the knowledge they acquire from group. Group members are encouraged to challenge each other when using minimization, denial, justification, or externalization of blame for their actions. Initial sessions lay the framework for the most essential tenets of the program. First and foremost are the legal definitions of domestic violence and intimate violence and the laws that must be abided by according to CT General Statutes. Broadly educating the group about the harmfulness and progression of abusive behavior and all of the different forms it can take are identified. Immediate, simple coping mechanisms are emphasized as ways to break the cycle of violence and take a time-out so that anger does not lead to aggressive behavior.

Cognitive restructuring is the next big component of EXPLORE. Before any real meaningful behavioral changes can be made, the emphasis is on targeting the cognitive distortions that may have led these individuals to commit domestic violence against their intimate female partner. Rebuilding trust and establishing personal accountability by understanding and taking ownership of the ways that their abusive, controlling, and violent behavior has impacted their partner are cornerstones to the program. Once the participant truly accepts responsibility, topics can be introduced that inhibit changes in behavior such as utilizing positive self-talk to combat negative thoughts and feelings. Substance abuse is addressed for only one session which is far from adequate considering its overall influence as a comorbid issue to many of the concepts this program acknowledges.

Just list the main provisions, not the summary

Socialization is the next topic covered highlighting the significance of cultural influences, gender roles, familial influences, and relationship roles as well as the effect of other institutions that shape thinking patterns and behaviors. At this point, the curriculum incorporates materials from the EVOLVE program in sessions ten through sixteen mostly for role play and fictional scenario illustration. In sessions thirteen through nineteen, the effects of domestic violence on the victim are examined. Skills such as developing empathy for the victim and understanding domestic violence from the woman's point of view are emphasized through role play and hypothetical

SAMPLE 4

scenarios to show a range of situations usually starting with the most detrimental and violent and working its way towards what a healthy relationship should embody. Developing compassion and equality for their partner is the cornerstone to these middle sessions. Next, parenting skills are incorporated into the lesson plan to help the group understand that the domestic violence that has been occurring in their homes may have caused a number of harmful effects on their children.

The last component to EXPLORE is teaching communication skills that will hopefully help to foster a more positive and non-violent atmosphere in the home. Additionally, the program does attempt to prepare individuals for the possibility that their intimate relationship/marriage may be over, therefore, crafting a positive relationship with their former spouse/partner in cases where children are involved are stressed very strongly. Skills such as active listening, non-coercive, assertive communication, as well as implementing a cost-benefit analysis before acting are taught through more role play and scenario dialogues. Lastly, healthy ways to handle stress management are discussed and a number of healthy relaxation techniques are presented. The program is concluded with an overview of the cycle of violence and how these negative concepts can be cognitively transformed into healthy, pro-social behaviors.

Reference-

Cox, S., & Rivolta, P. (2014, June 1). Evaluation of Three Court-Mandated Family Violence Intervention: FVEP, EXPLORE and EVOLVE. Retrieved November 7, 2015, from https://www.jud.ct.gov/CSSD/research/FamViolence_Eval_060914.pdf

Move to
Appendix I
The actual
program should
be in Appendix
II.

In the appendix,
only include the
specific sections/
subsections that
you propose to
evaluate

The purpose of this research is to look at the Raise the Age Law in Connecticut, the alternate options that Connecticut has began using and the results that it has had. Connecticut legislature, at one point sent the youth offenders from the ages of 16 and 17 years old to the adult criminal system no matter how minor the crime was. The state had three main reasons for doing this. First, the state, at the time, felt that by charging the youth offenders as adults it made out communities safer. Second, it held the offenders completely accountable for their actions in an environment that was monitored and safe, in what Connecticut considered to be a place to encourage healthy development with more positive behaviors. Third, it kept Connecticut up to speed with the national best practices. Variables that this research will focus on will be juvenile rehabilitation options, the cognitive abilities of the adolescent, and recidivism rates. Studying the options that Connecticut has for rehabilitation is important because it gives the offenders a more constructive way to learn that offending is wrong rather than treating the youth as adults. It allows the programs to target the proper areas that the offenders need in order to be helped. Observing recidivism rates is important to make sure that the rehabilitation programs that Connecticut has set up are actually working. Educating policy makers on the scientifically proven abilities of Connecticut's youth offenders will help the consequences become more reasonable. This would mean educating the people that will have an impact on the offender's future to understand the importance and timing of brain development. Collaboratively, all of these aspects could help make Connecticut and the juveniles safer.

Appendix 1

Connecticut Law PA 09-07- PA 10-01 focuses on Raising the Age of Juveniles. This covers what a youth and child are defined as, who exactly can be charged as a delinquent and how the juvenile must be given their Miranda. This section also covers State Juvenile Detention Center Release Procedures with information about other efforts that can be made through programs.

Raise the Age Law. (n.d.). Retrieved from

http://www.ct.gov/post/lib/post/pdf_documents/updated_raising_juvenile_age_guide_2010.pdf

Remember to list sources in a separate appendix I before the appendix that contains the language of the statute/program/policy that you are evaluating