

## Washington State Institute for Public Policy

Benefit-Cost Results

# Multisystemic Therapy (MST) for court-involved/post-release youth Juvenile Justice

Benefit-cost estimates updated December 2023. Literature review updated May 2019.

Current estimates replace old estimates. Numbers will change over time as a result of model inputs and monetization methods.

The WSIPP benefit-cost analysis examines, on an apples-to-apples basis, the monetary value of programs or policies to determine whether the benefits from the program exceed its costs. WSIPP's research approach to identifying evidence-based programs and policies has three main steps. First, we determine "what works" (and what does not work) to improve outcomes using a statistical technique called meta-analysis. Second, we calculate whether the benefits of a program exceed its costs. Third, we estimate the risk of investing in a program by testing the sensitivity of our results. For more detail on our methods, see our Technical Documentation.

Program Description: Multisystemic Therapy (MST) is an intensive family- and community-based therapy for youth with antisocial behaviors that combines aspects of cognitive, behavioral, and family therapies. In the juvenile justice setting, MST is designed for youth with violent and chronic criminal behavior. The goal of MST is to identify problems and assess how those problems fit within the context of the youth's life. The program targets and delivers its curriculum in the environments a youth navigates (i.e., home, school, the community). MST therapists meet weekly with the youth and their family members for three to six months. MST relies on the compliance of the family to design and implement the treatment plan to adjust to the individual strengths and needs of each family.

In the included studies, participants received an average of 4.1 months of treatment. Youth were classified as moderate- or high-risk per scores on a validated risk instrument and were either on probation following adjudication or following their release from confinement. In the studies in the analysis that reported demographic information, 80% of participants were youth of color and 23% were female.

We exclude evaluations of Multisystemic Therapy-Substance Abuse, Multisystemic Therapy-Family Integrated Transitions, and Multisystemic Therapy-Problem Sexual Behavior from this analysis and analyze them separately.

Benefit-Cost Summary Statistics Per Participant							
Benefits to:							
Taxpayers	\$8,069	Benefit to cost ratio	\$3.01				
Participants	\$1,564	Benefits minus costs	\$19,076				
Others	\$20,023	Chance the program will produce					
Indirect	(\$1,095)	benefits greater than the costs	99%				
Total benefits	\$28,562						
Net program cost	(\$9,486)						
Benefits minus cost	\$19,076						

The estimates shown are present value, life cycle benefits and costs. All dollars are expressed in the base year chosen for this analysis (2022). The chance the benefits exceed the costs are derived from a Monte Carlo risk analysis. The details on this, as well as the economic discount rates and other relevant parameters are described in our Technical Documentation.

Meta-Analysis of Program Effects											
Outcomes measured	Treatment age	No. of effect	Treatment N	Adjusted effect sizes and standard errors used in the benefit-cost analysis					the	Unadjusted effect size (random effects	
		sizes		First time ES is estimated		ated	Second time ES is estimated			model)	
				ES	SE	Age	ES	SE	Age	ES	p-value
Crime	15	6	1072	-0.314	0.069	16	-0.314	0.069	24	-0.314	0.001
Externalizing behavior symptoms <sup>^^</sup>	15	1	53	0.034	0.197	15	n/a	n/a	n/a	0.034	0.864
Internalizing symptoms <sup>^^</sup>	15	1	53	0.254	0.197	15	n/a	n/a	n/a	0.254	0.198
Technical violations <sup>^</sup>	15	1	43	0.832	0.691	16	n/a	n/a	n/a	0.832	0.228

<sup>^</sup>WSIPP's benefit-cost model does not monetize this outcome.

Meta-analysis is a statistical method to combine the results from separate studies on a program, policy, or topic in order to estimate its effect on an outcome. WSIPP systematically evaluates all credible evaluations we can locate on each topic. The outcomes measured are the types of program impacts that were measured in the research literature (for example, crime or educational attainment). Treatment N represents the total number of individuals or units in the treatment group across the included studies.

An effect size (ES) is a standard metric that summarizes the degree to which a program or policy affects a measured outcome. If the effect size is positive, the outcome increases. If the effect size is negative, the outcome decreases.

Adjusted effect sizes are used to calculate the benefits from our benefit cost model. WSIPP may adjust effect sizes based on methodological characteristics of the study. For example, we may adjust effect sizes when a study has a weak research design or when the program developer is involved in the research. The magnitude of these adjustments varies depending on the topic area.

WSIPP may also adjust the second ES measurement. Research shows the magnitude of some effect sizes decrease over time. For those effect sizes, we estimate outcome-based adjustments which we apply between the first time ES is estimated and the second time ES is estimated. We also report the unadjusted effect size to show the effect sizes before any adjustments have been made. More details about these adjustments can be found in our Technical Documentation.

Detailed Monetary Benefit Estimates Per Participant							
Affected outcome:	Resulting benefits:1	Benefits accrue to:					
		Taxpayers	Participants	Others <sup>2</sup>	Indirect <sup>3</sup>	Total	
Crime	Criminal justice system	\$7,466	\$0	\$19,095	\$3,733	\$30,294	
Crime	Labor market earnings associated with high school graduation	\$773	\$1,822	\$1,006	\$0	\$3,601	
Crime	Costs of higher education	(\$170)	(\$258)	(\$77)	(\$85)	(\$590)	
Program cost	Adjustment for deadweight cost of program	\$0	\$0	\$0	(\$4,743)	(\$4,743)	
Totals		\$8,069	\$1,564	\$20,023	(\$1,095)	\$28,562	

<sup>&</sup>lt;sup>1</sup>In addition to the outcomes measured in the meta-analysis table, WSIPP measures benefits and costs estimated from other outcomes associated with those reported in the evaluation literature. For example, empirical research demonstrates that high school graduation leads to reduced crime. These associated measures provide a more complete picture of the detailed costs and benefits of the program.

<sup>^^</sup>WSIPP does not include this outcome when conducting benefit-cost analysis for this program.

<sup>&</sup>lt;sup>2</sup>"Others" includes benefits to people other than taxpayers and participants. Depending on the program, it could include reductions in crime victimization, the economic benefits from a more educated workforce, and the benefits from employer-paid health insurance.

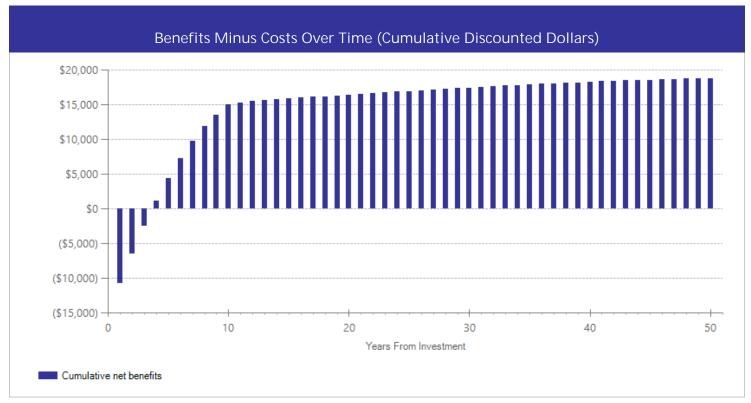
<sup>&</sup>lt;sup>3</sup>"Indirect benefits" includes estimates of the net changes in the value of a statistical life and net changes in the deadweight costs of taxation.

#### Detailed Annual Cost Estimates Per Participant

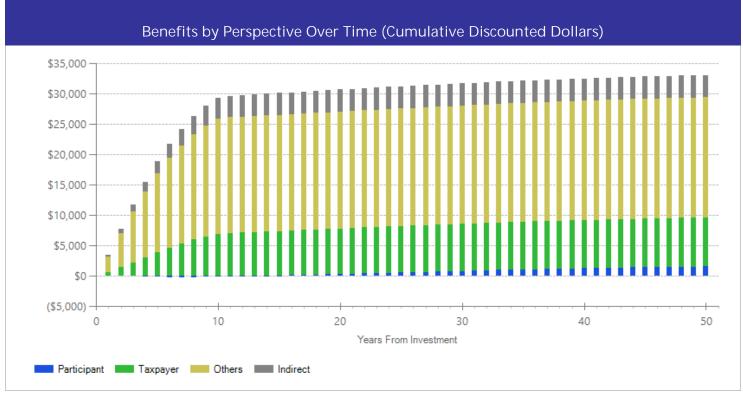
	Annual cost	Year dollars	Summary	
Program costs	\$8,041	2016	Present value of net program costs (in 2022 dollars)	(\$9,486)
Comparison costs	\$0	2016	Cost range (+ or -)	20%

The per-participant cost estimate is the average cost of providing Multisystemic Therapy (MST), as implemented in the studies included in this analysis. We estimate a monthly cost for MST using the average length of the program in Washington (four months) and the cost of MST in Washington, provided by C. Redman (personal communication, Washington State Juvenile Rehabilitation, April 16, 2019). This cost reflects estimates from Barnoski, R. (2009). Providing evidence-based programs with fidelity in Washington State juvenile courts: Cost analysis (Doc. No. 09-12-1201). Olympia: Washington State Institute for Public Policy. We multiply this monthly cost estimate and the average length of MST in the included studies, approximately 4.1 months.

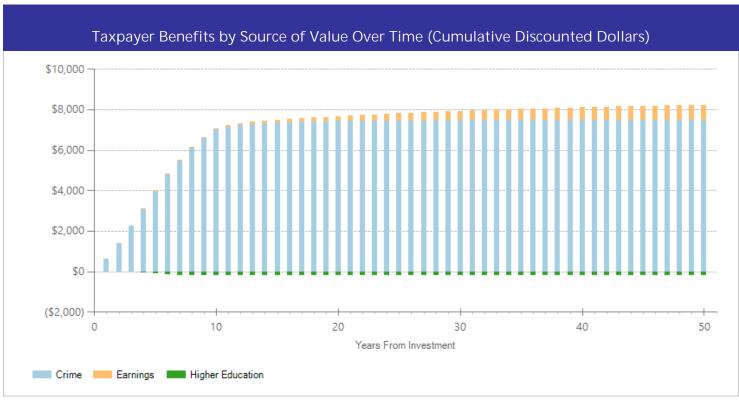
The figures shown are estimates of the costs to implement programs in Washington. The comparison group costs reflect either no treatment or treatment as usual, depending on how effect sizes were calculated in the meta-analysis. The cost range reported above reflects potential variation or uncertainty in the cost estimate; more detail can be found in our Technical Documentation.



The graph above illustrates the estimated cumulative net benefits per-participant for the first fifty years beyond the initial investment in the program. We present these cash flows in discounted dollars. If the dollars are negative (bars below \$0 line), the cumulative benefits do not outweigh the cost of the program up to that point in time. The program breaks even when the dollars reach \$0. At this point, the total benefits to participants, taxpayers, and others, are equal to the cost of the program. If the dollars are above \$0, the benefits of the program exceed the initial investment.



The graph above illustrates the breakdown of the estimated cumulative benefits (not including program costs) per-participant for the first fifty years beyond the initial investment in the program. These cash flows provide a breakdown of the classification of dollars over time into four perspectives: taxpayer, participant, others, and indirect. "Taxpayers" includes expected savings to government and expected increases in tax revenue. "Participants" includes expected increases in earnings and expenditures for items such as health care and college tuition. "Others" includes benefits to people other than taxpayers and participants. Depending on the program, it could include reductions in crime victimization, the economic benefits from a more educated workforce, and the benefits from employer-paid health insurance. "Indirect benefits" includes estimates of the changes in the value of a statistical life and changes in the deadweight costs of taxation. If a section of the bar is below the \$0 line, the program is creating a negative benefit, meaning a loss of value from that perspective.



The graph above focuses on the subset of estimated cumulative benefits that accrue to taxpayers. The cash flows are divided into the source of the value.

#### Citations Used in the Meta-Analysis

- Butler, S., Fonagy, P., Baruch, G., & Hickey, N. (2011). A randomized controlled trial of multisystemic therapy and a statutory therapeutic intervention for young offenders. *Journal of the American Academy of Child and Adolescent Psychiatry*, *50* (12), 1220-1235.
- Fain, T., & Greathouse, S.M. (2014). Effectiveness of multisystemic therapy for minority youth: Outcomes over 8 years in Los Angeles County, *Journal of Juvenile Justice*, *3* (2), 24-38.
- Henggeler, S.W., Melton, G.B., Smith, L.A., Schoenwald, S.K., & Hanley, J.H. (1992). Family preservation using multisystemic therapy: An effective alternative to incarcerating serious juvenile offenders. *Journal of Consulting and Clinical Psychology, 60,* 953 961.
- Henggeler, S.W., Melton, G.B., Brondino, M.J., Scherer, D.G., & Hanley, J.H. (1997). Multisystemic therapy with violent and chronic juvenile offenders and their families: The role of treatment fidelity in successful dissemination. *Journal of Consulting and Clinical Psychology, 65* (5), 821-833.
- Leschied, A.W., & Cunningham, A.J., London Family Court Clinic. (2002). Seeking effective interventions for serious young offenders: Interim results of a four-year randomized study of multisystemic therapy in Ontario, Canada. London, ON: Centre for Children and Families in the Justice System.
- Schaeffer, C.M., & Borduin, C.M. (2005). Long-term follow-up to a randomized clinical trial of Multisystemic Therapy with serious and violent juvenile offenders. *Journal of Consulting and Clinical Psychology*, 73 (3), 445-453.

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Printed on 03-24-2024



### Washington State Institute for Public Policy

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