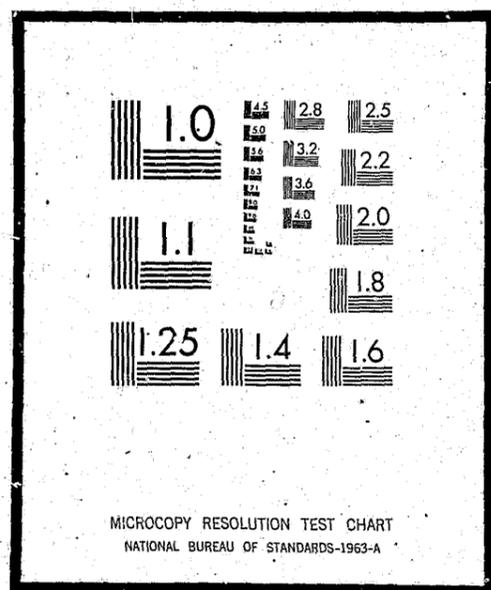


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STATE OF FLORIDA
FLORIDA PAROLE AND PROBATION COMMISSION

A STUDY: ✓
THE PERCEIVED EFFECTIVENESS OF
COMMUNITY TREATMENT PROGRAMS - A Study
BY THE FIELD STAFF OF
THE FLORIDA PAROLE AND PROBATION COMMISSION

DIVISION OF PLANNING AND EVALUATION

SUNIL B. NATH, DIRECTOR

MARCH 1975

A STUDY:
THE PERCEIVED EFFECTIVENESS OF
COMMUNITY TREATMENT PROGRAMS
BY THE FIELD STAFF OF
THE FLORIDA PAROLE AND PROBATION COMMISSION
(In partial fulfillment of LEAA Grant 73-08-10)

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FOREWORD

During the month of November, 1974, a Community Treatment Rating Inventory was conducted statewide among the ten areas of the Florida Parole and Probation Commission. The survey was designed to: 1) Obtain a consensus of opinion from the officers in the field concerning which Community Treatment Programs they perceived as being ineffectual; and 2) Find out if the officers directed their clients to the programs most needed by the clients.

A survey instrument (Treatment Program Rating Inventory) was developed to collect data from the states parole and probation officers. A consensus of the officers opinions was obtained at the district level and then consolidated by the Research and Evaluation Section of the Planning and Evaluation Division through the use of two measures, a qualitative and quantitative ranking. By combining these two rankings, a Perceived Effectiveness Ranking was obtained.

Five categories of programs were ranked. They were:

1. Alcoholic Programs.
2. Educational Programs.
3. Drug Programs.
4. Psychological/psychiatric Programs.
5. Other Programs.

Noticeably present in the top ten on the Perceived Effectiveness Ranking were Alcoholic and Educational Programs. The remaining three categories were scattered over the rest of the ranking.

INTRODUCTION

The Community Treatment Program concept for resocialization of the offender has seen a rapid expansion in the state of Florida during the past few years. The Commission currently feel this is the most effective way to resocialize the offenders. While it is being used intensively by parole officers in rehabilitating clients naturally the officers direct their clients toward the programs they feel will be most helpful. Also, the officers perception of the operation of each program will determine whether they channel their clients into one particular program or another.

The Planning and Evaluation Division of the Commission designed a study to find out which Community Treatment Programs the officers feel are best for their clients. It is possible that variations in perceived effectiveness occur from area to area and even district to district. Different districts, throughout the state, would have different facilities depending on demographic characteristics.

METHODOLOGY:

A survey instrument (Community Treatment Rating Inventory-Appendix A) was developed to ascertain the officers perceived effectiveness of Community Treatment Programs. A Community Treatment Rating Inventory was mailed to each of the 48 districts on

November 1, 1974. (See Appendix B for a complete list of all districts). The Community Treatment Program Rating Inventory was subdivided into: Special Programs (Multiphasic, Pre-Trial, etc.); Alcoholic Programs (DWI, Halfway House, etc.); Drug Programs (Halfway House, Out-Patient Clinic, etc.); Educational Programs (G.E.D., Trade School, etc.); Psychological/Psychiatric Programs (Group Counseling, Individual Counseling, etc.); and Other Programs (Commodity Foods, Legal Aid, etc.).

For each of these subdivisions, two questions were asked; (1) Is the service available in your district? (2) Have you ever placed clients in the service? A Value Rating Scale was provided to rate each program. The scale was divided into 5 categories which included 0 (Lousy, Poor), 2 (So-so, Doubtful), 5 (Average, Satisfactory), 8 (Good, Above Average), and 11 (Excellent, Superb). Out of the 48 districts, 39 replied. Each district supervisor was instructed to take a poll of his officers on each program and then, using the Value Rating Scale, rate only those programs that were used in his district. (See Appendix A for a copy of the Community Treatment Program Rating Inventory and instructions)

STATISTICAL PROCEDURE:

The statistical work was started as soon as the replies were returned. In compiling the statistics, the data was calculated in two measures, one which showed (how the districts rated the programs which they had experience in using) and the other showed (how many districts used the programs). The first category shall

be called a Qualitative Ranking and the second shall be called a Quantitative Ranking. By combining these two rankings, a Perceived Effectiveness Ranking was derived. These rankings consisted of all 40 programs. The program perceived by all district officers to be the most useful was ranked first and the least effective ranked fortieth. The following is a brief summary description of each ranking technique (See pages 9-11 for a copy of each ranking).

QUALITATIVE RANKING METHOD

An Arithmetic mean (Total score divided by number of responses) was taken from the statewide replies for each program to obtain the qualitative ranking scores, which show the value of the programs. The programs were ranked in descending order according to mean, with the highest mean score being ranked first and the lowest mean ranked fortieth.

EXAMPLE:

In the sample program below (Legal Aid, there were twenty-two responses. Two districts rated the program 0 for a score of 0 (2x0), eight districts rated it 2 for a score of 16, (8x2); ten districts rated Legal Aid 5 for a score of 50, (10x5); One district rated the program 8 for a score of 8, (1x8); and one district rated it 11 for a score of 11 (1x11). These scores were then summed for a total score of 85 (0 + 16 + 50 + 8 + 11=85). The mean (average), which is 3.9, was computed by dividing the total score by the number of responses. This mean is the qualitative ranking for the Legal Aid program. All the other 39

programs were so calculated, then these means, or qualitative scores, were ranked. This places Legal Aid 37th on the Qualitative Ranking.

PROGRAM	VALUE RATING SCALE					Total Score
	0	2	5	8	11	
Legal Aid (# of re- sponses per category)	2	8	10	1	1	85
(2x0)+(8x2)+(10x5)+(1x8)+(1x11)=85						

$$\frac{\text{TOTAL SCORE}}{\# \text{ OF RESPONSES}} = \frac{85}{22} = 3.9 \text{ Arithmetic Mean (Average)}$$

QUANTITATIVE RANKING METHOD

The quantitative ranking is based primarily on the frequencies on the Value Rating Scale received from the thirty-nine districts. As an example, the Volunteer Program received 37 responses from the 39 reporting districts whereas the Bureau of Narcotics received only two responses. The programs were ranked in descending order according to number of responses. Where there was more than one program with the same number of responses, the programs were then put in order by their total score. For example, the Loan Fund program received 4 responses for a total score of 29 and the Multiphasic Program received 4 responses for a total score of 23. Therefore, the Loan Fund program would rank higher because of the higher total score. (See the Quantitative Ranking on page 9 for further details).

PERCEIVED EFFECTIVENESS METHOD

By combining the positions of each program from the Quantitative Ranking and the Qualitative Ranking, another ranking was

obtained to show the perceived effectiveness. (This perceived effectiveness ranking is named thus because it is based on the opinions of the field staff rather than an empirical evaluation of the programs themselves.) While a program may be used quite often, its perceived value to the districts may be low. Conversely, a program may be valued highly, but not used very frequently. This Perceived Effectiveness Ranking gives equal balance to both quality and quantity. For example the High School program ranks 2nd on the Quantitative Ranking and 12th on the Qualitative Ranking for a Perceived Effectiveness Ranking score of 14. Alcoholic Programs rank 4th on the Quantitative Ranking and 9th on the Qualitative Ranking for a Perceived Effectiveness Ranking score of 13 which would rank it above the High School program. For each program, both its Quantitative Ranking and Qualitative Ranking were summed in order to ascertain the Perceived Effectiveness Ranking.

The Perceived Effectiveness Ranking was subdivided into four sets of ten programs each for analysis purposes. From an inspection of the list Educational programs rank high, appearing in four of the top ten programs and seven places in the first twenty. A close second was Alcoholic programs with three places in the top ten and four of the first twenty places. Further development of this subject can be found in the Discussion section.

The following null hypothesis (H_0) was tested:

H_0 : There is no correlation between the frequency of use of the community treatment programs and the value ratings of the community treatment programs.

Both the Kendall Rank Correlation Coefficient $\frac{S}{\frac{1}{2}N(N-1)}$ and the Spearman Rank Correlation Coefficient $R_s = 1 - \frac{6d^2}{N^3 - N}$ were used to test the above null hypothesis. The Kendall Coefficient is .13 and the Spearman Coefficient is .11. (Results of the correlation tests may range from +1 to -1, the closer to +1 and -1 showing a very high correlation and a definite relationship, while the closer it gets to 0 the less correlation and lack of relationship there is.) Although the correlation coefficients were both positive, they were very low and close to 0 indicating a lack of correlation between the frequency of usage of a program to the value rating it received. This would indicate that there is a negligible correlation and very little relationship between how officers rated a program and the frequency of its usage. It would appear that the value ratings are based on some other variables which were not addressed by this survey.

AREA RANKING

Also in the survey each district was asked to rank the top three programs they felt were most effective. This is referred to as the Preferred Stated Rating. The forty programs were grouped into the following categories: Alcoholic, Drug, Educational, Psychological/Psychiatric, and Other. A composite count shows that Alcoholic Programs ranked first followed by Educational Programs and then Psychological/Psychiatric. As on the Qualitative Ranking, a mean (average) was used in Area Ranking. Using the five categories listed above, a mean was taken for each of the categories for each area. When these means were put in descending order, a Measured Rating was formed. The following

chart shows where the Preferred Rating matches the Measured Rating. The programs are ranked by Preferred Rating with the Measured Rating in parentheses.

AREA I

- 1. Alcoholic (1)/Psychological (4)*
- 2. Educational (2)
- 3. Drug (3)

AREA II

- 1. Alcoholic (1)
- 2. Other (3)
Volunteers
Veterans
- 3. Educational (2)

AREA III

- 1. Other (1)
Pre-Trial
Multiphasic
Community Employment Service
Volunteers
- 2. Psychological (2)
- 3. Educational (2)

AREA IV

- 1. Educational (2)
- 2. Other (3)/Psychological (1)
Volunteers
Employment Counseling
Motivation Course
Split-Sentence Probation
- 3. Alcohol (4)

AREA V

- 1. Alcoholic (2)
- 2. Other (1)
Multiphasic
Employment Counseling
- 3. Psychological (3)

AREA VI

- 1. Other (4)
Volunteers
Pre-Trial
Motivational Course
- 2. Drug (2)
- 3. Educational (1)/Alcoholic (3)

AREA VII

- 1. Other (3)
Multiphasic
Work Release
Motivational Course
- 2. Psychological (4)
- 3. Educational (1)

AREA VIII

- 1. Educational (1)
- 2. Alcoholic (2)
- 3. Psychological (3)/Other (4)
Volunteers
Legal Aid
Placement
Service

AREA IX

- 1. Alcoholic (2)/Education (1)
- 2. Other (5)
Employment Counseling
Multiphasic
- 3. Psychological (3)/Drug (4)

AREA X

- 1. Alcoholic (2)
- 2. Educational (1)
- 3. Psychological (3)

*Psychological on the chart refers to Psychological/Psychiatric

RESULTS:

Each Area rated its top three programs in a separate section of the survey. By comparing the Preferred Stated Rating with the Measured Rating, a few conclusions can be reached. The following are comparisons of the two ratings by areas.

In Areas I, III, and VIII the Measured Rating and the Preferred Stated Rating coincide with Alcoholic, Educational, and Drug programs placing first, second, and third, respectively. Psychological/Psychiatric tied for first place in the Preferred Stated Rating with Alcoholic in Area I.

In Areas II, VI, VII, and IX the "Other" category ranked much higher by preference than it did on the Measured Rating. The reason for this is on the Preferred Stated Rating only the three most preferred programs are used when computing the average. Therefore, the unfavorable ratings are computed with the favorable ratings to cause a lower mean (average) score. Also, the expansiveness of the "Other" category helps to reduce its mean (average) score.

In Areas IV, V, and X the Preferred Stated Rating are the reverse of the Measured Rating in the first and second position: Educational and Psychological in Area IV, Alcohol and Other in Area V, Alcoholic and Educational in Area X. This results from the closeness of effectiveness of the two programs involved in each area.

Overall, the "Other" Programs category ranked much higher by Preferred Stated Rating than the Measured Rating. This is true because the category "Other" covers an array of programs compared to any specific treatment program. The Measured Rating is an average

of values while the Preferred Stated Rating is an individual value.

QUALITATIVE RANKING

Based on Arithmetic Mean Using Value Ratings

<u>PROGRAM RANKING</u>	<u>ARITHMETIC¹</u> <u>MEAN =</u>	<u>TOTAL SCORE ÷</u>	<u>RESPONSES</u>
1. Client Orientation	7.3	110	17
2. Loan Fund	7.3	29	4
3. G.E.D. ²	7.0	245	35
4. Trade School	7.0	223	32
5. College	6.9	103	15
6. Junior College	6.9	199	29
7. Work Release	6.8	115	17
8. Motivational Course	6.5	78	12
9. Alcohol Programs	6.4	224	35
10. Grade School	6.4	115	18
11. DWI School ³	6.1	214	35
12. High School	6.0	216	36
13. Drug Halfway House	6.0	78	13
14. Emergency Clothing	5.9	172	29
15. Educational Guidance	5.9	147	25
16. Out-patient Clients	5.8	197	34
17. Individual Counseling	5.8	184	32
18. Marriage Counseling	5.8	138	24
19. Multiphasic	5.8	23	4
20. Alcohol Treatment Center	5.7	142	25
21. Family Counseling	5.6	140	25
22. Pre-Trial Intervention	5.6	28	5
23. Group Counseling	5.5	143	26
24. Alcohol Halfway House	5.4	140	26
25. Veterans	5.4	172	32
26. Detoxification Center	5.2	104	20
27. Social Security	5.1	169	33
28. Volunteers	5.1	188	37
29. Financial Counseling	5.0	50	10
30. Bureau of Narcotics	5.0	10	2
31. Manpower Development	4.9	103	21
32. Drug out-patient	4.6	74	16
33. Placement Service	4.4	154	35
34. Commodity Foods	4.3	98	23
35. Employment Counseling	4.1	102	25
36. Mandatory Cond. Release	4.1	122	30
37. Legal Aid	3.9	85	22
38. Young Lawyers	3.8	64	17
39. Private Employment	3.5	54	16
40. Action Volunteers	2.8	25	9

¹ Where a tie exists, the first Mean is higher if carried to 2 decimal places.

² Graduate Equivalence Diploma

³ Driving while Intoxicated

PERCEIVED EFFECTIVENESS OF PROGRAMS

(Combination of Qualitative and Quantitative Rankings)

PROGRAMS	QUANTITATIVE RANKING	+	QUALITATIVE RANKING	= PERCEIVED EFFECTIVENESS ¹
1. G.E.D. ²	3		3	6
2. Trade School	9		4	13
3. Alcohol Programs	4		9	13
4. High School	2		12	14
5. DWI School ³	5		11	16
6. Junior College	13		6	19
7. Out-patient Clients	7		16	23
8. Individual Counseling	10		17	27
9. Emergency Clothing	14		14	28
10. Client Orientation	28		1	29
11. Volunteers	1		28	29
12. Educational Guidance	17		15	32
13. Work Release	27		7	34
14. Social Security	8		27	35
15. Veterans	11		25	36
16. Grade School	26		10	36
17. College	32		5	37
18. Alcohol Treatment Center	18		20	38
19. Group Counseling	15		23	38
20. Marriage Counseling	32		18	39
21. Placement Service	6		33	39
22. Alcohol Halfway House	16		24	40
23. Loan Fund	38		2	40
24. Family Counseling	19		21	40
25. Motivational Course	34		8	42
26. Drug Halfway House	33		13	46
27. Mandatory Cond. Release	12		36	48
28. Detoxification Center	25		26	51
29. Manpower Development	24		31	55
30. Employment Counseling	20		35	55
31. Commodity Foods	22		34	56
32. Multiphasic	39		19	58
33. Pre-Trial Intervention	37		22	59
34. Legal Aid	23		37	60
35. Drug out-patient	30		32	62
36. Financial Counseling	35		29	64
37. Young Lawyers	29		38	67
38. Private Employment	31		39	70
39. Bureau of Narcotics	40		30	70
40. Action Volunteers	36		40	76

¹ (Perceived effectiveness = Quantitative + Qualitative) i.e. the smaller the score, the higher the rank.

² Graduate Equivalence Diploma

³ Driving while Intoxicated

DISCUSSION:

The Perceived Effectiveness Ranking, a result of combining the Qualitative and Quantitative Rankings, is divided into four sections of ten programs each. The first group includes several educational programs: G.E.D., Trade School, High School, and Junior College, ranking 1st, 2nd, 4th, and 6th respectively. Alcoholic programs placed three programs in the top ten positions: Alcoholic Programs (AA), DWI School and Out-patient Clients (Antabuse) ranking 3rd, 5th, and 7th, respectively. This might be expected because of the statewide availability of these programs. The remainder of the programs are bunched together in no particular order with no one category outstanding. The reason many programs rated low might be accounted for by the unavailability of some programs in some parts of the state and the high cost factor of some others.

The data that was collected seemed to indicate that the programs that were needed the most were the ones being used. Information from the Florida Parole and Probation Commission Special Report #1 (December 1974 pp. 21-25) shows that at that time 54% of all misdemeanants, 61% of all felons, and 73% of all parolees lacked a high school education. This may account for G.E.D., Trade School and High School programs showing up 1st, 2nd, and 4th on the Perceived Effectiveness Ranking. From the same report statistics show that 48% of all misdemeanants were convicted of DWI (driving while intoxicated), while 58% of all felons and 49% of all parolees used alcohol moderately. Possibly, due to these facts, DWI School, Alcoholics Anonymous, and Out-patient Client

programs (Antabuse) showed up 3rd, 5th, and 7th on the Perceived Effectiveness Ranking. Although not in either of the two previous categories, the Educational Guidance and Work Release programs rated high (12th, 13th) on the Perceived Effectiveness Ranking. Including these related programs 60% (12) of the top twenty Community Treatment Programs have something to do with educational or alcoholic rehabilitation programs.

SUMMARY:

The Community Treatment Rating Inventory was conducted statewide among the ten areas and 48 districts of the Florida Parole and Probation Commission during the month of November, 1974. The survey was designed to ascertain a consensus of opinion from the officers in the field concerning which Community Treatment Programs they perceived as being effective and those they perceived as being ineffectual.

A survey instrument (Treatment Program Rating Inventory) was developed to collect the opinions of the officers. A consensus of the officers opinions was obtained at the district level and consolidated later by the Planning and Evaluation Division through the use of two measures, a Qualitative and Quantitative Ranking. By combining the Qualitative and Quantitative Rankings, a Perceived Effectiveness Ranking was obtained. Ranked in the top ten on the Perceived Effectiveness list were:

- | | |
|----------------------------|-----------------------------------|
| 1. G.E.D. | 6. Junior College |
| 2. Trade School | 7. Out-patient Clients (Antabuse) |
| 3. Alcoholic Programs (AA) | 8. Individual Counseling |
| 4. High School | 9. Emergency Clothing |
| 5. DWI School | 10. Client Orientation |

Noticeably present in the top ten were educational programs (1st, 2nd, 4th, 6th) and alcoholic programs (3rd, 5th, 7th). In accordance with statistics obtained from the Florida Parole and Probation Commission Special Report #1 (December, 1974), these programs were the ones that were most needed by the parolees and probationers. Therefore, it appears that the officers do direct their clients to the programs that they feel are the most needed by the clients.

GLOSSARY

The terms in this glossary were originated by the Research and Evaluation Section of the Florida Parole and Probation Commission. They were used in a study to obtain the perceived effectiveness of the Community Treatment Programs by the officers in each district. Each term is described in detail in the study, but for convenience a short description follows:

Community Treatment Program Rating Inventory - This is the survey instrument designed to collect the data from the field. A consensus of officer's opinions in each district was represented by the answer to each question for each of the forty Community Treatment Programs (pages 1,2)

Value Rating Scale - For each program that was used, each district was asked to evaluate it on a scale of five values for effectiveness (0,2,5,8,11). This scale was a part of the Treatment Program Rating Inventory and offered the officers a chance to rate each program separately. (page 2)

Qualitative Ranking - This measurement was obtained from the Value Rating Scale. The arithmetic mean of each of the 40 programs was computed and then the programs were ranked from highest mean to lowest mean. The purpose of this ranking was to show how much each district valued each program (pg. 3,4).

GLOSSARY CONTINUED:

Quantitative Ranking - The Quantitative Ranking is a measurement derived from the frequency of usage of Treatment Programs. Information for this Ranking was obtained from the Value Rating Scale. The forty programs were ranked by number of districts that used them. The program that was used by the most districts ranked first while the program that was used the least ranked fortieth (page 4).

Perceived Effectiveness Ranking - The Perceived Effectiveness Ranking is a combination of both the Quantitative and the Qualitative Rankings. It measures the total perceived effectiveness of the programs by the field staff. This ranking is the ultimate goal of the study (pages 4,5).

Preferred Stated Rating - Officers were asked to rank in order the three most effective programs in their district. These were then separated into five categories on each of the 10 areas and ranked. This ranking is the Preferred Stated Rating (page 6).

Measured Rating - This measurement is similar to the Quantitative Ranking. The 40 programs were divided into 5 categories (Alcoholic, Educational, Drug, Psychological/Psychiatric, and Other) and the mean score for each category was compiled. This was done in each of these categories for all 10 areas (page 6).

APPENDIX A

FLORIDA PAROLE AND PROBATION COMMISSION
Inter-Office Communication

Date: November 12, 1974

To: DISTRICT SUPERVISORS Office:

From: Sunil B. Nath *SM* Office: CO- Planning and Evaluation
Director of Planning and Evaluation

Re: Opinion Questionnaire Co. No. Dist. No.

The attached opinion questionnaire was designed to rate the effectiveness of various treatment programs and services throughout the state. Some of these are Commission sponsored; others are not.

Please review with your officers the list of programs and services and jointly complete the questionnaire. First, check the appropriate answers to the two questions: Is service available in your district? and Have you ever placed any of your clients in the service? If your answer is yes to both these questions, then proceed to rate the program or service, but if this service is not in your district or if you have not placed any clients in the service, do not rate the service or program. However, if the service or program is in your district and clients in your district have used the service or program, please rate the service based on this direct knowledge. The value rating scale is a five step scale of "0", "2", "5", "8", "11" with descriptors above the scores. These descriptors are to aid you in your evaluation of the services and programs. (See example below)

PROGRAMS	Is service available in your district?		Have you ever placed any of your clients in this service?		VALUE RATING SCALE				
	YES	NO	YES	NO	Lousy	Doubtful	Average	Effective	Excellent
					Not acceptable Detrimental Not effective Useless; sorry	Below avg. Marginal Questionable So-so	Satisfactory Adequate	Good Above avg. Successful	Superb Dynamic Fantastic
0	2	5	8	11					
PRETRIAL INTERVENTION	✓		✓				✓		
PHASIC DIAGNOSTIC & TREATMENT PROGRAM		✓		✓	-	-	-	-	-

APPENDIX A

Then upon finishing the list, please rank the three programs (or services) you consider the most effective in the rehabilitation of the offender. (See the example below)

PLEASE RANK in order (1,2,3 with 1 being the highest) the three programs you consider most effective in the rehabilitation of the offender.

1. *Blue Funck Drug Program*

2. *Red Nass Alcohol Halfway House*

Hate and Run Driving School

THANK YOU VERY MUCH FOR YOUR TIME AND COOPERATION.

Please return on or before November 29 to:
Sunil B. Nath
Director of Planning and Evaluation
P.O. Box 3168
Tallahassee, Florida 32303
Attn: James C. Payne, II

SBN/bc

cc: Mr. W. C. Kyle *W.C. Kyle*
Area Supervisors

APPENDIX A
TREATMENT PROGRAM RATING INVENTORY
(cont.)

PROGRAMS	Is service available in your district?		Have you ever placed any of your clients in this service?		VALUE RATING SCALE				
	YES	NO	YES	NO	Lousy Not acceptable Detrimental Not effective Useless; sorry	Doubtful Below avg. Marginal Questionable So-so	Average Acceptable Satisfactory Adequate	Effective Good Above avg. Successful	Excellent Superb Dynamic Fantastic
					0	2	5	8	11
OTHER: COMMODITY FOODS									
EMERGENCY CLOTHING CENTERS (Salvation Army, Goodwill, etc)									
LEGAL AID									
YOUNG LAWYERS PROG.									
VOLUNTEERS									
ACTION VOLUNTEERS									
PLACEMENT SERVICE STATE EMPLOY. SER.									
PRIVATE EMPLOY. SERVICE									
EMPLOYMENT COUN- SELING									
SOCIAL SECURITY									
VETERANS ADMIN.									
FINANCIAL COUNSELING									
OTHER (Please specify)									

PLEASE RANK in order (1,2,3 with 1 being the highest) the three programs you consider most effective in the rehabilitation of the offender.

1. _____
2. _____
3. _____

THANK YOU VERY MUCH FOR YOUR TIME AND COOPERATION.

APPENDIX B

District Offices
(to which the Treatment Program Rating Inventory was sent)

District #01

Mr. Thomas E. David
P.O. Box 947
Pensacola, Fl.
32594

District #02

Mr. Perry A. Holmes
P.O. Box 447
Live Oak, Fl.
32060

District #03

Mr. Eugene H. Ginn, Jr.
Rm. 201, Courthouse
315 Haven St.
Clearwater, Fl.
33516

District #04

Mr. Otha R. Smith, Jr.
Suite M-106
Duval County Courthouse
Jacksonville, Fl.
32202

District #05

Mr. Charles E. Limpus, Jr.
P.O. Box 391
Orlando, Fl.
32802

District #06

Mr. William J. Ruster
P.O. Box 1600
Bartow, Fl.
33830

District #07

Mr. Phillip N. Ware
Rm. 104
2128 W. Flagler St.
Miami, Fl.
33135

District #08

Mr. Robert Adams
Third Floor, Courthouse Annex
Tampa, Fl.
33602

District #09

Mr. Charles Maxwell
P.O. Box 807
Lake City, Fl.
32055

District #10

Mr. W. Harold Martin
P.O. Box 1072
Gainesville, Fl.
32601

District #11

Mr. Ronald L. Mercer
P.O. Box 1507
Tallahassee, Fl.
32302

District #12

Mr. Vernon Wright
P.O. Box 1116
Vero Beach, Fl.
32960

District #13

Mr. Floyd E. Boone
6 th. Ave. West
Rm. 218
Bradenton, Fl.
33505

District #14

Mr. Thomas H. Young, Jr.
P.O. Box 187
Marianna, Fl.
32446

District #15

Mr. William J. Cain
P.O. Box 435
Deland, Fl.
32721

District #16

Mr. Glenn H. Hollingsworth
P.O. Box 3465
West Palm Beach, Fl.
33402

APPENDIX B

District #17
Mr. Howell L. Winfree, II
P.O. Box 823
Ocala, Fl.
32670

District #18
Mr. Raymond A. Long, III
P.O. Box 14190
Ft. Lauderdale, Fl
33302

District #19
Mr. Raymond K. McShane
P.O. Box 205
Crestview, Fl.
32536

District #20
Mr. Charles L. Barfield
P.O. Box 366
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32780

District #21
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32804

District #22
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32778

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33901

District #24
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32347

District #25
Mr. Ruie Langford
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32402

District #26
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33041

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District #28
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District #29
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32077

District #30
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32570

District #31
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Dade City, Fl.
33525

District #32
Mr. Joseph E. LaVoie, Jr.
P.O. Box 489
Sebring, Fl.
33870

District #33
Mr. August McDowell
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33821

District #34
Mr. Fredick V. Dietz, Jr.
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Bushnell, Fl.
33513

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Mr. Robert E. Hayes
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33935

District #36
Mr. David A. Smith
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Naples, Fl.
33940

District #37
Mr. Troy O. Rhoades
P.O. Box 302
Madison, Fl.
32340

District #38
Mr. Everard S. Bedell
P.O. Box 724
Ft. Pierce, Fl.
33451

District #39
Mr. Melvin H. Wills, Jr.
P.O. Drawer F
Kissimmee, Fl.
32741

District #40
Mr. Keith B. Drake
P.O. Box 737
Quincy, Fl.
32351

District #41
Mr. James F. Bloodworth
P.O. Box 997
Starke, Fl.
32091

District #42
Mr. Michael C. Dippolito
P.O. Box 1205
Inverness, Fl.
32650

District #43
Mr. Douglas Robinson
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Brookville, Fl.
33512

District #44
Mr. Emil Sales
P.O. Box 665
Okeechobee, Fl.
33472

District #45
Mr. James See
P.O. Box 1367
Wauchula, Fl.
33873

District #46
Mr. Joseph M. Cruse
263 Tamiami Trail
Punta Gorda, Fl.
33950

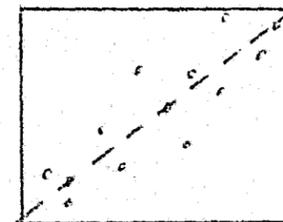
District #47
Mr. R. A. Long
P.O. Box 5
Stuart, Fl.
33494

District #48
Mr. Harry M. Ivey, Jr.
P.O. Box 1426
Green Cove Springs, Fl.
32043

APPENDIX C

The scatter diagram or dot chart presented on the following page is a way of graphically displaying the degree of correlation between two variables, in this case, the Qualitative and Quantitative Rankings. It provides a simple pictorial presentation which may be readily understood.

A positive correlation coefficient (approaching +1) implies that as one variable goes up, the other goes up, or as one variable goes down, the other goes down. In the case of the Qualitative and the Quantitative Rankings, this would mean the more a program was used the higher it would be rated, or the lower a program was rated the less it would be used. An example of positive correlation follows:



Notice how all the points or dots are relatively close to the dotted line*. This clearly shows a positive tendency to correlation.

*line of perfect positive correlation (+1 being the upper limit)

A negative correlation coefficient (approaching -1) implies that as one variable goes up, the other goes down, or as one variable goes down, the other goes up. In the case of the Qualitative and Quantitative Rankings, this would mean the more a program was used, the lower it would be rated, or the less a program was used, the better it would be rated. An example of negative correlation follows:



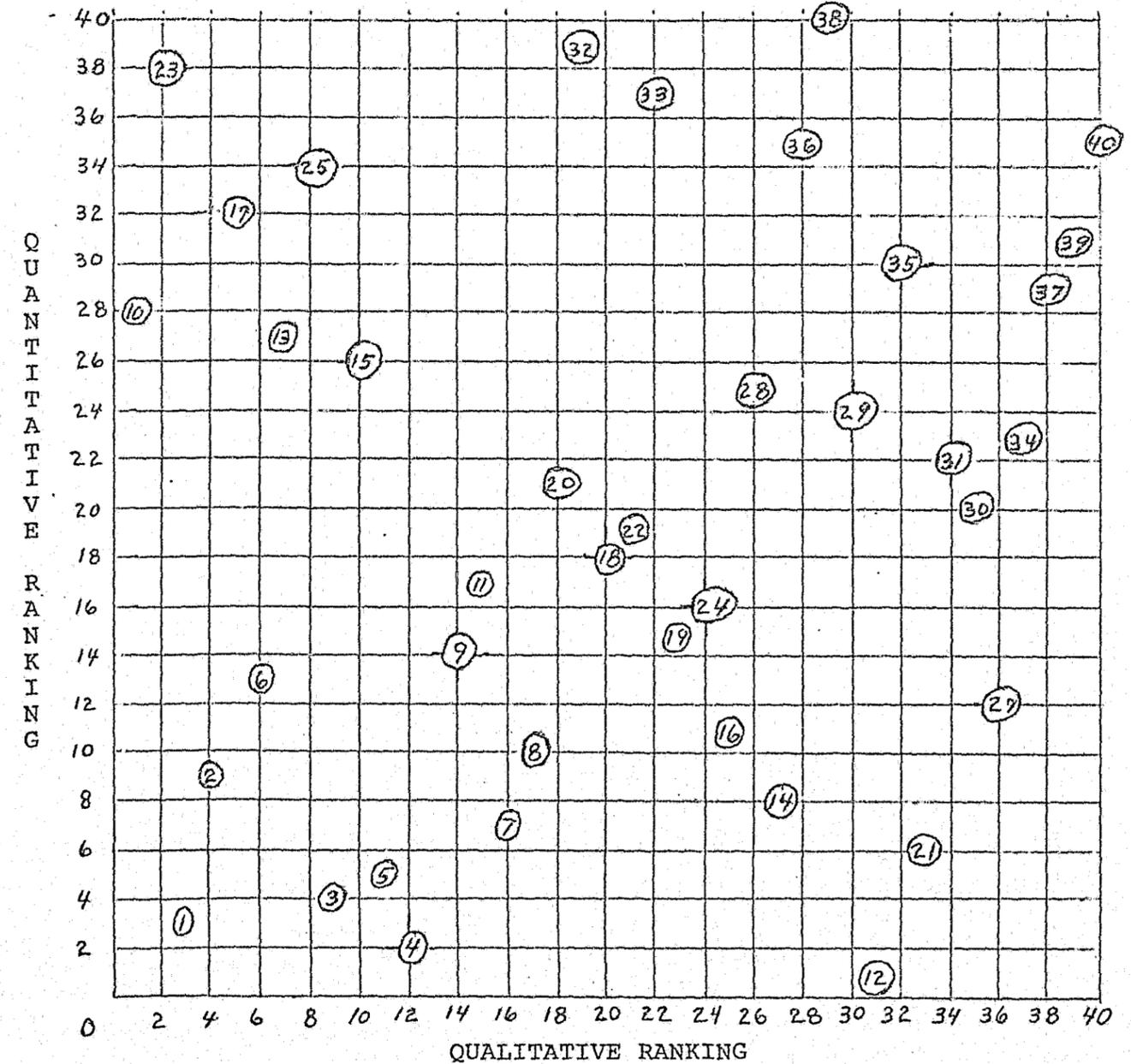
Notice how all the points or dots are relatively close to the dotted line*. This clearly shows a negative tendency to correlation.

*line of perfect negative correlation (-1 being the lower limit)

APPENDIX C

Therefore, the closer a correlation coefficient is to 0, the less tendency there is to correlation between the two programs. The two tests for correlation gave .11 and .13 as results which show there is no correlation. By observing the scatter diagram, no consistent pattern for correlation can be seen.

SCATTER DIAGRAM*



*Numbers encircled are the positions on the Perceived Effectiveness Ranking (See P. 10)

END