READI Chicago
Reducing Violence Through Cognitive Behavioral Therapy & Supported Work

Early Analysis
READI Chicago is a community violence reduction initiative that provides two years of intensive programming to men at the highest risk of gun violence involvement. The initiative offers 18 months of paid employment, cognitive behavioral therapy (CBT), and wrap-around services, with an additional six months of job coaching support after the work component of the program ends. READI identifies eligible men through three sources: community partners, re-entry from the criminal justice system, and a data-based risk assessment.

The randomized controlled trial of READI Chicago is still in progress, but this document reports interim results. This analysis includes 82% of the full study population—a total of 2,014 men for whom we can measure outcomes over a pre-specified follow-up period of 20 months. For the typical participant, these 20 months represent two months of initial engagement and recruitment, and 18 months of eligibility for paid work and other services. For full transparency, we have reported preliminary results on a biannual basis since randomization began in August 2017. It is important to note that since this is a partial sample, these results should be considered preliminary and are subject to change. Final results will be available in 2022, once all individuals in the study complete their program eligibility windows.

What would have happened without READI?
Shooting and homicide victimizations per 100 people over 20 months

Men eligible for READI Chicago are highly engaged despite being at incredibly high risk for violence involvement

READI Chicago is successfully identifying and recruiting men with unusually high rates of gun violence and justice system contact, even within neighborhoods experiencing elevated rates of violence. Of the 2,014 men in this early analysis, for instance, 35% had been shot at least once and almost all (98%) have been arrested at least once. The average entering age of a READI Chicago eligible young man is 25 years old. Among the recruited population, approximately 20% have a high school diploma, with most men having last had contact with the educational system during grade 10. They also had an average of 17 arrests prior to the study. These men continued to be at an extremely high risk of gun violence involvement after referral. Over 20 months, men in the control group—whose outcomes represent what would happen to READI-eligible men without access to READI services—were shot or killed at 45 times the rate of the average Chicagoan. They were over 11 times more likely to be shot or killed than their neighbors in some of Chicago’s highest-violence neighborhoods. Even compared to other men in their same age group and neighborhoods, READI referrals were more than twice as likely to be shot or killed during the outcome period. These rates of violence victimization are astonishingly high. Although the three pathways are referring different types of people, realized risk — whether or not men actually experience a shooting — is consistent across pathways. This suggests READI’s 3-part referral system is successfully broadening the reach of the program to men who might otherwise be missed.
Despite facing considerable barriers to participating, men offered READI are also highly engaged. Fifty-five percent of all referrals eligible to start work do so within 20 months, working an average of 569 hours in subsidized jobs over this period. The rates of starting work are even higher for community and reentry referrals—79% and 70%, respectively—compared to 38% for risk assessment referrals. One explanation for such high take-up rates may be the income READI provides, though according to staff focus groups and participant interviews and surveys, men stay connected because of the skills they are learning and relationships they are building.

We measure serious violence involvement in several different ways.

Because we cannot directly observe the behavior of men in the READI study, we currently rely on two types of data from the Chicago Police Department to measure their serious violence involvement: arrests for serious violent offenses and victimizations for shootings and homicides. To improve the integrity of this research, we pre-specified an index combining these measures as the study’s primary outcome. We also pre-specified that we would break down the elements of the index into its components to provide a more complete picture of how READI may change participants’ behavior. As pre-specified we adjust our analysis for the number of tests we run, to avoid making spurious conclusions.

There is no statistically significant change in the pre-specified index of serious violence involvement. But there is a large and significant decline in arrests for shootings and homicides, even after adjusting for multiple testing. These results are most consistent for community referrals, who also show a large decline in shooting and homicide victimizations that is not quite statistically significant.

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Shooting and homicide arrests. Men offered the chance to participate in READI—including those who participated as well as those who could not be found or declined the offer—are 59% less likely to be arrested for a shooting or homicide. Men who participated in READI—defined as attending at least one orientation—are 79% less likely to be arrested for a shooting or homicide. Both estimates are statistically significant.

Shooting and homicide victimizations. There is some indication of large reductions in shooting and homicide victimizations for community referrals as compared to men through the risk referral pathway; however, these effects are not statistically significant.

Non-lethal violent crime arrests. Men offered READI see a modest increase in arrests for non-lethal violent crimes, though this difference is not statistically significant.

Involvement in any lethal violence—defined as arrests and victimizations for shooting and homicide—declined by 19% for men offered READI and by 32% for men who participated in READI. Neither estimate is statistically significant. However, community referrals who participated in READI were 51% less likely to be involved in lethal violence, a statistically significant estimate.

These results suggest that READI may reduce involvement in lethal violence, particularly for men referred to the program by community outreach partners. If these results persist, it would signal a potentially major READI-driven improvement in the lives of both participants and their communities. As more men complete the program over time, we will continue to update this document and share these important results with community service providers, policymakers, activists, and the philanthropic community. For more information on the research findings, please contact Dr. Monica Bhatt, Senior Research Director at the University of Chicago Crime Lab, at mbhatt@uchicago.edu.

Endnotes

1. For more information on the risk assessment, please see our corresponding "Service Provision Risk Assessment Overview."
2. See the READI Pre-Analysis Plan: [https://osf.io/ap8fj/](https://osf.io/ap8fj/)
3. The lower take-up rate for risk assessment referrals partly reflects the fact that many fewer of these men are ever located by outreach workers, with whom they often have no prior relationship, unlike community referrals.
4. For more on our early qualitative findings, please reach out to the research team for more information.
5. We are in the process of obtaining additional data from the Illinois State Police and the Illinois Department of Public Health that would broaden our measures of serious violence involvement.
6. Serious violence offenses include homicide, manslaughter, aggravated assault, aggravated battery, robbery and criminal sexual assault. For each of the arrest and victimization measures, we count the number of times a person experienced that event.