Curr Probl Pediatr Adolesc Health Care xxx (xxxx) xxx

Contents lists available at ScienceDirect

Current Problems in Pediatric and Adolescent Health Care

journal homepage: www.elsevier.com/locate/cppeds

Credible messenger mentoring to promote the health of youth involved in the juvenile legal system: A narrative review

Julia Lesnick, MSW [a,*], Laura S. Abrams, PhD, MSW [a], Kassandra Angel, MPA [a], Elizabeth S. Barnert, MD, MPH, MS [b]

[a] Department of Social Welfare, Luskin School of Public Affairs, University of California, Los Angeles, California, US
[b] Department of Pediatrics, David Geffen School of Medicine, University of California, Los Angeles, California, US

ARTICLE INFO

Keywords:
Credible messenger mentoring
Juvenile system
Life course health development

ABSTRACT

This narrative review examines the literature on credible messenger mentoring (CMM) as an intervention to promote the health and well-being of youth involved in the juvenile legal system. In the CMM model, individuals with shared life experiences (e.g., from the same neighborhoods or marginalized communities, with former gang or incarceration history) serve as mentors, leveraging their own history of transformation to engage youth involved in the juvenile legal system and promote individual and community change. CMM is an increasingly popular approach for working with youth involved in the juvenile legal system, yet the state of the research on this intervention is unclear. This article provides a narrative review of existing research on CMM to understand what is known, and unknown, about the intervention. Results find an emerging, but incomplete body of evidence supporting the impact of CMM for youth involved in the juvenile legal system, and for adult mentors. Qualitative and observational findings provide stronger support for the model, while quantitative findings provide more mixed evidence, indicating that CMM may be a promising life course health intervention, yet needs more empirical study. Findings from this review underscore the value of integrating community-informed evidence in the evaluation of health interventions. Future research can inform contemporary interest in the CMM approach and guide implementation and measurement standards for optimizing intervention delivery with youth involved in the juvenile legal system.

Credible messenger mentoring (CMM, defined as mentoring by individuals with lived experience) is an emerging strategy to promote the healthy development of young people involved in the juvenile legal system (JLS), their families, and communities. Youth involved in the JLS face a number of health disparities. Youth are more likely to enter the JLS with greater health needs, and JLS involvement itself—especially detention and incarceration—contributes to long-term health consequences persisting into adulthood, including higher morbidity and mortality rates.[1–3] Health disparities are further compounded by the over-representation of young people of color, LGBTQ+ youth, and youth from impoverished communities in the JLS.[4] Moreover, most interventions for this population focus on mitigating risks and preventing recidivism, rather than promoting health or prosocial development. There is an urgent need for policy and practice innovations that foster health equity and promote long-term healthy development and well-being for youth who are already involved or are at risk of becoming involved in the JLS.

Purpose of this review

CMM is a burgeoning health promotion strategy that aligns with the growing recognition that violence and carceral system involvement are strong determinants of health.[5,6] Multiple technical reports have described the CMM model in depth, provided examples of programs, and advocated for its expansion (see Table 1). However, there remains a need for thorough synthesis of empirical research on this increasingly popular intervention. This narrative review seeks to address a gap in understanding the scope and quality of research on the impact of CMM interventions, especially in terms of how the model may promote health equity and long-term healthy development. To that end, we survey the CMM literature to analyze the state of evidence on this model. We first describe the core components of the CMM model. Next, we describe our narrative search methods and provide findings and analysis on the state of empirical evidence on CMM, followed by considerations for CMM through a life course health framework. We conclude with implications

* Corresponding author.
E-mail address: julialesnick@ucla.edu (J. Lesnick).

https://doi.org/10.1016/j.cppeds.2023.101435

1538-5442/© 2023 The Authors. Published by Elsevier Inc. This is an open access article under the CC BY-NC-ND license (http://creativecommons.org/licenses/by-nc-nd/4.0/).

Table 1
Additional technical reports with examples of CMM programs

Example CMM Programs and Initiatives
Ready4Work[7,8]
DYRS Credible Messenger Initiative[9]
Youth Advocate Programs[9]
Project Safe Neighborhoods[10]
reVision[10]
READI[10,9]
Roca, Inc.[9]
Community Connections for Youth[9]
Southeast Credible Messengers[11]
Maine Credible Messenger Movement[11]
NuEntry Opportunity[11]
Personal reflection from an Arches mentor[12]
Other cities and county-level CMM initiatives (Described in: Credible Messenger Justice Center[13]): City of Milwaukee; Racine County, WI; King County, WA; Onandaga County, NY; Harris County, TX; Middlesex County, NJ

and future directions for research to further understand the impact of CMM.

The credible messenger mentoring model

The *credible messenger* concept was first developed in 1979 by a group of men in prison, led by Black Panther Eddie Ellis, when they envisioned a radical social movement of people who were currently and previously incarcerated, applying their lived experience to empower and lift up marginalized communities.[14,10] In the years since, grassroots credible messenger approaches have supported communities in multiple ways, including serving as first responders to shootings, de-escalating gang conflicts, conducting street outreach, and hosting community events.[6,15] Credible messengers also increasingly work in a mentoring capacity with youth in the JLS in many regions of the United States, garnering national media coverage and recognition.[11,13,16–19] **Credible messenger mentoring** (CMM) is practiced in the community with young people identified as high risk for involvement in violence or the JLS, inside juvenile facilities, in alternatives to incarceration programs, and during the re-entry process.[20]

At its core, CMM connects youth involved in the JLS with trusted adult mentors who have relatable life experiences and can show them a different path forward.[11] Credible messengers are uniquely skilled and positioned to connect with young people in the JLS who may be disengaged and harder to reach through more traditional service approaches. Credible messengers can relate to the challenges that youth face, and have successfully navigated the types of changes that they are encouraging youth to make, increasing their credibility in the eyes of youth. As one report describes: "The problem is not the message; the young person simply has a hard time identifying with the messenger" (p. 3).[21] Mentors' credibility, based on their lived experience, helps build a foundation of trust and strong relationships to support young people's growth and change. In addition to the benefits for youth, CMM is also designed to promote intergenerational and community health and well-being. The CMM model views mentors as assets to be supported and developed as leaders, and provides them with opportunities for gainful employment and to make meaningful change in their communities where they otherwise often face structural barriers related to their own system involvement.[2223]

Credible messenger mentoring defined

Our review of the literature indicates that there is not one universal definition of CMM; rather, it is a mindset and philosophy constituted of certain core elements, with room to adapt to individuals and local communities.[10] CMM programs generally aim to reduce violence, crime, and contact with the carceral system, and to transform young people's thinking and behavior in ways that help shift their life trajectories.[10,11] However, CMM programs vary considerably, such as in the frequency and duration of services, compensation for mentees, and the extent of collaboration with probation and law enforcement. Additionally, the format of service provision can differ to include individual and/or group mentoring, therapeutic and mental health programming such as cognitive behavioral therapy, and referrals to community-based services and opportunities. Regardless of the specific approach, CMM is grounded in relationship-building, and a deep commitment to intensively and holistically supporting youth and communities impacted by the carceral system.[15]

Similarly, there is no universal definition of what makes someone a "credible messenger." A participatory study conducted by the Urban Institute[10] of a diverse sample of CMM programs and providers found that credible messengers define their role fluidly. Respondents understood lived experience broadly, where an "intimate knowledge, connection, and embeddedness" in the communities they work with fosters their credibility (p. 25). While many credible messengers have been incarcerated or involved in gangs, CMM recognizes a range of direct and indirect experiences of marginalization and involvement in the carceral system. The results of the Urban Institute participatory study[10] offer the following guidelines for defining a credible messenger:

- **Lived experience**: having direct, or indirect (e.g., a family member or close friend who is or was incarcerated) experience with the carceral system. This experience may also include living in heavily criminalized communities or involvement in other systems such as foster care.
- **Transformation**: having experienced a major life change, such as desisting from crime or leaving a gang, and now acting as a leader in their community to support others in making similar transitions.
- **Community credibility**: considered credible in the eyes of youth and community members they work with (rather than by an external stakeholder or system).
- **Mentoring and relational skills**: skilled in communication, listening, rapport-building, empathy, and mentoring, with a deep commitment to lifting up marginalized youth and communities.

We initially approached the present review with the intention of differentiating credible messengers and CMM programs from other similar models (e.g., peer mentors, peer navigators, youth coaches, transformative mentoring, community health advocates, returned citizens, agents of change, lived experience experts). However, our review found that these terms are often used interchangeably. Furthermore, credible messengers in the Urban Institute report suggest that the spirit of the work itself is more important than the specific language used to describe it.[6] Thus, for the purpose of this review, we utilize the term *credible messenger mentoring* (or CMM) for consistency, but define it inclusively based on the core criteria of lived experience, transformation, community credibility, and mentoring and relational skills outlined above.

Method

We conducted an extensive literature search to assess the state of empirical knowledge on CMM. Search terms included: "credible messenger mentoring", "credible messenger re-entry", "credible messenger juvenile", "credible messenger youth", "credible messenger probation", "credible messenger aftercare", and "transformative mentoring juvenile." We also searched the CMM synonyms listed above, but did not find additional studies meeting the aforementioned guidelines defining CMM. The search period included literature from 2010 to 2023, retrieved from the following databases: Google Scholar; ProQuest Social Service Abstracts; National Criminal Justice Reference Service; and Crime Solutions Program Profiles. Additionally, we reviewed citation lists of the studies obtained, technical reports advocating for CMM programs and providing local examples,[10,11,17,21,9] and the research

library of the Credible Messenger Justice Center, a national organization focused on credible messenger programs.

We included studies for consideration if they focused on youth and young adults as the client population, described work aligned with core criteria of credible messenger mentoring outlined above, and served youth formerly or currently involved in the JLS, or who were designated high-risk for JLS involvement. Studies that examined community based violence interventions with credible messengers, but without an explicit mentoring component were not included. Reports that focused on program implementation, capacity-building, or cost-savings of CMM, without findings related to their impact on youth or adults were also excluded. For studies that included other data or findings on the organization such as cost-benefit analyses, we limited our review to results about the model's impact on youth and mentors. We included quantitative, qualitative, and mixed-methods studies, but excluded reports that referenced findings or impacts without providing primary data. Additionally, we excluded articles that referenced CMM as a model program in technical reports, but where no evaluation had been conducted or it was not possible to determine or access the evaluation (see Table 1).

We conducted a narrative review rather than a systematic review due to the emerging nature of research on CMM, the varying types of methods and research designs examined, and the importance of incorporating community-based evidence and grey literature. Unlike a formal systematic review, there are fewer established standards for evaluating evidence in a narrative review. We referenced existing narrative reviews conducted on youth justice issues,[24,25] and best practice standards for evaluating grey literature[26] to develop the following review criteria:

- Quantitative evidence:
  - Strong: use of comparison group/experimental or quasi-experimental design; detailed description of research procedures for recruitment, sampling, and bias; statistical significance level set at $p < .05$; use of validated measures; controlling/addressing relevant confounds.
  - Moderate: statistical test of pre/post change, without comparison or control group; statistical significance set at $p < .1$; incomplete description of methods, sampling, or instruments.
  - Weaker: no statistical analyses or tests of association, minimal or no detail on research procedures or methods.
- Qualitative and observational evidence:
  - Strong: themes reflected across several participants; rigorous qualitative methods described, participant quotations provided to illustrate themes, researcher positionality defined.
  - Moderate: limited detail regarding method; paraphrasing of participant narratives; few direct quotations; less robust analysis.
  - Weaker: minimal or no detail on method or analysis procedures; no direct quotations.

Search results and studies

Our search yielded two broad categories of findings on CMM: Type 1) quantitative evidence of CMM's impact on youth and/or mentors; and Type 2) qualitative or observational evidence of CMM's impact on youth and/or mentors. Table 2 summarizes the empirical evaluations included in this review. Table 3 offers a detailed overview of methodology and findings for each study.

Overall, the search yielded nine studies evaluating the impact of CMM on youth and mentors. Independent evaluators conducted most of these studies and examined specific adaptations of CMM: The Peacemaker Fellowship, Arches, AIM, Healthy, Wealthy & Wise (HWW), and the Credible Messenger Institute (see Table 3 for a description of each adaptation). One study examined the impact of participating in CMM more generally, outside of a specific program. Each adaptation of CMM had one or two distinct studies assessing some aspect of its impacts. The studies evaluated CMM in New York City, in three different cities in California, and in Philadelphia, predominantly in neighborhoods with high rates of crime and poverty.

Table 2
Summary of empirical studies evaluating CMM

CMM Program Studied	*Citation*	*Type 1: Quantitative Evidence of CMM Impact*	*Type 2: Qualitative/ Observational Evidence of CMM Impact*
AIM	Cramer et al., 2018[27]	Moderate evidence	Moderate evidence
Arches	Lynch et al., 2018[28]	Strong evidence	Moderate evidence
Credible Messenger Institute	Lopez-Humphreys & Teater, 2020[29]	Moderate evidence	N/A
	Lopez-Humphreys & Teater, 2019[30]	N/A	Strong evidence
Peacemaker Fellowship	Corburn & Fukutome-Lopez, 2020[31]	Weaker evidence	N/A
	Wolf et al., 2015[32]	Weaker evidence	Moderate evidence
Healthy, Wealthy & Wise	Remington, 2020[33]	N/A	Strong evidence
	Gonzalez et al., 2020[34]	Weaker evidence	Moderate evidence
No model specified	Fader et al., 2022[35]	N/A	Strong evidence

The programs examined served youth and young adults ages 13 to 25 (with one program also including adults up to age 35) who were mandated to complete the program as part of probation or as an alternative to incarceration, as well as those who were not formally involved in the JLS or criminal legal system at the time of participation but were previously involved, or were considered high risk for system involvement. Mentors in the studies had currently or previously worked with youth, or were in training to do so. In studies that reported mentor characteristics, mentors were ages 21-63, were formerly incarcerated or had a history of criminal activity, and had been out of prison for varying lengths of time. Both mentors and mentees predominantly identified as people of color.

Research designs varied across the research reports. Most of the studies followed participants throughout their involvement in a specific program (and sometimes after), and used mixed methods (e.g., some combination of interviews, focus groups, observations, case review, and/or analysis of law enforcement records or internal program data). Most studies used convenience samples of participants who were connected to a CMM program during the study period, although some studies included data from prior program participants. Only one study[28] used a quasi-experimental design, where participants' zip codes were used to form treatment and comparison groups. Sample sizes varied, with some studies focused on in-depth reflections from a few participants, and other studies including hundreds of youth.

Findings

Quantitative evidence on the impact of CMM (Type 1). The most commonly assessed outcomes were measures of recidivism reporting indicators of youth participants' delinquent or criminal activity, or future JLS involvement at varying points in time from when they started or ended the program. Other common outcomes assessed included progress on individualized goal plans, program participation and dosage, and linkages to other services and opportunities (e.g., employment, counseling, educational programs). Some studies also assessed changes in psychosocial indicators (e.g., self-esteem, social support, emotion-regulation) for youth or mentors. Participation in CMM programs was associated with varying degrees of improvement in psychosocial skills and achievement of individual goals, though findings were largely correlational. Only one study collected quantitative data on

Table 3
Analysis of Empirical Studies of Credible Messenger Mentoring

Study	Sample	Design	Outcomes	Results	Evaluator	Evidence Assessment
Advocate, Intervene, Mentor (AIM): program for youth assessed as high risk, who are sentenced to probation and would otherwise be placed in a residential facility, are facing a violation of probation, or were rearrested for certain felonies. Youth work individually with credible messenger mentors 7-30 hours per week for 6-9 months. Mentors help youth create and work on goal plans, link youth to services, and partner with probation officers to provide case management and referrals. AIM also involves regular meetings with youth, families, probation, and mentors.						
Study 1: [27] *Location: NYC*	• n=229 youth at 5 sites • Ages 13-18, m=15 • 77% male • 81% African American • 16.2% Hispanic /Latino Interviews: • 20 youth • 9 parents • 17 mentors • 7 staff • 34 stake-holders	• Analysis of program data from launch (2012) to evaluation (2016) • Within group change • Interviews • Focus groups • Case file reviews • Court records • Historical comparison group of youth released from placement	•Perceptions of program • Program completion • Goal attainment • Re-arrest • Re-conviction (general, felony) at 6, 12 months post enrollment • Out of home placement • Demographic differences	Quantitative Results • 2-10 hours/week with mentors • 61% program completion • Most made progress on or achieved goals • 67% not resentenced to placement (80% excluding technical violations.) • Recidivism varied by court, charge, and timepoint: 0-25.8% • Significant results: ○ Family court adjudication: general at 6, 12 months, felony at 12 months ($p <$ 0.1) ○ Criminal court felony re-conviction 12 months ($p <$ .05) Qualitative Results: • Shared experiences enabled connections • Youth comfortable opening up with mentors • Parents found mentors supportive and responsive • Concerns with capacity, mentor matching, program length, working with probation, and engaging younger youth	Independent evaluator at the Urban Institute Peer review: No	*Quantitative: Moderate* Results indicate that youth are on a promising track at the end of the program. Some measures of recidivism showed significant differences before and after AIM, and over half of youth were not resentenced to placement. Procedures and methods are described in detail, and results include tests of association for some measures. The authors attempted to form a historical comparison group, however the samples were not comparable. Findings do not provide a basis for causal inference. *Qualitative: Moderate* Interview findings provide insight into positive impacts of the program on youth, as well as some limitations of the program.Some direct quotes used to illustrate themes, and moderate detail provided on methods and analysis.
Arches: 6-12-month program for youth sentenced to probation in the community, with high risk of re-offending. Program components include individualized support, and group sessions held twice per week facilitated by credible messenger mentors, where youth complete a cognitive behavioral therapy journaling intervention. Mentors work in partnership with probation officers to provide case management and referrals. Youth receive stipends for participation.						
Study 1: [28] Location: NYC	• n=943 youth, 8 sites (273 in Arches, 670 probation as usual) • Observed 61 youth, 24 mentors *Demographics* (Arches youth) • Ages 16-24, m=19 • 86.5% male • 75.6% African-American • 17.9% Hispanic /Latino • 73.5% less than high school degree • 20.8% employed at intake • 22.9% assessed high risk at intake	• Quasi-experimental design • Groups formed by zip code, propensity score matching • Paired t-tests • 8 sites randomly selected. • For Arches programs only: ○ Focus groups ○ Interviews ○ Observation ○ Pre/post surveys	• Rates of re-arrest and re-conviction (general, felony) 12, 24 months post-program • Demographic differences • Changes in youth behavior • Perceptions of program • Youth engagement • Mentor facilitation	Quantitative results: • Varied attendance and retention by site • Significant differences between Arches and comparison group in some recidivism indicators: • For youth under 17, felony re-conviction at 12 ($p <$ 0.01), 24 ($p <$0.001) months • For older youth, arrest (felony, non-felony), and reconviction (non-felony) at 12, 24 months ($p <$ 0.05) • Change in positive development and psycho-social skills ($p <$ 0.01) Qualitative/ Observation results: • Youth felt supported by and close to mentors • Journaling curriculum not engaging • Mentors need more support • Program too short • Program capacity limited • Varying fidelity	Independent evaluator at the Urban Institute Peer-review: No	*Quantitative: Strong* Results find that Arches was effective in reducing some indicators of recidivism compared to probation as usual, especially for younger youth. Arches youth also improved in indicators of positive youth development and psycho-social skills over time. The study uses rigorous methods and a strong design, with validated measures and comparison groups. Tests of association were significant below the threshold of p<.05. Results provide a strong basis for causal inference. *Qualitative/ Observational: Moderate* Interview, focus group, and observation results demonstrate positive impacts of the program on youth, as well as some limitations of the program. Direct quotes are used to illustrate themes, and moderate detail is provided on methods and analysis.

(*continued on next page*)

Table 3 (*continued*)

Credible Messenger Institute: 6-week intensive training program for credible messenger mentors. Training focuses on facilitating cognitive-behavioral therapy, mentoring skills, and interpersonal communication. Training also aims to support mentors in their own healing, such as providing tools for self-care, self-awareness, reflecting on trauma and how it may influence mentoring, processing one's own story of struggle and resilience, and practicing emotion regulation.						
Credible Messenger Institute: 6-week intensive training program for credible messenger mentors. Training focuses on facilitating cognitive-behavioral therapy, mentoring skills, and interpersonal communication. Training also aims to support mentors in their own healing, such as providing tools for self-care, self-awareness, reflecting on trauma and how it may influence mentoring, processing one's own story of struggle and resilience, and practicing emotion regulation.						
Study 1: [29] Location: NYC	• n=35 • Ages 21-61+, m=40 • 77% Black/ African American • 20% Hispanic/ Latino/a/x • 71% Male • Years incarcerated: < 1-36, m= 15.4 • Years since release: 1-12, m=5.2	Pilot study evaluating a 6-week CMM training. Pre-post t-test of change after training.	• Self-esteem • Self-awareness • Professional boundaries • Self-narratives • Hope • Experience with training	• Statistically significant increases in self-esteem, hope, self-awareness, and self-knowledge after training (p <0.1). • No statistically significant increases in professional boundaries or self-narratives. • Mentors reported strong satisfaction with the training, and intentions to apply what was learned in practice.	University researchers Peer-review: Yes	*Quantitative: Moderate* Results find that training is associated with increases in some psychosocial indicators for mentors. Methods and analysis are described in detail, use validated measures, and tests of significance, at the (p<.1) threshold. However, the study did not use comparison groups or calculate effect sizes. Findings do not provide a basis for causal inference. Results also focus on training, and may not be generalizable to CMM's impact in a mentoring context.
Study 2: [30] Location: NYC	• n=11 • Ages 29-63 • Years incarcerated: 2-25+ • Years since release: 2-11 • 64% Black/ African American • 27% Hispanic/ Latino/a/x • 82% male	Focus groups conducted 1 year after completing the training	• Mentors hopes for training • Reasons for participating • Experience with training • Main takeaways • Impact of training on practice	• Training was meaningful for mentors, and created a safe space to be vulnerable, build community, receive/give mutual mentorship, continue healing, practice self-care and self-forgiveness, recognize and affirm their own value. • Mentors felt validated by peers • Training promoted mentor growth (such as seeing oneself as more than their past)	University researchers, member-checked findings with participants Peer-review: Yes	*Qualitative: Strong* Compelling findings on mentors' positive experiences of joining the CMM community and receiving training. To a lesser extent, results provide some insights into the ways mentors saw the benefits of their training pass down to youth they work with. Methodology is detailed and rigorous, researchers define their positionality and use a member checking process, and rich example quotes are provided to support findings.
Peacemaker Fellowship: 18-month program where cohorts of fellows work with teams of credible messenger mentors. Fellows are individuals identified as active firearm offenders in the community but do not currently have prosecutable cases. Participation is not mandated, fellows are encouraged to join. Program components include daily mentor contact, intergenerational mentoring groups, developing life maps (individualized goal plans), case management, internships, travel and excursions, and linkage to services. Mentors work with fellows' support networks. Fellows receive stipends for participating.						
Study 1: [31] Location: Sacramento, CA	• n=50 • Ages 14-25 m=23 • 98% male • 96% African American • 65% previously incarcerated or arrested • 12% previously offered social services • 84% unemployed • 84% gun violence victim	Percentage of fellows meeting each outcome during and after program completion. Uses internal program data.	• Program completion • Life map completion • Program participation • New arrests (general and gun-related) • Gun victimization • Paid work/ internship • Service referrals • Mortality • Mentor contacts	• 64% program completion • 90% no new gun charges • 44% no new arrests • 2% (1 fellow) shot or killed by firearms during the program • 100% received social services • 25% AVG goal completion • 26% began paid internship • 38% obtained work • AVG services provided (per fellow): • 3.7 referrals, 7.7 hours of referral advocacy • 31 mentor contacts • 50 hours face-to-face mentor contact	Independent evaluator at UC Berkeley Institute of Urban and Regional Development Peer-review: No	*Quantitative: Weaker* Results find that the program helps connect many fellows to services and opportunities, progress on their goals, and get on a promising track after the program. However, the report provides minimal information on methods, and did not conduct statistical analyses, or use a comparison group. Findings do not provide a basis for causal inference.
Study 2: [32] Location: Richmond, CA	• n=68 fellows, 14 with interviews • Age: 14-25 • 97% African American • 45% are fathers • 21% were prior victims of gun violence	Process evaluation of organization from launch (2010) to evaluation (2015), with select findings on the fellowship. • Interviews • Program data	• Perceptions of program • Experience in program • Exposure to violence • Arrest rates • Access/ referral to services • Mortality • Educational and vocational achievements	Quantitative Results • Services completed: ○ 100% life maps ○ 83% life skills training ○ 77% anger management ○ 77% financial management ○ 61% employment ○ 14-46% accessed various social services • 84% no new gun injury • 79% no new gun arrests • 94% (64/68) are alive • 20% received GED • 10% enrolled in college/	Independent evaluator at the National Council on Crime and Delinquency Peer-review: No	*Quantitative: Weaker* Results find that the program helps connect many fellows to services and opportunities, progress on their goals, and get on a promising track after the program. The study provides some description of methods and procedures, but does not use statistical analyses, or a comparison group. Findings do not provide a basis for causal inference. *Qualitative: Moderate* Interview findings provide rich

(*continued on next page*)

Table 3 (*continued*)

Peacemaker Fellowship: 18-month program where cohorts of fellows work with teams of credible messenger mentors. Fellows are individuals identified as active firearm offenders in the community but do not currently have prosecutable cases. Participation is not mandated, fellows are encouraged to join. Program components include daily mentor contact, intergenerational mentoring groups, developing life maps (individualized goal plans), case management, internships, travel and excursions, and linkage to services. Mentors work with fellows' support networks. Fellows receive stipends for participating.						
				vocational program • 50% became employed Qualitative results: • Fellows felt understood and supported by mentors, program felt like a family • Program improved participants' world views, showed possibilities for change, helped learn skills to feel safer in community		insight into the positive impact of the fellowship for participants. Limited detail is provided on interview methods or analysis, but direct quotes are used to illustrate themes.
Healthy, Wealthy & Wise (HWW) intensive, 14-week mentoring program led by credible messenger mentors for youth and young adults considered high risk for system involvement, or who are formerly system involved. Weekly sessions held for 1.5-2 hours, and curriculum addresses topics such as decision-making, identity, overcoming pain and trauma, life skills, and financial literacy. The program also draws on aspects of cognitive behavioral therapy, and uses journaling techniques to promote self-reflection, goal setting, and changes to thinking. Participants receive stipends for participating.						
Study 1: [33] Location: Oakland, CA	• *n*=5 youth (3/5 male, 4/5 Black, 1/5 Latinx) • Ages 18-35 • All assessed as high risk (involved or affiliated with gangs, JLS, formerly incarcerated, victim/perpetrator of gun violence) • *n*=15 staff (12/15 male, 11/15 Black, 2/15 Latinx) • Ages 37-54	Larger organizational case study, with select findings on HWW program impact • Interviews • Observation • Document analysis	• Process of transformative mentoring • Mentor perceptions of their roles • Youth perceptions of mentors • Mentor's process of engaging youth	• Mentors support youth in navigating hard decisions, staying accountable to goals, modeling positive change, connecting to resources, and changing mindsets. • Mentors' credibility helps build strong relationships and strengthens understanding of youth to provide individualized support. • Mentors foster belonging, engage families, and strengthen youth support networks • Mentors/staff support to each other.	Doctoral dissertation Peer reviewed: no	*Qualitative/Observational: Strong* Findings provide compelling insights into the positive experience and impact of CMM for youth, mentors, and the larger community. Methodology is detailed and rigorous, researcher defines their positionality and process in depth, and provides rich example quotes, and supporting observations.
Study 2: [34] Location: Oakland CA	• *n= 37* • 67% African American • 12% Hispanic/ Latino • 72% Male • 44% ages 19-24 • 100% history/ immediate risk of gun violence • 97% close relation harmed by gun violence • 82% on probation or parole • 39% shot or seriously injured due to turf/ group violence • *Demographics reflect full organization	Process and outcome evaluation of full organization, select findings relevant to HWW. • Interviews • Document review • Program data • Survey data • Participant outcomes from 12 months before program start to 12 months after program end.	• Arrests for any offense, gun offense, and violent offense • Probation sentence • Conviction for any offense • Violent victimization • Resilience	Quantitative results • Decrease in arrests (from 16 to 5 participants) • 49% program completion. Some re-joined or completed multiple times • Decrease in participants with gun offenses (11 to 0), and violent offenses (8 to 0), and placement on probation or convicted of a crime (8 to 0) • Varied changes in violent victimization by program participation • Minimal change on resilience surveys Qualitative results: • Participants felt program changed mindset, built life skills, fostered a sense of pride. • Participants felt mentors could relate to them.	Independent evaluator at Mathematica Peer review: no	*Quantitative: Weaker* Results find that mentees are on a promising track after HWW, with declines in indicators of recidivism and risk behavior, and varied rates of violent victimization. However, the study does not utilize comparison groups nor conduct tests of statistical significance, has a small sample size of youth participating in the target program, and provides limited detail on research procedures. Findings do not provide a basis for causal inference. *Qualitative: Moderate* Interview findings provide rich insight into the positive impact of the program for participants. Limited detail is provided on interview methods or analysis, but direct quotes are used to illustrate themes.
Impact on mentors (non-program specific)						
Study 1[35] *Location: Philadelphia suburb*	• *n*=45, results focused on the 28 men of color • 20/28 identified as mentors • 24/28 had a criminal history or record, or self-reported past criminal activity	Interview study on experiences of racialization, criminalization, and finding redemption, with select findings relevant to CMM.	• How men of color navigate racial-criminal stigma, masculinity and redemption	• Mentoring role offers a chance to teach others from mistakes. • Mentoring promoted upward economic and social mobility • Mentoring helped develop positive	University researchers Peer-review: Yes	*Qualitative: Strong* Findings provide a rich example of the positive effects of mentoring for men who have been racialized and criminalized. Study provides a detailed description of rigorous methodology and analysis, with numerous quotes to illustrate findings. This study was the least explicit in language and focus on

(*continued on next page*)

Table 3 (*continued*)

Impact on mentors (non-program specific)		
	self- narratives and change life trajectories.	CMM, but the work described was consistent with the CMM criteria outlined earlier.

mentors,[29] finding small increases in some psychosocial indicators following completion of a CMM training program.

The strongest quantitative support for CMM came from the one study with a comparison group, which examined the Arches program.[28] This study found statistically significant reductions on some indicators of recidivism, where the rate of felony reconvictions was over two times higher in the group receiving probation as usual compared to the group participating in a CMM program within 12 ($p < 0.01$) and 24 ($p < 0.001$) months of completing the program, especially for younger participants (under age 17 at the start of the program). For older youth the rate of felony and non-felony arrest, and non-felony reconviction was significantly lower in the Arches group at 12 and 24 months ($p < 0.05$). However, other indicators of recidivism in this study were not significantly different between the groups. Results also found statistically significant improvements from program start to end in psychosocial indicators of positive youth development ($p < 0.01$), and cognitive-behavioral skills targeted by a journaling curriculum ($p < 0.01$). However, the study did not include effect sizes, which limits ability to interpret the scale of psychosocial changes.

There were a limited number of quantitative findings speaking to the impact of CMM on health outcomes. A few studies tracked participants' experiences of violent victimization, gun violence/injury, and death, with varying results and weaker evidence. Studies of the Peacemaker Fellowship found that 84% of youth participants at the Richmond, California site did not report new gun-related injuries during their time in the program.[32] At the Sacramento site, one of the 64 fellows participating died due to gun violence during the 18-month program.[31] Additionally, an evaluation of HWW found that the rate of violent victimization amongst participants before and after the program dropped from 35% to 10% amongst youth who received mentoring only, however for youth receiving the full curriculum the rate of violent victimization actually increased slightly, from 5% to 8%.[34]

Qualitative and observational evidence on the impact of CMM (Type 2). Qualitative studies provided stronger evidence speaking to the impact of CMM for mentees and mentors. Studies varied in the extent of detail provided regarding methods and analytic approaches, but almost all studies provided rich quotes that clearly demonstrated participants' positive experiences and views of the model's impact.

Across essentially all qualitative and observational findings, mentees described or displayed close, supportive relationships with their mentors. For example, mentees described feeling like they could relate to their mentors, and like mentors understood their experiences. Multiple studies found that forming these strong relationships and sense of community in CMM programs created a supportive and trusting environment for young people's growth, which is in line with the program's theory of change. One participant from HWW is quoted describing, "It's not just a class, it's a support group, it's grown to a family…a group of people who help you to be a better version of yourself" (p.18).[34] Studies asking youth about their experience in the program indicated that to varying degrees, mentors helped shift their world view, show them a different kind of lifestyle, and learn key skills to change behavior. Youth described feeling supported by mentors in making these changes. For instance, one Peacemaker Fellow was quoted as saying: "I've seen the path I was on. [The program] pulled me from a lot of things. They saved my life. They are committed to me even when I am not" (p.15).[32] Similarly, a participant from Arches described how the "goal is to get [participants] focused; [mentors] don't want us to take the same path that they went through. Every time, the conversation is to [put] yourself in a different situation, to change your mindset" (p. 16).[28] There were also some challenges reflected in qualitative and observation findings, such as program capacity, engagement, mentor matching, and collaborating with probation. For example, staff in AIM described challenges connecting with younger youth, or not having enough time to build relationships,[27] and some participants in Arches expressed concerns with the fit of the curriculum.[28]

Regarding mentors' experiences in CMM programs, multiple studies found that mentors were successful in connecting with youth and supporting them in navigating structural barriers. Mentors also shared that CMM offered them an opportunity to make amends with their own past by "paying it forward" to youth facing similar circumstances, to continue their own personal growth and healing, and to improve their economic and social mobility and community standing. For example, a mentor from HWW stated, "I wanted to find a way that I could give back to my community, 'cause I had took so much from it" (p.110).[33] Program observations, such as those conducted for HWW, also describe mentors' positive experiences belonging to the CMM community, and providing as well as receiving support from other mentors. These aspects of CMM helped mentors grow in their own role and capacity to support youth.[33] Mentors described how feeling validated by their peers in the safe space of the CMM community helped them to increasingly recognize their own worth, hope, and self-esteem. For instance, one Arches mentor shared of the experience of mentoring and participating in training: "It made me feel like I've got more, more to give these young men and women other than my story" (p. 149).[30] These findings demonstrate mentors' views that CMM also supports their own well-being.

Discussion

This narrative review investigated the range of evidence concerning the impact of CMM. We found weaker to moderate quantitative evidence, and moderate to strong qualitative and observational evidence on the impact of CMM for youth and mentors. Regarding the quantitative findings, most results found that participation was associated with some degree of reduced recidivism, increased connection to services and opportunities, and growth in some kinds of psychosocial indicators. However, the influence of CMM on health or violent victimization was not clear, and there is very limited quantitative evidence examining the program's impact on mentors. Moreover, only one study[28] used a research design with an appropriate comparison group. Without the use of comparison groups, there is limited evidence at present showing that CMM program participation (rather than some other factor) actually *causes* these positive changes, or how CMM compares to other models or programs offering general mentoring or other interventions. Additionally, many studies discussed challenges with attrition, and it may be that those who completed CMM programs are more motivated to make major life changes, so the results may reflect characteristics of the participants, rather than the effects of the program itself. Finally, a number of quantitative results were presented as standalone percentages without corresponding tests of statistical significance, which limits the ability to determine whether findings were due to chance. Overall, there is some emerging quantitative evidence on the positive impact of CMM, but at present there is not sufficient research to make causal claims about the model's effects.

The qualitative and observational evidence on CMM is more compelling, offering rich insight into the transformative effects of the model. Qualitative findings support the model's theory of change,

including the value that community members attribute to lived experience for building trust, supporting youth in navigating structural barriers, fostering hope, and modeling a path for meaningful change. Interview and focus group results from youth reiterate this impact, with descriptions of how program participation changed their thinking, behavior, outlook, and for some, their larger life trajectory. Likewise, mentors shared how their experience with CMM promoted their own growth, healing, and sense of purpose. It should be noted that some studies were more robust than others, and a few studies described concerns about challenges and limitations of current CMM implementations, especially related to youth engagement, program capacity, and support for mentors. Though studies provided varying levels of detail regarding methods, analysis, and researcher reflexivity, all qualitative evidence included direct quotes to illustrate claims in participants' own words. There were also multiple studies using rigorous qualitative and observational methods to substantiate these findings. In sum, our review found moderate to strong qualitative and observational evidence demonstrating that those who have been involved in CMM largely consider it an effective approach for promoting well-being in their communities.

The settings and groups evaluated in the current body of research also offers strengths and limitations for understanding the CMM evidence base. Study participants largely identified as people of color and as having past or current involvement in the juvenile or criminal legal system, or who were considered high-risk for system involvement, which provides a basis for claims that the model is effective with the population it is designed to serve. However, it should be noted that no evaluations were conducted in custodial facilities, and that the large majority of participants identified as male, which limits the ability to assess the impact of CMM in some JLS settings and with female-identified and gender expansive youth and mentors.

Similarly, the range of study methods has strengths and limitations. On the one hand, the range of methodological approaches used provides a nuanced understanding of program impact. The positive findings across regions, service settings, and with different program adaptations also point to its diverse potential. On the other hand, with such divergent methods and program contexts, it is difficult to compare findings and assess the larger effects of CMM in a generalizable way. For instance, it is not clear how the model's impact differs if mentoring is provided in a group or individual setting, if mentees are compensated, or if cognitive behavioral therapy is included. As another example, the curriculum and structure of CMM adaptations differ enough that it is not clear how a program developed in one region might translate to another area or JLS setting. Overall, this review found that there is some evidence to support the model's flexibility across a range of contexts and populations, but more limited evidence demonstrating its replicability or transferability to other parts of the country, in some settings, and with other system-impacted populations such as LGBTQ+ and female youth.

One final point is important in describing the state of the research on CMM. Our review found that most studies were conducted in close collaboration with CMM providers, published as technical reports by think tanks or independent evaluators, and with only a few studies conducted by academics and published in peer-reviewed journals. The CMM evidence base was generated in closer connection to communities than is typical of intervention studies, which aligns well with the model's philosophy of community-determined credibility. Such community-driven and validated evidence offers a unique contribution to understanding the impact of interventions, especially when taking seriously the goal of health equity.[36]

At the same time, in recognizing the community desire to expand the model, it is important to address the gap in the CMM evidence base in the context of a funding and service landscape that may discredit non-traditional research evidence. Whether out of convention, elitism, or concerns about methodological rigor, major funders and the academy often ignore or under-value such community-driven and validated evidence and instead prioritize studies using randomized control trial designs, and which undergo peer-review.[37] However, there are a number of unique ethical and logistical challenges to conducting research with credible messengers,[38] which may contribute to the seemingly unconventional CMM evidence base, and pose challenges to continued research on CMM. We do not advocate that researchers force CMM to fit into traditional evaluation paradigms, especially given that CMM's informal, fluid, and collective approach seems to be part of what makes it so impactful; indeed, the promising findings described in this review reiterate the importance of lifting up and prioritizing community-informed research for its strengths alongside other types of evidence. Rather, we encourage researchers and funders to engage in creative thinking and to innovate evaluation methods that can further expand the CMM evidence base.

Life course health development as a potential theoretical frame for credible messenger mentoring

The results of this review point to the life course health development (LCHD) framework as a helpful direction for guiding future research on the impact of CMM. LCHD views health as a developmental process unfolding over the lifespan and across generations, and influenced by multiple biological, environmental, social, and psychological factors.[39] LCHD interventions integrate this complex understanding of health to move beyond preventing and treating problems, and instead shift health trajectories towards longevity and optimal well-being.[40] We mapped the results of our narrative review onto the twelve principles of LCHD interventions (see Table 4), and found emerging support for CMM as a life course intervention. The evidence on CMM appears especially promising for the LCHD intervention principles of strategic timing, health equity, and collaborative co-design. For example, in regards to strategic timing, CMM challenges conventional definitions of sensitive periods by demonstrating possibilities for transformative change beyond the bounds of age or developmental stage. There also seems to be some evidence supporting CMM as aligned with other LCHD intervention principles (such as being developmentally and longitudinally focused, multi-level, health optimization focused, anti-racist, and addressing emerging health capabilities), but more research is needed to understand how the model may promote these dimensions of health. Given the emerging empirical support for CMM, and its strong conceptual fit with LCHD, we recommend future research draw on the LCHD framework and intervention principles to inform research designs and the processes and outcomes measured, such as health concepts.

Future directions

The results of this narrative review reinforce the potential positive life course effects of CMM, as well as the importance of further expanding the evidence base to clarify how the model promotes the health and well-being of youth impacted by the JLS, and their communities. In addition to applying LCHD to inform research, there are a number of directions that can further strengthen the CMM evidence base. First, future research using comparison or control groups will help demonstrate how the impact of CMM differs from other mentoring models or programs, and investigate causal associations between CMM and intended outcomes. Quasi-experimental designs may be promising, in addition to historical (but more closely matched) comparison groups or other approaches such as time series methods. Another pressing direction is to expand assessment into other geographic areas and JLS settings, especially custodial facilities, where health risks are particularly exacerbated and young people may be the most disengaged and hard to reach. Finally, we encourage future research to incorporate a wider range of outcome measures beyond recidivism, especially markers of health, positive development, and community thriving. The recidivism measures used in most of the existing studies on CMM generally do not capture the structural, environmental, and relational influences that shape youth behavior, nor do they demonstrate how complex processes

Table 4
Assessing CMM as a Life Course Intervention

Life course criteria	*CMM Evidence Base*
Developmentally focused	• Strong evidence that CMM promotes positive development in mentors, and core developmental processes in youth by connecting them with caring, trusted adults and opportunities for growth. • Varied evidence regarding the development fit of some CMM curriculums.
Longitudinally focused	• Strong evidence for the model's impact in promoting mentor's resilience and well-being long-term. • Limited evidence for the model's long-term impact for youth, beyond recidivism.
Strategically timed	• Some evidence that CMM is targeted to key turning points (e.g. individuals identified as high-risk, or re-entering the community) but no evidence on CMM in facilities, which may be a critical transition. • CMM redefines "turning points" with strong evidence of transformative shifts for those who are often considered "past change," and at varying points in individual's trajectories.
Multi-level and holistic	• Strong evidence that CMM helps youth and mentors navigate complex environments, meeting a wide range of needs, and matching social context. • Limited evidence on whether CMM is more holistic compared to other interventions.
Strengths based	• Strong evidence that CMM leverages mentor and community strengths. • Some evidence on ways that CMM matches individualized youth needs and strengths.
Health Optimization Focused	• Strong evidence that CMM helps optimize positive life trajectories for mentors. • Some evidence that CMM promotes health and well-being for youth, but many indicators focused on problem-oriented outcomes.
Health Equity Focused	• Strong evidence that CMM serves and is led by those who often face the greatest health disparities, including people of color, and people impacted by the carceral system, poverty, and community violence.
Family centered	• Strong evidence that CMM fosters a sense of family, community, and belonging. • Some evidence that CMM engages young people's larger support networks.
Anti-Racist	• Strong evidence for CMM promoting meaningful change in communities of color. • Model explicitly seeks to lift up people of color and people with experiences of structural racism and institutional violence as leaders.
Horizontally, Vertically, And Longitudinally Integrated	• Some evidence of effective collaborations between CMM and other stakeholders to promote multi-dimensional change across institutions and contexts.
Collaboratively Co-designed	• CMM was created by individuals impacted by the carceral system. Strong evidence for ongoing community leadership and support for CMM.
Addresses Emerging Health Development Capabilities	• Strong evidence that CMM promotes mentors' capabilities and supports their continued development and transitions through adulthood. • Some evidence for CMM promoting changes in youth thinking and behavior, achieving goals, and connecting to opportunities that may promote later success and adaptability.

of change in thinking, behavior, and ultimately life trajectories may unfold in response to the intervention.[41] CMM is specifically designed to promote this kind of transformative, long-term change and to support youth in navigating structural barriers to health and well-being. The studies reviewed here also largely examined individual-level changes associated with CMM. The impact of credible messengers at the neighborhood level has been evaluated in the context of gun violence interventions,[31,32,42] and further research is needed similarly assessing community-level outcomes associated with mentoring by credible messengers. More holistic measures of CMM's effects over time will likely better demonstrate the models' impact. Ultimately, these directions can help to strengthen the empirical grounding of CMM to match the growing interest and expansion of the model.

Limitations

This review has a number of limitations. First, this review is narrative, not systematic. Due to the small and varied nature of the evidence base, we did not believe that a formal systematic review would be feasible until a more robust body of research is developed. However, a systematic review uses more rigorous and established criteria and would likely be valuable once more studies on CMM are available. It is also important to acknowledge that this review was conducted by academic researchers. While all of the authors have varying degrees of prior or current practice experience in the juvenile and adult legal systems and working with credible messenger organizations, we ourselves are not credible messengers. Though we aimed to review the full body of evidence on CMM, and hope that our review can help advance CMM, our analysis and recommendations are influenced by our own positionality, and may not resonate with the CMM community.

Conclusion

This narrative review summarizes an emerging body of research on credible messenger mentoring, and underscores the need to continue understanding how this intervention may promote health and wellbeing in communities impacted by the legal system. CMM appears to be a promising approach to promote life course health development, led by community members from the ground up; however, more research is needed to examine how CMM promotes health equity and pro-social development. As CMM continues to expand, participatory research will be particularly important to engage youth, mentors, and other youth justice stakeholders in further expanding evidence about this approach. There is much potential for CMM to grow as an evidence-based intervention for youth and adults impacted by the carceral system, both as mentees and mentors. Further community-engaged research can advance CMM's growth and extend its usage into other communities to advance health equity.

Declaration of Competing Interest

The authors have no conflicts of interest to disclose.

Funding statement

Funding statement: This project is also supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) under award UA6MC32492, the Life Course Intervention Research Network, and U9DMC49250, the Life Course Translational Research Network. Dr. Barnert's time is also funded by the National Institute on Drug Abuse (K23 DA045747-01) and by the UCLA Children's Discovery and Innovation Institute. The information, content and/or conclusions are those of the author and should not be construed as the official position or policy of, nor should any endorsements be inferred by NIH, HRSA, HHS or the U.S. Government.

References

1 Barnert ES, Perry R, Morris RE. Juvenile incarceration and health. *Acad Pediatr.* 2016;16(2):99–109.

2 Barnert ES, Abrams LS, Dudovitz R, et al. What is the relationship between incarceration of children and adult health outcomes? *Acad Pediatr*. 2019;19(3):342–350.
3 Braverman PK, Murray PJ. Committee on Adolescence. Health care for youth in the juvenile justice system. *Pediatrics*. 2011;128(6):1219–1235.
4 Winkelman TN, Frank JW, Binswanger IA, Pinals DA. Health conditions and racial differences among justice-involved adolescents, 2009 to 2014. *Acad Pediatr*. 2017;17(7):723–731.
5 Wildeman C, Wang EA. Mass incarceration, public health, and widening inequality in the USA. *Lancet North Am Ed*. 2017;389(10077):1464–1474.
6 Butts JA, Roman CG, Bostwick L, Porter JR. Cure violence: a public health model to reduce gun violence. *Annu Rev Public Health*. 2015;36:39–53.
7 Bauldry S, McClanahan W. Ready4Work: Final Research Report. US Department of Labor; 2008. Accessed May 9, 2023. https://wdr.doleta.gov/research/FullText_Documents/Ready4Work%20Final%20Research%20Report.pdf.
8 Jucovy L. Early Lessons from the Ready4Work Prisoner Reentry Initiative. Public/Private Ventures; 2006. Accessed May 9, 2023. https://www.prisonlegalnews.org/media/publications/ppv_publication_just_out_early_lessons_from_the_ready_4_work_prisoner_reentry_initiative_02_2005.pdf.
9 Muhammad D, Ahearn C. *Healthy, Wealthy, and Wise: Cognitive Behavioral Therapy and Transformative Credible Messenger Mentoring to Reduce Violence and Justice System Involvement*. National Institute for Criminal Justice Reform; 2023, 2020. Accessed June 4 https://nicjr.org/wp-content/uploads/2020/05/HWW-Report-2020.pdf.
10 Martinez R, McGilton M, Gulaid A, et al. *New York City's Wounded Healers: A Cross-Program, Participatory Action Research Study of Credible Messengers*. Urban Institute; 2022. https://www.nyc.gov/assets/opportunity/pdf/evidence/wounded-healers-finalreport-2022.pdf.
11 *A Gathering Movement-Credible Messenger Mentoring Across the US*. Credible Messenger Justice Center; 2023, 2022. Accessed June 4 https://cmjcenter.org/wp-content/uploads/2022/01/A-GATHERING-MOVEMENT-Credible-Messenger-Mentoring-Across-the-US.pdf.
12 Fuller C, Goodman H. The answer is in the community: credible messengers and justice system involved youth. *Social Work with Groups*. 2020;43(1-2):70–74. https://doi.org/10.1080/01609513.2019.1645507.
13 *American Youth Policy Forum A. Credible Messengers as a Youth Policy Solution*. American Youth Policy Forum; November 8, 2022. PublishedAccessed June 4, 2023 https://www.aypf.org/event/credible-messengers-as-a-youth-policy-solution/.
14 Greaves D. Eddie Ellis: Prison Reform Visionary – Our Time Press. Published online 1997. Accessed June 27, 2023. https://ourtimepress.com/eddie-ellis-prison-reform-visionary/.
15 Allotey I, Graff AK, Highstrete K, Soogrim D, Tasnim F. *Breaking the Cycle of Incarceration: A Roadmap to Credible Messenger Recruitment*. Columbia School of International and Public Affairs; 2022. Accessed June 4, 2023 https://www.sipa.columbia.edu/sites/default/files/migrated/downloads/For_Publication_NeighborhoodBenches_Pincus_v2.pdf.
16 *Incarcerated Nation Network INC. Incarcerated Nation Credible Messenger Institute INCMI*. Incarcerated Nation Network INC; June 4, 2023. Accessed https://www.incarceratednationnetwork.org/incrediblemessengerinstitute.
17 Mendel R. *Effective Alternatives to Youth Incarceration*. The Sentencing Project; 2023, 2023. Accessed June 28 https://www.sentencingproject.org/app/uploads/2023/06/Effective-Alternatives-to-Youth-Incarceration.pdf?emci=fcb89951-b215-ee11-a9bb-00224832eb73&emdi=ecd01819-bd15-ee11-a9bb-00224832eb73&ceid=13844741.
18 *The Credible Messenger Mentoring Movement*. Introducing CM3 - Splash; 2023. Accessed June 23 https://cm3.splashthat.com.
19 Tucker E. We are the alternative": A growing movement aims to disrupt violence by connecting incarcerated youth with mentors. *CNN*; September 4, 2022. PublishedAccessed June 4, 2023 https://www.cnn.com/2022/09/04/us/credible-messenger-mentoring-movement/index.html.
20 Lacey C (DYRS). Credible Messenger Movement: Program Model Overview. Presented at: August 2021; Los Angeles, CA. Accessed May 9, 2023. https://file.lacounty.gov/SDSInter/bos/supdocs/POC21-0073.pdf.
21 Austria R, Peterson J. *Pinkerton Foundation. Credible Messenger Mentoring for Justice-Involved Youth*; 2017. Accessed May 9, 2023 https://www.thepinkertonfoundation.org/wp-content/uploads/2017/02/Pinkerton-Papers-credible-messenger-monitoring.pdf.
22 Credible Messenger Justice Center. *The Credible Messenger Approach*. Credible Messenger Justice Center; 2023. Published 2022. Accessed February 28 https://cmjcenter.org/approach/.
23 CM3: Credible Messenger Mentoring Movement. What We Do | CM3. CM3: Credible Messenger Mentoring Movement. Published 2023. Accessed October 5, 2023. https://crediblemessenger3.org/about-us/.
24 Bui L, Deakin J. What we talk about when we talk about vulnerability and youth crime: a narrative review. *Aggression Violent Behav*. 2021;58, 101605.
25 Ten Brummelaar MD, Harder AT, Kalverboer ME, Post WJ, Knorth EJ. Participation of youth in decision-making procedures during residential care: a narrative review. *Child Family Social Work*. 2018;23(1):33–44.
26 Penn Libraries. Guides: Grey Literature in the Health Sciences: Evaluating It. Published 2023. Accessed July 3, 2023. https://guides.library.upenn.edu/c.php?g=475317&p=3254241.
27 Cramer L, Lynch M, Lipman M, Yu L, Astone NM. *Evaluation Report on New York City's Advocate, Intervene, Mentor Program*. Urban Institute; 2023, 2018. Accessed May 9 https://www.urban.org/sites/default/files/publication/99228/evaluation_report_on_new_york_citys_aim_program.pdf.
28 Lynch M, Esthappan S, Astone NM, Collazos J, Lipman M. *Arches Transformative Mentoring Program*. Urban Institute; 2018. https://www.urban.org/sites/default/files/publication/96601/arches_transformative_mentoring_program_0.pdf.
29 Lopez-Humphreys M, Teater B. It's what's on the inside that counts": a pilot study of the subjective changes among returned citizens participating in a peer-mentor support initiative. *J Social Service Res*. 2020;46(6):741–755. https://doi.org/10.1080/01488376.2019.1656699.
30 Lopez-Humphreys M, Teater B. *Transformations of the self: Learning from the experiences of returned citizens participating in peer mentor support training*. 3. Urban Social Work; 2019:136–155.
31 Corburn J, Fukutome-Lopez A. *Outcome Evaluation of Advance Peace Sacramento, 2018–19*. Berkeley Institute of Urban and Regional Development; 2023, 2020. Accessed May 9 https://www.advancepeace.org/wp-content/uploads/2020/04/Corburn-and-F-Lopez-Advance-Peace-Sacramento-2-Year-Evaluation-03-2020.pdf.
32 Wolf A, Del Prado Lippman A, Glesmann C, Castro E. *Process Evaluation for the Office of Neighborhood Safety*. National Council on Crime & Delinquency; 2023, 2015. Accessed May 9 https://www.evidentchange.org/wp-content/uploads/2016/12/publication_pdf_ons-process-evaluation.pdf.
33 Remington K. *Capacity, Community, and Consolidation: Transformative Mentoring for Formerly Incarcerated Young Adults in Reentry*. Ph.D. Stanford University; 2020. https://www.proquest.com/dissertations-theses/capacity-community-consolidation-transformative/docview/2457694802/se-2?accountid=14512.
34 Gonzalez N, Hu M, Spitzer M. *Implementation and Outcomes of Healthy, Wealthy and Wise*. Mathematica; 2020. http://www.bscc.ca.gov/wp-content/uploads/CALVIP-Cohort1Final-Local-Evaluation-Report-Oakland-CalVIP-FLER.pdf.
35 Fader JJ, Henson A, Brey J. "I Don't Want to Be a Statistic": Racial-Criminal Stigma, Redemption Bids, and Redemptive Generativity. Crime & Delinquency. Published online.
36 Cacari-Stone L, Wallerstein N, Garcia AP, Minkler M. The promise of community-based participatory research for health equity: a conceptual model for bridging evidence with policy. *Am J Public Health*. 2014;104(9):1615–1623.
37 Christ TW. Scientific-Based research and randomized controlled trials, the "gold" standard? Alternative paradigms and mixed methodologies. *Qualitative Inquiry*. 2014;20(1):72–80.
38 Richardson JB. The co-sign: the credible messenger and the challenges with conducting gun violence research. *Anthropology Now*. 2022;14(1-2):51–62.
39 Halfon N, Hochstein M. Life course health development: an integrated framework for developing health, policy, and research. *Milbank Q*. 2002;80(3):433–479.
40 Russ SA, Hotez E, Berghaus M, et al. What makes an intervention a life course intervention? *Pediatrics*. 2022;149(Supplement 5).
41 Butts JA, Schiraldi VN. Recidivism reconsidered: Preserving the community justice mission of community corrections. Published online 2018.
42 Webster DW, Richardson J, Meyerson N, Vil C, Topazian R. Research on the Effects of Hospital-Based Violence Intervention Programs: Observations and Recommendations. *Ann. Am. Acad. Political Soc. Sci.* 2022;704(1):137–157.