Better Solutions for Youth with Mental Health Needs in the Juvenile Justice System
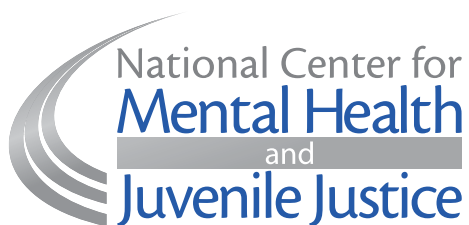
By the Mental Health and Juvenile Justice Collaborative for Change: A Training, Technical Assistance and Education Center and a member of the Models for Change Resource Center Partnership

National Center for
Mental Health
and
Juvenile Justice

Resource
Center
Partnership

ModelsforChange

Introduction

Sarah, an eighth grader, was experiencing problematic behavior in middle school. In sixth and seventh grades, she was repeatedly getting into trouble for starting fights with other students and making statements about her interest in harming others. Instead of referring her to the police, the school referred her to a diversion program.

Upon referral, Sarah met with a mental health clinician who administered the Massachusetts Youth Screening Instrument-2, a mental health screening tool. The screen indicated a need for follow-up, so she underwent a clinical evaluation where it was determined that Sarah had some mental health issues, primarily related to trauma after witnessing the murder of one of her parents several years ago. She was referred to therapy to help with her anger issues and her depression. Her guardian became engaged in therapy with her, and in-home visits by the young girl's social worker resulted in the development of an academic plan that included support in school and constant check-ins to monitor progress.

As a result, Sarah's aggressive behavior subsided and her academic performance improved substantially, all without any involvement with the juvenile justice system.

What makes Sarah's success story possible? What can be done to create positive outcomes for more youth with mental health needs in the juvenile justice system?

> **Whenever safe and appropriate, youth with mental health needs should be prevented from entering the juvenile justice system in the first place.**

The short answer is this: whenever safe and appropriate, youth with mental health needs should be prevented from entering the juvenile justice system in the first place. For youth who *do* enter the system, a first option should be to refer them to effective treatment within the community. For those few who require placement, it is important to ensure that they have access to effective services while in care to help them re-enter society successfully.

There's no denying that these outcomes come with practical challenges. But we know that reform is possible – with the right people collaborating to build systems that help communities improve the way they respond to youth with mental health needs.

The aim of this paper is to encourage and support other communities to work toward similar reform for these youth.

How widespread is the challenge of mental health in America's juvenile justice system?

Each year, more than 600,000 youth in America are placed in juvenile detention centers, and close to 70,000 youth reside in juvenile correctional facilities on any given day.[1] Youth in the juvenile justice system experience mental health disorders at a rate that is more than three times higher than that of the general youth population.[2]

Studies have consistently documented that:

1. 65% to 70% of youth in contact with the juvenile justice system have a diagnosable mental health disorder;

2. Over 60% of youth with a mental health disorder also have a substance use disorder; and

3. Almost 30% of youth have disorders that are serious enough to require immediate and significant treatment.[3]

In addition, youth in the juvenile justice system have higher rates of exposure to traumatic experiences:
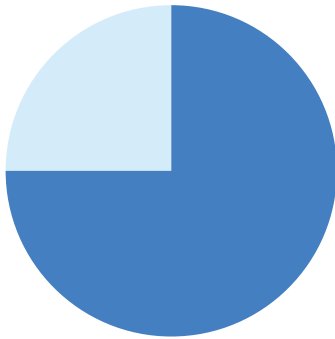
At least **75%** of youth in the juvenile justice system have experienced traumatic victimization.[4]
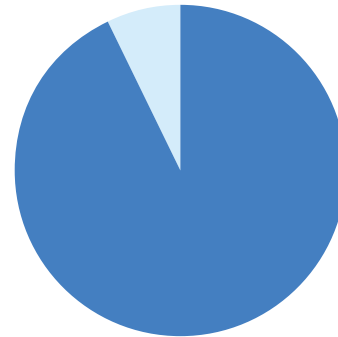
93% of youth in detention reported exposure to "adverse" events including accidents, serious illnesses, physical and sexual abuse, domestic and community violence – and the majority of these youth were exposed to six or more events.[5]

Many of these youth are unnecessarily placed in or referred to the juvenile justice system for relatively minor, non-violent offenses, often in a misguided attempt to obtain treatment services that are lacking in the community.[6] However, the unfortunate irony of this approach is that the mental health services typically available to youth in the juvenile justice system are often inadequate or simply unavailable, as documented by a series of investigations conducted by the U.S. Department of Justice.[7]

Instead of relying on the justice system to address a youth's mental health needs, it is now recognized that the more appropriate and effective response involves community-based treatment interventions that engage youth and their families.

What new scientific breakthroughs can help youth with mental health needs who come into contact with the juvenile justice system?

Over the last decade, significant advances in research, program and resource development have resulted in a wide array of new tools and new knowledge that can help the juvenile justice and related child-serving systems improve their response to youth with mental health needs. These advancements include:

- New research-based mental health screening and assessment tools and protocols to guide their use with youth in the juvenile justice system.

- New evidence-based intervention and treatment programs that produce positive results and are cost-effective.

- Adolescent development and brain research that has greatly enhanced our understanding of adolescent behavior and a youth's capacity for change. This greater understanding has also influenced juvenile justice law and policy.

Building on these advancements and embracing a "research to practice" continuum, the John D. and Catherine T. MacArthur Foundation created Models for Change: Systems Reform in Juvenile Justice – a national juvenile justice initiative aimed at developing successful and replicable reform models in select states that could be shared and adapted by other jurisdictions across the country. Through this work, states such as Pennsylvania, Illinois, Louisiana and Washington, and later Colorado, Connecticut, Ohio and Texas, have changed their policies and practices to better meet the mental health needs of youth involved in the juvenile justice system.

While the individual states identified the specific areas of reform they wished to address, all aimed (and succeeded) at implementing reforms that effectively held young people accountable for their actions, provided for their rehabilitation, protected them from harm, increased their life chances and managed the risk they posed to themselves and to others.

The ensuing work undertaken in the states and communities mentioned above has resulted in new models, publications, toolkits and training curricula that not only document the system improvements that have occurred over the last decade but also provide guidance to other sites interested in tackling similar reforms. Significant innovations related to mental health emerged, including resources such as:

- New school, probation and police-based diversion models for youth with mental health needs

- New mental health training resources for juvenile justice staff and police

- Resources to support family involvement within the juvenile justice system

- Advanced protocols and processes for screening and assessment to identify mental health needs and risk among juveniles

- New resources for implementing evidence-based practices for justice-involved youth

- New guidelines for juvenile competency

Here's a closer look at efforts in two leading states:

Louisiana

Louisiana has transformed its juvenile justice system to embrace evidence-based practices[1] (EBPs) for youth. Following criticism, including an investigation by the Department of Justice, for their over-reliance on institutional care for youth in the juvenile justice system and the conditions of confinement that existed within the state's correctional institutions, the state has moved in a decidedly different direction.

With support from MacArthur, Louisiana has actively worked to reduce its reliance on incarceration and increase awareness of and the availability of community, evidence-based practices for youth. In just a few short years the state has increased the use of research-based behavioral health screening and assessment instruments and recently moved to statewide adoption of the Structured Assessment of Violence Risk in Youth (SAVRY) - a research based risk assessment instrument for youth. In addition, they have substantially increased the availability of EBPs in the state (there are now statewide Functional Family Therapy teams) and in turn, increased the number of youth with access to these services to almost 50%. More youth are receiving services in the community, fewer youth are placed in in-home care and public safety has improved.

The transformation was recognized when Louisiana was cited at the 2012 Blueprints for Violence Prevention Conference as "among the top four states in this country to show growth in evidence-based community programs."

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1 Evidence based practices or programs (also called EBPs) refer to prevention or treatment approaches that have been proven to work with scientific evidence.

Connecticut

Zero tolerance policies in Connecticut's schools were contributing to high rates of school arrest and expulsion, particularly for youth with behavioral and mental health needs. In response, the state created the School-Based Diversion Initiative (SBDI) which uses mental health responders (provided by Emergency Mobile Psychiatric Service [EMPS] units) to respond to school-based incidents involving youth with mental health needs as an alternative to contacting the police or referring to juvenile court.

The program is designed to reduce the number of school arrests, suspensions and expulsions by linking youth with mental health needs who are at risk of juvenile system involvement with appropriate community based services and supports. The program, piloted in two schools in 2009, has expanded to 17 middle schools in 9 communities. A 2012 evaluation by the Connecticut Center for Effective Practice found that student arrests in participating schools has significantly decreased, as have suspensions and expulsions. At the same time, EMPS referrals and utilization have increased.

How can more communities adopt these better solutions for youth with mental health needs in the juvenile justice system?

The advancements across the country for youth with mental health needs are significant. Many more jurisdictions are searching for new ways to help youth with mental health needs in the juvenile justice system. These systems could benefit substantially from this new knowledge and these new resources if they had the opportunity. Now they do. The MacArthur Foundation recently supported the establishment of the Mental Health Juvenile Justice Collaborative for Change: A Training, Technical Assistance and Education Center to promote the expansion of research-based mental health reforms.

The Collaborative for Change, coordinated by the National Center for Mental Health and Juvenile Justice (NCMHJJ) at Policy Research Inc., is a dedicated effort to share these new innovations and actively support their adaption, replication and expansion in the field. Partners in this effort include the National Youth

Screening and Assessment Project at the University of Massachusetts Medical School and the Technical Assistance Collaborative.

The Collaborative for Change is designed to serve juvenile justice and mental health system administrators, policy makers, program providers and direct care staff by providing a wide array of technical assistance and support services on mental health and juvenile justice including:

- A web-based resource center (http://cfc.ncmhjj.com) that provides around the clock, online access to information and practical resources

- A Help Desk, staffed by NCMHJJ professionals, prepared to answer general questions beyond the scope of the website.

- Consultation and assistance for more complex requests provided by NCMHJJ professionals and subject matter experts working with the Collaborative. This consultation is provided by email, phone or in special cases, on-site technical assistance.

- On-site training by experienced national trainers

Over 25 national, state and local mental health and juvenile justice leaders are working with the Collaborative for Change to help provide this assistance to the field. Many of these experts were responsible for the actual development and implementation of the mental health innovations coming out of Models for Change and the Mental Health/Juvenile Justice Action Network. This "peer to peer" approach is a key component of the Collaborative's technical assistance and training strategy.

What can be done?

There is growing recognition among researchers and practitioners across the country that:

> **The substantive focus of the Collaborative for Change includes:**
>
> 1. Mental health screening within juvenile justice settings
> 2. Diversion strategies and models for youth with mental health needs
> 3. Adolescent Mental Health Training for Juvenile Justice Staff and Police
> 4. Guidance around the implementation of evidence-based practices
> 5. Training and resources to support family involvement in the juvenile justice system
> 6. Juvenile competency

- There are large numbers of youth with mental health needs involved with the juvenile justice system.

- Many of these youth would be better served in community-settings with access to effective evidence-based treatments.

- Some of these youth will not be appropriate for diversion to the community but still deserve access to effective treatment while they are involved with the juvenile justice system.

Acknowledging these facts is the first step. The next step involves taking appropriate action. However, in order to take this action, most communities need guidance around the best strategies, tools, program models and interventions to implement in order to effectively address the problems. Drawing on the lessons learned and knowledge gained from model states, the Collaborative for Change is aimed at providing this assistance to the field.

Visit the Collaborative for Change at <u>http://cfc.ncmhjj.com</u>, or phone the toll-free Help Desk at 1-866-962-6455.

About the Models For Change Resource Center Partnership

The Mental Health Juvenile Justice Collaborative for Change is a project of the National Center for Mental Health and Juvenile Justice and is supported by the John D. and Catherine T. MacArthur Foundation, as part of its Models for Change Resource Center Partnership.

The Resource Center Partnership works to advance juvenile justice systems reform across the country by providing state and local leaders, practitioners and policymakers with technical assistance, training, and the proven tools, resources and lessons developed through the John D. and Catherine T. MacArthur Foundation's Models for Change: Systems Reform in Juvenile Justice initiative.

The Partnership is anchored by four complementary, connected Resource Centers that address four important issues in juvenile justice:

- Mental health: The Mental Health and Juvenile Justice Collaborative for Change, led by the National Center for Mental Health and Juvenile Justice. For more information, visit: cfc.ncmhjj.com

- Stronger legal defense for indigent youth: National Juvenile Defender Center. For more information, visit: njdc.info/resourcecenterpartnership.php

- Appropriate interventions for youth charged with non-delinquent–or status–offenses: The Status Offense Reform Center, led by the Vera Institute of Justice. For more information, visit: www.statusoffensereform.org

- Coordinated systems of care for young people involved in both the juvenile justice and child protective systems: The Robert F. Kennedy National Resource Center for Juvenile Justice, led by the RFK Children's Action Corps. For more information, visit: www.rfknrcjj.org

The Partnership also includes a strategic alliance of national experts and organizations representing state leaders, mayors, judges, law enforcement, prosecutors, corrections professionals, court personnel and justice reform advocates. These partners further enrich the tools, best practices and training offered by the Centers and provide direct connections to professionals working in juvenile justice.

For more information about the Models for Change Resource Center Partnership, visit: modelsforchange.net/resourcecenters

Mental Health and Juvenile Justice Collaborative for Change: A Training, Technical Assistance and Education Center

The Mental Health and Juvenile Justice Collaborative for Change, led by the National Center for Mental Health and Juvenile Justice, is a training, technical assistance, and education center designed to promote and support adoption of new resources, tools, and program models to help the field better respond to youth with mental health needs in the juvenile justice system.

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