Working with Justice-Involved Youth

Nora Charles, Ph.D. IRETA webinar October 4, 2023

Plan for today

The juvenile justice system

Correlates of JJ involvement

Working with JJ youth

The juvenile justice system

- 2.1 million youth <18 arrested in the US each year
 - 57% placed on probation
 - ~87,000 incarcerated



(OJJDP; 2018)

The juvenile justice system

- Many are processed through youth court
 - Special court docket for youth under 18 not being charged as an adult
- Adolescents in youth court can be sentenced to:
 - Community service
 - Probation
 - Restitution
 - Detention
- Some will be JCAs



Justice-involved youth

- JJ youth are nearly 3/4 male, > 50% POC, 20% LGBTQ
- Many have low school achievement, truancy
- Most are 13-16 years old
- Most common crimes are person or property

Justice-involved youth

- Recidivism for youth under the age of 21 is common
- Most youth decrease or stop illegal activity during the first three years following their encounter with the JJ system
- More likely to reoffend if:
 - Substance misuse
 - Low-quality/not enough services received
 - Poor academic achievement

(OJJDP; 2020)

Effects of JJ involvement

- Difficulties obtaining and maintaining employment (Piquero, Farrington, Nagin, & Moffitt, 2010; Tanner, Davies, & O'Grady, 1999)
- Health risk behaviors, poorer health (Mason et al., 2010; Odgers et al., 2007; Piquero et al., 2010)
- Adult criminality (Loeber & Farrington, 2012; Mason et al., 2010)

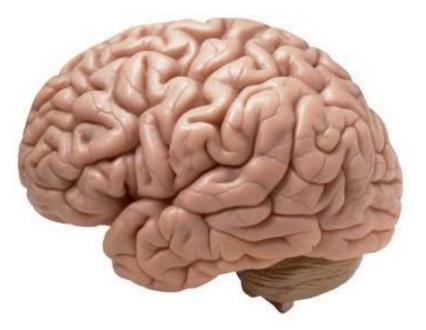
Why do youth become JJ-involved?

Biology



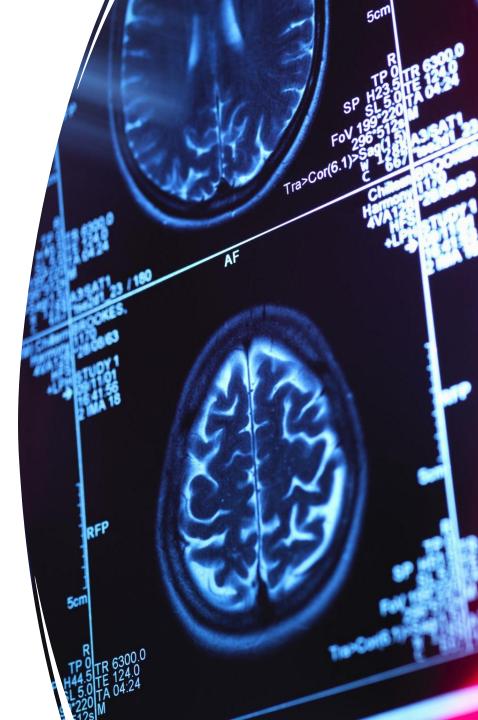
Adolescent brain development

 Typical development can help explain some adolescent behaviors that can lead to justice system involvement



Important brain processes

- Before adolescence:
 - Limbic system is mostly developed
- After adolescence:
 - Prefrontal cortex matures



Impulsivity

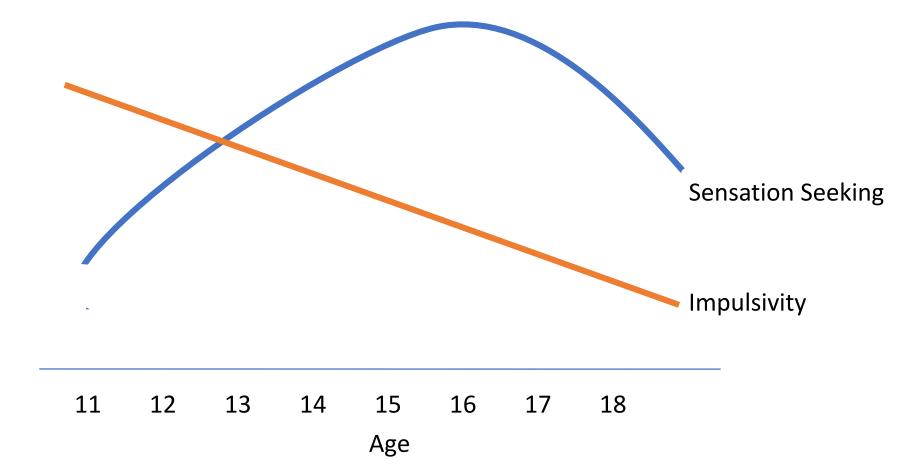
DENNIS THE MENACE



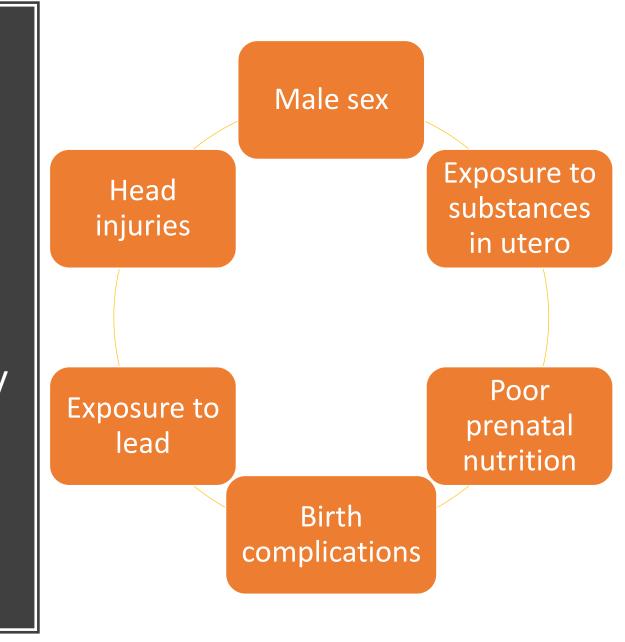
Sensation seeking

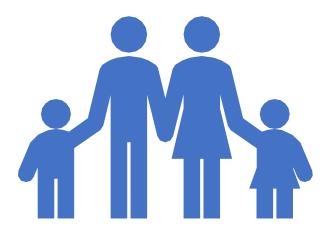


Important brain processes



Biological risks for delinquency





Families

Parenting & delinquency

- Meta-analysis of 161 studies of parenting and delinquency (Hoeve et al., 2009)
- Strongest effects:
 - Neglect, hostility, rejection positively associated with delinquency
 - Monitoring and supervision negatively associated with delinquency

Bidirectional relationship

Child displays difficult behaviors

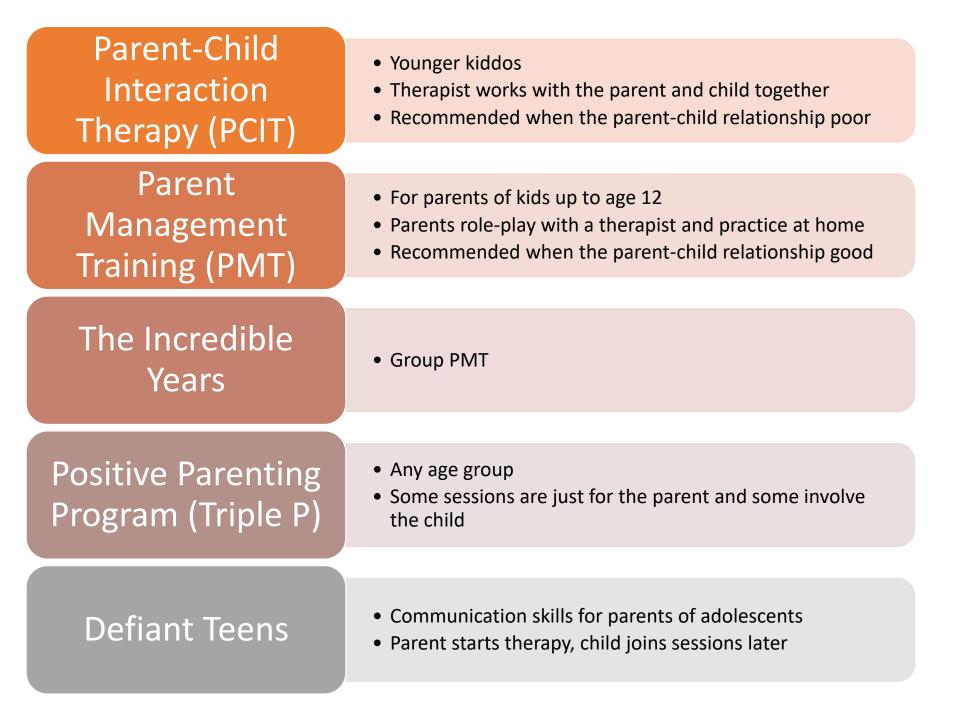
Parents' disciplinary strategies are reactive

Harsher punishments, less involvement

Poorer child behavior

Solutions

- Parent training programs are effective for:
 - ADHD
 - Oppositional Defiant Disorder
 - Disruptive Mood Dysregulation Disorder
 - Conduct Disorder
 - Delinquency prevention







School engagement

Disengagement from school can start as early as first grade

A central developmental process underlying school failure and dropout

May moderate the impact of stressors on delinquency (DiPerro et al., 2016)

Direction of effects

Engagement predicts delinquency

 Students who perform poorly in school, feel alienated from school are more likely to be delinquent

Delinquency predicts engagement

 Peer rejection, exclusionary discipline, negative feedback reduce enthusiasm for school The schoolto-prison pipeline

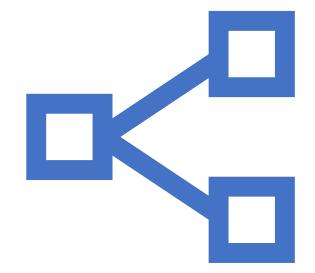
- Youth funneled out of public schools and into JJS
- Many of these youth are minoritized and/or disadvantaged
- Diminishes academic success, engagement
- Associated with recidivism

Solutions

- Schools:
 - Analysis of school discipline & addressing disparities
 - School-wide Positive Behavior Interventions and Supports
- Youth:
 - Post-incarceration school engagement and achievement negatively associated with recidivism (Blomberg et al., 2011)

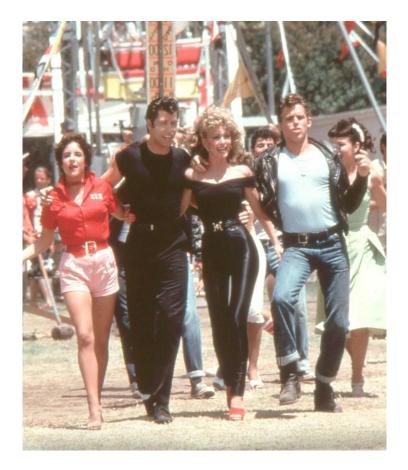


Social environment



Peer Relations

- Adolescents spend more time with peers than parents
- Some adolescents seek deviant peers
- Adolescents are influenced by peer delinquency



(Gallupe et al., 2019)

Gangs

National estimates- over 400,000 adolescents join gangs every year

Age of affiliation: 15

Prevalence varies by location

- Large cities 32.6%
- Small cities 48.0%
- Suburban counties 36.7%
- Rural counties 58.9%

(National Gang Center; 2023)

Neighborhoods

Neighborhood disorder and crime can reduce feelings of safety

Neighborhoods where crime and delinquency is taking place can model negative behavior

Community violence exposure increases risk for delinquency

Solutions

Individual

- Engagement in prosocial activities
- Mentoring
- Parental monitoring/supervision

Community

- Reduce community violence
- Restore a sense of community
- Places for prosocial activities

MH problems & treatment



Prevalence

Around 2/3 of youth in the JJS have an emotional, behavioral, or developmental disorder

As much as 10x as many youth in JJS (vs. community) have Intellectual Disability

Increasing awareness of this issue in last 20 years



- A study of nearly 10,000 youth in the JJS found:
 - 34% had an SUD
 - 27% had a DBD
 - 31% had > 1 disorder
 - 14% had attempted suicide
 - Girls had higher rates of every MH issue except SUD

(Wasserman et al., 2010)

Exposure to trauma

- More prevalent among justice-involved youth
- Types
 - ACEs
 - Community violence
 - Family violence
 - Abuse
- Both muted reactions and PTS symptoms are associated with risk for delinquency

(OJJDP, 2016)



Common:

- Individual therapy
- Group therapy

Sometimes:

• Family therapy

Youth-focused interventions in JJ

- CBT (Feucht & Holt, 2016)
 - Many "promising" or "effective"
- Dialectical Behavior Therapy-A (Rathus & Miller, 2015)
- Anger management
 - Coping Power Program (Lochman & Wells, 2002)
 - Juvenile Justice Anger Management (Goldstein et al., 2013)
- Substance Use
 - Cannabis Youth Treatment (Dennis et al., 2004)
- Trauma
 - TF-CBT (Cohen, Mannarino, & Deblinger, 2006)
- Problematic sexual behavior
 - No clearly effective tx, MST promising

Family interventions

- Family involvement generally leads to better outcomes (Chassin et al., 2009)
- Multisystemic Therapy (MST; Henggeler et al., 2009)
 - Family- and community-based intervention originally developed for JJ youth
- Functional Family Therapy (FFT; Alexander & Sexton, 2004)
 - Family-based intervention for behavior problems in atrisk and JJ youth

Barriers to Treatment

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- Identification of need
- Cost
- Availability of providers
- Cultural competence
- Attitudes/knowledge of systems
- Mandated tx & motivation
- Family participation



- Macro:
 - More funding for MH care in the JJ system
 - Training for practitioners
 - Educating courts, corrections
- Micro:
 - User-friendly manuals/research
 - Public scholarship/community engagement
 - Self-education about EBTs, cultural factors
- With clients:
 - Engagement strategies
 - Incentivizing family participation
 - MST-lite



Things to remember

- JJ youth are still kids
- Empathy
- Many cases will break your heart
- Skills deficits are treatable

Questions?

Thank you! Nora.Charles@usm.edu X/BlueSky: @NoraCharlesPhD



