

JUVENILE JUSTICE UPDATE:

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Center for Juvenile Justice Reform



Center for Juvenile Justice Reform

· working across systems of care · georgetown university ·

Who We Are:

Center for Juvenile Justice Reform

Mission:

The Center for Juvenile Justice Reform aims to advance a balanced, multi-system approach in reducing juvenile delinquency that promotes positive child and youth development, while also holding youth accountable

We are committed to supporting and developing stronger leaders in juvenile justice and related systems of care and helping them to achieve better outcomes for the young people and families they serve.

Who We Are:

Center for Juvenile Justice Reform

CJJR Overview	
Crossover Youth Practice Model Youth in Custody Practice Model	Juvenile Justice Leadership Network
Center for Coordinated Assistance to States	Juvenile Justice System Improvement Project
Certificate Programs (LGBTQ Youth; Reducing Racial and Ethnic Disparities; School Justice Partnerships and Diversion Pathways; Youth in Custody; Evidence-Based Decision-Making)	Public Information Officers Learning Collaborative

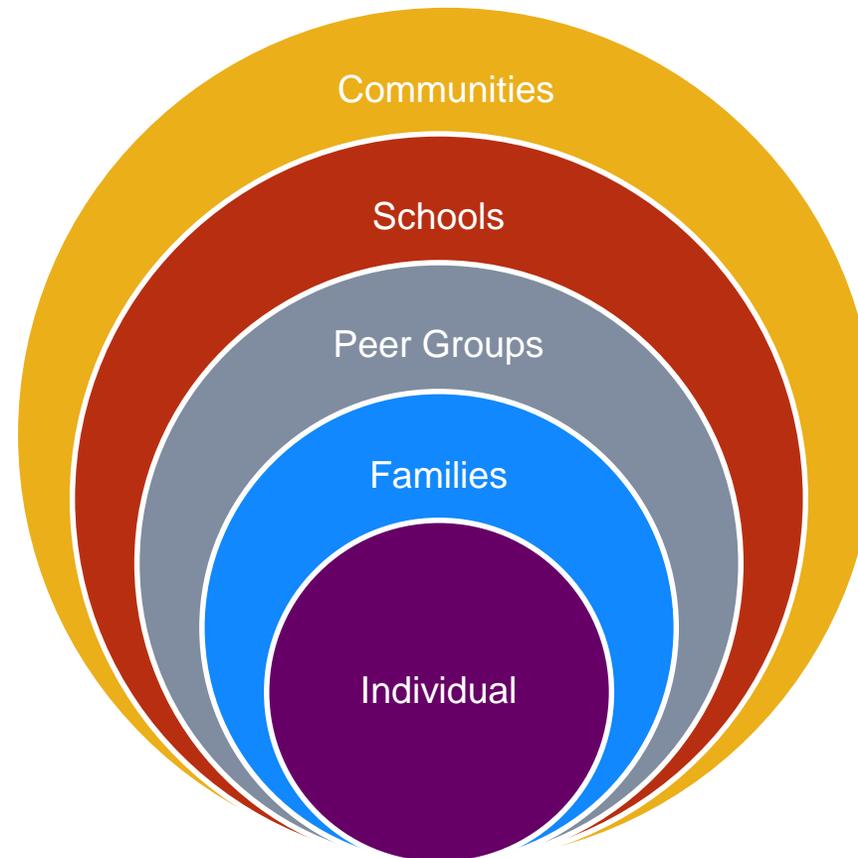
Agenda:

- About the CJJR
- Advances in Juvenile Justice Policy and Practice
- Juvenile Justice Delinquency & Prevention Act
 - How CJJR Can Help – Programs & Resources
- Families First Prevention and Services Act

ADVANCES IN JUVENILE JUSTICE

The Ecological Model: Nesting Theory

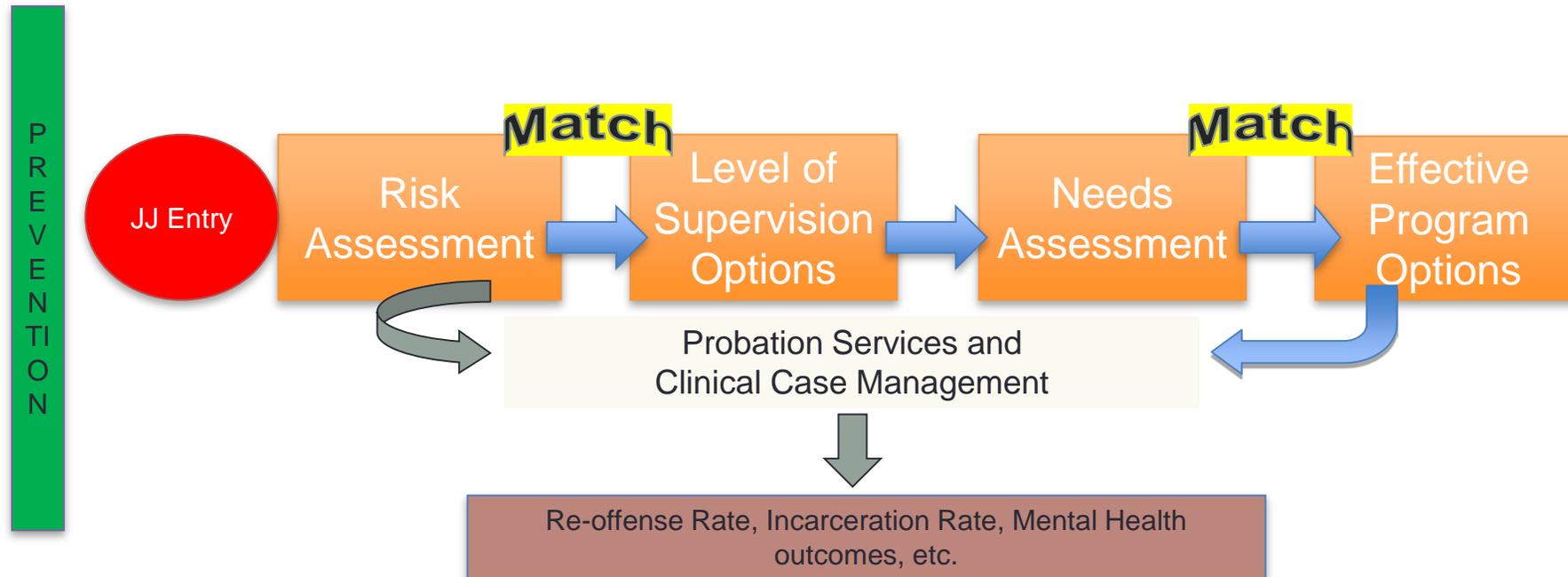
Youth “nest” within multiple settings that impact behavior, such as:



Advances in Juvenile Justice Over Time

- Increasing Knowledge in Juvenile Justice – “What Works”
- Promoting effective, evidence-based juvenile justice programming and policy
 - The use of risk and needs assessment tools
 - The need for strong diversion programs for low risk/level offenders
 - The importance of keeping youth in the community and close to home
 - Addressing racial and ethnic disproportionality in the juvenile justice system
 - Implementing evidence-based services

Evidence-Based Decision-Making Platform



JUVENILE JUSTICE DELINQUENCY & PREVENTION ACT

JJDPA 2018 Update Summary:

- Updates requirements regarding acceptable placement and restraint of juveniles
- Amended the permissible use of grant funds toward delinquency prevention & treatment programs
- Delineates administrative requirements of expertise and input for state plan and personnel

JJDPA 2018 Update: Key Changes

- **Sight and Sound/Jail Removal:** States are required to ensure sight and sound separation and jail removal for youth awaiting trial as adults.
- **Deinstitutionalization of Status Offenses:** Youth who are found in violation of a valid court order may be held in detention, for no longer than seven days, if the court finds that such detention is necessary and makes specific findings required by the statute

JJDPA 2018 Update: Key Changes

- **Title V:** Amended to permit Youth PROMISE grants to be used by local policy boards to fund delinquency prevention programs, including but not limited to alcohol and substance abuse prevention or treatment services.
- Ends the use of certain restraints on detained, pregnant juveniles during labor, delivery, and recovery (unless there is an immediate and serious threat of harm to self or others)
- Requires Annual Report: A summary of data from 1 month of the applicable fiscal year of the use of restraints and isolation upon juveniles held in the custody of secure detention and correctional facilities operated by a State or unit of local government

JJDPA 2018 Update: Administrative Changes

- **State Plans:** Requires that the state plan be supported by or take account of scientific knowledge regarding adolescent development and behavior and regarding the effects of delinquency prevention programs and juvenile justice interventions on adolescents
- **State Advisory Group Appointees:** Clarifies who may be appointed to the required State Advisory Group (SAG):
 - Persons, licensed or certified by the applicable state, **with expertise and competence in preventing and addressing mental health and substance abuse needs in delinquent youth and youth at risk of delinquency**
 - Representatives of victim or witness advocacy groups, **including at least one individual with expertise in addressing the challenges of sexual abuse and exploitation and trauma**, particularly the needs of youth who experience disproportionate levels of sexual abuse, exploitation, and trauma before entering the juvenile justice system;

CJJR Resources

- Practice Models
 - Crossover Youth Practice Model
 - Youth in Custody Practice Model
- Certificate Programs
 - Reducing racial and ethnic disparities
 - School Justice Partnerships & Diversion Pathways
 - Supporting LGBTQ+ Youth
 - Transforming Juvenile Probation
 - Youth in Custody

Certificate Programs: Theories of Change

- Multi-system, multi-disciplinary team approach
- Focus on leadership and culture change
- Comprehensive, advanced, and innovative curriculum presented by leaders in the field providing intensive learning opportunity
- Capstone Project used to enhance policy and practice and accelerate reforms
- Fellows Network supports peer learning and support

Youth In Custody Practice Model - Theory of Change

- 18-month initiative to align policies and practices
- Sets forth 70+ best practices elements based on research
- Develop and implement action plans to address gaps
- Data collection and evaluation

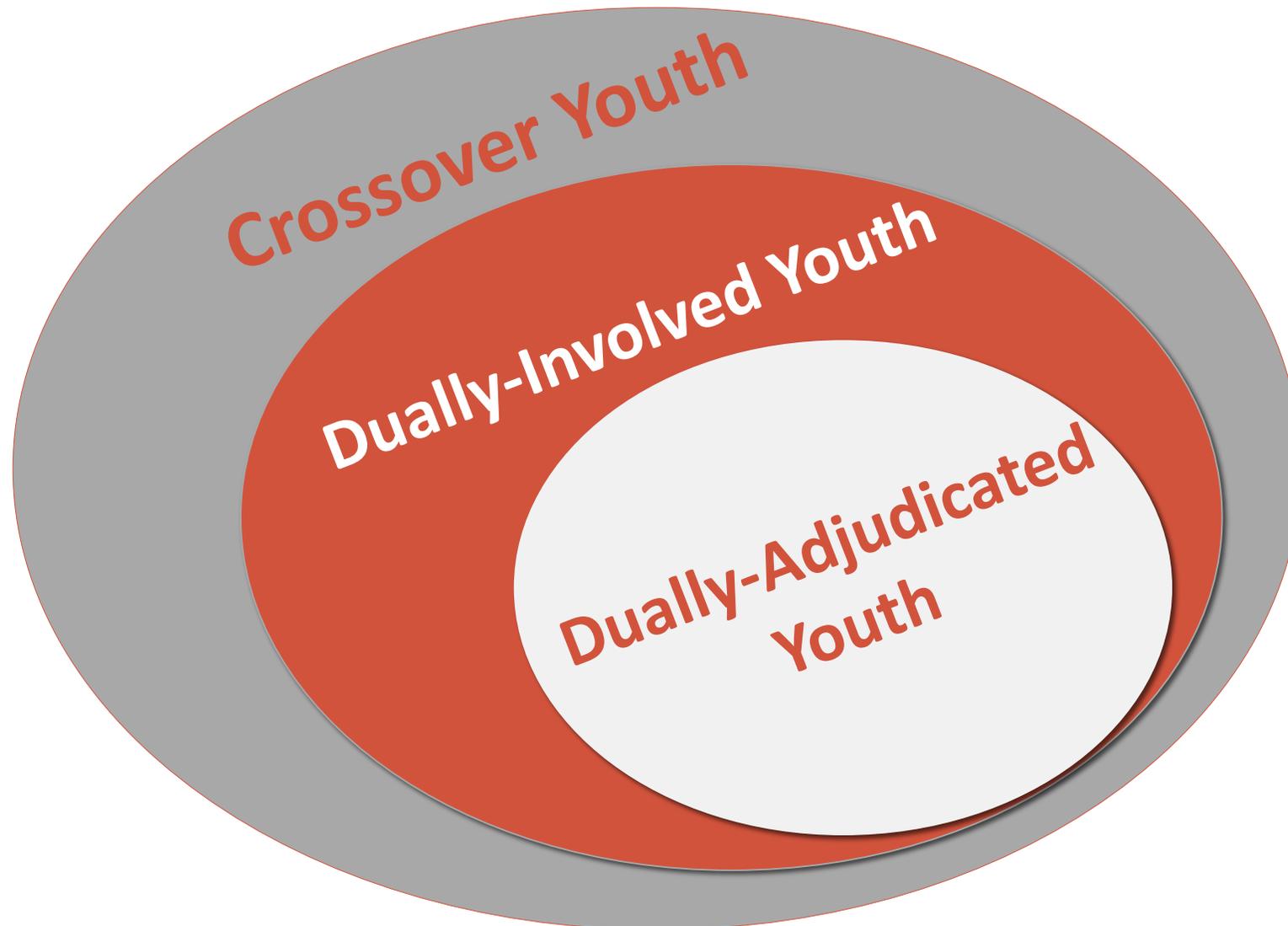
Youth in Custody Practice Model

- Case planning
- Providing facility-based services (10 domains)
- Reentry
- Providing community-based services

Key considerations:

- Family engagement
- Addressing racial and ethnic disparities

CROSSOVER YOUTH: DEFINITIONS



WHO ARE THE YOUTH WHO CROSS OVER INTO DELINQUENCY?

Demographics

- Increased likelihood of being female
- More likely to be African-American
- Younger at the age of their first arrest than youth not involved in child welfare

Experiences with Abuse/Neglect and the Child Welfare System

- Persistence or adolescent maltreatment, alone
- Type of maltreatment
- Type and # of placements
- Absence of positive attachments

CHARACTERISTICS OF CROSSOVER YOUTH

Individual Characteristics

- Truancy, drop-out, and push-out
- Special education issues that may or may not have been identified
- Parents and youth with history of mental illness, substance abuse, domestic violence, and/or criminal behavior

Juvenile Justice Involvement

- Less than $\frac{1}{2}$ charged with violent offenses
- $\frac{1}{4}$ to $\frac{1}{2}$ detained at the time of arrest
- Prior contact with the system for previous criminal or status offense charges

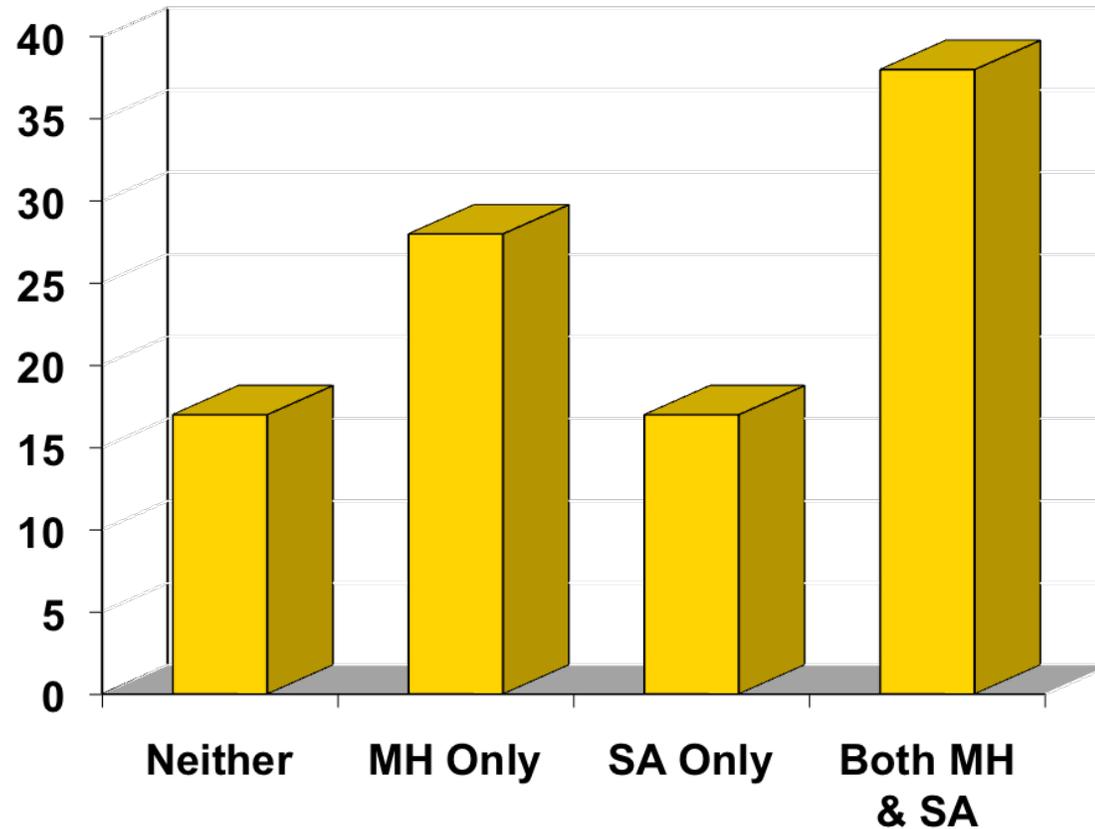
Population Characteristics: Mental Health and Substance Abuse

Mental Health & Substance Abuse Characteristics of Dual System Youth: LA Case Study

75% of youth had a diagnosed mental health challenges

- $\frac{1}{4}$ were prescribed psychotropic medication; $\frac{1}{2}$ of them were taking the medication
- High level of service referrals
 - 74% individual therapy
 - 43% tutoring
 - 35% group therapy
- Large discrepancy between referrals and access to services
 - Individual therapy (74% referred, 55% accessed)
 - Medication monitoring (33% referred, 15% accessed)
 - Tutoring (43% referred, 17% accessed)

Population Characteristics: Mental Health and Substance Abuse



Source: Herz, Denise. *A Review of the Research and Issues Related to Crossover Youth*. June 2009.

Long Term Outcomes: Crossover Youth

- Higher rates of substance abuse and mental illness
- Higher recidivism rates
- Higher rates of criminal involvement as adults
- Higher rates of child welfare involvement as parents/perpetrators of maltreatment

Long Term Outcomes: Crossover Youth

- **Involvement with homeless services, justice services, foster care, financial assistance, and health services**
 - ❖ 94% utilized at least one service
 - ❖ 80% utilized two or more services
 - ❖ 50% utilized three or more services

When compared to youth that were only involved in Juvenile Justice or Child Welfare alone (New York City)

Crossover Youth Practice Model

- Defines and explains how staff working across systems partner with families, service providers, and other stakeholders in the delivery of services to achieve positive outcomes for youth and their families
- Phases of Practices
 - **Phase I**
 - Arrest, Identification, and Detention
 - Decision-Making Regarding Charges
 - **Phase II**
 - Joint Assessment and Planning
 - **Phase III**
 - Coordinated Case Management and Ongoing Assessment
 - Planning for Youth Permanency, Transition, and Case Closure

Crossover Youth Practice Model

- CYPM Implementation Seeks to Achieve

- **Reductions In:**

- Juvenile Justice System Penetration
- Use of Pre-Adjudication Detention
- Use of APPLA as a Permanency Goal
- Education Instability
- Rate of Recidivism
- Re-Entering CW from JJ

- **Increases In:**

- Information Sharing
- Family Voice in Decision Making
- Youth/Parent Satisfaction & Engagement
- Coordinated Assessment, Case Planning, and Management
- Pro-Social Bonds
- Use of Diversion
- Reunification and Placements at Home

CYPM Outcomes:

- **Overarching Outcomes Achieved to Date**

Reductions In:

- Recidivism
- Use of APPLA as a Permanency Goal
- New Sustained JJ Petitions

Increases In:

- Educational Outcomes
- Pro-Social Activities
- Positive Behavioral Health Outcomes
- Diversion/Dismissal
- Home Placement/Reunification

- Professionals participating in CYPM implementation report positive, structural changes in service delivery
- CYPM was found to save a county \$173,161 in its first year of implementation

Findings noted above were based on external evaluations conducted by California State University-Los Angeles, University of Minnesota, and University of Nebraska-Omaha.

CYPM Outcomes:

- **External Evaluations: University of Nebraska-Omaha**
- **Case Processing Outcomes:**
 - Increased # of youth diverted or dismissed
 - Increased # of delinquency & dependency case closures
 - Reduced # of new sustained JJ petitions
- **Social/Behavioral Outcomes**
- Better living situation 9 months after identification
- Fewer group home/congregate care and detention/correctional placements
- Improved pro-social behavior

- **Recidivism Outcomes**
 - Fewer # of new arrests 9 months after identification
 - Longer time to recidivate
 - Arrested for less serious offenses

CYPM Outcomes:

- **External Evaluations: University of Minnesota Studies**

- Haight, et al. “An Evaluation of the Crossover Youth Practice Model: Recidivism Outcomes for Maltreated Youth Involved in the Juvenile Justice System”
 - Evaluated CYPM efforts in a Minnesota county
 - Finding: *“Youth receiving CYPM services were less likely to recidivate than propensity score matched youth receiving ‘services as usual’ even when controlling for location, time and other key covariates.”*
- Haight, et al. also conducted a study on the experiences of professionals in five Minnesota CYPM sites
 - Finding: 99% of CYPM participants reported positive, structural changes in service delivery

CYPM Outcomes:

- External Evaluations: California Evidenced Based Clearinghouse
- In 2018, designated the CYPM as having “**Promising Research Evidence**” with a **rating of 3** and a relevance of “**High**” in the “Child/Family Well-Being” outcome category.

FAMILIES FIRST PREVENTION AND SERVICES ACT

Families First Prevention & Services Act

- **Under Title IV-E of the Social Security Act**
 - Allows states and tribes, tribal organizations or tribal consortiums IV-E programs the option to use new open-ended Title IV-E funds to provide prevention services and programs for up to 12 months for youth at imminent risk of entering foster care, any parenting or pregnant youth in foster care, biological/adopted parents, as well as kin caregivers of these children.
 - Eligible services are evidence-based mental health and substance abuse prevention and treatment services, and in-home parent skill-based services.
- **Under Title IV-B:** Reauthorizes and makes changes to the Regional Partnership Grants to provide evidence-based services **to prevent child abuse and neglect related to heroin, opioids and other substance abuse** for FY2017 through FY2021.

Families First Prevention & Services Act

- Title IV-E federal support will be available for Title IV-E eligible youth placed in a Qualified Residential Treatment Program (QRTP) which meets all the following requirements:
 - Has a trauma informed treatment mode
 - Has registered or licensed nursing and other licensed clinical staff onsite, consistent with the QRTP's treatment model.
 - Facilitates outreach and engagement of the child's family in the child's treatment plan
 - Provides discharge planning and family-based aftercare supports for at least 6 months
 - Is licensed by the state and accredited

Families First Prevention & Services Act

- Provides 8 million in FY2018 for grants to states and tribes to support the recruitment and retention of high quality foster families
- Makes revisions to the Chafee Program to emphasize more successful transitions to adulthood, including allowing states to provide services to youth who have aged out foster care up to age 23;
 - 5 years of eligibility for Education and Training Vouchers up to age 26
- Amends Title IV-B state plan requirements to include information about what the state is doing to address the developmental need of all vulnerable children under 5 years of age who are receiving services under title IV-E or IV-B (not just children in foster care)

Questions?

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