Resource Guide for Mental Health Professionals Working with Youth Involved in the Juvenile Justice System

INTRODUCTION

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INTRODUCTION

This module and its contents are intended for educational purposes.



"How do you help a 16-year-old when all their life all they know is violence? You can't just swoop in and say stop doing what you're doing. It's not gonna work"



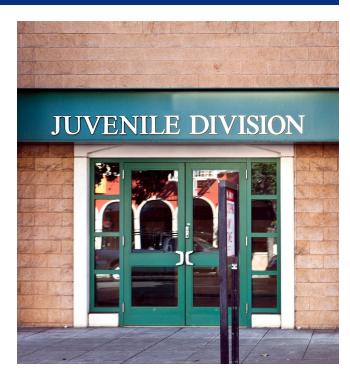
-Formerly incarcerated youth

This Guide is designed to inform mental health providers about the complex challenges that youths and their families face when they become involved in the juvenile justice system.

This is an essential but often overlooked knowledge base because many youth who receive mental health treatment are either involved in the juvenile justice system or at risk for juvenile justice involvement.

By delivering prevention, intervention, and evaluation services, mental health providers can play a crucial role in helping youth navigate the juvenile justice system, as well as stay out of the system and safely in their communities. However, to do this, providers must be knowledge about the complex labyrinthine system that youths, and their families, must deal with when involved in, or at risk for becoming involved in, the legal system.

Purpose: The purpose of this resource is to give mental health providers practical guidance about the juvenile legal system, as well as a trauma informed approach to working with youth and families who are faced with the challenges of navigating that system. This resource also highlights the intersection between mental health and juvenile legal system involvement, including the need for shared resources and interdisciplinary training and communication among professionals. It further provides community-based mental health professionals, as well as those working within the juvenile legal system, with foundational information about both the system and youths' experiences within the system, so that they might better support, serve, and advocate for their clients.



We will also highlight initiatives specific to the legal system, as well as resources that could complement, or be enhanced by, mental health services.

Intended Audience: This guide was designed for mental health providers who want to better understand the juvenile justice system in order to more effectively support their clients. This resource will be especially helpful for providers with no direct experience in, or knowledge about, the juvenile justice system. However, given the various divisions (e.g., courts, diversion, detention, probation, incarceration) and associated systems (e.g., law enforcement, child protective services, schools) that often function in silos with limited cross-program coordination, this document may be equally useful for providers working across juvenile justice settings.

Complementary Resources: Youth who are the most vulnerable for legal system involvement are often impacted by multiple systems^{1,2} and need multidisciplinary services (e.g., mental health, educational, child welfare).





The National Child Traumatic Stress Network (NCTSN) offers a variety of resources on multisystem involvement and trauma-informed approaches to working with youth. This guide is designed to complement those resources^{3,4}, as well as the resources found on the website of the <u>Center for Trauma Recovery and Juvenile Justice (CTRJJ)</u>.

Format: The resource guide begins with some key facts and a brief history of the juvenile justice system, followed by an overview of the current system and the characteristics of youth who are impacted by the system. Pertinent information is then provided about the juvenile court process, as well as the screening, assessment and treatment of youth at risk for, or involved with, the juvenile justice system. Several approaches to community-based accountability and diversion programs for youth are also described, and overall tips for mental health professionals working with youth who may be involved with the system are provided. This resource also includes an Appendix with a list of relevant resources for mental health providers. The voices of youth impacted by the system are infused throughout.

Disclaimers:

Please note that this is a general primer, as the laws, procedures, and programs vary from jurisdiction to jurisdiction. Consider this as a starting point to prepare you to begin (or continue) working with youth involved in the legal system and collaborating with colleagues in the juvenile justice field.

The term "juvenile justice system" is used here to describe the legal system that youth become involved in when an arrest is initiated by law enforcement. The purpose of that system is to apply the relevant laws to youth who are accused of violating those laws. We recognize that justice may or may not be served in that application.

Trauma Exposure and Posttraumatic Stress Disorder



"In almost ten years of providing mental health services to youth in juvenile justice settings, I have yet to meet a kid that hasn't experienced trauma. And I'm not talking about isolated, discrete instances of trauma, I'm talking about chronic, pervasive things like daily shootings and stabbings in the neighborhood and the deaths of parents, siblings and friends. These are things that no child should ever have to go through."



-Quote from a psychologist working in juvenile detention

Up to

Key Facts

In 2020, 424,300 youth, ages 17 and younger, were arrested in the United States. Only 8% of those arrests were for violent crimes⁵. This represents a:

71% decline in arrests since

In 2022, more than 33
Million youth were under the
jurisdiction of a juvenile court for a
delinquency case⁶, and

43% of cases involved White youth **37%**of cases
involved
Black youth

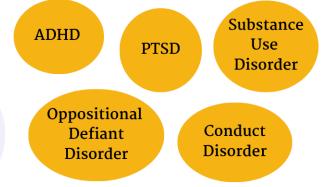
In the same year,

White youth comprised 52%

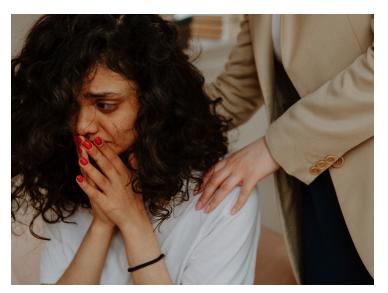
of the US population.

of youth in the juvenile justice system have a diagnosable mental health disorder^{7,8,9,10} and almost 30% of youth in juvenile justice settings are suffering from a serious mental illness.^{11,12}

The most common diagnoses found among youth in juvenile justice settings are:



The majority of youth who are impacted by the juvenile justice system have experienced multiple forms of trauma throughout their lives, including physical abuse, sexual abuse, commercial sexual exploitation, exposure to domestic violence and both direct and indirect experiences of community violence^{13,14,15,16}. The rates of trauma exposure for this population far exceed rates found in non-justice involved samples. In fact, one in 11 boys and one in five girls involved in juvenile justice settings have been diagnosed with posttraumatic stress disorder (PTSD)¹⁷. For youth of color in particular, both overt and covert forms of racial discrimination have also been shown to have a detrimental impact, leading to PTSD and other trauma-related symptoms¹⁸.



In addition to incidents of trauma that youth may experience in the community, contact with the justice system itself can also be a source of trauma. For example, research studies have begun to document the negative impact that being stopped by the police can have on young people, particularly Black and Brown youth. Conditions within detention and correctional facilities can also be an added source of trauma exposure for youth, as elevated rates of violence and sexual abuse have been identified in some settings¹⁹.

Trauma exposure is associated with a variety of negative consequences for youth in the juvenile justice system, including the development of psychiatric and substance use disorders, self-harm and suicidality^{20,21,22}. Trauma exposure and traumatic stress symptoms may also lead to youth to engage in survival coping behaviors, such as aggression, substance use, and carrying a weapon that bring them to the attention of the legal system and increase the risk for ongoing involvement^{23,24}.

Due to the pervasive nature of trauma and potential impact of trauma-related symptoms for youth involved in the juvenile justice system, mental health professionals working with youth in justice settings should be mindful of the ways that trauma may be impacting youths' thoughts, feelings and behaviors. It is recommended that a trauma-informed approach be used when working with youth involved in, or at-risk for involvement in, the juvenile justice system.



Trauma-informed care includes universal screening for trauma exposure and symptoms, as well as the use of trauma-specific interventions to address trauma-related symptoms when applicable. However, trauma-informed care extends beyond screening and treatment to include an overall approach to the delivery of services (e.g., practices, policies, and environmental modifications) that foster a sense of safety and empowerment for youth and their families²⁵. Throughout this guide, we have provided a variety of trauma-informed tools and interventions for working with youth in justice settings. For more information and additional tools, please visit the <u>National Traumatic Stress Network</u>.

References

- 1. Modrowski, C. A., Chaplo, S. D., & Kerig, P. K. (2022). Advancing our understanding of the risk factors associated with crossover youth in the child welfare and juvenile justice systems: A trauma-informed research agenda. Clinical Child and Family Psychological Review, 25(2), 283–299. https://doi.org/10.1007/s10567-021-00370-4
- 2. Vidal, S., Connell, C. M., Prince, D. M., & Tebes, J. K. (2019). Multisystem-involved youth: A developmental framework and implications for research, policy, and practice. Adolescence Research Review, 4(1), 15–29. https://doi.org/10.1007/s40894-018-0088-1
- 3. Fehrenbach, T., Ford J., Olafson E., Kisiel, C., Chang, R., Kerig, P., Khumalo, M., Walsh, C., Ocampo, A., Pickens, I., Miller, A., Rains, M., McCullough, A.D., Spady, L., & Pauter, S. (2022). A trauma-informed guide for working with youth involved in multiple systems. National Center for Child Traumatic Stress. https://www.nctsn.org/resources/a-trauma-informed-guide-for-working-with-youth-involved-in-multiple-systems
- 4. https://www.nctsn.org/what-is-child-trauma/populations-at-risk/lgbtq-youth/nctsn-resources
- 5. Puzzanchera, C. (2022). Trends in youth arrests for violent crimes. Office of Juvenile Justice and Delinquency Prevention. https://www.ojp.gov/ncjrs/virtual-library/abstracts/trends-youth-arrests-violent-crimes
- 6. Hockenberry, S., & Puzzanchera, C. (2024). Juvenile court statistics 2022. National Center for Juvenile Justice. https://ojjdp.ojp.gov/publications/juvenile-court-statistics-2022.pdf
- 7. Abram, K. M., Zwecker, N. A., Welty, L. J., Hershfield, J. A., Dulcan, M. K., & Teplin, L. A. (2015). Comorbidity and continuity of psychiatric disorders in youth after detention: a prospective longitudinal study. JAMA Psychiatry, 72(1), 84-93. https://doi.org/10.1001/jamapsychiatry.2014.1375
- 8. Beaudry, G., Yu, R., Langström, N., & Fazel, F. S. (2020). An updated systematic review and meta-regression analysis: Mental disorders among adolescents in juvenile detention and correctional facilities. Journal of the American Academy of Child and Adolescent Psychiatry, 60(1), 46–60. https://doi.org/10.1016/j.jaac.2020.01.015
- 9. Kim, B. E., Gilman, A. B., Thompson, N., & De Leon, J. (2021). Statewide trends of trauma history, suicidality, and mental health among youth entering the juvenile justice system. Journal of Adolescent Health, 68(2), 300–307. https://doi.org/10.1016/j.jadohealth.2020.05.044
- 10. Underwood, L. A., & Washington, A. (2016). Mental illness and juvenile offenders. International Journal of Environmental Research and Public Health, 13(2), 228. https://doi.org/10.3390/ijerph13020228
- 11. Kim, B. E., Gilman, A. B., Thompson, N., & De Leon, J. (2021). Statewide trends of trauma history, suicidality, and mental health among youth entering the juvenile justice system. Journal of Adolescent Health, 68(2), 300–307. https://doi.org/10.1016/j.jadohealth.2020.05.044
- 12. Merikangas, K. R., He, J. P., Burstein, M., Swanson, S. A., Avenevoli, S., Cui, L., Benjet, C., Georgiades, K., & Swendsen, J. (2010). Lifetime prevalence of mental disorders in U.S. adolescents: results from the National Comorbidity Survey Replication—Adolescent Supplement (NCS-A). Journal of the American Academy of Child and Adolescent Psychiatry, 49(10), 980–989. https://doi.org/10.1016/j.jaac.2010.05.017
- 13. Ford, J. D., Grasso, D. J., Hawke, J., & Chapman, J. F. (2013). Poly-victimization among juvenile justice-involved youths. Child Abuse and Neglect, 37(10), 788–800.
- 14. Ford, J. D., Cruise, K. R., Grasso, D. J., & Holloway, E. (2018). A study of the impact of screening for poly-victimization in Juvenile Justice: The rocky road to a successful

- investigation in the real world. Journal of Interpersonal Violence, 33(5), 810-831. doi:10.1177/0886260517744844
- 15. Graf, G. H., Chihuri, S., Blow, M., & Li, G. (2021). Adverse childhood experiences and justice system contact: A systematic review. Pediatrics, 147(1). https://doi.org/10.1542/peds.2020-021030
- 16. Pane Seifert, H. T., Tunno, A. M., Briggs, E. C., Hill, S., Grasso, D. J., Adams, Z. W., & Ford, J. D. (2021). Polyvictimization and psychosocial outcomes among trauma-exposed, clinic-referred youth involved in the juvenile justice system, Child Maltreatment, 27(4), 626-636. https://doi.org/10.1177/10775595211025096
- 17. Beaudry, G., Yu, R., Langstrom, N., & Fazel, F. S. (2020). An updated systematic review and meta-regression analysis: Mental disorders among adolescents in juvenile detention and correctional facilities. Journal of the American Academy of Child and Adolescent Psychiatry, 60(1), 46-60. https://doi.org/10.1016/j.jaac.2020.01.015
- 18. Williams, M., Metzger, I. W., Leins, C., & Delapp, C. (2018). Assessing racial trauma within a DSM-5 framework: The UConn Racial/Ethnic Stress & Trauma Survey. Practice Innovations, 3(4), 242-260.
- 19. Dierkhising, C. B., Ko, S. J., Woods-Jaeger, B., Briggs, E. C., Lee, R., & Pynoos, R. S. (2013). Trauma histories among justice-involved youth: Findings from the National Child Traumatic Stress Network. European Journal of Psychotraumatology, 4, 1–12.
- 20. Duron, J. F., Williams-Butler, A., Mattson, P., & Boxer, P. (2021). Trauma exposure and mental health needs among adolescents involved with the Juvenile Justice system. Journal of Interpersonal Violence, 37(17–18). https://doi.org/10.1177/08862605211016358
- 21. Folk, J. B., Ramos, L. M. C., Bath, É. P., Rosen, B., Marshall, B. D. L., Kemp, K., Brown, L., Conrad, S., & Tolou-Shams, M. (2021). The prospective impact of adverse childhood experiences on justice-involved youth's psychiatric symptoms and substance use. Journal of Consulting and Clinical Psychology, 89(6), 483-498. https://doi.org/10.1037/ccp0000655
- 22. Kim, B. E., Gilman, A. B., Thompson, N., & De Leon, J. (2021). Statewide trends of trauma history, suicidality, and mental health among youth entering the juvenile justice system. Journal of Adolescent Health, 68(2), 300–307. https://doi.org/10.1016/j.jadohealth.2020.05.044
- 23. DeHart, D. D., & Moran, R. (2015). Poly-victimization among girls in the justice system: Trajectories of risk and associations to juvenile offending. Violence Against Women, 21(3), 291–312. https://doi.org/10.1177/1077801214568355
- 24. Kerig, P. K., & Becker, S. P. (2010). From internalizing to externalizing: Theoretical models of the processes linking PTSD to juvenile delinquency. In S. J. Egan (Ed.), Posttraumatic stress disorder (PTSD): Causes, symptoms and treatment (pp. 33-78). Nova Science Publishers.
- 25. Branson, C. E., Baetz, C. L., Horwitz, S. M., & Hoagwood, K. E. (2017). Trauma-informed juvenile justice systems: A systematic review of definitions and core components. Psychological Trauma, 9(6), 635-646. https://doi.org/10.1037/tra0000255