

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

MODULE 4

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Module 4

SCREENING AND ASSESSMENT IN THE JUVENILE JUSTICE SYSTEM

This module and its contents are intended for educational purposes.

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“I was like, You know what? I'm done. I'm throwing in the towel. So I went to school. I was like, Hey, I need to talk to the DCFS worker. Finally, they were like, Hey, what do you want? And then like the 13th time that I've called, they're like, You're just the girl that cries abuse. So what's going on?”

”

–Youth in Detention

The goal of this module is to describe the mental health screening and assessment process typically used in the juvenile justice system. A list of commonly used screening and assessment measures can be found in Appendix III.

Purpose of Screening and Assessment



Similar to clinicians in community-based settings, professionals working within the juvenile justice system use screening tools to identify youth in need of mental health treatment, assess for risk of harm to self or others, and inform treatment planning. Screening tools may be conducted by mental health clinicians working in juvenile justice settings (e.g., legal settings, detention, placement) as well as by other juvenile justice professionals such as probation officers and intake workers.

While the terms “screening” and “assessment” are often used interchangeably, they are not the same. Screening is typically briefer, can be conducted by professionals outside of the mental health field, and is a cost-effective way of identifying youth who may be experiencing current mental health problems or are at risk for harm (e.g. suicide). Screening is often used to identify individuals who are in need of a more thorough assessment^{1,2}, which is a more comprehensive evaluation of mental health needs.

Mental Health Screening and Assessment in Juvenile Justice

Juvenile justice facilities have a legal and societal responsibility to respond to the needs of the youth in their custody^{3,4}. As previously noted (see Key Facts section), a high percentage of youth entering the justice system have mental health needs. Consequently, mental health screening typically occurs upon a youth's entry into the system (e.g. arrest, detention, probation intake). For example, a youth may complete an intake and screening process upon admission to a juvenile detention facility, sometimes with several different departments (e.g., mental health, admissions, case management, medical). The level of training required for administration of screening measures may differ by tool.



Initial screening results can inform whether youth are in need of a more in-depth assessment, which can help to more accurately identify mental health needs, make diagnoses, and inform mental health treatment and interventions. Comprehensive assessment measures typically require administration by trained mental health professionals. See Appendix III for commonly used mental health screening and assessment tools.

Risk Assessment

Standardized risk assessment tools are often used in juvenile justice settings to evaluate a youth's propensity for future offending and identify factors and services that may reduce this risk⁵. Depending upon the setting and purpose, risk assessment results can be used to determine a youth's level of care before or after adjudication, as well as to inform the dispositional and/or service plan.



Risk assessment tools can be brief or comprehensive. Brief tools tend to focus on risk for reoffending or continued offending behavior, while more comprehensive tools often examine both risk factors and factors that contribute to youths' offending behavior. It is also important to note what risk assessments don't do. For example, risk assessments are not

meant to tell the judge what decision to make for a particular youth and most do not assess for risk of sexual offending^{6,7}.

Risk Assessment Tools	
Advantages	Things to Keep in Mind
Can identify factors that if treated and changed, may reduce the likelihood of youth reoffending.	Mental health problems in general are considered specific responsivity factors through the RNR model (see below), but risk assessment tools are not designed to identify mental health problems or make diagnoses. Additional evaluation is needed for this purpose.
Available for use at several different decision points, including diversion, pre-trial detention, post-adjudication, and re-entry.	Risk assessment tools should not include items that are unrelated to risk for future offending.
Helps to conserve more intensive resources for youth with the highest risk and need, while also identifying youth at low risk of offending who may not need court involvement and should be candidates for diversion.	To avoid potential bias, only tools that have been validated with a particular population of youth should be used with that population.
Can be administered by trained probation officers, juvenile justice staff, and mental health professionals (e.g. psychologists, psychiatrists, social workers).	When tools rely primarily or exclusively on static or historical factors that focus on histories of arrest, prior charges, and/or supervision/placement failures, they may be more likely to misclassify youth of color as high risk.

Most risk assessments examine static risk factors, dynamic risk factors or a combination. Static risk factors are factors that are historical and do not change, such as prior criminal history and family history. Dynamic risk factors can be influenced or changed through intervention, such as peer associations, school engagement, and substance use. The degree to which a risk assessment tool examines static or dynamic factors depends upon the type and purpose of the tool. For example, risk assessment instruments (RAI) are used to inform decisions about short-term detention and tend to rely more on static factors, such as risk for failure to appear in court and/or likelihood of a new charge prior to adjudication. In contrast,

tools that inform case planning and risk reduction strategies examine dynamic factors associated with future offending over longer periods of time.



Risk assessments should also include assessment of protective factors (i.e. factors that decrease the potential harmful effect of risk factors, such as positive peer, family and mentoring relationships) and responsivity factors (i.e., aspects of a youth's circumstances that impact their ability to make progress in interventions, such as motivation to participate and change and mental health problems)^{8,9}.

Risk assessment is generally grounded in the Risk-Needs-Responsivity model^{10,11} which supports the idea that justice systems should match treatment/service programming to address youth's dynamic (i.e. changeable) risk factors and criminogenic needs according to one's overall risk to reoffend (i.e., informing the intensity and dosage of services needed to address the future delinquency risk)^{12,13,14}. In line with this model, risk assessment helps conserve the most intense and costly resources for those youth with the highest risk and need. Conversely, the RNR model reinforces that when a youth is determined to be low risk for future delinquent behavior, they should be considered candidates for diversion or light touch responses to avoid ensnaring them in the system and inadvertently increasing the likelihood of future offending due to over prescription of unnecessary services.

RESOURCES

The [CTRJJ Roadmap for Change](#) podcast episode discusses more about the tools and interventions needed to ensure success for youth in the juvenile justice system.

**Beyond Screening
& Assessment:
Listen with Your
Eyes & Ears**

 **Roadmap for Change:**
Trauma Recovery & Juvenile Justice

NOTE: More information about risk assessment tools can be found in **Appendix III**.

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