

# HELPING YOUNG PEOPLE GET TREATMENT IN JUVENILE JUSTICE AND BEYOND

**W**hy focus on the juvenile justice system? Despite the fact that most juvenile justice-involved young people are not being treated for substance abuse and mental health needs, the juvenile justice system is still the single largest referral source for adolescent treatment and this system is where young people in trouble often first come to our attention.<sup>1</sup>

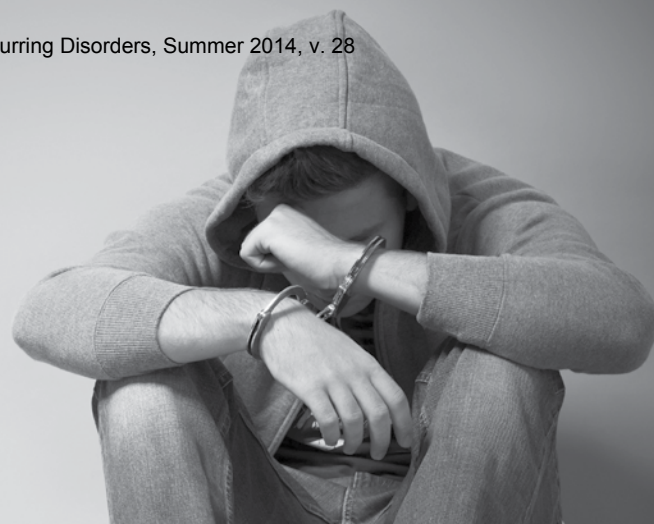
Young people involved in the juvenile justice system often are challenged with substance use issues. Nationally, about half of young people in the juvenile justice system have drug related problems.<sup>2</sup> In fact, four of five young people in the juvenile justice system are under the influence of alcohol or drugs while breaking the law; test positive for drugs; are arrested for committing an alcohol or drug offense; admit having substance abuse and addiction problems; or share some combination of these characteristics.<sup>3</sup> Additionally, many young people in the juvenile justice system have a co-occurring disorder (both substance abuse and mental health). Yet in spite of research that shows treatment helps reduce recidivism<sup>4</sup> and saves money, juvenile courts usually are not set up to detect and treat substance abuse or to provide mental health and other important services. Instead, most of the young people in the juvenile justice system who need treatment for drugs, alcohol, and mental health problems are not getting it. Fewer than one in twelve young people who need such supports actually receive treatment of any kind.<sup>5</sup> For those who receive treatment, less than half are retained for 90 days as recommended by research.<sup>6</sup> Many communi-

ties are not using evidence-based treatments that have been tested in the field for many years. Young people need different care than adults: care that addresses adolescent development and brain science, and that utilizes support from families and community. Too many juvenile courts mirror a more punitive approach appropriate to adult criminal court rather than the rehabilitative civil court envisioned when the juvenile court was first established in the late nineteenth century.

## THE RECLAIMING FUTURES APPROACH

The Robert Wood Johnson Foundation (RWJF) recognized that there was no uniform system of care for young people in the juvenile justice system and as a result launched Reclaiming Futures in 2000 to address the lack of treatment young people received for their substance use and mental health challenges. Reclaiming Futures founder, Dr. Laura Nissen, and ten pilot sites drew upon emerging research to establish new national benchmarks, and develop and validate the Reclaiming Futures model during a five-year pilot phase beginning in 2002.<sup>7</sup>

RWJF, by launching this initiative, reinvented how juvenile courts work. Reclaiming Futures brings together judges, probation officers, treatment providers, families and community members to improve drug, alcohol, and mental health treatment for young people in trouble with the law. This is in part accomplished through a system change framework of “more treatment, better treatment, and beyond treatment” that screens young people for drug and alcohol problems, assesses the severity of substance use, provides prompt access to



a treatment plan coordinated by a service team, and connects young people with employers, mentors, and a wide range of community pro-social activities.

Specifically, “more treatment” is about addressing the lack of treatment available in many communities and the screening and assessment of young peoples’ treatment needs. “Better treatment” refers to the best evidence-based continuum of treatment options that can be implemented with fidelity by a community. “Beyond treatment” is the process of fully engaging the community in supporting young people and families early in formal services, and in providing supportive opportunities for them outside of the court setting. The goal is to get young people out of the system and not return. “Community,” which is broadly defined, is very important to the Reclaiming Futures model and requires many partners such as young people, parents, families, mentors, child welfare, faith leaders, education, defense attorneys, public defenders, volunteers, youth advocacy organizations, employers, etc.

Additionally, the Reclaiming Futures approach is comprised of a six-step model. More specifically, the elements of the model include:

- Step 1: Screening
- Step 2: Assessment
- Step 3: Service coordination/ multi-disciplinary care planning
- Step 4: Initiation in treatment
- Step 5: Engagement in treatment
- Step 6: Transition, community involvement, and recovery networks

Transition, Step 6, describes efforts to connect youth and families with long-term supports for success and includes restoration (holding young people accountable for court ordered fines and/ or community service); and readiness for whatever is next for the

young person, like education, employment, pro-social activities, re-entry back into the community, and recovery for those with addiction.

### IMPLEMENTING RECLAIMING FUTURES

Today, Reclaiming Futures has been implemented in 39 communities across 18 states nationwide. The local Reclaiming Futures sites all are supported by an individual coach; the national program’s office staff and resources (headquartered at Portland State University in Portland, Oregon); a curriculum toolkit; an implementation index and plan; and the Reclaiming Futures national learning collaborative. This collaborative consists of Reclaiming Futures team members from sites throughout the country, and engages all sites in group learning activities, peer coaching, and resource sharing. It is organized by discipline (judges, probation, community, treatment, and project directors) and is convened via regular calls, meetings and webinars. The learning collaborative also convenes as a state cohort within states with multiple sites.

System change at each site is accomplished by ensuring youth progress through the six-step model, making policy changes for better outcomes, sharing leadership across disciplines and partnering agencies, aligning job descriptions with Reclaiming Futures goals, and sustaining and maintaining improvements by institutionalizing the advancements made. The resulting improvements lead to better data on the behavioral health needs of young people coming into the system, better tracking of youth while they are in the system, greater awareness and utilization of evidence-based treatment, and increased community involvement to help these youth become productive members of society.

While Reclaiming Futures is a system change initiative for the juvenile court in general, it has also been effectively implemented in juvenile drug courts, a specialized docket of juvenile court. These courts are

sometimes criticized for being “boutique” because of concerns that they serve a relatively small subset of youth in the system with a disproportionate share of the limited resources available. Reclaiming Futures, through extending screening and assessment beyond the drug court and by increasing community involvement with the juvenile court system as a whole, has provided an opportunity for juvenile drug courts to pilot the model and then spread it throughout the system. Implementation of this model may thus begin in a single court but the intention is to spread its impact from the court to the entire local juvenile justice system, then into the community.

### EVALUATING RECLAIMING FUTURES

Independent evaluation by the Urban Institute and the University of Chicago's Chapin Hall Center for Children found that the Reclaiming Futures model works at the implementation level. Surveys of the ten original sites were conducted every six months between December 2003 and June 2006 to determine how adopting the Reclaiming Futures model changed the services offered and the integration of those services within and beyond the juvenile justice system.<sup>8</sup> Findings indicated that the model is adaptable, flexible, and works in both urban and rural settings. Additionally, Reclaiming Futures pilot communities reported significant improvements in juvenile justice and drug and alcohol treatment services (improved assessment and treatment effectiveness), and positive changes in the way juvenile justice and substance abuse agencies communicate and cooperate. Improvements in family involvement, and young people's involvement in positive activities were also noted.

Since 2007, twelve communities have been funded by OJJDP and the Substance Abuse Services and Mental Health Services Administration (SAMHSA), Center for Substance Abuse Treatment (CSAT) to combine the Reclaiming Futures model with their local juvenile drug court. A recent study looked at this specific implementation and provided the Reclaiming Futures initiative its first youth-level outcome data.<sup>9</sup> An external evaluation of these sites and Reclaiming Futures funded by OJJDP is currently underway with the University of Arizona, Southwest Institute for Research on Women, through an interagency agreement with the Library of Congress (LOC). One of the external evaluation partners is Chestnut Health Systems of Normal, IL.

The Global Appraisal of Individual Needs (GAIN) is a screening and assessment tool used on every young person coming into both the Reclaiming Futures JTDCs and the SAMHSA CSAT-funded juvenile treatment drug

courts (CSAT-JTDC). It collects several types of data from youth including background demographics and information, substance use, physical health, risk behaviors, mental health, environment risk, legal involvement, and vocational measures. A recent study by Chestnut Health Systems using the GAIN data compared young people in CSAT-JTDC to young people in drug courts using the Reclaiming Futures JTDC model. Research techniques designed to produce an equivalent comparison group were used. The SAMHSA CSAT-funded courts were funded to implement evidence-based treatment for their juvenile drug court. As a result, they are considered relatively effective drug courts compared to the many juvenile drug courts that do not provide evidence-based treatment.

A comparison was made between the two groups on the number of days and the respective change in days that the youths experienced problems in the year before treatment and the year after treatment. While living in the community, Reclaiming Futures JTDC young people had a larger increase in days abstinent from drugs and alcohol than the young people in the comparison group (a 42% increase in the number of days abstinent in the year following involvement with Reclaiming Futures vs a 24% increase for those in CSAT-JTDC). Young people involved in Reclaiming Futures JTDC also showed higher reductions of crime; illegal activities were decreased by 65% compared to 45%. Higher crime reductions were seen in violent and substance-related activities.

After controlling for the intake differences, Reclaiming Futures JTDC clients reported receiving more substance abuse services, including significantly more days of residential treatment and a trend toward more intensive outpatient treatment days marking an important contribution of this effort. This supports the claim that the Reclaiming Futures model promotes more treatment than JTDC. However, additional findings indicated that Reclaiming Futures JTDC clients had fewer family services; this result is less than desired and warrants additional exploration.

In summary, this evaluation revealed that Reclaiming Futures JTDC increased days of alcohol and drug abstinence by 42%, reduced teens' illegal activity by 65%, and significantly reduced the costs of crime to society. It also increased the amount of services that young people get, with the exception of family services.

This research study had several strengths, including a large sample size (JTDC N=1,934 and Reclaiming Futures JTDC N=811), standardized intake and follow-up measures, data collection at multiple sites, and multiple sources of data on service utilization (i.e., from staff records and self-report). However, we need



to acknowledge some important limitations, including having compared two groups receiving treatment (via Reclaiming Futures JTDC or JTDC) and not using a no-treatment control group.

To address some of the questions raised in this analysis, the authors recommend further analysis of referral sources and an expanded array of outcomes. Additional areas of exploration include even more rigorous analysis of data to determine which young people would most likely benefit from JTDC as normal vs. Reclaiming Futures JTDC. More research also is needed to determine specifically which aspects of Reclaiming Futures JTDC cause its beneficial outcomes so that they can be replicated.

Co-occurring disorders among young people in juvenile justice settings are not exceptions – they are the expectation, and young people should receive evidence-based treatment that addresses their co-occurring needs. The Reclaiming Futures JTDC model has potential to increase drug and alcohol abstinence, reduce young people's illegal activity, and reduce the cost of crime to society.

*Note: In addition to the long-term generous support of the Robert Wood Johnson Foundation, the initiative has received additional investments to spread its model from the Office of Juvenile Justice and Delinquency Prevention; the Center for Substance Abuse Treatment; the Kate B. Reynolds Charitable Trust; The Duke Endowment; and the State of North Carolina, Department of Public Safety. The national office of Reclaiming Futures is housed in the Regional Research Institute of the School of Social Work at Portland State University. For more information on Reclaiming Futures, please visit [www.reclaimingfutures.org](http://www.reclaimingfutures.org). For the full article on this research to be published in the coming months, please contact Michael Dennis at [mdennis@chestnut.org](mailto:mdennis@chestnut.org).*

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## PROJECTS AND STAFF:

**CAREER VISIONS** tests an approach to career planning and employment for young adults, ages 21-25, who are receiving SSE or extended special education services.

Jo-Ann Sowers, Principal Investigator; Adrienne Scavera, Graduate Research Assistant.

**BETTER FUTURES** tests a comprehensive intervention to assist young people in foster care with serious mental health conditions to prepare to participate in post-secondary education.

Sarah Geenan and Laurie Powers, Co-Principal Investigators; Pauline Jivanjee, Project Advisor; Lee Ann Phillips, Project Manager; Nick Winges-Yanez, Graduate Research Assistant.

**ACHIEVE MY PLAN** studies the efficacy of an intervention to increase young people's participation and engagement in their mental health treatment planning teams, and to build organizational capacity to support youth engagement.

Janet S. Walker and Laurie Powers, Co-Principal Investigators; Celeste Moser, Project Coordinator; Jared Best, Graduate Research Assistant; Celina Ataras, Research Assistant; Heather Rowlett, AMP Coach.

**TRANSITION POLICY CONSORTIUM** will develop an inventory that assesses the level of community support for transition services with a specific emphasis on measuring collaboration and continuity of care between the child and adult mental health systems.

Nancy Koroloff and Janet Walker, Co-Principal Investigators; Adrienne Croskey, Graduate Research Assistant.

**FINDING OUR WAY** furthers the development of a culturally specific self-assessment tool for American Indian/Alaskan Native young people.

Developed for youth ages 13-19, the tool will be modified to include issues relevant to transition.

Barbara Friesen and Terry Cross, Co-Principal Investigators; L. Kris Gowen and Pauline Jivanjee, Researchers; Abby Bandurraga, Graduate Research Assistant.

**eHEALTH LITERACY** is a developmental project that will contribute to a knowledge base about the ways youth and young adults use the internet to find information about mental health care, conditions, symptoms, or medications. The information will be used to develop and test an eHealth literacy curriculum.

L. Kris Gowen, Principal Investigator.

**RECOVERY OUTCOMES** is a secondary analysis of large national data sets. This project will analyze data from the System of Care National Evaluation related to young people's recovery outcomes.

Eileen Brennan, Principal Investigator.

**MEDIATORS OF STIGMATIZATION** will analyze data from nationally representative samples of youth and young adults, and use this information to identify potentially effective anti-stigmatization strategies.

Janet Walker, Principal Investigator.

**TRANSITION TRAINING COLLABORATIVE** will develop graduate and undergraduate course modules appropriate for individuals who plan to work with transition-aged youth, as well as modules for in-service delivery.

Eileen Brennan and Pauline Jivanjee, Co-Principal Investigators; Claudia Sellmaier, Graduate Research Assistant; Goutam Saha, Coordinator of Multimedia Services.

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**Laura Nissen** served as founding Executive Director of the Reclaiming Futures national program office. In 2014 she assumed the role of Dean of the School of Social Work at Portland State University.

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