



*An estimated 7 in 10 youth in the juvenile justice system have at least one mental disorder. In Texas, do the kids who need help most get put behind bars?*

## **THE OFFICER WILL SEE YOU NOW**

*Reversing the Trend Toward the Juvenile Justice System  
As Default Mental Health Provider for Texas Kids*

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*Correctional systems were not designed for mental health treatment. There is no evidence that incarcerating mentally ill youth prevents later delinquency.*

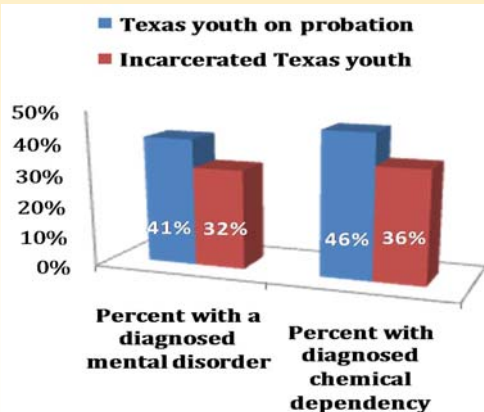


Texas communities have limited resources for addressing children’s mental health. An early warning sign of untreated mental health or substance abuse problems is delinquent behavior, which can lead many children who need help into the juvenile justice system. Roughly 70% of youth in juvenile justice systems nationwide have mental health disorders.<sup>i</sup> In Texas, the juvenile justice system acts as a de facto provider of mental health services.<sup>ii</sup>

Juvenile justice systems are not made for treating mental illness, and putting mentally ill youth into these systems does not work at preventing later delinquency. What does work is detecting problems early and treating them in the community—strategies that also save public dollars.<sup>iii</sup>

## WHAT TEXAS CAN DO:

**Texas’s two juvenile justice agencies report challenges meeting the mental health needs of many youth in their care.**



Sources: Texas Juvenile Probation Commission, 2006; Texas Youth Commission, 2008.

*The single greatest predictor of future incarceration is a history of disciplinary referrals at school.*

*Texas schools send more than 20,000 misdemeanor cases to the courts each year for truancy and minor Texas Education Code violations, like disrupting class by making noise.*

Sources: Texas A&M University Public Policy Research Institute, 2005; Texas Appleseed, 2009.

### **Promote Wellness and Prevent Challenges from Escalating**

Doctors’ offices, schools, and community agencies can help identify kids with mental challenges or behavioral problems early so that children don’t go on to become juvenile offenders.

#### ***Ensure health providers are equipped to identify problems early.***

Primary care doctors can help identify and address children’s behavioral health needs early and refer families to appropriate resources. To keep from missing a valuable opportunity to detect problems early, when they are easiest and least costly to treat, doctors should screen for emotional, social, and behavioral concerns during well-child visits.<sup>iv</sup> When problems are detected, families need the assurance of reliable health insurance, rather than plans that limit coverage for mental health treatment or place caps on needed services.<sup>v</sup>

#### ***Help schools detect and address mental and behavioral issues.***

Unfortunately, many schools respond to students with behavior problems by removing them from their classrooms and placing them in restrictive environments, like alternative education programs. This practice derails students’ education and often overlooks underlying causes of problem behaviors. Schools could instead provide more appropriate interventions to ensure kids get diagnosed at the first opportunity and connected with services or treatment they need.

#### ***Provide community services that stabilize crises and meet kids’ needs.***

When youth experience a mental health crisis, rapid response can help prevent their entering the juvenile justice system. In some communities, Mobile Crisis Units or Crisis Intervention Teams provide timely assessment and crisis resolution services. Children and their families also need ongoing services to prevent a “crisis-stabilization-crisis” cycle from taking hold. The most effective services for youth with serious emotional disturbances typically occur in the home or community, not in facility settings.<sup>vi</sup> A systems of care, “wraparound” approach serves youth with mental health challenges and juvenile offenders, providing youth and their families with an array of comprehensive, coordinated services from various agencies and organizations—and an alternative to predetermined, inflexible, and frequently less effective treatment programs.<sup>vii</sup>

## Better Bang for the Buck

Community-based treatments for youth with mental health challenges and juvenile delinquency prevention programs have proven effective for both reducing juvenile crime and saving money. Texas can avoid costs in the juvenile justice system and to victims of juvenile crime through wiser investments.<sup>viii</sup>

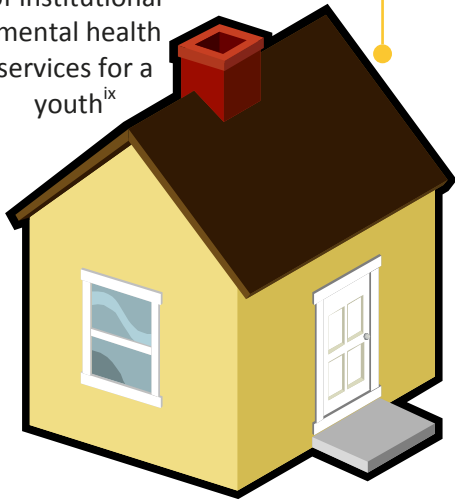


**\$885**

The average cost of community-based mental health services for a Texas youth

**\$8,759**

The average cost of institutional mental health services for a youth<sup>ix</sup>



**\$3,000**

Average annual cost of drug or alcohol rehab for a youth with a substance abuse problem<sup>x</sup>



**\$96,000**

Average annual cost of confining a youth in TYC<sup>xi</sup>

## Respond Appropriately When Kids Enter the Justice System

When youth with mental health challenges act out, recognizing underlying mental disorders quickly can prevent future offenses and keep them from “graduating” further in the correctional system. The most effective solutions usually involve keeping kids with their families.<sup>xii</sup>

### **Screen and assess delinquent youth for mental health challenges.**

To divert youth with mental disorders into appropriate and effective treatment first requires reliable screening—preferably at their earliest point of contact with the juvenile justice system. Valid assessment instruments can effectively detect mental health and substance abuse problems.

### **Involve the judicial system in ensuring youth in need of treatment get it.**

Juvenile court judges can order a mental health evaluation at any stage of court proceedings. Doing so requires the local probation department to refer the child to a local community mental health center for further evaluation, as well as services if testing indicates a suspected mental illness.<sup>xiii</sup> Youth with mental health challenges need to have access to adequate legal defense, who can help make the case for securing community-based care.<sup>xiv</sup> Mental Health and Drug Courts also offer promising new alternatives for addressing juvenile offenders’ mental and substance use issues at the same time as public safety.<sup>xv</sup> Mental health courts link offenders who would ordinarily be prison-bound to long-term community-based treatment. Drug courts use court-supervised treatment in place of the usual sanctions.

### **Opt for community-based interventions that promote family involvement.**

Proximity to their communities matters for all youth in the juvenile justice system, but perhaps especially those with mental health disorders. Family therapy, medication management, respite care, and behavioral coaching are all interventions that address youths’ mental health needs while decreasing the chance of future delinquent behavior.<sup>xvi</sup> Several approaches have been proven effective by working with parents or guardians and youth at home to improve behavior. These include functional family therapy, multisystemic therapy, multidimensional treatment foster care, and “wraparound” coordinated services, an integral component of systems of care.<sup>xvii</sup>



*Providing delinquent youth with an array of coordinated community services known as systems of care has been shown to result in fewer behavioral and emotional problems after 18 months.*

Source: Center for Mental Health Services, 2006.

**In a national survey, parents of children with serious mental health disorders reported that a lack of services in the community had led them to rely on state systems.**

**Said their child entered the juvenile justice system.**

**36%**

**Said they were advised to give up custody of their child to access services.**

**23%**

**Reported relinquishing custody.**

**20%**

Source: National Alliance for the Mentally Ill (NAMI), 1999.

## Ensure the System Can Meet Youths' Mental Health Needs

Merely incarcerating youth with underlying problems has proven ineffective at changing behavior once they are released back into their homes and communities.<sup>xviii</sup> Providing mental health treatment during incarceration, though, *can* improve outcomes. A Texas Youth Commission (TYC) study found that youth who received such treatment while incarcerated were significantly less likely to be rearrested within a year of their release.<sup>xix</sup>

### **Conduct comprehensive assessments and provide treatment accordingly.**

Having psychological screenings for all juvenile offenders at the time of commitment would allow facilities to detect previously undiagnosed mental health disorders and develop individualized treatment plans for youth. Evidence-based practices—such as Cognitive Behavioral Therapy, specialized substance abuse treatment, integrated treatment for dually diagnosed youth, and trauma-informed care—are key to treating incarcerated youth.<sup>xx</sup> Specialized treatment should be provided by qualified professionals with extensive training.<sup>xxi</sup> Even in incarceration, youths' families should be involved in the treatment plan.

### **Equip facility staff to provide youth-focused, strength-based services.**

Facilities need to operate with a low youth-to-staff ratio and train their workers to defuse escalating situations effectively.<sup>xxii</sup> Staff should avoid using seclusion and restraints, including medication as a chemical restraint, since these approaches pose serious health and safety risks to youth and prevent them from learning appropriate coping skills.<sup>xxiii</sup>

### **Plan for youths' reentry to the community and suitable follow-up care.**

Preparing for what happens when a youth returns home can help reduce recidivism and save the public money.<sup>xxiv</sup> Using a wraparound approach to serve youth leaving a juvenile justice facility can prevent kids with mental illness from reoffending. Planning ahead ensures youth can maintain access to services and supports they need to succeed at home: mental health treatment, substance abuse treatment, and continuous health coverage.

## Questions to Consider

### **Are we meeting the treatment needs of young female offenders?**

Girls make up only a small percentage of youth in TYC (7% of commitments in 2008) and more than a quarter of youth referred to the Texas Juvenile Probation Commission (TJPC).<sup>xxv</sup>

### **Are we involving families?**

Having family involved in all aspects of care and treatment not only can provide valuable information key to keeping the youth stable and safe, but also can improve treatment and rehabilitation results.<sup>xxvi</sup>

### **Are we addressing disparities?**

Youth of color are overrepresented in the juvenile justice system.<sup>xxvii</sup> They are also less likely to receive mental health services they may need and less likely to receive treatments that are proven to be effective.<sup>xxviii</sup> Disparities in how schools, courts, and the correctional system respond to youth of color can affect outcomes and prevent children in minority communities from getting care they need to be successful.<sup>xxix</sup> Addressing disproportional contact and providing culturally competent services both need to be juvenile justice priorities.



## RECOMMENDATIONS TO HELP TEXAS REVERSE THE TREND

A number of promising practices would prevent the juvenile justice system from acting as default mental health provider for Texas kids. To promote youths' success, keep citizens safe, and save public money, Texas can:

### Divert Youth Who Don't Belong in the System

*Promote school success by requiring districts to use evidence-based models.*

Examples include school-wide Positive Behavioral Supports. Train school teachers and staff to recognize potential unmet mental health needs and make appropriate referrals. Make Mobile Crisis Teams available on campuses. Continue to repeal discipline policies that criminalize rather than address challenging behaviors in students.

*Build community capacity to address mental health needs of children and families.*

*Decrease reliance on psychotropic medication to control behaviors in children.*

When such medication is deemed necessary, ensure that its usage is closely monitored and provided in conjunction with other interventions.

*Improve coordination among agencies and systems serving children and their families.*

Use multidisciplinary teams as standard practice for assessment and service delivery. Provide flexible funding to allow Community Resource Coordination Groups and Texas Integrated Funding Initiative sites to provide systems of care. This would give more children with complex needs access to supports.

*Make the primary objective of probation supervision, not sanction.*

Expand probation-based diversion strategies, such as the Front End Diversion Initiative, to all counties, with specialized officer certification that includes motivational interviewing.

*Increase use of mental health and drug courts. Move juvenile courts towards treatment-based models.*

*Ensure practices reduce the disproportionate referral of children of color to the juvenile justice system.*

### Provide Appropriate Treatment to Youth in the System

*Identify youth with mental health challenges upon system entry.*

Provide them with evidence-based treatment that is culturally competent, trauma-informed, and gender-appropriate.

*Involve guardians and family of choice in all aspects of youth care.*

Strategies to better engage families include training juvenile justice staff on how to effectively engage families, exploring the use of family group decision-making, and using technology, such as video conferencing, to keep families engaged with incarcerated youth

*Use seclusion and restraints only if there is imminent risk of danger.*

Medication should not be used as a chemical restraint.

*Serve youth in small, regionalized facilities close to their communities.*

Keep youth out of the adult criminal justice system, as well.

*Partner with community-based organizations.*

Local groups can keep youth connected to their community and involved in activities that foster responsibility and self esteem.

*Promote professionalism among juvenile justice staff.*

Increase professional requirements, including field experience and training in how to work with special populations. Pay a living wage, and reward staff who work effectively with youth.

### Foster Smooth Transitions Back Into the Community

*Begin reentry planning early.*

Provide comprehensive aftercare services to youth as they return home so a continuum of care exists. Ensure youth who are eligible for Medicaid or CHIP have the coverage they need to receive services.

*Involve youths' family of choice.*

The people a child identifies as supportive can help prepare for his or her reentry.

*Help youth attain the skills and resources to succeed in reentry.*

*Explore using transition centers.*

Such centers, which serve older foster youth, could also assist young people leaving the juvenile justice system.

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Texans Care for Children is a 501(c)(3) nonprofit child advocacy organization working to promote the wellbeing of kids in Texas. Its areas of focus include juvenile justice, mental health, child and maternal health, child protection, and family financial security. With members statewide, Texans Care is a nonpartisan voice for children, source on children, and network for people who put kids first.

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