Shifting paradigms: Best practice in juvenile justice treatment

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Overview

- Historical Overview
- Paradigm shift
- Physical intervention/Isolation
- Current best practice trends
- Prison pipeline
- Future implications
Historical Overview
Long before....

• 1760’s “Commentaries on the Laws of England” William Blackstone, English lawyer
  • Defined anyone under the age of 7, unable to commit a crime
    • Based on 2 part determinant, intent and unlawful act
  • Age 7-14, dependent on whether the child knew right from wrong
  • Over 14, tried as an adult

• Sentencing could be as serious as death
  • ABA, Division of Public Education, “The History of Juvenile Justice”
19th Century United States

- Paradigm shift – juveniles need reform to help them become better citizens
- Reform schools, Rehabilitation
  - 1855 – Chicago – The Chicago Reform School
- Alternative Programming
  -Probation, Group homes, out of home placement
- Court systems/sentencing
  - 1899 – Cook County, Illinois – the first juvenile court system
  - Over the next 25 years all other states established a juvenile court system
    - ABA, Division of Public Education, “The History of Juvenile Justice”
20th Century

- 1967 – All juvenile cases were afforded due process
  - Notice of the charges against them
  - A right to legal counsel
  - The right against self-incrimination
  - The right to confront and cross-examine witnesses
- 1970 – Established that juvenile cases must establish a “preponderance of evidence” not “beyond a reasonable doubt” (Criminal court)
- 1971 - McKeiver v. Pennsylvania, Court ruled that juveniles are not entitled to trial by jury
  - ABA, Division of Public Education, “The History of Juvenile Justice”
Paradigm Shifts
1980’s/1990’s Fear

- Increase in violent crime
- Increase in juvenile offenses
- First incidence of mass shooting
- Highly publicized juvenile crimes
Response

• Increase in arrests
• Increase in sentencing
• Increase in status offenses in court
• Increase in placement in facilities
• Increase in high level interventions
Last 5/10 years

- Research does not find the harsher sentences, longer time in facilities, stricter policies to have reduced crime
- Juvenile crime decreasing
- Research finds that high level interventions to be ineffective and even detrimental to the adolescent brain
- Anecdotes suggest alternative programming, therapies, solutions to be effective
States are shifting from “incarcerating” juveniles to providing them best practices psychiatric treatment

High level interventions are starting to be monitored and scrutinized by government entities and regulatory parties

There is a larger emphasis placed on keeping youth in their communities under supervision

Restorative and social justice are being utilized
Physical Intervention/Isolation/Seclusion
Definitions  Kraus & Arroyo (2005)

- Seclusion
- Isolation
- Restraint
  - Chemical
  - Physical
Contraindications

• The adolescent brain development and impact
• Short lived change without internal achievement
• Addiction
• Secondary gain
• Decreased trust in authority and systems
• Increased risk for suicide, self-harm, mental illness
Prison Pipeline
1990’s  Curtis (2014)

• Zero tolerance polices
  • Implemented to reduce drug possession and guns
  • Used in response to bullying, school threats, weapons, drugs, alcohol, fights

• Referring disciplinary offenses to law enforcement

• School resource officers
• Harsh discipline responses to school behavior
• Increased referral to law enforcement
• More rapid suspension/expulsion
• Faster referral to alternative education
• Less services
• Disproportionate ethnic minority status
  • Curtis (2014)
• Impact of being out of school
• Impact of being incarcerated
• Impact of education in facilities
• Impact of being out of the community of origin
Current best practice
Trauma informed services

• Treating the amygdala and limbic system before treating behavior
• Treating youth who have trauma histories with caution
• Organizing the system in a trauma informed manner for trickle down
• Each youth is an individual and also their own expert
• Youth learn best when safe and calm
Positive Peer Culture

• Adolescents learn from one another faster than adults
• Social/milieu dysfunction slows treatment
• A positive environment in treatment avoids pathologizing survival behaviors
• Inclusionary
• Increases the opportunity for higher level skill building like leadership, cohesion, social justice
Prevention not intervention

- Diversion
- Restorative justice/social justice for first offenses
- Early identification and adequate diagnosis
- Breaking behavioral patterns early
- Physical intervention and isolation does not work and can be traumatizing
Family involvement

- Juveniles often return to family
- Family values and early lessons dictate beliefs
- Family knows the historical perspective
- Healing the family unit increases transitional success
- Families can help leverage treatment
From manuals to relationships

- Safety heals attachment
- Structure mends trauma
- Relationships develop trust
- Care and love support self-esteem and empowerment
- An ally increases motivation
Integrated and holistic services

- Treating the whole youth
- Multidisciplinary teams
- Bringing the community in and the youth out
- Focus on wellness not on recidivism
- Youth driven
Alternative therapies

- Music therapy
- Psychodrama
- Bibliotherapy
- Art therapy
- Animal therapy
- Recreation and movement therapy
Future implications
What can we do?

- Know the facts
- Understand the adolescent brain
- Utilize what works
- Work harder on the front end
- Mentoring
- Commit to ending incarceration as a business
- Donate time, money, resources, or yourself
References

• “The History of Juvenile Justice,” The American Bar Association, Division for Public Education, Chapter 1
Questions/Comments

Thank you!