

MAKING THE RIGHT TURN:

A Guide About Improving Transition Outcomes for Youth Involved in the Juvenile Corrections System



National Collaborative on
Workforce & Disability for Youth
Institute for Educational Leadership



This document was developed by
the National Collaborative on Workforce and Disability for Youth,
funded by a grant/contract/cooperative agreement
from the U.S. Department of Labor,
Office of Disability Employment Policy
(Number #E-9-4-1-0070).

The opinions expressed herein do not necessarily reflect
the position or policy of the U.S. Department of Labor.
Nor does mention of trade names, commercial products
or organizations imply the endorsement
of the U.S. Department of Labor.

The National Collaborative on Workforce and Disability for Youth
(NCWD/Youth) is composed of partners with expertise in disability,
education, employment, and workforce development issues.
NCWD/Youth is a national technical assistance center housed at
the Institute for Educational Leadership in Washington, DC.
The Collaborative is charged with assisting state and local
workforce development systems to integrate youth with
disabilities into their service strategies.

Information on the Collaborative can be found at
<http://www.ncwd-youth.info>

Information about the Office of Disability
Employment Policy can be found at
<http://www.dol.gov/odep>



Individuals may reproduce any part of this document.
Please credit the source and support of Federal funds.
Suggested citation for this guide:

Gagnon, J. C., & Richards, C. (2008). *Making the right turn: A guide about improving transition outcomes of youth involved in the juvenile corrections system*. Washington, DC: National Collaborative on Workforce and Disability for Youth, Institute for Educational Leadership.

NCWD/Youth publications can be downloaded for free from the web
at www.ncwd-youth.info. Hard copies may be purchased by contacting
the Collaborative at contact@ncwd-youth.info

Table of Contents

Acknowledgements iii

Preface iv

Chapter One: Introduction 1

Characteristics of Youth with Disabilities 2

Disability Status, Educational Outcomes, and Juvenile Corrections 3

Disability Status, Mental Health, and Juvenile Corrections 4

Over-representation Theories 5

**Chapter Two: Understanding the Juvenile Justice System —
Stages of Youth Involvement** 7

Prevention/Early Intervention 7

Figure 1 – Stages of Delinquency & Case Processing in the Juvenile Justice System 8

Initial Problem Behavior: Law Enforcement or Non-Law Enforcement Involvement 8

Diversion 9

Prosecution 10

Intake and Detention 10

Formal Processing and Judicial Waiver 11

Adjudication and Disposition 11

Alternative Sentencing 12

Confinement 12

Moving Forward 12

Chapter Three: Meeting the Needs of Youth in Juvenile Corrections 13

The Guideposts for Success 13

Guidepost 1 – School-Based Preparatory Experiences 14

Guidepost 2 – Career Preparation and Work-Based Experiences 15

Guidepost 3 – Youth Development & Leadership 16

Guidepost 4 – Connecting Activities 17

Guidepost 5 – Family Involvement and Support 17

Table 1 – Guideposts for Success for Youth Involvement in the Juvenile Corrections System 18

Chapter Four: Promising Practices for Practitioners	24
Promising Practices for Employment and Training for Court Involved Youth	26
Promising Practices for Prevention and Early Intervention	27
Positive Behavioral Interventions and Support	27
Jobs for America’s Graduates model	28
Promising Practices for Non-Institutionalized Juveniles	28
Diversions	28
Rehabilitative models	29
Family-focused treatment	29
Teen Courts	29
Mental health and substance abuse treatment for non-institutionalized juveniles	31
Multisystemic Therapy	31
Promising Practices for Institutionalized Juveniles	31
Education	31
Strategic Instruction Model	32
Career and Technical Education for Youth in Corrections	33
Behavioral Intervention	34
Mental Health Interventions	35
Transition and After Care	35
Chapter Five: Straightening Out the Curve — A Roadmap to Enhancing Policy & Practice	37
Adherence to Federal Law	37
No Child Left Behind	38
Alternative Educational Paths	39
Transitioning Out of Juvenile Corrections	39
Expanding Promising Practices	40
Expanding System Collaboration	40
Professional Development	40
Research and Evaluation	42
Conclusion	42
APPENDICES	43
Appendix A: Resources by Guideposts area	43
School-based Preparatory Experiences	43
Career Preparation and Work-based	44
Youth Development & Leadership	45
Connecting Activities	45
Family Involvement and Supports	46
Appendix B: Footnotes	47
Chapter One Footnotes	47
Chapter Two Footnotes	53
Chapter Three Footnotes	53
Chapter Four Footnotes	54
Chapter Five Footnotes	60
Appendix Footnotes	61

Acknowledgements

This Guide was written primarily by Joseph Gagnon, Ph.D., Assistant Professor in the College of Education, Department of Special Education, University of Florida. Dr. Gagnon’s thoughtfulness, thoroughness, and incredible patience are most appreciated. He was assisted by Curtis Richards, Senior Policy Fellow at the Institute for Educational Leadership in Washington, D.C. Thanks are due to Joan Wills, Director of the Center for Workforce Development at the Institute for Educational Leadership, for reviewing multiple drafts.

Beyond Dr. Gagnon, NCWD/Youth would like to extend a special note of gratitude to Dr. Deanne Unruh for her description of Project SUPPORT, and the Juvenile Justice Panel of Experts for its assistance in reviewing and enhancing this Guide: Rhonda Basha, Office of Disability Employment Policy, U.S. Department of Labor; David Brown, Department of Youth Rehabilitative Services, Government of the District of Columbia; Leonard Dixon, National Juvenile Detention Association, Bureau of Juvenile Justice, State of Michigan; David Domenici, Maya Angelou Charter School, See

Forever Foundation; Rachel Dorman, Office of Disability Employment Policy, U.S. Department of Labor; James Forman, Georgetown University Law Center; Patricia Gill, The Corps Network; Tom Hanley, Office of Special Education Programs, U.S. Department of Education; Ann Higdon, Improved Solutions for Urban Systems; Peter Leone, National Center on Education, Disability and Juvenile Justice, Department of Special Education, University of Maryland; Kia Loggins, National Juvenile Detention Association, Center for Research and Professional Development, Michigan State University; Diane McCauley, Office of Vocational and Adult Education, U.S. Department of Education; Darcie Milazzo, National Youth Employment Coalition; Tom Murphy, Office of Juvenile Justice and Delinquency Prevention, U.S. Department of Justice; Lane Roos; Sean Roy, PACER Center; Joe Scantlebury, Bill and Melinda Gates Foundation; Andrew Smiles, Bill and Melinda Gates Foundation; Dennis Torbett, Home Builders Institute; Rex Uberman, National Association of Youth Service Consultants; and Jane Young, North Carolina Department of Juvenile Justice and Delinquency Prevention.

Preface

This Guide has been developed to assist professionals in the workforce development system in gaining a better understanding of the needs of youth involved, or at risk of being involved in the juvenile corrections system. The “workforce development system” includes all national, state, and local level organizations that plan and allocate resources (both public and private), and operate programs that assist individuals in obtaining education, training, and job placement, as well as assist employers with training and job recruitment. The types of organizations and array of settings making up the workforce development system are quite varied, and include programs operating in the community and in the juvenile corrections system, such as youth development programs, vocational rehabilitation programs, corrections-based career and technical education, diversion programs, high schools, colleges, after-school programs, and job training programs, including those offered through One-Stop Career Centers.

In America there is an expectation that youth will grow up, get an education, develop skills, get a job, become economically self-sufficient and contribute to society. However, for many youth today, there are

enormous challenges to achieving this goal. There is a growing recognition that youth involved in the juvenile corrections system represent one of the most vulnerable populations in our country. For the purposes of this Guide, the youth being focused upon are generally in the age range of 14 to 22, the developmental transition stage of life.

The U.S. Department of Labor’s Office of Disability Employment Policy (ODEP) has recognized the harsh fact that youth with disabilities are overrepresented in the juvenile corrections population, as well as in all other categories of high risk youth. In order to improve the employment outcomes of all youth with disabilities, ODEP acknowledges the importance of assisting professionals involved in workforce development programs to support youth with disabilities in the context of a universal system of service delivery. Another ODEP acknowledgement is the need to promote cross-systems collaboration in order to bring together the needed expertise and resources.

Research and practice suggest, however, that long-term success in helping youth involved in the juvenile justice system, including those with

Long-term success in helping youth involved in the juvenile justice system, including those with disabilities, prepare for economic self-sufficiency is possible when strategies are used that address the developmental needs of these youth: a solid academic foundation, life skills, and good workplace attitudes and attributes.



disabilities, prepare for economic self-sufficiency is possible when strategies are used that address the developmental needs of these youth: a solid academic foundation, life skills, and good workplace attitudes and attributes.

Accordingly, the contextual framework for this Guide is the *Guideposts for Success*, which details what research says all youth, including youth with disabilities, need from a developmental perspective to successfully transition to adulthood. Within this Guide, the *Guideposts for Success* are extended and focus on their application in the context of meeting the needs of transition-age youth with and without disabilities who have been involved or who are at risk of being involved in the juvenile justice system. NCWD/Youth and ODEP have engaged in similar efforts previously with regard to meeting the specific needs of youth with mental health needs as well as youth with and without disabilities in the foster care system (Available at: http://www.ncwdyouth.info/assets/guides/foster_care/Foster_Care_Guide_complete.pdf).

The *Guideposts for Success for Youth Involved in the Juvenile Corrections System (the Juvenile Justice Guideposts)*, included in this Guide, are designed to encourage collaborative efforts across the nation between juvenile justice, education, workforce development, mental health, and other community institutions, as well as youth and families. Although research concerning youth at-risk and involved in the juvenile justice system is limited, the emerging promising practices identified and recommendations contained in the guide are derived from the research available, as well as a review of current Federal law. Additionally, the report and recommendations were

extensively reviewed by a panel of experts from such fields as juvenile justice and delinquency prevention, disability employment, labor, rehabilitative services, charter schools, education and special education, law, research and professional development, vocational and adult education, parent and youth advocacy, and various foundations.

By addressing the specific developmental needs of this population, caring adults (e.g., policymakers, program administrators, judges, court personnel, secure care staff, corrections professionals, youth service practitioners, parents, family members) can substantially increase the likelihood that former youth offenders, with and without disabilities, will complete their education, become employed, and ultimately become productive members of society.

The Guide:

- provides well-researched and documented facts and statistics about youth involved in the juvenile corrections system;
- offers evidence-based research about the juvenile corrections system and the youth involved in it;
- provides a template based upon the Guideposts for Success to assist states and communities in the design and implementation of programs to meet the multiple challenges of this population;
- points out areas requiring further attention on the part of policymakers and service providers;
- identifies promising practices for practitioners and policymakers; and,
- identifies resources and tools to assist cross-system collaborative efforts.

(Page intentionally left blank.)

CHAPTER 1

Introduction

This Chapter provides a substantive overview of facts, statistics, and characteristics of youth involved in the juvenile corrections system. There is an overrepresentation of youth with disabilities and, specifically, youth with emotional disturbance in juvenile corrections. As such, a majority of the discussion that follows focuses on these youth. The intent is to help professionals involved with a wide array of youth-serving organizations acquire an understanding of youth in the juvenile corrections system, how and why they become involved in the juvenile corrections system, and some of the critical challenges that stand in the way of their successful transition into adulthood and economic self-sufficiency.

Professionals who serve youth involved in the juvenile justice system are faced with the daunting task of preparing these adolescents for successful integration into the community, school, and the workforce. In a year, approximately 144,000 delinquency cases result in youth being committed to out-of-home placement.¹ This represents an increase of 44 percent over the last 20 years. On average across states, over one third of these youth

are provided special education services due to the existence of a disability and the percentage ranges from 9.1 percent to 77.5 percent.² While rates of students with disabilities in corrections are hindered by inadequate child-find procedures, it is generally believed that the rates greatly exceed the typical 9.1 percent of youth with disabilities (ages 6-17) in public schools.³ Primarily, youth in juvenile corrections are classified as having an emotional disturbance (ED) or learning disabilities (LD). Furthermore, the success of these youth is often inhibited by one or more mental health disabilities and difficulties with drug abuse.⁴

Unfortunately, youth with and without disabilities involved in juvenile corrections typically have poor outcomes related to reintegration and recidivism. The financial and social costs of continued and repeated confinement of young adults are tremendous. For example, it is estimated that costs to society of a person who begins criminal activity as a youth and continues throughout life could reach \$1.5 million.⁵ These youth commonly exit the juvenile correctional facility and frequently have difficulties returning to school, obtaining full-time



In light of the impact that disability, drug abuse, mental health needs, and a history of abuse and/or neglect can have on an individual, it is essential that adults with responsibility for these youth have the knowledge, skills, and abilities, as well as the professional and political will, to do what is necessary to address their unique needs.

employment, and integrating into their communities.⁶

To address the significant concerns related to youth with disabilities at-risk and involved with the juvenile correctional system, this guide addresses critical background information concerning youth, the affects of youth characteristics, recommendations for policy and practice, and examples of promising approaches and programs. Specifically, the remainder of Chapter 1 focuses on youth characteristics that negatively affect their academic and social success, as well as their ability to integrate upon release from juvenile corrections. Chapter 2 reviews the stages of youth involvement with the juvenile justice system and highlights important considerations related to student characteristics at each stage. Chapter 3 describes the *Guideposts for Success for Transition Age Youth Involved in the Juvenile Corrections System (Juvenile Justice Guideposts)*. Chapter 4 delineates promising approaches to serving youth with disabilities at-risk and involved in the juvenile justice system. Chapter 5 includes a discussion on key policy considerations. Additionally, the Appendix includes specific promising programs that provide important support to youth.

Characteristics of Youth with Disabilities

An understanding of the unique characteristics of youth involved in the juvenile justice system is critical to serving these students. It is also important

to developing more effective policies, programs, and service systems.⁷ Issues that may affect youth include classification as requiring special education, having mental health needs, and experiencing abuse, and neglect.

Having a classification such as ED or LD can have significant implications for youth in juvenile corrections. Students with disabilities typically have great difficulty at each stage of involvement with the juvenile justice system. For example, youth with disabilities might confess quickly and have difficulties communicating with their lawyers.⁸ These youth are also more likely to plead guilty and be committed. Moreover, they are less likely to have their sentences appealed, to be placed on probation, or to be placed in diversionary programs. In addition, they frequently serve longer sentences than youth without disabilities convicted of the same crimes.⁹

In light of the impact that disability, drug abuse, mental health needs, and a history of abuse and/or neglect can have on an individual, it is essential that adults with responsibility for these youth (e.g., families, police, judges, attorneys, secure care professionals, educators and administrators, social service professionals, and other advocates) have the knowledge, skills, and abilities, as well as the professional and political will, to do what is necessary to address their unique needs. Balanced consideration of community protection, offender

accountability, and competency development are key to creating a coordinated system that truly operates in both the best interest of the child and the community.¹⁰

Disability Status, Educational Outcomes, and Juvenile Corrections

As noted, students with disabilities are overrepresented in the juvenile justice system.

- Youth with ED comprise over 47.4 percent of students with disabilities in secure care,¹¹ while within public schools they account for only about eight percent of students with disabilities.¹²
- Students with LD are also overrepresented in the juvenile justice system and account for 38.6 percent of students with disabilities in these settings.¹³
- Of youth with disabilities in secure care, there are almost five percent with mental retardation,¹⁴ 2.9 percent with “other health impairments,” and another 0.8 percent with multiple disabilities.¹⁵

There may also be a small number of youth with physical disabilities; however, there is no national information on the percentage of these students.

All students with disabilities ages 3 to 21, including those involved in the juvenile justice system, are entitled to a free, appropriate public education and related services (there are limited exceptions for youth over the age of 18 in adult facilities without an active Individualized Education Program). However, the current discussion will focus primarily on youth with ED for three reasons:

- Youth with ED represent the category of youth with disabilities most highly represented in the juvenile justice system;
- Youth with ED experience the most school and post-school failure; and,
- Youth with ED may have numerous

complications that require attention, including issues of co-occurring behavioral and academic problems, mental health issues, drug abuse, and difficulties with post-school integration into the workforce.

While in school, youth with ED have poor academic and social outcomes.¹⁶ These students commonly earn lower grades and fail more courses than youth in any other disability category.¹⁷ Also, 58 percent of students with ED perform below grade level in reading and 93 percent are below grade level in math.¹⁸ For youth with ED, having a lack of skills in reading and math is a strong predictor of dropping out.¹⁹ Moreover, youth with ED commonly have significant communication-skills deficits in both expressive and receptive language that may affect both academic and social success.²⁰

Youth with ED also experience a high degree of disciplinary actions during the time they are in school.²¹

- Almost three quarters of secondary students with ED have been suspended or expelled: a rate four times that of students with other disabilities and non-disabled peers.²²
- While in school, these youth are also 13.3 times more likely to be arrested than youth without disabilities.²³
- About 20 percent of students with ED are arrested, in detention, or on probation before exiting school.²⁴
- In one study of youth with ED from residential schools over seven years, 43.3 percent were arrested at least once and 34.4% were adjudicated.²⁵

Educational failure and unemployment are both related to law-violating behavior.²⁶

Sixty-four and six-tenths (64.6) percent of youth with ED exit school without a regular diploma.²⁷ Students with disabilities who drop out of school are 5.9 times more likely to be arrested.²⁸ Further, about 70 percent of youth with ED will also be arrested within three years of exiting school.²⁹

Unfortunately, more than one-third of students who drop out are unemployed.³⁰ Youth formerly labeled ED commonly have longer delays before obtaining employment, have lower employment rates, earn less than others with and without disabilities, and are more likely to be employed part-time, rather than full-time.³¹

In addition to an increase in involvement with the juvenile justice system, students with and without disabilities who drop out of school experience other significant difficulties in terms of their long-term financial, social, and psychological well being.³² Three times the number of youth without a high school diploma live in poverty than youth with a high school diploma.³³ Youth who drop out of school are 72 percent more likely to be unemployed and earn 27 percent less than high school graduates.³⁴ In addition, every student dropout costs the government over \$200,000 in public spending.³⁵

Disability Status, Mental Health, and Juvenile Corrections

Students with ED frequently face a myriad of problems which may be associated with their overrepresentation in the juvenile justice system. In public schools, more students with ED are depressed and anxious than students without disabilities.³⁶ Youth with disabilities, such as ED, have increased problems with drug abuse, lack of social skills, mental disorders, and abuse and neglect. Adolescents with ED are also lower functioning on measures of social skills, including the areas of self-control, assertion, and cooperation.³⁷ Students with disabilities who scored low on social skills assessments were 2.3 times as likely to be arrested.³⁸ Given the link between the ED classification and youth mental illness, it is also noteworthy that youth with mental disorders may be more likely to be arrested due to their common deficiencies in interpersonal problem solving skills and difficulties with impulsivity.³⁹

There is also some evidence that youth with ED experience higher incidence of abuse and neglect. In a national study, teachers estimated that 38 percent

of students labeled emotionally or behaviorally disturbed (EBD) were physically or sexually abused, 41 percent were neglected, and 51 percent were emotionally abused.⁴⁰ Moreover, in another study over half of students with serious emotional disturbance had experienced abuse.⁴¹ Children with a history of abuse or neglect are six to seven times more likely to be arrested for delinquent acts than youth in the general population.⁴²

Another mental health issue for youth with disabilities is drug abuse. It is reported that 45 percent of youth with ED in public schools are provided substance abuse services.⁴³ Given the high percentage of youth with ED in juvenile corrections, it is not surprising that, of confined youth, about half of males and almost half of females have a substance use disorder.⁴⁴

Researchers⁴⁵ have also identified other important mental health-related characteristics of detained youth:

- Excluding conduct disorder, because of its relative frequency in detained youth, nearly two-thirds of males and three-fourths of females met diagnostic criteria for one or more psychiatric disorders.
- At least 11 percent of detained youth were identified as having posttraumatic stress disorder (PTSD).⁴⁶ Taking into account the screening tool used and depth of questioning, this percentage may be a conservative figure.
- The high percentage of youth with PTSD should be considered in light of the more than 90 percent of youth in the study who experienced some type of traumatic event (i.e., witnessed someone hurt very badly or killed).⁴⁷

In other words, youth with disabilities involved with the juvenile justice system may be faced with a complex combination of incarceration, academic difficulties, and mental disorders.

The link between youth with disabilities and mental health needs in juvenile corrections has not been

Youth with disabilities, such as ED, have increased problems with drug abuse, lack of social skills, mental disorders, and abuse and neglect.



extensively studied. This may be, in part, due to the differing definitions of emotional disturbance between the fields of psychiatry and education. For example, while the IDEA definition of ED excludes youth with social maladjustment, social maladjustment is commonly equated with oppositional defiant disorder and conduct disorder in the psychiatry field. In juvenile corrections, over half of youth have oppositional defiant disorder or conduct disorder.⁴⁸

One condition, prevalent in juvenile corrections, which is recognized in both special education and psychiatry, is attention deficit hyperactivity disorder (ADHD). Due to inadequate child-find procedures and depending on the characteristics of the study sample, the percentage of youth with ADHD in juvenile corrections ranges from 2.9 percent to 16 percent, while 7.5 percent in regular schools are classified under Other Health Impairments (in which ADHD is included).⁴⁹ Despite the wide range, it is commonly held that there is a serious under-identification of youth with disabilities in juvenile corrections due to inadequate child-find procedures and it could be asserted that the higher percentage more closely represents the current situation. Having ADHD, being male, and being rejected by one's peers are typical characteristics of persistently aggressive offenders.⁵⁰

Overrepresentation Theories

There are several theories that attempt to explain why youth with disabilities are overrepresented in the juvenile justice system. Although a complete description is beyond the scope of this Guide and additional research is necessary, there are three theories to consider that may inform approaches to prevention and treatment of youth.⁵¹

First, the *susceptibility theory* holds that student characteristics (e.g., disability, poor self-esteem, desire for immediate gratification) lead to juvenile delinquency. Next, the *school failure model* is based on the concept that school failure results in student detachment from school and subsequent delinquency. Third, in the *differential treatment model*, it is maintained that youth with disabilities are dealt with in a more punitive manner within schools, juvenile justice, and corrections.

Certainly, each model explains some of the difficulties experienced by youth with disabilities. Regardless of the theoretical orientation, it is clear that youth with disabilities experience ongoing difficulties throughout the juvenile justice process. These difficulties, if not adequately recognized and addressed, will likely inhibit youth engagement in school, the community, and workforce.

(Page intentionally left blank.)

CHAPTER 2

Understanding the Juvenile Justice System — Stages of Youth Involvement

This Chapter provides a step-by-step description of the juvenile corrections system (see Figure 1), the characteristics that put youth with disabilities at a disadvantage during each stage, and the key decision makers whose understanding of youth disability can have a profound impact on youth involvement with the system. Professionals from a number of systems and organizations (e.g. education, youth development, juvenile justice, mental health) must have an understanding of the characteristics that put youth with disabilities at a disadvantage during each stage of involvement in the juvenile justice system. The need to share information and for professionals to be knowledgeable presents both a challenge and a tremendous opportunity to effectively intervene. Collaboration across systems and between organizations is the underlying theme of discussion for youth with and without disabilities involved in the juvenile justice system. Opportunities for collaboration existing at each stage of the juvenile justice process are described in the following section of this chapter.

Prevention/Early Intervention

As previously noted, issues such as school failure, abuse and neglect, mental health needs, and language difficulties put youth with ED at an increased risk for being arrested. Also, given the relatively high percentage of youth with co-occurring ED and LD, it is noteworthy that youth with LD are more than three times as likely as non-disabled peers to become gang members.⁵² The difficulties experienced by youth with disabilities and the high risk for arrest necessitate collaboration across child welfare, social service agencies, mental health, special education, workforce development, and community programs targeting youth with high incidence disabilities such as ED.

Prior to arrest, it is critical that these professionals coordinate services and work with families. Early identification and support of at-risk youth can help lower the odds of their being incarcerated and can assist the youth, their families, and ultimately their communities. For example, there is evidence that preventive mental health programs in schools may help in preventing youth with co-occurring ED and

mental illness from becoming involved with law enforcement.⁵³

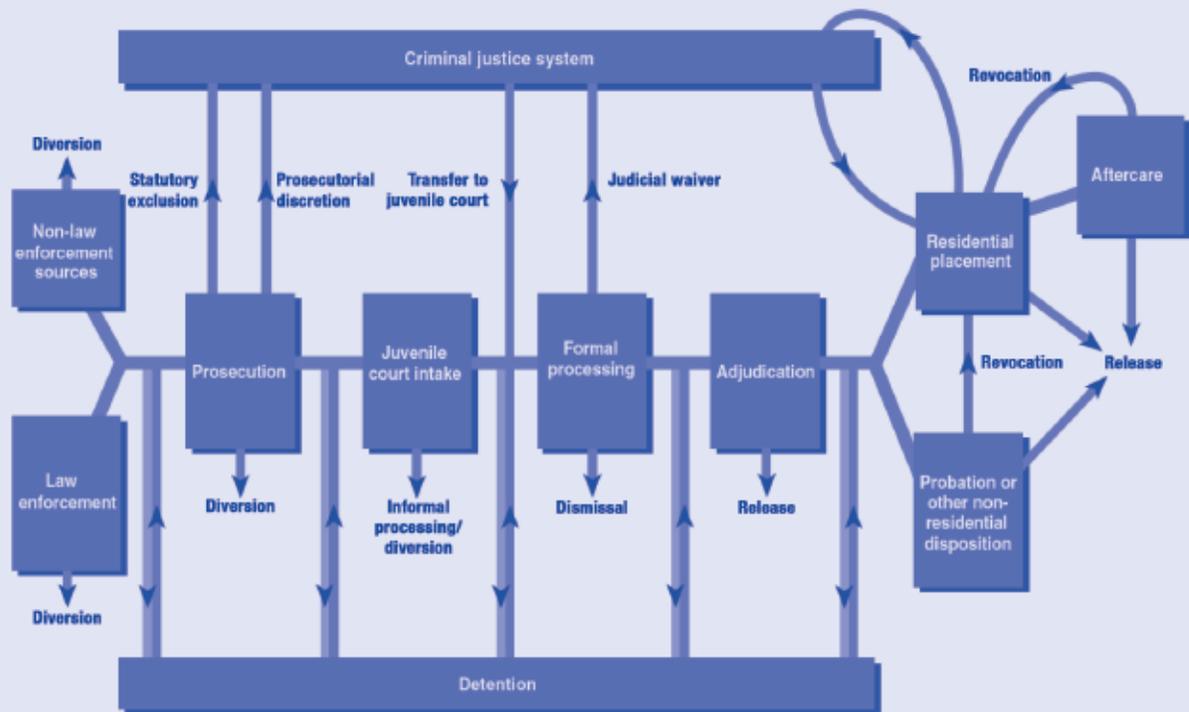
Unfortunately, however, student mental health supports in schools are commonly inadequate and tend to be ad hoc and fragmented.⁵⁴ The Center for Mental Health in Schools has identified system changes needed to improve mental health services in public schools. First, support must exist for the development of prototypes for effectively addressing the mental health needs of youth in schools. Second, schools should strategically plan how the changes will be accomplished and validated. Regardless of the setting, it is clear that, “much greater attention should be given to ensuring that significant resources are used to systematically monitor implementation and delivery of treatment.”⁵⁵

Initial Problem Behavior: Law Enforcement or Non-Law Enforcement Involvement

From the onset of involvement with law enforcement, students with disabilities are often at a significant disadvantage. For example, youth involved in the juvenile justice system score significantly below non-delinquents on measures of language skills.⁵⁶ In addition, a high percentage of youth with ED have language disorders.⁵⁷ In fact, approximately one-third of adolescents with ED have difficulty understanding what others say to them.⁵⁸ Because youth with disabilities and, specifically, youth with ED are overrepresented in the juvenile justice system, the impact of potential language deficits should be considered at each stage of the juvenile justice process. These deficits can have a significant impact on the youths’

Figure 1

What are the stages of delinquency case processing in the juvenile justice system?



Note: This chart gives a simplified view of caseflow through the juvenile justice system. Procedures vary by jurisdiction.

Note: From H. N. Snyder and M. Sickmund, *Juvenile Offenders and Victims: 1999 National Report* (p. 105). Copyright by U.S. Department of Justice, Office of Justice Programs, Office of Juvenile Justice and Delinquency Prevention, Pittsburgh, PA. Used with permission.

understanding of their rights at arrest, while in detention, in court, and while in confinement, both in terms of how they communicate with officials and their ability to express themselves in a socially appropriate manner.

Specifically, when a youth with a disability is first questioned or arrested by a police officer, problems may arise. For example, the officer may assume the youth understands the questions being asked, can process the information, and understands the rights read to him/her.⁵⁹ In fact, many youth have difficulty understanding their Miranda rights and have misconceptions concerning their right to an attorney.⁶⁰

Generally, law enforcement agencies make the decision whether to send a matter into the juvenile justice system or divert the youth to alternative programs.⁶¹ Typically, this is based on conversations with the youth, parents, victim, and also the youth's prior involvement with the juvenile justice system.⁶² At this stage, it is important that consideration also be given to whether the individual has a disability, the possible effects of that disability on the individual's behavior, and the likelihood that the individual would benefit from participation in an alternative program.

Unfortunately, however, youth with disabilities may not be considered for alternative programs. There is a growing trend toward the criminalization of behavior for youth with ED in schools and for youth with mental health needs.⁶³ In schools, for example, because zero tolerance policies have removed discretion from principals, the use of non-law enforcement options when dealing with student problem behavior has been limited.⁶⁴

Although inappropriate, detention and incarceration in juvenile corrections may be seen as a way of providing mental health services that may be otherwise unavailable.⁶⁵ Researchers noted that two-thirds of juvenile detention facilities surveyed reported that youth with mental health needs were held even though there were no charges filed against them, but merely because they were awaiting a

mental health placement.⁶⁶ Additionally, of the facilities who detained youth awaiting mental health services, 48 percent reported that there were suicide attempts among those youth.⁶⁷ In another study, 36 percent of parents noted that their child was placed in the juvenile justice system because the mental health services needed were unavailable.⁶⁸

The use of specially trained officers, collaboration with mental health professionals within the police department, and collaboration between the police and a mental health crisis team are important strategies for making valid decisions regarding referral of youth with ED. In addition, police may find that parents can provide important information when a youth is arrested. "A parent knows his or her own child best and may be able to assist the officer by providing information about the youth's mental health needs, symptoms, behaviors, medications, side effects, and the youth's interests and strengths. Additionally, the parent may have previously experienced similar situations with the youth and may be able to advise the officer about approaches that could defuse the situation, or conversely, provoke a negative or even hostile response."⁶⁹ Although professionals may have difficulties engaging parents, research has shown clear benefits in involving them at all points in the process from initial contact, to juvenile involvement in diversion programs or placement in secure care, to services provided following the youth's exit from secure care.⁷⁰

Diversion

Diversion can be defined as, "an attempt to divert, or channel out, youthful offenders from the juvenile justice system."⁷¹ "The basis of the diversion argument is that courts may inadvertently stigmatize some youth for having committed relatively petty acts that might best be handled outside the formal system."⁷² Diversion is an option from the initial point of contact with law enforcement, but there are several opportunities in which to divert youth away from the juvenile or criminal justice systems throughout the processing of a delinquency case (see Figure 1).



From the onset of involvement with law enforcement, students with disabilities are often at a significant disadvantage.

Alternatives to out-of-home placement (e.g., secure care facilities) are important to consider for nonviolent youthful offenders, those with a small likelihood of reoffending, and those likely to attend mandatory meetings. It is particularly critical to pursue such alternatives for youth classified as special education and those with identified mental health needs. Cost studies indicate that there is considerable savings when youth are served in the community versus when they are confined.⁷³ For youth with ED and/or other mental health needs in particular, “incarceration presents potential risks including victimization, self-injury, and suicide.”⁷⁴

Providing appropriate diversion requires an understanding of youth characteristics, as well as collaboration between police, intake officers, attorneys, judges, parents, child welfare, mental health, youth development, and social service agencies.⁷⁵ Maintaining youth in the community with appropriate supports (e.g., family and individual counseling, school-based interventions, behavioral and social skills interventions) will allow the youth to continue to work toward post-school self-sufficiency. In addition, a 2000 review of research concerning the characteristics of effective treatments for youth in the juvenile justice system revealed that community-based treatment and programs are generally more effective than incarceration or residential placement in reducing recidivism, even for serious and violent juvenile offenders.⁷⁶

Unfortunately, however, youth may be incarcerated simply because of a lack of available community-based and mental health services.⁷⁷ Accordingly, it is imperative that practitioners and community members voice their needs and collaborate with

policymakers to ensure that adequate community-based programs are available that can provide appropriate sanctions for youth, while avoiding the negative outcomes associated with imprisonment.

Prosecution

At the prosecution stage, the decision can be made to divert the youth from the juvenile justice system or continue to juvenile court intake. Additionally, youth may be waived to the criminal justice system via statutory discretion or prosecutorial discretion.⁷⁸

Between 1992 and 1997, laws were passed in 45 states that made it easier to transfer juvenile cases to criminal court.⁷⁹ The National Council of Juvenile and Family Court Judges, however, has taken the position that a judge should make decisions regarding juvenile waiver to the criminal justice system and that “prosecutorial waivers, mandatory transfers, and automatic exclusions are not recommended.”⁸⁰

Intake and Detention

Sickmund summarizes the process of intake and detention.⁸¹ Court intake is typically done by an intake officer and is designed to decide, “to dismiss the case, to handle the matter informally, or to request formal intervention by the juvenile court.” In cases to be handled by the juvenile court, a delinquency petition may be filed to adjudicate or judge the youth delinquent. At this stage, the intake personnel may also file, “a waiver hearing to transfer the case to criminal court.”

Youth with disabilities may have difficulties understanding questions at intake and inadvertently

provide inaccurate information.⁸² While youth with disabilities are detained, they are also more likely to have behavioral violations and be placed in segregation.⁸³ Also, youth with disabilities are detained more often than youth without disabilities and they may be detained for longer periods of time while awaiting assessments or specialized placements.⁸⁴ As noted, ongoing collaboration and communication among special educators, custody staff, mental health professionals, and parents during intake and confinement can help minimize these issues and can assist the youth by ensuring that appropriate supports are in place.

Formal Processing and Judicial Waiver

During formal processing, a youth may be held in a secure juvenile detention facility. Following this, a detention hearing is held and the judge may decide that a youth requires further detention or the case may be dismissed. “The juvenile court judge also has the authority in some instances to waive juvenile court jurisdiction and transfer the case to criminal court.”⁸⁵ The most recent statistics indicate that in a year, approximately 1,500 juvenile delinquency cases are waived from juvenile court to criminal court.⁸⁶

To assist judges in making such decisions, additional models are necessary that ensure identification of the most serious offenders and eliminate the tendency toward harsher sentencing for minority youth.⁸⁷ When juvenile cases are transferred to criminal court and youth are convicted, they are more likely to recidivate and learn new ways of offending.⁸⁸ More disturbing are reports that compared to youth in juvenile detention, youth in adult facilities are five times more likely to report being a victim of rape.⁸⁹ Additionally, “youth in adult facilities are twice as likely to be beaten by staff, 50 percent more likely to be attacked with a weapon, and almost eight times more likely to commit suicide.”⁹⁰ Consistent with these statistics, a recent review of research from The Task Force on Community Preventative Services has concluded that transferring youth to criminal court was harmful to youth and there was insufficient evidence of preventative effects for youth violence.⁹¹

Adjudication and Disposition

Adjudication is the formal procedure where a judge may or may not find a youth delinquent. If a youth is not adjudicated delinquent, he/she is released. However, if a youth is adjudicated delinquent, a disposition plan is developed.⁹² At the dispositional hearing, recommendations are presented to the judge. At this point, the judge may order residential placement or other combinations of programs, including supervised probations, drug or other counseling, restitution, and other configurations of confinement (e.g., weekends).⁹³

Youth with disabilities characteristically have difficulties at adjudicatory hearings. For example, they may appear before a judge without understanding the proceedings and due to a lack of social skills and/or language issues may, “appear hostile, impulsive, unconcerned, or may respond inappropriately to questions.”⁹⁴

Unfortunately, many court jurisdictions lack the time and expertise to consider youth development and disability to a meaningful degree.⁹⁵ An understanding of the impact that disability can play in terms of the youth’s perception, demeanor, and actions are necessary to making appropriate decisions concerning youth adjudication and disposition. Adults who have an understanding of disabilities and mental disorders must be available to advocate for the needs of youth prior to and during hearings. Additionally, adults (e.g. parents, teachers) who have an understanding of the unique needs of a youth with a disability must also have opportunities to provide input prior to and during hearings. As such, there is a clear justification for a comprehensive multi-disciplinary approach to decision-making throughout the juvenile justice process.⁹⁶

Moreover, there is a clear need for juvenile delinquency court judge leadership and promotion of system collaboration.⁹⁷ The National Council of Juvenile and Family Court Judges has indicated that a juvenile delinquency court judge and delinquency system staff should gather information from schools and parents, and engage these and other key

individuals and organizations (e.g., mental health, substance abuse) in case planning.⁹⁸ In addition, due to the high percentage of youth with ED in the juvenile justice system, it is recommended that mental health workers provide input at dispositional and placement hearings.⁹⁹

The effectiveness of including parents in post-adjudicatory interventions should be highlighted. First time youthful offenders and families who participated in a multiple family intervention with other families had significantly lower recidivism rates than youth on probation.¹⁰⁰ The intervention included:

- altering patterns of conflict within the family;
- increasing problem-solving skills;
- promoting hope for the future;
- improving parental supervision;
- improving school functioning;
- increasing family cohesion; and,
- increasing community involvement.¹⁰¹

This study underscores the critical importance of including families in treatment of youthful offenders.

Alternative Sentencing

The issue of equity when considering youth placement and sentencing is an important consideration. Documentation exists that, when controlling for issues such as offense, minority youth are held more often than Caucasian youth during detainment and placed in secure care facilities.¹⁰² Additionally, minority youth are overrepresented in special education.¹⁰³ As such, it is clear that minority youth and youth with disabilities are provided less access to alternative sentencing.

In addition to placement in secure care, release, or transfer to criminal court, alternative sentencing may include probation, restitution, and community service. Exploring and providing the most appropriate placement option requires the

involvement of key youth advocates including educators, child welfare, mental health, youth development, social service agencies, and parents. Familial involvement in the decision-making process for diversion is vital to ensure youth are appropriately placed and able to continue progress toward independence and self-sufficiency as adults.

Confinement

If youth with disabilities are adjudicated delinquent and placed in a secure care facility, problems often continue. These youth are more likely to be placed in segregation or disciplinary confinement for behavioral violations.¹⁰⁴ This can be particularly problematic for youth with mental health problems, who spend 20.4 percent of their time in disciplinary confinement as compared to 12.3 percent for the youth in special education and 5.6 percent for youth not in special education.¹⁰⁵ While in confinement, they typically do not receive educational services. In addition, very few correctional facilities have formal vocational education programs that provide offenders with marketable skills and assistance in employment planning.¹⁰⁶ Even when such vocational education programs do exist, they often exclude youth with disabilities because they do not have a high school diploma, adequate reading skills, or other prerequisite skills.¹⁰⁷

Throughout youth confinement, key support personnel must continue to collaborate and communicate to ensure that the youth's education and mental health needs are considered, their rights are maintained, and that they continue to gain skills they will need in the workplace.

Moving Forward

The chapters that follow provide more in-depth information about meeting the needs of youth, with and without disabilities, in all stages of the juvenile justice system. Specifically, strategies for meeting youth needs under the *Juvenile Justice Guideposts* are discussed, as well as a description of promising practices and policy recommendations.

CHAPTER 3

Meeting the Needs of Youth in Juvenile Corrections

This Chapter describes the *Guideposts for Success for Transition Age Youth Involved in the Juvenile Corrections System (Juvenile Justice Guideposts)*. The Guidepost is a framework to assist the multiple organizations that need to be involved to meet the needs and improve the transition outcomes of youth involved with the juvenile corrections system and to create the necessary community webs of support.

The *Juvenile Justice Guideposts* highlight specific experiences, supports, and services that are relevant to improving transition outcomes for youth with and without disabilities involved or at risk of becoming involved in the juvenile justice system within the framework of the *Guideposts for Success*. An increased understanding of the unique needs of this particular population of young people, combined with an enhanced level of coordination among the court and corrections systems, education, workforce, child welfare systems, and mental health systems can help decrease recidivism and increase the likelihood that these youth will become productive adult members of our society. This coordination is also a necessary precursor for the leveraging

(“blending” or “braiding”) of resources among these partners.

The Guideposts for Success

Built on 30 years of research and experience, NCWD/Youth and ODEP created the *Guideposts for Success*, a comprehensive framework that identifies what all youth, including youth with disabilities, need to succeed during the critical transition years. An extensive literature review of research, demonstration projects, and effective practices covering a wide range of programs and services — including lessons from youth development, quality education, workforce development, and the child welfare system — revealed five core commonalities across disciplines, programs, and institutional settings. The review pointed out that all youth, particularly at-risk youth (e.g., youth with mental health needs, other youth with disabilities), achieve better outcomes when they have access to:

- school-based preparatory experiences;
- career-preparation and work-based experiences;



The Guidepost is a framework to assist the multiple organizations that need to be involved to meet the needs and improve the transition outcomes of youth involved with the juvenile corrections system and to create the necessary community webs of support.

- youth development and leadership opportunities;
- connecting activities (support and community services);
- family involvement and supports.

This Guide focuses on application of the *Guideposts for Success* in the context of meeting the needs of transition-aged youth with and without disabilities who have been involved in the juvenile justice system. Regardless of the presence of a disability, these youth face many difficulties inherent in involvement in the juvenile justice system. For example, their ability to transition successfully may be hampered by (a) having been separated from their family while in a secure care facility, (b) stigma associated with having been detained when they re-enter their community, and (c) a lack of appropriate supports prior to, during, and after they are released.

There is widespread support for the idea that effective reintegration of youth from juvenile corrections to the community, school, and/or workforce requires highly individualized education, treatment, and transition planning from the moment the youth is committed, as well as regular committee review of these plans.¹⁰⁸ Key preparations are needed for a successful transition from juvenile corrections to the community, school, and workforce, including:

- providing rigorous standards-based instruction to support youth obtaining a high school diploma, vocational certificate, or GED;
- providing the information necessary to prepare youth for a career and to participate in supervised work experience;

- preparing the young person to meet upcoming challenges via activities and experiences which help them gain personal development skills and competencies;
- connecting the young person to programs, services, activities, and supports that will eventually help them gain access to chosen post-release and post-school options; and,
- maintaining parental and/or caretaker involvement in the youth's life, education, and training.

The *Juvenile Justice Guideposts* provides a roadmap for guiding this effort. By utilizing a strength-based approach to address the specific developmental needs of this population, caring adults (e.g., policymakers, program administrators, judges, court personnel, secure care staff, corrections professionals, youth service practitioners, parents, family members) can substantially increase the likelihood that former youth offenders will ultimately become productive contributing members of society. Although this framework for success has not yet been implemented in any known community in its entirety, key components are emerging in an array of communities around the country.

Guidepost 1 — School-Based Preparatory Experiences

At every stage in the juvenile justice process, youth need to participate in educational programs grounded in content standards, with clear performance expectations and graduation options based upon meaningful, accurate, and relevant indicators of student learning and skills. To achieve this, secure care facilities must have a sufficient

number of highly qualified general and special education teachers who are compensated at the same level as teachers in local public schools. The professionals should also share an understanding of state assessments, and of effective instructional approaches needed to provide students with disabilities the meaningful opportunities to benefit from access to the general education curriculum. Collaboration with the local school district and state department of education is also necessary to ensure that the curriculum, materials, and instruction align with local and state standards and assessments. Moreover, Carnegie units earned by students should be transferable to public schools. Holding juvenile correctional schools accountable for providing a free and appropriate public education and meeting the adequate yearly progress standards of the No Child Left Behind Act are also important components for achieving educational success.

To assist youth in secure care, input is also necessary from security professionals. This cooperation will allow youth who are confined, including those with disabilities, to continue to pursue their education. For example, collaboratively developed facility-wide behavioral plans should be implemented to facilitate educational success; particular consideration should be given to whether behaviors reflect a manifestation of youth disability.

For those youth that are involved with juvenile justice, but not in secure care, collaboration and planning among caring adults (e.g., judges, teachers, administrators, parents, social service agencies, attorneys, police, mental health professionals) can help to ensure that student emotional and behavioral needs are met. Officers of the court are responsible for monitoring the status of the youth and ensuring compliance with court-ordered mandates, including participation in education and vocational training.

Guidepost 2 — Career Preparation and Work-Based Experiences

In order for youth to form and develop aspirations and make informed choices about careers, they must be afforded multiple opportunities to engage in

career preparation and work-based learning experiences. Participation in comprehensive vocational programming can serve as an approach to prevention and diversion from the juvenile justice system as well as a positive youth development strategy in the event that a youth is placed in a secure facility. There is evidence that, particularly for youth with ED or LD, school-based vocational education contributes to higher rates of post-school vocational training and employment.¹⁰⁹

Development and implementation of an appropriate career and technical education program within a juvenile correctional facility requires consideration of educational, vocational, and security issues. Collaboration is therefore key to providing a safe program that promotes meaningful vocational training and experiences that prepare youth with the types of skills they will need when they re-enter the community.

Career preparation and work-based experiences can be provided during the school day or after school, and may take place both on and off facility grounds through collaborations between corrections professionals, local community organizations, educators, and employers. Important strategies to having the youth successfully re-engage in his/her education include access to a graduated release program that allows the youth to leave the facility during the day and begin to transition back to school on a part-time basis, and ensuring the availability of tutorial services and enrichment programs. In the event that a partial release is not possible, technology can be used to facilitate virtual career exploration and simulation of the work environment can be used to teach job skills.

Broadly speaking, career and technical education programs must be comprehensive, and aligned with local school, local education agency, and state education policies, as well as community needs. In addition, programs should provide for assessment of student learning, as well as formalized progress toward a certificate or license in a field of study. Moreover, career and technical education programs should allow for the development of career pathways

that include course work, work experience, and post-secondary and career options. Any career and technical education provided should include skill training in an applied setting. Skills that may affect employability such as anger management, accepting feedback and following directions, should be a focus of youth training and experience. In addition, an advocate/job development specialist can assist in making the youth more employable and provide or assist the youth in obtaining needed training about accessing resources after release. Youth should also be provided guidance to address such issues as:

- how to respond to employers about previous involvement with juvenile justice;
- how to get juvenile records sealed and expunged; and,
- how to get such items as a social security card, financial assistance (e.g., health care, housing assistance, food assistance).

Collaboration between mental health services, juvenile correctional school professionals, youth service practitioners, and secure care staff will provide opportunities for youth to learn work-related skills (e.g., problem solving, social skills). In addition, youth should be provided opportunities to apply skills to activities in the living units, school at the facility, and supervised work experiences. Coordination among professionals is a key component of promoting generalization of skills.¹¹⁰

Guidepost 3 — Youth Development and Leadership

Youth development is a process that prepares young people to meet the challenges of adolescence and adulthood through a coordinated, progressive series of activities and experiences. However, youth development may be complicated by adolescent risk behavior that is characterized by short-sighted decision making, poor impulse control, and vulnerability to peer pressure.¹¹¹ Adolescents may make immature judgments and decisions that are inadvertently harmful to themselves or others.¹¹² Concerns with decision making are even more

pronounced for youth involved in the juvenile justice and particularly, youth with disabilities involved in the juvenile justice system.

To promote both youth development and leadership, several approaches are beneficial as both prevention of law violating behavior and to promote successful reintegration into school, community, and the workforce. Specifically, youth would benefit from education related to common risk-taking behaviors (e.g., drug use, sexual activity, and law violations) and their consequences. Youth development and leadership may also be promoted via specific instruction and involvement in activities that promote self-empowerment. For example, as an alternative to incarceration, involvement with community service activities and Teen Court (see Chapter 4) may provide a positive intervention.

Youth development and leadership competencies may also be fostered through (a) collaboration between the juvenile justice system and the workforce development youth services system;¹¹³ (b) peer and adult mentoring activities; and, (c) appropriate transition services that promote reengagement into the community, school, and/or workforce. Although some logistical issues remain (e.g., sharing information, differences in goals), instances do exist in which community organizations, workforce development staff, and community members are collaborating and such collaboration shows promise for positively affecting outcomes for youth transitioning from juvenile corrections.¹¹⁴ For example, in Louisiana, “(t)he workforce board hired a probation official to serve as the project’s juvenile justice coordinator.”¹¹⁵ The action contributed to noteworthy improvements in collaborative efforts.

Positive adult-youth and peer-to-peer mentoring activities may assist in establishing important relationships. The responsiveness of adolescents to peers is a factor that supports the use of peer mentors.¹¹⁶ Older youth who have transitioned from the juvenile justice system and made positive changes may be particularly positive role models for youth. Adult role models may also promote positive

youth development. For example, in Arkansas, local employers provided mentoring support to youth in the workplace.¹¹⁷ This example of adult mentoring also highlights the importance of connecting youth to community supports that may promote development of workforce skills. Exposure to role models in a variety of other contexts, such as instruction, training, and activities that promote self-advocacy and conflict resolution may also be effective.

Another key component of youth development concerns the availability of support for youth to effectively transition out of juvenile corrections. A transition support model should include both broad based supports for all youth, as well as highly individualized plans that are developed with meaningful youth input. Particularly for youth with disabilities in a juvenile correctional placement, transition services should include self-determination skills, competitive job placement, flexible educational opportunities, social skills instruction, and immediate service coordination of wrap-around services. An example of a research-based approach to transition that includes comprehensive and ongoing support services is Project Parole SUPPORT (Service Utilization Promoting Positive Outcomes in Rehabilitation and Transition for Incarcerated Adolescents with Disabilities) (see Chapter 4).

Guidepost 4 — Connecting Activities

In addition to ongoing collaboration to prepare youth with and without disabilities for transition while they are committed, collaborative services are also crucial after youth exit.¹¹⁸ However, this collaboration between mental health, education, youth development, parole offenders, and families requires a clear delineation of roles and ongoing communication between organizations and individuals. The collaboration is crucial, given that the educational, social, developmental, and mental health challenges that youth faced throughout their involvement with the juvenile justice system typically continue upon exit. Youth with ED are a particularly vulnerable population during transition. However, support from a number of professionals can have a

significant impact on recidivism, as well as youth participation in school and/or work upon exit.

For example, formerly confined youth who received mental health services in the six months after exiting juvenile corrections were more than twice as likely to be engaged in work or school at that point in time and 12 months after release.¹¹⁹ Being engaged in work or school in the community after one year is particularly important, given that the likelihood of return greatly diminishes if youth haven't been confined again within the first year of release.¹²⁰

On a practical level, youth with disabilities exiting juvenile corrections need assistance to overcome specific obstacles. For example, youth should have the opportunity to return to their home public school, if appropriate. Concerned adults can assist youth on a personal level, but systemic changes can also be made to explicitly promote a youth's return to their home school or other school placement. For example, in Virginia, a comprehensive plan exists to assist youth in the transition from juvenile corrections to public schools and includes a reenrollment plan, reenrollment team and coordinator, procedures for sharing academic and behavioral information, a timeline by which specific procedures are to be completed, and support upon reenrollment (e.g., counseling).¹²¹ To facilitate the transition, it is important that juvenile corrections and public schools collaborate to develop an exit document that the public schools understand and accept as a valid summary of student progress.

There is also a great need for young people to be connected to programs, services, activities, and supports that help them gain access to chosen post-school options.

Guidepost Five — Family Involvement and Supports

Parents are a vital component of any plan to positively affecting youth trajectory toward independence and self-sufficiency. Significant benefits are evident when parents are involved throughout youth involvement with the juvenile

justice system, as well following youth exit from a juvenile correctional facility.¹²² At the initial stages of youth involvement with the juvenile correctional system, parents can provide important information on their child.¹²³ In addition, input from parents will assist in appropriate placement in diversionary programs and student success in the programs. Support is particularly important for youth with disabilities in juvenile corrections, in light of their common issues with emotional problems, drug abuse, and making the transition from confinement to school, community, and workforce. For example, multisystemic therapy relies on interviews with family members to identify problem behaviors and possible causes, as well as youth strengths and the supports available to the youth at home, school, in the community.¹²⁴

Parent involvement is also essential for successful interventions that may be implemented at any stage in the juvenile justice process. Specifically, youth benefit from family-based cognitive-behavior interventions and drug treatment that involves parents on an ongoing basis.¹²⁵ Similarly, familial involvement during youth confinement and upon exit is an important factor for reducing recidivism rates.¹²⁶ However, the complexities of the juvenile justice system and the trauma of youth involvement with this system can be overwhelming to parents. As such, ongoing support is needed to ensure parents are well-informed and can appropriately advocate for their child.

Table 1

Guideposts for Success for Youth Involved in the Juvenile Corrections System

GENERAL NEEDS	SPECIFIC NEEDS
<p>School-Based Preparatory Experiences</p> <p>1</p>	<p>In order to perform at optimal levels in all education settings, all youth need to participate in educational programs grounded in standards, clear performance expectations and graduation exit options based upon meaningful, accurate, and relevant indicators of student learning and skills. These should include:</p> <ul style="list-style-type: none"> • academic programs that are based on clear state standards; • career and technical education programs that are based on professional and industry standards; • curricular and program options based on universal design of school, work, and community-based learning experiences; • learning environments that are small and safe, including extra supports such as tutoring, as necessary; • supports from and by highly qualified staff; • access to an assessment system that includes multiple measures; and, • graduation standards that include options. <p>In addition, youth with disabilities need to:</p> <ul style="list-style-type: none"> • use their individual transition plans to drive their personal instruction, and use strategies to continue the transition process post-schooling; • have access to specific and individual learning accommodations while they are in school; • develop knowledge of reasonable accommodations that they can request and control in educational settings, including assessment accommodations; and, • be supported by highly qualified transitional support staff that may or may not be school staff.

Table 1

Guideposts for Success for Youth Involved in the Juvenile Corrections System

GENERAL NEEDS	SPECIFIC NEEDS
<p>School-Based Preparatory Experiences (contd.)</p>	<p>Youth with and without disabilities involved in the juvenile justice system need:</p> <ul style="list-style-type: none"> • availability of quality educational, vocational, and GED programs; • access to additional academic and behavioral support that relies on research-based techniques; • teachers, administrators, and secure care professionals in juvenile correctional facilities that collaborate to promote youth access to a free and appropriate public education; • conditions in juvenile correctional facilities, and throughout the juvenile justice process that foster enrollment in education, alternative education, special education, vocational, pre-GED and GED programs, and post-secondary education based on youth needs and not on available programs; • placement in housing units and classrooms that take into consideration youth academic and behavioral needs, as well as placement of youth in classes with similar aged youth; • opportunity for youth to earn Carnegie units that transfer to public middle and high schools; • teachers who use content enhancements, strategy instruction, and contextualized learning opportunities to provide access to the general education curriculum; • juvenile correctional schools that are held accountable for providing a free and appropriate public education, meet Adequate Yearly Progress standards, and have a sufficient number of general and special education teachers who are also highly qualified and compensated at the same level as teachers in the local public schools; • educational settings that include universal, secondary, and tertiary proactive approaches to promoting positive student behavior, as well as counseling services and social skills training; • collaboration and planning among teachers, secure care staff, and mental health professionals to ensure that students’ emotional and behavioral needs are met and that appropriate strategies are used when addressing behaviors that are a manifestation of a student’s disability; and, • collaboration among general and special educators within the correctional facility, and with public schools concerning the youth’s education, behavior, and transition plan implementation.
<p>Career Preparation & Work-Based Learning Experiences</p> <p style="font-size: 48pt; font-weight: bold; text-align: center;">2</p>	<p>Career preparation and work-based learning experiences are essential in order to form and develop aspirations and to make informed choices about careers. These experiences can be provided during the school day or through after-school programs and will require collaboration with other organizations. All youth need information on career options, including:</p> <ul style="list-style-type: none"> • career assessments to help identify students’ school and post-school preferences and interests; • structured exposure to postsecondary education and other life-long learning opportunities; • exposure to career opportunities that ultimately lead to a living wage, including information about educational requirements, entry requirements, income and benefits potential, and asset accumulation; and, • training designed to improve job-seeking skills and workplace basic skills (sometimes called “soft skills”).

Table 1

Guideposts for Success for Youth Involved in the Juvenile Corrections System

GENERAL NEEDS	SPECIFIC NEEDS
<p>Career Preparation & Work-Based Learning Experiences (contd.)</p>	<p>In order to identify and attain career goals, youth need to be exposed to a range of experiences, including:</p> <ul style="list-style-type: none"> • opportunities to engage in a range of work-based exploration activities such as site visits and job shadowing; • multiple on-the-job training experiences, including community service (paid or unpaid) that is specifically linked to the content of a program of study and school credit; • opportunities to learn and practice their work skills (“soft skills”); and, • opportunities to learn first-hand about specific occupational skills related to a career pathway. <p>In addition, youth with disabilities need to:</p> <ul style="list-style-type: none"> • understand the relationship between planning and career choices and the benefits of planning; • learn to communicate their disability-related work support and accommodation needs; and, • learn to find, formally request and secure appropriate supports and reasonable accommodations in education, training and employment settings. <p>Youth with and without disabilities involved in the juvenile justice system need additional supports and services such as:</p> <ul style="list-style-type: none"> • participation in comprehensive vocational programming that is consistent with the youth’s aptitude and interest and with high growth industries in the community to which they will return, as an approach to prevention and diversion from the juvenile justice system; • vocational education should include scope and sequence for a variety of courses and how they will be adapted to meet the unique needs of the setting and students. Scope and sequence provide a guide for both what students should learn and the order in which concepts should be presented; • vocational education should include formal assessment of both student learning and progress toward certification or license requirements in the vocation of study; • development of career pathways that include a list of courses, work experiences, post-secondary options, and career options; • access to employment and work-based experiences on and off facility grounds by collaborating with the community and businesses; • an advocate/job development specialist who can assist in making the youth more employable and provide or assist the youth in obtaining needed training about accessing resources after release, getting records sealed and expunged, and responding to employers’ questions about their previous law violations; • training in behavioral skills that may affect sustaining employment (e.g., anger management, accepting feedback, accepting directions); • access to a graduated release program that allows the youth to leave the facility during the day to complete supervised work experience; and, • access to technology to assist in career exploration and job simulation when partial release to work is not a possibility.

Table 1

Guideposts for Success for Youth Involved in the Juvenile Corrections System

GENERAL NEEDS	SPECIFIC NEEDS
<p data-bbox="164 390 354 485">Youth Development & Leadership</p> <p data-bbox="220 506 302 636">3</p>	<p data-bbox="410 382 1455 512">Youth development is a process that prepares young people to meet the challenges of adolescence and adulthood through a coordinated, progressive series of activities and experiences which help them gain skills and competencies. Youth leadership is part of that process. In order to control and direct their own lives based on informed decisions, all youth need:</p> <ul data-bbox="431 537 1422 852" style="list-style-type: none"> • mentoring activities designed to establish strong relationships with adults through formal and informal settings; • peer-to-peer mentoring opportunities; • exposure to role models in a variety of contexts; • training in skills such as self-advocacy and conflict resolution; • exposure to personal leadership and youth development activities, including community service; and, • opportunities that allow youth to exercise leadership and build self-esteem. <p data-bbox="410 894 719 919">Youth with disabilities also need:</p> <ul data-bbox="431 945 1409 1054" style="list-style-type: none"> • mentors and role models including persons with and without disabilities; • an understanding of disability history, culture, and disability public policy issues as well as their rights and responsibilities. <p data-bbox="410 1096 1373 1188">Youth with and without disabilities involved in the juvenile justice system need additional supports and services including transitional services to assist with reintegration into school, community, and the workforce, such as:</p> <ul data-bbox="431 1213 1463 1780" style="list-style-type: none"> • engagement in service other than community service (e.g., youth court) for youth who are diverted from the juvenile justice system; • a highly individualized transition plan that begins upon entry to a juvenile correctional facility and is developed with meaningful youth input; • the availability of a transition support model that considers the unique needs of youth involved in juvenile corrections and includes self-determination skills, competitive job placement, flexible educational opportunities, social skills instruction, and immediate service coordination of wrap-around services; • clear instruction concerning relevant laws, rights, and consequences throughout the juvenile justice process; • additional emphasis on self-empowerment through training in self-advocacy, self-esteem, self-reliance, self-determination, and self-sufficiency; • an understanding of risk-taking behaviors (and the relationship to their disabilities) and their consequences, such as substance abuse, teen pregnancy, sexually transmitted diseases, recidivism; and, • formal and informal connections to significant adult role models, peer mentors, and older youth who have transitioned from the juvenile justice system.

Table 1

Guideposts for Success for Youth Involved in the Juvenile Corrections System

GENERAL NEEDS	SPECIFIC NEEDS
<p>Connecting Activities</p> <p>4</p>	<p>Young people need to be connected to programs, services, activities, and supports that help them gain access to chosen post-school options. All youth may need one or more of the following:</p> <ul style="list-style-type: none"> • mental and physical health services; • transportation; • tutoring; • financial planning and management; • post-program supports through structured arrangements in postsecondary institutions and adult service agencies; and, • connection to other services and opportunities (e.g., recreation, sports, faith-based organizations). <p>In addition, youth with disabilities may need:</p> <ul style="list-style-type: none"> • acquisition of appropriate assistive technologies; • community orientation and mobility training (e.g. accessible transportation, bus routes, housing, health clinics); • exposure to post-program supports such as independent living centers and other consumer-driven community-based support service agencies; • personal assistance services, including attendants, readers, interpreters, or other such services; and, • benefits planning counseling including information regarding the myriad of benefits available and their interrelationships so that they may maximize those benefits in transitioning from public assistance to self-sufficiency. <p>Youth with and without disabilities involved in the juvenile justice system need:</p> <ul style="list-style-type: none"> • appropriate prevention services that include access to mental health and drug abuse treatment; • access to diversion programs, when appropriate, such as teen court and other community-based options; • advocates at each stage of the juvenile justice process to ensure that youth understand the processes; • support from individuals, programs and systems (e.g. mental health, education, vocational rehabilitation, social services) while confined and for at least one year after release; • alcohol and drug abuse treatment that extends for a minimum of one year post-release and includes family involvement, training in life skills and abstinence, and after care (e.g., self-help, support groups); • probation and parole officers that have time, knowledge, and resources to assist youth; • access to transition specialists who can collaborate with relevant professionals across systems (e.g., parole, mental health, child welfare, vocational rehabilitation); • ongoing contact with and visits from public school and job development/placement professionals to maintain contact and support for re-entry; and, • a transitional exit program from the juvenile correctional facility (including day passes) that provides progressively increased involvement with public school and/or job placement.

Table 1

Guideposts for Success for Youth Involved in the Juvenile Corrections System

GENERAL NEEDS	SPECIFIC NEEDS
<p>Family Involvement & Supports</p> <p>5</p>	<p>Participation and involvement of parents, family members, and/or other caring adults promote the social, emotional, physical, academic, and occupational growth of youth, leading to better post-school outcomes. All youth need parents, families, and other caring adults who:</p> <ul style="list-style-type: none"> • have high expectations that build upon the young person’s strengths, interests, and needs, and fosters their ability to achieve independence and self-sufficiency; • remain involved in their lives and assist them toward adulthood; • have access to information about employment, further education, and community resources; • take an active role in transition planning with schools and community partners; and, • have access to medical, professional, and peer support networks. <p>In addition, youth with disabilities need parents, families, and other caring adults who have:</p> <ul style="list-style-type: none"> • an understanding of their youth’s disability and how it affects his or her education, employment, and/or daily living options; • knowledge of rights and responsibilities under various disability-related legislation; • knowledge of and access to programs, services, supports, and accommodations available for young people with disabilities; and, • an understanding of how individualized planning tools can assist youth in achieving transition goals and objectives. <p>Youth with and without disabilities involved in the juvenile justice system need:</p> <ul style="list-style-type: none"> • parents who are well-informed and can assist and advocate for them; • facilities and programs that are committed to engaging parents and families in prevention and rehabilitative services; • specific, ongoing opportunities for parent, family, and caring adult involvement, participation, and input at each stage in the juvenile justice process; • family and community involvement as delineated in Multi-Systemic Therapy (MST); and, • family-focused mental health treatment that also includes individual youth therapy, as well as behavioral and/or cognitive/behavioral interventions.

(Page intentionally left blank.)

CHAPTER 4

Promising Practices for Practitioners

This Chapter highlights promising practices and strategies for working with youth involved in the juvenile corrections system to reduce recidivism and improve other important transition outcomes. Although it is possible to identify effective interventions for both youth at risk for involvement in the juvenile justice system and youthful offenders, limitations in available research do exist. Relatively few studies have been conducted, many studies have small sample sizes or may not have used random assignment to experimental conditions, and differences exist in the measure of recidivism (e.g., police contact, arrest, contact with juvenile court, probation violation).¹²⁷ Additionally, study results may not be analyzed separately for youth with disabilities or youth with specific disabilities, such as ED.

Despite these limitations, important conclusions and recommendations can be made concerning effective programs for youth offenders. The most effective strategy for treating and rehabilitating juvenile offenders and preventing recidivism appears to be a comprehensive, community-based model that integrates: (a) prevention programming; (b) a

continuum of pre-trial and sentencing placement options; (c) services and sanctions; and, (d) aftercare programs.¹²⁸

Another issue to consider when discussing effective interventions for youth with disabilities involved in the juvenile justice system is the importance of outcomes other than recidivism.¹²⁹ Evaluating whether or not youth remain integrated into the community, school, and the workforce, rather than experiencing repeated confinement is an appropriate indicator of success. However, programs may also be deemed successful if they result in other positive outcomes. For example, researchers noted the importance of such benefits as increased interagency collaboration and provision of appropriate and legally mandated services.¹³⁰ These issues may have an indirect impact on recidivism, but also may result in important benefits related to the improvement of services to youth. This approach is further supported when considering that simply complying with Federal law (e.g., IDEA; Section 504 of the Rehabilitation Act; Americans with Disabilities Act) is one of the most significant difficulties for the juvenile justice system.¹³¹



“...positive approaches that emphasize opportunities for healthy social, physical, and mental development have a much greater likelihood of success. Successful delinquency prevention strategies must, therefore, be positive in orientation and comprehensive in their scope.”

(Office of Juvenile Justice and Delinquency Prevention, 2000, p. 7)

Finally, a distinction is necessary between discussion of empirically validated interventions, and mention of interventions within the context of specific facilities. The difficulty lies in the sustainability and fidelity of interventions within certain facilities. The unfortunate fact is that, particularly in juvenile correctional facilities, programs and interventions often rely on the tireless work of a few individuals. It is not uncommon for exceptional programs to be unrecognizable after the departure of a dynamic administrator and the subsequent lack of fidelity to continue program or intervention implementation. While a few programs are noted below, perhaps it may be more prudent to focus on the key characteristics of a program or intervention, rather than the specific facility at which a program or intervention is implemented.

Promising Practices for Employment and Training for Court Involved Youth

The sections below provide specific promising practices at each stage of youth involvement within the juvenile justice system. The practices emphasize preparation for employment and job training (e.g., Jobs for America’s Graduates, Job Corps, career-technical education program in North Carolina, Project SUPPORT) through collaborative linkages between the juvenile justice and workforce development systems and programs. Despite the promise of juvenile justice and workforce development system collaboration, the common disconnect between these systems results in varied levels of quality both within and across states.¹³² Several issues must be overcome for the systems to

effectively collaborate including: (a) lack of sharing information concerning program availability; (b) competition for resources; (c) exclusion of youth involved in the juvenile justice system due to performance requirements; (d) lack of programs specifically designed for court involved youth; and, (e) insufficient understanding of the unique needs of court involved youth.¹³³

Despite these roadblocks, collaborative programs do exist that effectively connect court-involved youth to community-based resources that emphasize employment and the skills needed to find and keep a job, and promote success in the workplace.¹³⁴ For example, organizations may solicit funding via joint submission to Federal government requests for proposals (RFPs). To successfully collaborate, programs must develop a common understanding of youth characteristics and needs, a shared language, and a commitment to rise above common territorial conflicts.¹³⁵ Additionally, successful programs target their job training efforts to local labor market needs, collaborate to hold youth accountable via monitoring and counseling, and involve employers in a meaningful way in program design and implementation of work experience programs.¹³⁶

One example of a collaborative effort is The Court Employment Project, a community-based project for juvenile felony offenders. The program includes, “case management, educational instruction and GED preparation classes, social work, art therapy, activities and field trips as well as employment services.”¹³⁷ Student progress is regularly reported to the judge. Youth also have the option to participate

in the Career Exploration Project (CXP). In the CXP, court involved youth are provided a combination of employment readiness and a paid internship. Initial results show promise for positively affecting reduced recidivism and engagement as evidenced by secondary education completion (i.e., diploma or GED) and participation in higher education.¹³⁸

Another collaborative effort that holds promise is the Texas Re-Integration of Offenders-Youth (RIO-Y) Project. The program is a partnership between the Texas juvenile correctional agency and the State workforce development agency.¹³⁹ RIO-Y reintegrates youth into the community by linking the correctional agency’s resocialization, educational, training, and specialized treatment services to the workforce development agency’s job placement and training programs while youth are incarcerated. A workforce development counselor is available at every juvenile justice residential program.¹⁴⁰ Youth are provided with a multi-stage program that assists them in exploring career options within their community, developing skills for the workplace, and participating in pre-employment experiences (e.g., job shadowing, internships). Upon release, youth are referred to an employment office and the One-Stop Center that is run by the workforce development system, as needed.¹⁴¹

Promising Practices for Prevention and Early Intervention

A thorough discussion of the many prevention and early intervention programs is beyond the scope of this Guide. However, broad recommendations are identified. Two critical points should be made prior to a discussion of effective prevention. First, the U.S. Department of Justice’s Office of Juvenile Justice and Delinquency Prevention (OJJDP) has indicated that most unsuccessful juvenile delinquency efforts fail because of their negative approach.¹⁴² In contrast OJJDP has recognized that, “positive approaches that emphasize opportunities for healthy social, physical, and mental development have a much greater likelihood of success. Successful delinquency prevention strategies must, therefore, be positive in orientation and comprehensive in their scope.”¹⁴³

Positive Behavioral Interventions and Support

Given the social, academic, and mental health characteristics of youth with disabilities, as well as their increased risk for involvement with the juvenile justice system, one particular approach to prevention and early intervention is noteworthy. Positive Behavioral Interventions and Support (PBIS) is an effective approach to problem student behavior in public schools. This multi-tiered model is a positive and comprehensive system that promotes pro-social skills in youth with and without disabilities within public schools.¹⁴⁴ It can also be effectively applied to the juvenile correctional facility setting (see discussion on behavioral interventions within juvenile corrections for specific examples).

Generally, school-wide implementation of PBIS includes three levels of interventions. The idea is that most youth will be successful with broad system-wide interventions, while other youth require some more targeted or secondary interventions. The third or tertiary level of intervention provides individualized support to youth with the most severe behavioral difficulties. In addition to these three levels of positive behavioral support, PBIS includes seven key components:

- “an agreed upon and common approach to discipline;
- a positive statement of purpose;
- a small number of positively stated expectations for all students and staff;
- procedures for teaching these expectations to students;
- a continuum of procedures for encouraging displays and maintenance of these expectations;
- a continuum of procedures for discouraging displays of rule-violating behavior; and,
- procedures for monitoring and evaluating the effectiveness of the discipline system on a regular and frequent basis.”¹⁴⁵

Some states have begun statewide initiatives

supporting PBIS in public schools. For example, the Positive Behavioral Interventions and Supports of Arizona is a collaborative effort between the Arizona Department of Education, Arizona State University, University of Arizona, and Northern Arizona University. The purpose of this initiative is to promote PBIS and “establish a comprehensive and focused statewide effort to improve the capacity of educators, administrators and education professionals to address their specific school discipline needs and enable the development of positive teaching and learning environments.”¹⁴⁶

Jobs for America’s Graduates Model

There is a complex but evident relationship between classification with ED, academic and social failure, dropping out, and involvement with the juvenile justice system. As such, it is vital to target youth with ED and assist them in staying in school, during the school-to-career transition, and recovering those that have dropped out. One longstanding program that has met with success is the Jobs for America’s Graduates (JAG) model. The JAG model includes three types of programs:

- school-to-career program for high school seniors;
- multi-year dropout prevention for grades 9 to 12; and,
- dropout recovery program that targets dropouts and youth in alternative school settings.¹⁴⁷

The JAG model is comprised of several components including:

- classroom instruction from a trained career specialist;
- employability skills;
- adult mentoring;
- advisement and support;
- summer employment training;
- student-led leadership groups;
- job and postsecondary education placement;

- linkages to school and community-based services;
- 12-month follow-up services;
- accountability system;
- professional development;
- personal accountability of specialists for each youth they serve;
- activity-based classroom instruction;
- techniques that promote student motivation; and,
- focus on cost effectiveness.¹⁴⁸

Although results have rarely been disaggregated for youth with ED, the complex array of supports has consistently shown positive effects for 25 years. The most recent data confirms the programs success. In 2004, the graduation/GED rate of participants was 90.9 percent and the post-secondary enrollment rate was 41.2%.¹⁴⁹ Similarly, 2005 graduation rates for students with disabilities and ED were 85.4% and 81.5%, respectively.¹⁵⁰ Additionally, post-secondary enrollment rates for students with disabilities and ED were 54.3% and 40.9%, respectively.¹⁵¹

Promising Practices for Non-Institutionalized Juveniles

Diversion

One approach to nonviolent offenders is the use of diversion. Diversion is a set of programs and activities that may include job training and placement, counseling, and alternative schools.¹⁵²

“Pretrial detention of youths due to characteristics unrelated to dangerousness or risk of flight is unacceptable. Adequate understanding and response to the disabling condition of many youth in juvenile corrections is critical. Equally important is the development of appropriate, less restrictive, community-based placements and options for monitoring youth awaiting dispositional hearings.”¹⁵³ Unfortunately, reports indicate a 72 percent increase in the number of youth held in secure detention facilities from 1985-1995 and less than one-third were held for violent offenses.¹⁵⁴

“Multisystemic Therapy (MST) is a treatment for juvenile offenders that uses a combination of empirically-based treatments (e.g. cognitive behavior therapy, behavioral parent training, functional family therapy) to address multiple variables (i.e. family, school, peer groups) that have been shown to be factors in juvenile behavior”



Coalition for Evidence-Based Policy, 2006, p. 1).

Rehabilitative Models

Some states are developing a more rehabilitative than confinement model for youthful offenders. For example, the state of Missouri has made a commitment to treatment of youth in small (typically 33 or fewer beds) facilities.¹⁵⁵ In addition to maintaining youth in smaller facilities, three-fourths of non-residential community programs, group homes, and facilities have a minimum of security. The approach, now adapted by California Youth Authority, has six key characteristics:

- “small-scale residential facilities (rather than training schools);
- extensive 24-hour therapy;
- quality education programs;
- heavy family outreach/counseling;
- well-qualified, highly trained staff; and,
- extensive non-residential programming and aftercare support.”¹⁵⁶

Between 2001 and 2005, recidivism ranged from between six and nine percent and was 7.1 percent in 2005.¹⁵⁷ Across states, recidivism is often defined differently and rates may include youth transferred to the criminal justice system. However, the 7.1 percent rate is less than the combined average 12% of juvenile recidivism in Missouri, Arkansas, and Montana (a group of states with low recidivism rates).¹⁵⁸

For non-institutionalized serious juvenile offenders, certain variables, such as an increased length of treatment, have a significant positive effect on recidivism.¹⁵⁹ Additionally, three approaches to treatment are effective in reducing recidivism:

- interpersonal skills training;
- individual counseling; and,
- behavioral programs.

Family-focused Treatment

Family-focused treatment is also an effective approach to assisting non-confined youth.¹⁶⁰ Family-focused treatment often includes a cognitive-behavioral approach, as well as individual therapy, and medication management.¹⁶¹ Family-focused treatment may also include brief strategic family therapy, which “provides families with the tools to overcome individual and family risk factors through focused interventions to improve maladaptive patterns of family interaction and skill-building strategies to strengthen families.”¹⁶²

Teen Courts

Another approach that is gaining popularity and research validation is the use of teen courts. There are approximately 1,109 teen courts in the U.S.¹⁶³ Typically, teen courts are options for youth who are under the age of 16, have no prior arrest record, and have been charged with a less serious crime such as shoplifting, vandalism, or disorderly conduct.¹⁶⁴ Youth may be diverted to teen court at several points in the juvenile justice process including via



To appropriately address the academic needs of incarcerated youth, both detention and commitment juvenile correctional facilities must provide access to a “free, appropriate public education” to all students and ensure that they continue to make progress toward a high school diploma.

law enforcement referral, non-law enforcement referral, intake, via the prosecutor, or as an informal disposition from the court.¹⁶⁵

In teen court, youth admit their guilt and are provided consequences from a system of graduated sanctions.¹⁶⁶ A peer jury gives sanctions to the offender that typically goes beyond punishments and includes community service, apology letters, drug and alcohol classes, restitution, and service as a juror in future teen court cases.¹⁶⁷

Research on teen courts shows promise for decreasing youth recidivism and providing additional benefits. However, there are difficulties with much of the research on teen courts.¹⁶⁸ First, the evaluation procedures are typically so different that it makes comparisons among studies difficult. Additionally, many studies did not provide a non-treatment comparison group, which limits conclusions. Another issue is the need for procedures if a youth does not follow through with teen court requirements. In at least one study, there was essentially nothing done with youth who were referred back to juvenile parole and probation from teen court.¹⁶⁹ Also, there is a need to control for the types of students referred to the program when making comparison of teen court recidivism rates versus other diversion programs. While some research shows a difference in recidivism, these issues necessitate caution when interpreting results.¹⁷⁰

There are some studies of teen courts that were more rigorous and used a control group. For example, in two studies researchers noted a positive

affect on recidivism for youth participating in teen court.¹⁷¹ However, not all programs had statistically significantly lower recidivism than the control group. Other more rigorous studies included a control group and identified low rates of recidivism for teen courts, but showed no significant difference between teen court and the group that did not receive treatment.¹⁷² In a more recent study, there were reports of significant differences in recidivism between teen court participants and a control group.¹⁷³ The unique aspect of this study is that youth were repeat offenders, a group that is typically not provided the teen court option. In addition to some promising effects on recidivism, benefits of teen court may include youth satisfaction toward the program, more positive attitudes concerning procedural justice and toward authority, and a greater knowledge of the legal system.¹⁷⁴

Teen courts hold great promise, but additional high-quality research is needed to identify:

- critical features of effective programs;
- factors that contribute to and are barriers to program success;
- the types of sanctions that are most effective and for whom they are effective; and,
- effective strategies for youth who do not comply with sanctions.

Moreover, for teen courts to be a viable and sustainable option, problems with inadequate funding, personnel, and referrals must be addressed.¹⁷⁵

Mental Health and Substance Abuse Treatment for Non-institutionalized Juveniles

Multisystemic Therapy

“Multisystemic Therapy (MST) is a treatment for juvenile offenders that uses a combination of empirically-based treatments (e.g. cognitive behavior therapy, behavioral parent training, functional family therapy) to address multiple variables (i.e. family, school, peer groups) that have been shown to be factors in juvenile behavior.”¹⁷⁶ Multisystemic Therapy is provided at the youth’s home and community locations and the therapist is available at all times during the intervention.¹⁷⁷

The Coalition for Evidence-Based Policy identified three key steps for implementation of MST.¹⁷⁸

- the therapist interviews the youth, family members, friends, and caring adults to identify problem behaviors and possible causes;
- the strengths of the youth and his/her supporting people at home, school, in the community are identified to assist in addressing problem behaviors; and,
- the therapist and youth set goals for treatment.

The therapist closely monitors youth progress toward goals throughout the intervention. Multisystemic Therapy is an effective approach for youth with mental health needs or substance abuse problems who are involved with the juvenile justice system and served in non-institutional settings.¹⁷⁹ “MST conceptualizes adolescent drug abuse and problem behaviors as a product of several related systems, including home, school, neighborhood, and the larger community.”¹⁸⁰ As noted, intervention is time intensive and relies on an adolescent’s family members, teachers, social service agencies to build capacity for addressing problems and removing barriers to success and service access.¹⁸¹ However, the time and effort do result in positive outcomes. A recent review of MST research indicated consistent positive effects for youth with regard to re-arrest, out of home placement, and drug use.¹⁸² Additionally,

treatment effects were maintained over time. Moreover, recent cost-benefit analysis indicates that MST is associated with equivalent or better outcomes and costs than hospitalization.¹⁸³

Promising Practices for Institutionalized Juveniles

Education

Obtaining a high school diploma has a profound impact on youth integration into the community and workforce. As noted, compared to youth with a high school diploma, youth without a school diploma are more likely to live in poverty and work only part-time.¹⁸⁴ To appropriately address the academic needs of incarcerated youth, both detention and commitment juvenile correctional facilities must provide access to a “free, appropriate public education” to all students and ensure that they continue to make progress toward a high school diploma. Providing access to the general education curriculum for youth with disabilities in corrections is critical, given Federal education law (i.e., IDEA, NCLB) and research that indicates that academic improvement is associated with lower rates of recidivism.¹⁸⁰ Additionally, “an intensive literacy program can positively affect recidivism rates as well as improve youth fluency, reading placement level, and attitudes toward reading.”¹⁸¹

Unfortunately, few confined youth return to school upon release and earn a high school diploma.¹⁸² In fact, only about half return to high school¹⁸³ and after six months, only about 21 percent are still in school.¹⁸⁴ Although this is disheartening, it is not necessarily surprising given the typically poor quality of education that youth receive while in corrections, the lack of appropriate transition services they receive upon exit, and the scarcity of appropriate mental health services prior to confinement, while confined, and upon exit. The possibility of these youth working toward and even earning a high school diploma is likely to increase with additional systemic supports and improvements.

Furthermore, younger youth, those who may be at the beginning of or have not entered high school,

also have great potential for earning a high school diploma. This is important given that approximately 253,100 youth under the age of 13 were arrested in 1997, accounting for nine percent of all juvenile arrests,¹⁸⁵ and over the 10-year period (1988-1997), there was a 49 percent increase in the number of juveniles under the age of 13 committed to juvenile corrections.¹⁸⁶ Since child delinquents under the age of 13 have a greater chance of becoming serious, violent, or chronic offenders, than youth whose first contact with the juvenile justice system occurs later in life,¹⁸⁷ addressing the educational needs in this age group is particularly imperative.

In addition to a focus on appropriate curriculum, No Child Left Behind places an increasing emphasis on use of research-based instructional approaches for all youth. Juvenile correctional facilities address curricular and instruction issues in a variety of ways. Unfortunately, there is no model juvenile correctional program that can be highlighted for its thorough curriculum and materials that are aligned with state assessments, use of effective instruction, and ongoing and comprehensive approach to professional development. However, one of the most promising research-based options for approaching student learning and teacher professional development is the Strategic Instruction Model (SIM) from the University of Kansas Center for Research on Learning (UKCRL; <http://www.kucrl.org/>). Although not specifically validated in juvenile corrections, this model holds potential for incarcerated youth.

Strategic Instruction Model

UKCRL conducts research, and provides information and training on the Strategic Instruction Model (SIM). SIM is based on four underlying philosophies:

- “most low-achieving adolescents can learn to function independently in mainstream settings;
- the role of the support-class teacher is to teach low-achieving adolescents strategies that will enable them to be independent learners and performers;

- the role of the content teacher is to promote strategic behavior and to deliver subject-matter information in a manner that can be understood and remembered by low-achieving adolescents; and,
- adolescents should have a major voice in decisions about what strategies they are to learn and how fast they are to learn these strategies.”¹⁸⁸

Two types of interventions are promoted by UKCRL within the SIM model. First, teacher-focused interventions are designed to assist teachers in preparing, adapting, and presenting important material in a way that students understand. Teachers in juvenile corrections, in particular, teach classes where students have a wide range of academic abilities. Given this difficulty, one way for these teachers to be more effective is to use content enhancement routines to teach grade-level curriculum content to students. “Content-enhancement is an instructional method that relies on using powerful teaching devices to organize and present curriculum content in an understandable and easy-to-learn manner.”¹⁸⁹ UKCRL has identified content enhancements for teaching routines for:

- planning and leading learning;
- exploring text, topics, and details;
- teaching concepts; and,
- increasing student performance.

Second, UKCRL identified and developed student-focused interventions that provide students with skills and strategies. There are learning strategies in the areas of writing, reading, studying, interacting with others, and remembering information.¹⁹⁰ Research-based strategy instruction is one of the most effective approaches to ensuring youth with disabilities will have access to the general education curriculum.¹⁹¹

The use of teacher collaboration or teaming is also supported by UKCRL. Leading researchers at UKCRL noted student performance increases most dramatically when teachers plan and work together

The PBIS approach provides a convincing alternative to the argument for a solely punitive behavioral approach (Nelson et al. 2005).



effectively. UKCRL reported, “(i)nstructional programs that are well coordinated across teachers with regard to what is taught and how instruction is provided have resulted in the greatest student achievement gains.”¹⁹²

Career and Technical Education for Youth in Corrections

Career training and technical education while youth with and without disabilities are in public school and when involved with juvenile corrections are critical for preparing youth to successfully enter the workforce. Within public school, generic and occupationally-specific career and technical education as well as on-the-job-training strongly related to lower drop-out rates for youth with ED.¹⁹³ Generic career and technical education and on-the-job-training were also associated with higher postschool earnings.¹⁹⁴ Furthermore, youth who completed either vocational training or a GED program while confined were twice as likely to be employed six months after their release.¹⁹⁵

One example of a well-planned career/technical education program was developed in North Carolina. The State’s Department of Juvenile Justice and Delinquency Prevention implements the system, including the accountability component, in a manner identical to the public schools of North Carolina. The use of this system enhances students’ ability to transfer credits to local public schools and provides structure and accountability within the State’s juvenile justice school system. Although a complete description of the North Carolina system is beyond the scope of this Guide, there are a few characteristics of this system that are particularly noteworthy.

North Carolina has developed the Vocational Competency Tracking System (VoCATS). The purpose of VoCATS is to plan instruction, assess students, evaluate student mastery, document student achievement, and provide accountability data. The VoCATS is a competency-based, computer-supported system encompassing course and lesson planning, assessment items, as well as aggregated and disaggregated reports of students, classes, teachers, schools, and LEAs. The Rand Corporation and U.S. Department of Education have recognized VoCATS as an exemplary statewide system and national instructional model in workforce development education.

Currently, the North Carolina workforce development staff provide: “(a) 129 course blueprints validated by business/industry (course blueprints include competencies and objectives.); (b) 116 banks of assessment items distributed electronically; (c) 100 curriculum guides developed or adopted for use in North Carolina; (d) generation of secured End-of-Course tests or post-assessments for courses supported in the Programs of Study; (e) staff development; and, (f) a help desk to assist LEAs with implementation of VoCATS and use of related software.”¹⁹⁶

In North Carolina schools, youth are provided a choice of ten career pathways:

- agricultural and natural resources technologies;
- biological and chemical technologies;
- business technologies;
- commercial and artistic production technologies;
- construction technologies;

- engineering technologies;
- health sciences;
- industrial technologies;
- public service technologies; and,
- transportation systems technologies.¹⁹⁷

Within each career pathway, youth are able to identify a specific career area. Each student is provided a career map that outlines necessary coursework in each of grades 9-12, work-based learning opportunities, postsecondary options (e.g., community college, four-year college, apprenticeships, certification), and possible career options.

The North Carolina vocational system also delineates a clear plan for youth apprenticeships. The handbook defines apprenticeships, clarifies what is needed to establish a program, and specifically identifies the responsibilities of key players (i.e., participating business or industry, North Carolina Department of Labor, the school, student, parents).¹⁹⁸ However, in light of the unique educational and security attributes of juvenile correctional schools, there may be some need to adapt the components of the program, such as the career pathways and apprenticeships available to students.

Behavioral Interventions

Youth with and without disabilities in juvenile corrections must be actively engaged in the learning process. However, behavior can be a major obstacle that may eventually lead to youth being restricted from school and possibly placed in segregation. Unfortunately, the attitude held by many in corrections is that confinement should not be a positive place where appropriate behaviors are reinforced.¹⁹⁹ However, research consistently shows the effectiveness of promoting and reinforcing appropriate behavior and the ineffectiveness of reliance primarily on punitive measures.²⁰⁰ Further, results associated with the previously noted PBIS approach provide a convincing alternative to the

argument for a solely punitive behavioral approach.²⁰¹

For effective implementation of PBIS within juvenile correctional facilities, a couple considerations should be noted. First, it is advantageous to monitor implementation of PBIS and any research-based intervention to ensure appropriate implementation.²⁰² Also, it is gainful to integrate additional research-based approaches into the PBIS model. For example, at the secondary level, some youth may need additional supports. There is evidence that a cognitive-behavioral approach is effective at both the individual and family levels.²⁰³ In this approach, for example, youth (and families) could be trained in ways to manage stress and interact. Additionally, a behavioral component allows for reinforcement based on exhibiting target behaviors, as well as participation in the program. Furthermore, social skills training and anger management may be particularly important secondary interventions, as youth with ED also commonly have difficulties with co-workers in the workplace and in community living placements.²⁰⁴

Two juvenile correctional facilities have implemented PBIS with positive results.²⁰⁵ The **Illinois Youth Center (IYC)** implemented PBIS at the Harrisburg boys' prison in 2001. Following the PBIS model, the facility implemented facility-wide or universal interventions wherein youth were reinforced with tickets for appropriate behavior. The tickets could be exchanged for a variety of tangible and activity reinforcements. Also noteworthy were the available secondary interventions (e.g., mentoring) and tertiary interventions where a student received intensive individual support. Results indicated that since the implementation of PBIS, minor and major infractions at the school have declined, and fights declined from 32 per month to zero in three years.²⁰⁶

The **Iowa Juvenile Home (IJH)** also implemented the PBIS model.²⁰⁷ Similar to IYC, IJH implemented a form of token economy as a universal intervention using "courage slips." Youth earned slips based on progress toward personal goals and

The existence of long-term, untreated mental health issues has serious implications for the reintegration of youth into school, the community, and workforce.



meeting school expectations. Administrators at the facility highlighted the importance of using a positive behavioral system to promote and teach appropriate behaviors, as well as the necessity for negative consequences for significant infractions.²⁰⁸ Implementation of the PBIS approach has led to a reduction in restraint and seclusion by 73 percent and the average rate of disciplinary removals was reduced by 50 percent.²⁰⁹

These examples do not highlight the myriad of components associated with implementation of PBIS. However, they are noted to illustrate the effective application of the PBIS model to alternative and secure care settings. Also noteworthy is the mention from both facilities that the focus on collecting and analyzing data within the PBIS model allowed the facilities to make effective programmatic adaptations.²¹⁰ Continual data-based modifications and improvements are an important component of effective behavioral interventions.

Mental Health Interventions

There are serious concerns that youth with and without disabilities in juvenile corrections are not receiving necessary mental health screening and services.²¹¹ The National Mental Health Association reported that:

- there is commonly inadequate mental health screening for youth entering juvenile correctional facilities;
- facilities typically are not prepared to recognize or deal with youth at-risk for suicide; and,
- facilities typically employ staff with little training in mental health and in many facilities there is virtually an absence of mental health services.²¹²

The existence of long-term, untreated mental health issues has serious implications for the reintegration of youth into school, the community, and workforce. If left untreated, mental health issues might become chronic and have enormous personal and societal costs.²¹³ Conversely, there is some evidence that counseling, which includes components such as anger management, social skills training, and career training, reduces recidivism.²¹⁴

Substance abuse is a major mental health concern for youth with and without disabilities in juvenile corrections. Research indicates that effective interventions should address multiple areas that youth need including problems with school, peers, and family, as well as elements of relapse prevention.²¹⁵ Behavioral and cognitive/behavioral approaches are also recommended and should be implemented in a community setting whenever possible.²¹⁶ Also, several key variables are important for effective substance abuse programs for youth:

- time spent in treatment is an important predictor of recovery and treatment should be at least one year in length;
- family involvement increases the likelihood of success;
- training in life skills and abstinence are effective; and,
- aftercare that includes self-help and support groups positively affects recovery.²¹⁷

Transition and After Care

For youth involved in the juvenile corrections system to successfully move into the workforce and toward self-sufficiency, several preparatory activities need to occur before the youth is released into the

community. Project Parole SUPPORT is one example of an effective transition program. Project SUPPORT was initiated in 1999 as a statewide service effort managed by the Oregon Department of Education (ODE), Oregon Youth Authority (OYA), Oregon Office of Vocational Services (VR), and the University of Oregon (UO). The purpose of Project SUPPORT is to provide confined youth who have a designated special education disability and/or mental health disorder with pre-release training and coordinated planning to support a program participant's transition into the community. Program goals are to increase a participant's engagement in employment and/or school enrollment (high school/postsecondary) and decrease rates of recidivism.²¹⁸

The service-delivery model components are structured around tenets identified as effective for youth with emotional and behavioral disorders and include:

- strategies to enhance self-determination skills in the youth with services focused on the unique needs, interests, strengths, and barriers of the youth;
- competitive job placement;
- flexible educational opportunities;
- social skill instruction; and,
- immediate service coordination of wrap-around services.²¹⁹

A transition specialist (TS) is the key project staff person. Each TS works directly with the youth and parole officer (PO) to develop a project transition plan that is coupled with the youth's parole plan. Services are provided collaboratively with staff from the three agencies along with community support agencies: (a) VR counselor; (b) treatment manager; (c) parole officer; and, (d) facility and community education staff. This staff works in collaboration with the TS who provides direct services to project participants. The initial responsibility of the TS is to define each youth's strengths, needs, interests, and life goals to develop a transition plan with services

aligned to the unique needs and interests of each project participant. Services are not a prescriptive set of activities provided to each youth, but rely on the transition specialist's ability to make decisions and connections for each youth based on information and guidance provided by the youth, parole officer, family, and other agency staff.

Both process and outcome evaluation data have provided valuable information for working with this high-risk population. The primary outcome measured upon release from the youth correctional facility was the recidivism rates of project participants. Based on cumulative percents calculated through a Kaplan-Meier survival function, 85 percent of the sample had not recidivated at the 12-month marker. At 24-months and 36-months, 72 percent and 62 percent of the sample, respectively, had not been adjudicated delinquent or convicted of a new crime.²²⁰ The process evaluation provided lessons learned through the implementation of this multi-state agency collaboration and include:

- the need to develop "systems change" collaboration for project participants to access available community resources;
- project staff need to facilitate self-directed planning and decision-making for project participants;
- strategies to increase positive family and peer support must be a program focus; and,
- project participants need continued and long-term support to develop their employment, independent living, and academic skills.²²¹

Project SUPPORT services have incorporated these lessons into the service-delivery model and have demonstrated promising outcomes for formerly confined adolescents with disabilities.

CHAPTER 5

Straightening Out the Curves: A Roadmap to Enhancing Policy and Practice

This Chapter describes a set of policy issues that need to be addressed by policy makers, institutions, and organizations at the national, state, and local levels in order to take action to improve the transition outcomes of youth involved in the juvenile corrections system. Also, a summary is included of issues related to expanding promising practices, system collaboration, professional development, and research and evaluation.

Policymakers and practitioners are beginning to develop successful transition strategies and practices for youth involved in the juvenile corrections system. However, a great deal more needs to be done, including additional research, funding, professional development, and program evaluation.

The issues with the greatest promise for policy change relate to revision of Federal laws that directly affect services for youth with disabilities in juvenile corrections. The unique characteristics of these youth must be considered at the Federal level, if state and local changes are to occur in a systematized fashion. Second, only to the need for Federal policy

change, is the necessity of increased accountability for providing a minimum of transition services to youth exiting juvenile correctional facilities.

Adherence to Federal Law

Perhaps one of the greatest policy concerns is the nationwide lack of adherence and enforcement of the IDEA, No Child Left Behind, and Section 504 of the Rehabilitation Act, with regard to juvenile correctional facilities.²²² Special educators, administrators, correctional professionals, and experts in youth development have identified compliance with laws such as IDEA as the most significant issue facing the juvenile justice system.

Moreover, the U.S. Department of Justice (DOJ), Civil Rights Division, Special Litigation Section, “has investigated conditions of confinement in more than 100 juvenile facilities in 16 states, and the Commonwealths of Puerto Rico and the Northern Mariana Islands. DOJ currently monitors conditions in more than 65 facilities that operate under settlement agreements with the United States.”²²³ Federal (e.g., Office of Special Education



No Child Left Behind requires states to evaluate the performance of all students in all public schools in order to determine whether schools, school districts, and the state have made adequate yearly progress (AYP).

Programs), state, and local jurisdictions must provide oversight to ensure that juvenile correctional facilities are in compliance with Federal and state education requirements and support services are provided, as appropriate.

Primary responsibility to oversee the provision of appropriate special education services in juvenile corrections falls initially on the state education agency.²²⁴ The need for state-level oversight is particularly relevant given that, in a national study²²⁵ approximately 80 percent of juvenile correctional facilities reported being accredited by state departments of education. Such accreditation requires a comprehensive plan and implementation of said plan to ensure facility compliance with IDEA and NCLB. State education agencies must also be regularly and comprehensively monitored by the U.S. Department of Education's Office of Special Education Programs and held accountable for juvenile correctional facility school adherence to Federal requirements.

There is a need for development and implementation of a comprehensive plan for local, state, and Federal collaboration between education/special education and comparable levels of the juvenile justice system. The collaboration across systems and at varied levels is particularly critical in light of the varied approaches, throughout the nation, to oversight of education within juvenile correctional facility schools (i.e., juvenile correctional schools may be supervised by juvenile corrections and not the local education agency).

No Child Left Behind

There are several key policy issues regarding No Child Left Behind and youth with disabilities in juvenile corrections.²²⁶ No Child Left Behind requires states to evaluate the performance of all students in all public schools in order to determine whether schools, school districts, and the state have made adequate yearly progress (AYP). Each state must utilize a set of high-quality, yearly student academic assessments that include, at a minimum, assessments in mathematics, reading or language arts, and science that will be used as the primary means of determining the yearly performance. There is a clear expectation that juvenile justice education programs are to be included in this evaluation.²²⁷

A number of impediments exist to meeting the requirements of No Child Left Behind in juvenile justice education programs. First, youth within juvenile justice education programs are highly mobile. Given the relatively short length of stay in juvenile correctional facilities, many facility schools may not be required to report state assessment scores. To address this issue, Federal and state guidelines should be developed to assess and report student progress in intervals that coincide with the common six-month stay and include other indicators of student progress.²²⁸

Second, problems exist concerning AYP. It is important that juvenile correctional schools are held accountable. However, many more students in juvenile corrections have significant learning and behavior issues than in public schools and rarely are the same students in the facility from one year to the next.²²⁹ As such, an

evaluation of practical expectations must be conducted concerning AYP for juvenile corrections and policy revisions should take these issues into consideration.

Third, low pay, security concerns, insufficient numbers of educators, and inadequate professional development are some reasons that juvenile correctional facilities have difficulty attracting the high quality teachers required under NCLB.²³⁰ States and local education agencies must ensure that teachers in juvenile correctional school are provided adequate pay and support, in order to attract the high quality teachers necessary for compliance. Additionally, juvenile correctional schools should maintain a close link with public schools concerning professional development and teacher pay.

Fourth, there are currently no provisions for transferring confined students when a juvenile correctional school is failing or providing school choice options within juvenile corrections. Additional guidelines and rights for youth in failing juvenile correctional schools must be identified. These should take into considerations previously noted issues concerning what would be considered AYP.

Alternative Educational Paths

A further complication for youth with and without disabilities that must be addressed at Federal and state levels is the availability of options for older youth who enter a facility with almost no academic credits. For example, data in Florida show students (with a median age of 16) entering facilities with only 2.77 prior credits and GPAs that ranged from .68 to 1.26.²³¹ However, there is currently little guidance for facilities concerning when students can or should take alternative educational paths.

Currently, facilities may rely on the state age at which students are eligible to drop out to identify when students can participate in GED programs. If youth have few credits and would benefit from GED preparation courses and/or an intensive vocational program that leads to a license or certificate in a specific vocational area, schools must have guidelines

for decision-making. Without clear Federal and state guidelines, there is the possibility that general education and a high school diploma would be omitted from student choice too early or that a student would participate in general education courses when they would benefit more from intensive vocational training or GED preparation.

Transitioning Out of Juvenile Corrections

For youth with disabilities in juvenile corrections, transition relates to two issues: (a) transition from high school to postschool education and the workforce; and, (b) transition from the juvenile correctional facility back to either school or work. The multiple levels of transition may complicate the situation for these youth. However, policy recommendations can be made concerning both transitional experiences. First, concerning transition from high school to postschool education and the workforce, juvenile correctional schools must adhere to requirements in IDEA (2004). To ensure compliance, policies are needed that include internal and external evaluation and monitoring.

Within each facility, formal and informal policies should be designed and implemented to address youth transition from a facility to the community, education, and workforce. However, the reality is that transition services are often fragmented, or nonexistent. The National Center on Education, Disability and Juvenile Justice asserted that this transition may be the most neglected component of correctional programs.²³² A key policy recommendation is to identify a guaranteed minimum of services for all youth who exit any juvenile correctional facility.²³³ Establishing a common minimum standard will help ensure that youth are provided ongoing, comprehensive support in a manner and for a length of time that is supported by research. Policies should be based on the critical need for youth to have support in the areas of education, youth development, “employment, housing, counseling, drug treatment, and time with at least one committed, competent adult,”²³⁴ as well as easily accessible support for parents. Moreover, policies must be in place to

guarantee the transition process begins from the moment a youth enters a facility and includes the immediate transfer of relevant records both upon entrance and from the juvenile correctional facility to receiving organizations, immediately upon release.²³⁵

Expanding Promising Practices

The *Guideposts for Success*, discussed in Chapter 3, provide a basic framework for overall program design and implementation designed to assist all youth involved in or at risk of being involved in the juvenile justice system, including those with disabilities. It is through collaborative implementation of such research-based approaches that educational, mental health, employment, and self-sufficiency will be promoted among youth with and without disabilities who are at risk for or involved in the juvenile justice system.

As detailed earlier in this Guide, there are a number of emerging promising practices that can and should be replicated throughout the country on a broader scale. While additional research is needed at various stages of the juvenile justice process, the following approaches show great promise:

Prevention and Early Intervention

- Positive Behavior Intervention and Supports (PBIS)
- Jobs for America’s Graduates

Non-Institutionalized Youth

- Diversion strategies, as appropriate, and rehabilitative models including:
 - ~Family-focused treatment
 - ~Teen courts
- Mental health and substance abuse treatment, including Multisystemic Therapy

Institutionalized Juveniles

- Research-based education, such as the Strategic Instruction Model

- Career and technical education (see plan developed by the North Carolina’s Department of Juvenile Justice and Delinquency Prevention, Appendix A: page 44)
- Behavioral interventions
- Mental health interventions
- Transition and aftercare (see Project SUPPORT, Appendix A: page 45)

Expanding System Collaboration

Addressing the needs of youth at risk for and involved in the juvenile justice system requires collaboration between education, mental health, juvenile justice, and workforce development systems, as well as with parents. This collaboration is even more critical for youth who have disabilities. Collaborative efforts should include discussion of policy and practice, methods for implementation, and accountability for program effectiveness. Another important component of collaboration is the assessment of program implementation to ensure consistency.²³⁶

No single governmental agency, state entity, local organization, program, or project can do this hard work alone. Families and other caring adults, programs, governmental bodies must all work together, across boundaries, if there is any hope of improving the outcomes of youth with and without disabilities involved in the juvenile corrections system. Policy makers at all levels of government must also be willing to support improvements in collaboration across the various systems via such approaches as funding opportunities for cross-agency collaborative projects and acknowledgement of the unique needs of youth with disabilities involved in the juvenile justice system when identifying performance requirements.

Professional Development

For the interventions discussed in this Guide to be effective, there must be comprehensive and ongoing professional development on research-based approaches that support youth academically,

For the interventions discussed in this Guide to be effective, there must be comprehensive and ongoing professional development on research-based approaches that support youth academically, behaviorally, emotionally, and in work-related skills.



behaviorally, emotionally, and in work-related skills. There is a need for trainings across systems that include professionals from each organization focused on troubled youth.

Substantial challenges exist within each of the systems referenced in this Guide to find and maintain well-trained quality staff, particularly front-line youth service professionals. The multi-system approach needed to support the transition of youth involved with the juvenile corrections system further amplifies this problem. Front-line youth service professionals are expected to support youth who possess a complex array of educational and mental health challenges, as well as significant deficits in job related skills. As such, youth service professionals in the workforce development and juvenile corrections systems arena must possess a broad range of knowledge, skills, and abilities to serve youth effectively.

The NCWD/Youth, in collaboration with the National Youth Employment Coalition and the support of the ODEP, has identified 10 core competencies of effective youth service professionals as the centerpiece of an effective workforce development system. These core competencies are:

- knowledge of the field;
- communication with youth;
- assessment and individualized planning;
- relationship to family and community;
- workforce preparation;
- career exploration;

- relationship with employers and between employers and employees;
- connections to resources;
- program design and delivery; and,
- administrative skills.

These core youth service professional competencies have been further refined using the *Guideposts for Success* as an organizing framework. The competencies have also served as the basis for training curricula for youth service professionals and regional and national training for juvenile correctional professionals.

Comprehensive professional development is also critical for other professionals who are involved with these youth. For example, in order to make appropriate decisions to use and implement interventions for non-institutionalized youth, judges, youth advocates, attorneys, probation professionals, and direct service providers must have a common understanding of when and how to use a specific program and the interventions associated with the program. Similarly, within juvenile corrections, educators, administrators, secure care staff, and mental health professionals must all have knowledge of effective practices and how to implement such practices. Oversight is also necessary to hold professionals accountable for proper implementation of interventions. This fidelity of treatment is a fundamental component that is often neglected.²³⁷

Research and Evaluation

While this Guide is a compendium of existing information concerning the juvenile corrections system and youth with disabilities, there is a clear need for investments in additional research and program evaluation. For example, the link between youth with disabilities and mental health needs in juvenile corrections warrants further investigation. There is also a strong need to better understand why youth with disabilities, particularly youth with ED, are overrepresented in the juvenile corrections system and how this issue can be effectively addressed.

However, the most glaring holes in the current research are around effective interventions for youth with disabilities at-risk for involvement and those involved with the juvenile corrections system. As mentioned in Chapter Four, there are few studies and those that do exist, have several limitations.

Conclusion

Transition is an awkward period of life for many young adults. When you couple that fact with the oftentimes negative circumstances of being classified

ED, having mental health issues, and involvement in the juvenile corrections system, it quickly becomes clear that these youth are among the most vulnerable in our society.

There is much we know and have learned, and yet there is a great deal that remains unknown about this population and the organizations and institutions that serve them. The *Guideposts for Success for Youth Involved in the Juvenile Corrections System*, developed by NCWD/Youth in conjunction with ODEP, provide a holistic framework to guide professionals in their support of youth with and without disabilities involved or at risk of being involved in juvenile corrections. The research-based promising practices discussed throughout this Guide are vehicles through which the *Guideposts'* philosophy can be achieved. Implementing the *Guideposts* effectively and to scale may ultimately require the changes in policy described previously. Nonetheless, long-term employment success of youth, with and without disabilities, involved in or at risk of being involved in the juvenile justice system is possible where the systems responsible for serving these youth collaborate in a meaningful and purposeful way to address their developmental needs.

APPENDIX A

Resources by *Guidepost* Area

**The following programmatic summaries are taken from each organization's website:*

School-Based Preparatory Experiences

National Center on Accessing the General Curriculum (NCAC)

Improving access, participation, and progress within the general curriculum requires a vision of how new curricula, teaching practices, and policies can come together to create a powerful implementation model bridging theory and practice. Attaining this vision requires collaboration between experts in universal design, advanced teaching practices, educational policy, and consensus building. NCAC is a collaborative endeavor to improve access, participation, and progress within the general curriculum.²³⁸

For more information, go to <http://4.17.143.133/ncac/>

University of Kansas Center for Research on Learning (UKCRL)

At the University of Kansas Center for Research on Learning, they believe that no child or

adolescent can be left behind in the quest for literacy, equal opportunity, and a future with promise. The demands placed on adolescents in today's high schools are significant. For those students who lack basic literacy skills, these demands may be insurmountable. UKCRL has developed the Strategic Instruction Model (SIM), a comprehensive approach to adolescent literacy that addresses the need of students to be able to read and understand large volumes of complex reading materials as well as to be able to express themselves effectively in writing.²³⁹ For more information, go to <http://www.kucrl.org/>

Council for Exceptional Children (CEC)

The Council for Exceptional Children is the largest international professional organization dedicated to improving educational outcomes for individuals with exceptionalities, students with disabilities, and/or the gifted. CEC advocates for appropriate governmental policies, sets professional standards, provides continual professional development, advocates for newly and historically underserved individuals with exceptionalities, and helps professionals obtain

conditions and resources necessary for effective professional practice.²⁴⁰

CEC presents briefs addressing selected significant issues, such as comparisons between IDEA 2004 final regulations with those from the IDEA 1997 regulations.²⁴¹ For more information, go to <http://www.cec.sped.org/Content/NavigationMenu/PolicyAdvocacy/IDEAResources/default.htm>

U.S. Department of Education (USDOE)

This USDOE website focuses on information related to the No Child Left Behind Act. Information is provided for teachers, parents, and educational administrators at the school, district, and state levels. The comprehensive website provides detailed, accurate, and easy-to-use information concerning both policies and implementation of NCLB. For more information, go to <http://www.ed.gov/nclb/landing.jhtml>

National Technical Assistance Center on Positive Behavioral Interventions and Supports (PBIS)

The overall goals of the TA Center on PBIS are to: (a) identify and enhance knowledge about, and practical demonstration of, school-wide PBS practices, systems, and outcomes along the three-tiered continuum (primary, secondary, tertiary); and, (b) develop, conduct, and evaluate technical assistance and dissemination efforts that allow evidence-based practices to be implemented on a large scale with high durability and effectiveness. In the three-tiered approach, primary interventions provide behavioral support to all youth via a school wide or facility wide behavior plan. Secondary interventions are for those youth that need additional support to succeed behaviorally and/or academically. Examples of secondary interventions include such interventions as small group drug counseling and social skills or anger management groups. Finally, for the small percentage of youth with severe emotional or behavioral difficulties, tertiary interventions provide research-based individualized interventions.

The Center operates as a consortium of researchers, advocates, family members, teacher educators, professional association leaders, and model developers, and receives guidance from an external evaluation team. A network of researchers has been established to provide feedback on Center-related products and activities, receive and disseminate Center-related products and information, and participate in Center-sponsored events.²⁴² For more information, go to <http://www.pbis.org/main.htm>

Career Preparation & Work-Based Learning Experiences

Job Corps

Job Corps is a comprehensive set of services that includes outreach and admissions; vocational training; academic instruction; residential, health, and related services; and placement.²⁴³ Job Corps currently operates under the Workforce Investment Act of 1998 and is administered by the U.S. Department of Labor.²⁴⁴ Recent studies have cast doubt on the cost benefit of Job Corps and effects on employment and earnings.²⁴⁵ However, data also indicate that effects were more pronounced for older youth (i.e., 20-24 years old). There are also indications that participation in Job Corps has resulted in reduced crime committed by participants following exit from the program.²⁴⁶ Job Corps is a promising program. Additional research is needed, though, to identify the contribution of certain variables (e.g., length of time in program, length of vocational programming) that improves outcomes for older youth, and how these factors can be effectively adapted and implemented for younger participants.

North Carolina Technical Education

The mission of Career Technical Education (CTE) is to help empower students for effective participation in an international economy as world-class workers and citizens. CTE programs are designed to contribute to the broad

educational achievement of students, including basic skills such as reading, writing, and mathematics, as well as to their ability to work independently and as part of a team, think creatively and solve problems, and utilize technology.

In 2004-2005, nearly 900,000 students in grades 6-12 were enrolled in Career Technical Education (Students enrolled in more than one CTE course count multiple times in the total). These courses were taught by more than 5,300 teachers and with the assistance of more than 530 support personnel in special populations and career development. Overall, 75.6 percent of the students enrolled in grades 9-12 statewide took at least one CTE course.²⁴⁷ For more information, go to http://www.ncpublicschools.org/workforce_development/index.html

Youth Development & Leadership

The National Evaluation and Technical Assistance Center for the Education for Children and Youth Who Are Neglected, Delinquent or At Risk (NDTAC)

NDTAC is the result of a contract between the U.S. Department of Education and the American Institutes for Research (AIR), a nonprofit research organization that performs basic and applied research, provides technical support, and conducts analyses based on methods of the behavioral and social sciences. AIR's program areas focus on education, health, individual and organizational performance, and quality of life.

The overarching mission of NDTAC is to improve educational programming for neglected and delinquent youth. NDTAC is legislated to: (a) develop a uniform evaluation model for State Education Agency (SEA) Title I, Part D, Subpart I programs; (b) provide technical assistance (TA) to states in order to increase their capacity for data collection and their ability to use that data to improve educational programming for neglected or delinquent youth; and, (c) serve as a facilitator between different organizations, agencies, and

interest groups that work with youth in neglected and delinquent facilities.²⁴⁸ For more information, go to <http://www.neglecteddelinquent.org/nd/default.asp>

Connecting Activities

The Parent Advocacy Coalition for Educational Rights (PACER) Center

The mission of PACER Center is to expand opportunities and enhance the quality of life of children and young adults with disabilities and their families, based on the concept of parents helping parents.

Through its ALLIANCE and other national projects, PACER, a national center, responds to thousands of parents and professionals each year. From California to Minnesota to New York, PACER resources make a difference in the lives of 6.5 million children with disabilities nationwide.

With assistance to individual families, workshops, materials for parents and professionals, and leadership in securing a free and appropriate public education for all children, PACER's work affects and encourages families in Minnesota and across the nation.²⁴⁹ For more information, go to <http://www.pacer.org/>

Project SUPPORT

Project Parole SUPPORT (Service Utilization Promoting Positive Outcomes in Rehabilitation and Transition for Incarcerated Adolescents with Disabilities), initiated in 1999, is a statewide program designed to support assist adolescents with disabilities who are paroled from youth correctional facilities to return to their communities and enter school and/or employment through the support of a transition specialist. This project is collaboratively managed by the Oregon Department of Education (ODE), Oregon Youth Authority (OYA), Oregon Office of Vocational Services (VR), and the University of Oregon (UO). Currently, statewide coverage of the project has been achieved.

Project Probation SUPPORT (Service Utilization Promoting Positive Outcomes in Rehabilitation and Transition probation youth) is a pilot project funded through Edward S. Byrne funds to assist adolescents on probation through the Oregon Youth Authority maintain or gain school enrollment and develop employability and healthy leisure skills. This project is collaboratively managed by ODE, OYA, and UO. Currently 2 rural regions are receiving piloted services.²⁵⁰ For more information, go to <http://www.uoregon.edu/~sset/SUPPORT/projectSupport.htm>

The Federal Youth Court Program

The Federal Youth Court Program is funded by the Office of Juvenile Justice and Delinquency Prevention (OJJDP) Office of Justice Programs, U.S. Department of Justice in collaboration with the National Highway Traffic Safety Administration (NHTSA), U.S. Department of Transportation, and the Office of Safe and Drug-Free Schools (OSDFS), U.S. Department of

Education. As part of the Federal Youth Court Program, the National Council of Juvenile and Family Court Judges (NCJFCJ) serves as a central point of contact for youth court programs across the nation, provides informational services, delivers training and technical assistance, and develops resource materials on how to develop and enhance youth court programs in the United States.²⁵¹ For more information, go to <http://www.youthcourt.net/>

Family Involvement & Supports

Multisystemic Therapy

This website will provide you with an introduction to Multisystemic Therapy, and the necessary components for its successful implementation. They have established links to related web sites for additional information about Multisystemic Therapy. For more information, go to <http://www.mstservices.com/>

APPENDIX B

Footnotes

Chapter One Footnotes

¹ Snyder, H. N., & Sickmund, M. (2006). *Juvenile offenders and victims: 2006 national report*. Washington, DC: U.S. Department of Justice, Office of Justice Programs, Office of Juvenile Justice and Delinquency Prevention.

² Quinn, M. M., Rutherford, R. B., Leone, P. E., Osher, D. M., & Poirier, J. M. (2005). Youth with disabilities in juvenile corrections: A national survey. *Exceptional Children, 71*, 339-345.

³ Quinn et al. (2005).

U.S. Department of Education. (2005). *Twenty-seventh annual report to congress on the implementation of the Individuals with Disabilities Education Act*. Jessup, MD: Education Publications Center.

⁴ Teplin, L. A., Abram, K. M., McClelland, G. M., Dulcan, M. K., & Mericle, A. A. (2002). Psychiatric disorders in youth in juvenile detention. *Archives of General Psychiatry, 59*, 1133-1143.

⁵ Cohen, M. A. (1998). The monetary value of saving a high-risk youth. *Journal of Quantitative Criminology, 14(1)*, 5-33.

⁶ Griller-Clark, H., Rutherford, R. B., & Quinn, M. M. (2004). Practices in transition for youth in the juvenile justice system (pp. 247-262). In D. Cheney (Ed.). *Transition of students with emotional or behavioral disabilities from school to community: Current approaches for positive outcomes*. Arlington, VA: Division for Career Development and Transition/Council for Children with Behavioral Disorders.

LeBlanc, L. A., & Pfannenstiel, J. C. (1991). Unlocking learning: Chapter 1 in correctional facilities. *Longitudinal Study Findings: National Study of the ECIA Chapter 1 Neglected or Delinquent Program*. Washington, DC: U.S. Department of Education.

⁷ Wagner, M., Kutash, K., Duchnowski, A. J., Epstein, M. H., & Sumi, W. C. (2005). The children and youth we serve: A national picture of the characteristics of students with emotional disturbances receiving special education. *Journal of Emotional and Behavioral Disorders, 13*, 79-96.

- ⁸ Muller, E. (2005, October). The juvenile justice system and youths with disabilities. *inForum: Brief Policy Analysis*. Alexandria, VA: National Association of State Directors of Special Education.
- ⁹ Muller, E. (2005, October).
- ¹⁰ Harp, C. (2002). *Bringing balance to juvenile justice*. Alexandria VA: American Juvenile Justice Prosecution Center, American Prosecutors Research Institute.
- ¹¹ Quinn et al. (2005).
- ¹² U.S. Department of Education. (2005).
- ¹³ Quinn et al. (2005).
- ¹⁴ Gagnon, J. C., Barber, B. R., & Van Loan, C. L. (2008). *Characteristics and curriculum policies and practices in juvenile correctional schools*. Unpublished manuscript.
- ¹⁵ Quinn et al. (2005).
- ¹⁶ Wagner et al. (2005).
- U.S. Department of Education. (2005).
- ¹⁷ Landrum, T. J., Tankersley, M., & Kaufman, J. M. (2003). What is special about special education for students with emotional and behavioral disorders? *The Journal of Special Education, 37*, 148-156.
- ¹⁸ Greenbaum, P. E., Dedrick, R. F., Friedman, R. M., Kutash, K., Brown, E. C., Lardieri, S. P., & Pugh, A. M. (1996). National adolescent and child treatment study (NACTS): Outcomes for children with serious emotional and behavioral disturbance. *Journal of Emotional and Behavioral Disorders, 4*, 130-146.
- ¹⁹ Jolivet, K., Stichter, J. P., Nelson, C. M., Scott, T. M., & Liaupsin, C. J. (2000, August). *Improving post-school outcomes for students with emotional and behavioral disorders*. Arlington, VA: ERIC Clearinghouse on Disabilities and Gifted Education. Retrieved April 21, 2006 from <http://ericec.org/digests/e597.html>
- ²⁰ Wagner et al. (2005).
- ²¹ Doren, B, Bullis, M., & Benz, M. (1996). Predicting arrest status of adolescents with disabilities in transition. *The Journal of Special Education, 29*, 363-380.
- Snyder & Sickmund. (2006).
- ²² Wagner et al. (2005).
- ²³ Doren et al. (1996).
- ²⁴ Snyder & Sickmund. (2006).
- Silver, S. E., Duchnowski, A. J., Kutash, K., Friedman, R. M., Eisen, M., Prange, M. E., Brandenburg, N. A., & Greenbaum, P. E. (1992). A comparison of children with serious emotional disturbances served in residential and school settings. *Journal of Child and Family Studies, 1*, 43-59.
- U.S. Department of Education. (1994). *Sixteenth annual report to congress on the implementation of the Individuals with Disabilities Education Act*. Jessup, MD: Education Publications Center.
- ²⁵ Greenbaum et al. (1996).
- ²⁶ Snyder & Sickmund. (2006).
- ²⁷ U.S. Department of Education. (2005).
- ²⁸ Doren et al. (1996).
- ²⁹ U.S. Department of Health and Human Services. (1999). *Mental health: A report of the Surgeon General*. Washington, DC: Author.

- ³⁰ Kaufman, P., Alt, M., & Chapman, C. (2001). *Dropout rates in the United States: 2000*. Washington, DC: National Center on Education Statistics.
- ³¹ Jolivette et al. (2000, August).
- ³² Gagnon, J. C., & Mayer, M. (2004). *Educating juveniles with disabilities in correctional settings*. In L. M. Bullock, R. A. Gable, & K. J. Melloy (Eds.), Fifth CCBD mini-library series (pp. 1-59). Arlington, VA: Council for Children with Behavioral Disorders.
- ³³ Bureau of Labor Statistics. (2001). *Employment experience of youths: Results from the first three years of a longitudinal survey*. Washington, DC: U.S. Department of Labor.
- ³⁴ U.S. Department of Labor. (2003). *Educational Resources: So you are thinking about dropping out of school?* Washington, DC: Author. Retrieved January 14, 2005 from <http://www.dol.gov/asp/fibre/dropout.htm>
- ³⁵ Gonzales, R., Richards, K., Seeley, K., Harmacek, M., & Stokes, M. (2002). *Youth out of school: Linking absence to delinquency* (2nd edition). Denver, CO: The Colorado Foundation for Families and Children.
- ³⁶ Newcomer, P. L., Barenbaum, E., & Pearson, N. (1995). Depression and anxiety in children and adolescents with learning disabilities, conduct disorders, and no disabilities. *Journal of Emotional and Behavioral Disorders*, 3, 27-40.
- ³⁷ Wagner et al. (2005).
- ³⁸ Doren et al. (1996).
- ³⁹ Mulford, C. F., Reppucci, N. D., Mulvey, E. P., Woolard, J. L., & Portwood, S. L. (2004). Legal issues affecting mentally disordered and developmentally delayed youth in the juvenile justice system. *International journal of forensic mental health*, 3(1), 3-22.
- ⁴⁰ Oseroff, A., Oseroff, C. E., Westling, D., & Gessner, L. J. (1999). Teachers' beliefs about maltreatment of students with emotional/behavioral disorders. *Behavioral Disorders*, 24, 197-209.
- ⁴¹ Mattison, R. E., Spitznagel, E. L., & Felix, B. C. (1998). Enrollment predictors of the special education outcome for students with SED. *Behavioral Disorders*, 23, 243-256.
- ⁴² Brooks, T. R., & Petit, M. (1997). *Early intervention: Crafting a community response to child abuse and violence*. Washington, DC: Child Welfare League of America.
- Child Welfare League of America. (1997). *Sacramento County community intervention program*. Washington, DC: Author.
- ⁴³ Wagner, M., & Cameto, R. (2004). The characteristics, experiences, and outcomes of youth with emotional disturbances. NLTS2 Data Brief 3(2), 1-8.
- ⁴⁴ Teplin et al. (2002).
- ⁴⁵ Teplin et al. (2002).
- Similar results were also noted in Skowrya, K. R., & Cocozza, J. J. (2006). *Blueprint for change: A comprehensive model for the identification and treatment of youth with mental health needs in contact with the juvenile justice system*. Delmar, NY: The National Center for Mental Health (NCMHJJ) and Policy Research Associates, Inc. Retrieved February 17, 2006 from www.ncmhjj.com/Bueprint/pdfs/Blueprint.pdf
- ⁴⁶ Abram, K. M., Teplin, L. A., Charles, D. R., Longworth, S. L., McClelland, G. M., & Dulcan, M. K. (2004). Posttraumatic stress disorder and trauma in youth in juvenile detention. *Archives of General Psychiatry*, 61, 403-410.
- ⁴⁷ Teplin et al. (2002).

- ⁴⁸ Teplin et al. (2002).
⁴⁹ Quinn et al. (2005).
 Teplin et al. (2002).
 U.S. Department of Education. (2005).
⁵⁰ Rabiner, D. L., Coie, J. D., Miller-Johnson, S., Boykin, A. M., & Lochman, J. E. (2005). Predicting the persistence of aggressive offending of African American males from adolescents into young adulthood: The importance of peer relations, aggressive behavior, and ADHD symptoms. *Journal of Emotional and Behavioral Disorders, 13*, 131-140.
⁵¹ The three theories are summarized from Fink, C. M. (1990). Special education students at risk: A comparative study of delinquency. In P. E. Leone (Ed.), *Understanding troubled and troubling youth* (pp. 61-81). Thousand Oaks, CA: Sage Publications. For a more comprehensive discussion, refer to this publication.
⁵² Snyder & Sickmund. (2006).
⁵³ National Center for Mental Health and Juvenile Justice. (2003). *National policy forum on mental health and juvenile justice: Moving toward an integrated policy for youth*. Delmar, NY: Policy Research Associates, Inc.
⁵⁴ Center for Mental Health in Schools. (2006). *The current status of mental health in schools: A policy and practice analysis*. Los Angeles, CA: Author. Retrieved April 27, 2006 from <http://smhp.psych.ucla.edu/pdfdocs/currentstatusmh/Report.pdf>
 Foster, S., Rollefson, M., Doksum, T., Noonan, D., Robinson, G., & Teich, J. (2005). *School mental health service in the United States, 2002-2003*. DHHS Pub. No. (SMA) 05-4068. Rockville, MD: Center for Mental Health Services, Substance Abuse, and Mental Health Services Administration. Retrieved April 27, 2006 from <http://www.mentalhealth.samhsa.gov/media/ken/pdf/SMA05-4068/SMA05-4068.pdf>
⁵⁵ Mears, D. P., & Aron, L. Y. (2003). *Addressing the needs of youth with disabilities in the juvenile justice system: The current state of knowledge* (p. 111). Washington, DC: Urban Institute, Justice Policy Center. Retrieved April 27, 2006 from http://www.urban.org/uploadedpdf/410885_youth_with_disabilities.pdf
⁵⁶ Davis, A. D., Sanger, D. D., & Morris-Friche, M. (1991). Language skills of delinquent and nondelinquent adolescent males. *Journal of Communication Disorders, 24*, 251-266.
⁵⁷ Rogers-Adkinson, D., & Griffith, P. (Eds.) (1999). *Communication disorders and children with psychiatric and behavioral disorders*. San Diego, CA: Singular.
⁵⁸ Wagner et al. (2005).
⁵⁹ Leone, P. E., Zaremba, B. A., Chapin, M. S., & Iseli, C. (1995). Understanding the overrepresentation of youths with disabilities in juvenile detention. *The District of Columbia Law Review, 3*, 389-401.
⁶⁰ Grisso, T. (1980). Juveniles' capacities to waive Miranda rights: An empirical analysis. *California Law Review, 68*, 1134-1166.
⁶¹ Sickmund, M. (2003). *Juveniles in court. Juvenile offenders and victims: National report series*. Washington, DC: U.S. Department of Justice, Office of Justice Programs, Office of Juvenile Justice and Delinquency Prevention.
⁶² Sickmund. (2003).
⁶³ Leone, P. E., Mayer, M. J., Malmgren, K., & Meisel, S. M. (2000). School violence and disruption: Rhetoric, reality, and reasonable balance. *Focus on Exceptional Children, 33*(1), 1-20.

National Center for Mental Health and Juvenile Justice. (2003).

⁶⁴ Bazelon Center for Mental Health Law. (2003). *Suspending disbelief: Moving beyond punishment to promote effective interventions for children with mental or emotional disorders*. Washington, DC: Author.

⁶⁵ National Center for Mental Health and Juvenile Justice. (2003).

⁶⁶ United States House of Representatives Committee on Government Reform-Minority Staff Special Investigation Division. (2004). *Incarceration of youth who are waiting for community mental health services in the United States*. Washington, DC: United States House of Representatives Committee on Government Reform-Minority Staff Special Investigation Division.

⁶⁷ United States House of Representatives Committee on Government Reform-Minority Staff Special Investigation Division. (2004).

⁶⁸ The National Alliance for the Mentally Ill. (1999). *Families on the brink: The impact of ignoring children with serious mental illness*. Arlington, VA: Author.

⁶⁹ Healey, G., & Hirschhorn, J. (2002). *Police pocket guide: Responding to youths with mental illness* (p. 4). Boston, MA: Parent/Professional Advocacy League. Retrieved April 17, 2006 from http://ppal.net/downloads/PPG_6-10-2002.doc

Hissong, R. (1991). Teen court-Is it an effective alternative to traditional sanctions? *Journal for Juvenile Justice and Detention Services*, 6, 14-23.

⁷⁰ See National Center for Mental Health and Juvenile Justice. (2003).

Dague B., & Tolin, C. (1996, April). *Developing parent supports within the juvenile justices setting:*

One community's experience. Presented at Family Strengths meeting, Portland State University.

⁷¹ Bynum, J. E., & Thompson, W. E. (1996). *Juvenile delinquency: A sociological approach* (3rd ed.; p. 430). Needham Heights, MA: Allyn and Bacon.

⁷² Sheldon, R. G. (1999, September). Detention diversion advocacy: An evaluation. *Juvenile Justice Bulletin*, 1. Washington, DC: U.S. Department of Justice, Office of Justice Programs, Office of Juvenile Justice and Delinquency Prevention.

⁷³ Mears, D. P., & Kelly, W. R. (2002). Linking process and outcomes in evaluating a statewide drug treatment program for youthful offenders. *Crime and Delinquency*, 48, 99-115.

⁷⁴ National Mental Health Association. (2004). *Mental health treatment for youth in the juvenile justice system: A compendium of promising practices* (p. 3). Alexandria, VA: Author. Retrieved April 28, 2006 from [http://www.dsgonline.com/ccp/MentalHealthTreatmentforYouthinJJSsystem\(NAMH\).htm](http://www.dsgonline.com/ccp/MentalHealthTreatmentforYouthinJJSsystem(NAMH).htm)

⁷⁵ National Center for Mental Health and Juvenile Justice. (2003).

⁷⁶ Lipsey, M. W., Wilson, D. B., & Cothorn, L. (2000, April). Effective interventions for serious juvenile offenders. *Juvenile Justice Bulletin*. Washington, DC: U.S. Department of Justice, Office of Justice Programs, Office of Juvenile Justice and Delinquency Prevention.

⁷⁷ Griffinger, W. (2001). National trends, local consequences: The expansion of juvenile detention Facilities. *Youth Law News*, XXII(1), 18-21.

Stanfield, R. (1999). *Pathways to juvenile detention reform: The JDAI story*. Baltimore, MD: The Annie E. Casey Foundation.

- Zavlek, S. (2005, August). Planning community-based facilities for violent juvenile offenders as part of a system of graduated sanctions. *Juvenile Justice Bulletin*. Washington DC: U.S. Department of Justice, Office of Justice Programs, Office of Juvenile Justice and Delinquency Prevention.
- ⁷⁸ Sickmund. (2003).
- ⁷⁹ Snyder, H. N., & Sickmund, M. (1999). *Juvenile offenders and victims: 1999 national report*. Washington, DC: U.S. Department of Justice, Office of Justice Programs, Office of Juvenile Justice and Delinquency Prevention.
- ⁸⁰ National Council of Juvenile and Family Court Judges. (2005). *Juvenile delinquency guidelines: Improving court practices in juvenile delinquency cases* (p.39). Reno, NV: Author.
- ⁸¹ Sickmund. (2003). p. 2.
- ⁸² Leone et al. (1995).
- ⁸³ Leone et al. (1995).
- ⁸⁴ Leone, P., Rutherford, R., & Nelson, C. (1991). *Special education in juvenile corrections: Working with behavioral disorders*. Reston, VA: Council for Exceptional Children.
- ⁸⁵ Snyder & Sickmund. (2006). p. 110.
- ⁸⁶ Snyder & Sickmund. (2006).
- ⁸⁷ MacArthur Foundation Research Network on Adolescent Development and Juvenile Justice. (n.d.). *The changing borders of juvenile justice: Transfer of adolescents to the adult criminal court* (Issue Brief 5). Philadelphia, PA: Author. Retrieved February 17, 2007 from http://www.adjj.org/downloads/6093issue_brief_3pdf
- ⁸⁸ Shiraldi, V., & Ziedenberg, J. (1999). *The Florida experiment: An analysis of the impact of granting prosecutors discretion to try juveniles as adults*. Washington, DC: Justice Policy Institute.
- ⁸⁹ Shiraldi & Ziedenberg. (1999).
- ⁹⁰ Shiraldi, V., & Ziedenberg, J. (1999) as cited in Poirier, J. M. (2004). The policy of prosecuting juvenile offenders as adults: A summary of key issues (p. 2). *EDJJ Notes*, 3(2), 1-2. Retrieved April 27, 2006 from <http://www.edjj.org/edjjnotes/volume3number2.pdf>
- ⁹¹ See McGowan, A., Hahn, R., Liberman, A., Crosby, A., Fullilove, M., Johnson, R., Moscicki, E., Price, L., Snyder, S., Tuma, F., Lowy, J., Briss, P., Cory, S., & Stone, G. (2007). Effects on violence of laws and policies facilitating the transfer of juveniles from the juvenile justice system and the adult justice system. *American Journal of Preventative Medicines*, 32(4S), S7-S28.
- ⁹² Sickmund. (2003).
- ⁹³ Sickmund. (2003).
- ⁹⁴ Leone et al. (1995). p. 395.
- ⁹⁵ Arredondo, D. E. (2003). Child development, children's mental health and the juvenile justice system: Principles for effective decision-making. *Stanford Law & Policy Review*, 14(1), 13-28.
- ⁹⁶ Arredondo. (2003). National Center for Mental Health and Juvenile Justice. (2003).
- ⁹⁷ National Council of Juvenile and Family Court Judges. (2005).

Chapter Two Footnotes

- ⁹⁸ National Council of Juvenile and Family Court Judges. (2005).
- ⁹⁸ National Center for Mental Health and Juvenile Justice. (2003).
- ¹⁰⁰ Quinn W. H., & Van Dyke, D. J. (2004). A multiple family group intervention for first-time juvenile offenders: Comparisons with probation and dropouts on recidivism. *Journal of Community Psychology, 32*, 177-200.
- ¹⁰¹ Quinn & Van Dyke. (2004).
- ¹⁰² Snyder & Sickmund. (2006).
- ¹⁰³ U.S. Department of Education. (2005).
- ¹⁰⁴ Leone et al. (1995).

Chapter Three Footnotes

- ¹⁰⁵ Leone, P. E. (1994). Education services for youth with disabilities in a state-operated juvenile correctional system: Case study and analysis. *Journal of Special Education, 28*, 43-58.
- ¹⁰⁶ Rutherford, R. B., Nelson, C. M., Wolford, B. I. (1985). Special Education in the most restrictive environment: Correctional/special education. *Journal of Special Education, 19*, 59-71.
- ¹⁰⁷ Rutherford et al. (1985).
- ¹⁰⁸ Office of Juvenile Justice and Delinquency Prevention. (2000). *Employment and training for court involved youth*. Washington, DC: U.S. Department of Justice, Office of Justice Programs, Office of Juvenile Justice and Delinquency Prevention.
- ¹⁰⁹ Wagner & Cameto. (2004).

- ¹¹⁰ Alberto, P. A., & Troutman, A. C. (2005). *Applied behavior analysis for teachers* (7th ed.). Upper Saddle River, NJ: Prentice Hall.
- ¹¹¹ MacArthur Foundation Research Network on Adolescent Development and Juvenile Justice. (n.d.). *Less guilty by reason of adolescence* (Issue Brief 3). Philadelphia, PA: Author. Retrieved February 17, 2007 from http://www.adjj.org/downloads/6093issue_brief_3pdf
- ¹¹² Scott, E. S., & Steinberg, L. (2003, February). Blaming youth. *Texas Law Review, 81*, 799-840.
- ¹¹³ Harris, L. (2006). *Making the juvenile justice-workforce system connection for re-entering young offenders*. Washington, DC: Center for Law and Social Policy.
- ¹¹⁴ See description of four communities that are collaborating in Harris. (2006).
- ¹¹⁵ Harris. (2006). p. 15.
- ¹¹⁶ Scott et al. (2003, February).
- ¹¹⁷ Harris. (2006).
- ¹¹⁸ Gies, S. V. (2003, September). Aftercare services. *Juvenile Justice Bulletin*. Washington, DC: U.S. Department of Justice, Office of Justice Programs, Office of Juvenile Justice and Delinquency Prevention.
- ¹¹⁹ Bullis, M., Yovanoff, P., & Havel, E. (2004). The importance of getting started right: Further examination of the facility-to-community transition. *Journal of Special Education, 38*, 80-94.
- ¹²⁰ Bullis, M., & Yovanoff, P. (1997). *Return to close custody: Analysis of the Oregon Youth Authority's data set*. Eugene, OR: University of Oregon, Institute on Violence and Destructive Behavior.

Bullis, M., Yovanoff, P., Mueller, G., & Havel, E. (2002). Life on the “outs” — Examination of the facility-to-community transition of incarcerated youth. *Exceptional Children*, 69, 7-22.

¹²¹ 8 VAC 20-660-10 et seq. Virginia Board of Education regulations governing the re-enrollment of students committed to the Department of Juvenile Justice.

Chapter Four Footnotes

¹²² National Center for Mental Health and Juvenile Justice. (2003).

Dague B., & Tolin, C. (1996, April).

¹²³ Healey, G., & Hirschhorn, J. (2002).

¹²⁴ Coalition for Evidence-Based Policy. (2006). Multisystemic therapy for juvenile offenders: A treatment targeting multiple factors linked to anti-social behavior. Washington, DC: Author. Retrieved December 3, 2006 from <http://www.evidencebasedprograms.org/Default.aspx?tabid=29>

¹²⁵ Family focused treatment, including cognitive-behavioral interventions are effective

Hoagwood, K. J., Burns, B. J., Kiser, L., Ringeisen, H., & Schoenwald, S. K. (2001). Evidenced-based practice in child and adolescent mental health services. *Psychiatric Services*, 52, 1179-1189.

Larson, K. A., & Turner, D. (2002). *Best practices for serving court involved youth with learning, attention, and behavioral disabilities*. Monograph series on education, disability, and juvenile justice. Washington, DC: Center for Effective Collaboration and Practice and National Center on Education, Disability and Juvenile Justice.

¹²⁶ Dague B., & Tolin, C. (1996, April).

Quinn & Van Dyke. (2004).

¹²⁷ Lipsey, Wilson, & Cothorn. (2000, April).

¹²⁸ Zavlek. (2005, August). p.5.

¹²⁹ Mears & Aron. (2003).

¹³⁰ Mears & Aron. (2003).

¹³¹ Broadly, there are several purposes of key legislation in the context of juvenile corrections that make adherence critical for student academic and social success while in school and upon their entrance into the workforce. Specifically, the purpose of IDEA 2004 (Section 601(d)) includes

(1A) to ensure that all children with disabilities have available to them a free appropriate public education that emphasizes special education and related services designed to meet their unique needs and prepare them for further education, employment and independent living;

(1B) to ensure that the rights of children with disabilities and parents of such children are protected;

(1C) to assist states, localities, educational service agencies, and federal agencies to provide for the education of all children with disabilities;

(3) to ensure that educators and parents have the necessary tools to improve educational results for children with disabilities by supporting system improvement activities; coordinated research and personnel preparation; coordinated technical assistance, dissemination, and support; and technology development and media services; and

(4) to assess and ensure the effectiveness of efforts to educate children with disabilities.

In relation to juvenile corrections, the purposes of Section 504 of the Rehabilitation Act of 1973 and the Americans with Disabilities Act of 1990 are similar. Both prohibit discrimination on the

basis of disability. However, Section 504 is limited to organizations that receive federal financial assistance (or are conducted by any executive agency or the United States Postal Service). As noted, in addition to reduced recidivism, programs that improve adherence to these important civil rights statutes are worthy of attention.

See Gagnon & Mayer. (2004).

Americans with Disabilities Act of 1990, Pub. L. No. 101-336, §2, 104 Stat. 328 (1991).

Individuals with Disabilities Education Act Amendments of 1997, Pub. L. No.105-17. Title 20, U.S.C. 1400-1487; 111 Stat. 37-157

Individuals with Disabilities Education Act of 2004. Pub. L. No.108-446.

National Association of State Directors of *Special Education*. (1999). *Students with disabilities in juvenile justice programs: Directions for federal support*. Proceedings of Project FORUM at National Association of State Directors of Special Education. Author: Alexandria, VA. (ERIC Document Reproduction Service No. ED428492)

Nondiscrimination under federal grants and programs. 29 U.S.C. § 794(2). 1973.

¹³² The Task Force on Employment and Training for Court-Involved Youth. (2000). *Employment and training for court involved youth*. Washington DC: U.S. Department of Labor, Employment and Training Administration, and U.S. Department of Justice, Office of Juvenile Justice and Delinquency Prevention.

¹³³ The Task Force on Employment and Training for Court-Involved Youth. (2000).

¹³⁴ Sherman, L. W., Gottfredson, D. W., MacKenzie, D. W., Eck, J. W., Reuter, P. W., & Bushway, S. W. (1997) *Preventing crime: What works, what*

doesn't, what's promising, Report to the United States Congress. Washington DC: U.S. Department of Justice, Office of Justice Programs, National Institute of Justice.

Harris. (2006).

¹³⁵ Brown, D., DeJesus, E., & Schiraldi, V. (2002). *Barriers and promising approaches to workforce and youth development for young offenders*. Baltimore, MD: Annie E. Casey Foundation.

¹³⁶ The Task Force on Employment and Training for Court-Involved Youth. (2000).

¹³⁷ American Youth Policy Forum. (2006). *Academic and workforce development programs for court-involved youth, a youth development approach* (Forum Brief; p. 1). Retrieved January 11, 2007 from <http://www.aypf.org/forumbriefs/2006/fb112006.htm>

¹³⁸ American Youth Policy Forum. (2006). p. 1.

¹³⁹ The Task Force on Employment and Training for Court-Involved Youth. (2000).

¹⁴⁰ The Task Force on Employment and Training for Court-Involved Youth. (2000).

¹⁴¹ The Task Force on Employment and Training for Court-Involved Youth. (2000).

¹⁴² Office of Juvenile Justice and Delinquency Prevention. (2000).

¹⁴³ Office of Juvenile Justice and Delinquency Prevention. (2000). p. 7.

¹⁴⁴ Nelson, C. M., Sugai, G., & Smith, C. R. (2005, Summer). Positive behavior support offered in juvenile corrections. *Counterpoint*, 1, 6-7.

¹⁴⁵ Office of Special Education Programs, Technical Assistance Center on Positive Behavioral Interventions and Supports. (2006). *Schoolwide*

- PBIS* (p. 1). Washington, DC: Author. Retrieved April 28, 2006 from <http://www.pbis.org/schoolwide.htm#Components>
- ¹⁴⁶ Arizona State University. (2006). Positive behavioral interventions and supports of Arizona (PBISAz) (p. 1). Tempe, AZ: Author. Retrieved April 27, 2006 from <http://community.uui.asu.edu/Detail.asp?programID=312>
- ¹⁴⁷ Jobs for America's Graduates. (2006). JAG model. Alexandria, VA: Author. Retrieved April 25, 2006 from <http://www.jag.org/model.htm>
- ¹⁴⁸ Jobs for America's Graduates. (2006).
- ¹⁴⁹ Jobs for America's Graduates. (2005). *25th anniversary annual report: Committed to leaving no child left behind*. Alexandria, VA: Author. Retrieved April 25, 2006 from http://www.jag.org/documents/annual_report_2005.pdf
- ¹⁵⁰ Jobs for America's Graduates. (2007). *Participants with selected barriers in the class of 2005 and targeted performance outcomes: Graduation rate and postsecondary enrollment rate*. Alexandria, VA: Unpublished data.
- ¹⁵¹ Jobs for America's Graduates. (2007).
- ¹⁵² Mears & Aron. (2003).
- ¹⁵³ Leone et al. (1995). p. 104.
- ¹⁵⁴ Orlando, F. (1999). *Controlling the front gates: Effective admissions policies and practices*. Baltimore, MD: The Annie E. Casey Foundation. Retrieved April 27, 2006 from http://www.aecf.org/initiatives/jdai/pdf/3_controlling.pdf
- ¹⁵⁵ Mendel, R. A. (2001). *Less cost, more safety: Guiding lights for reform in juvenile justice*. Washington, DC: American Youth Policy Forum. Retrieved April 20, 2006 from <http://www.aypf.org/publications/lesscost/pages/full.pdf>
- ¹⁵⁶ Zavlek. (2005, August). p. 4.
- ¹⁵⁷ Missouri Department of Social Services, Division of Youth Services. (2005). *Annual report: Fiscal year 2005*. Jefferson City, MO: Author. Retrieved April 20, 2006 from <http://www.dss.mo.gov/re/pdf/dys/dysfy05.pdf>
- ¹⁵⁸ Snyder & Sickmund. (2006).
- ¹⁵⁹ Lipsey, Wilson, & Cothorn. (2000, April).
- ¹⁶⁰ Hoagwood et al. (2001).
- ¹⁶¹ Hoagwood et al. (2001).
- ¹⁶² Center for Family Studies. (2002). *Brief strategic family therapy* (p. 1). Miami, FL: Author. Retrieved April 26, 2006 from <http://www.cfs.med.miami.edu/Docs/Miscellaneous/EckerdAnnouncement.pdf>
- ¹⁶³ National Youth Court Center. (2006). *Youth court list by state*. Lexington, KY: Author. Retrieved April 18, 2006 from http://www.youthcourt.net/national_listing/overview.htm
- ¹⁶⁴ Butts, J. A., & Buck, J. (2000, October). Teen courts: A focus on research. *Juvenile Justice Bulletin*. Washington, DC: U.S. Department of Justice, Office of Justice Programs, Office of Juvenile Justice and Delinquency Prevention.
- ¹⁶⁵ Butts & Buck. (2000, October).
- ¹⁶⁶ Butts & Buck. (2000, October).
- ¹⁶⁷ Butts & Buck. (2000, October).
- ¹⁶⁸ Butts & Buck. (2000, October).
- ¹⁶⁹ Harrison, P., Maupin, J. R., & Mays, G. L. (2001). Teen court: An examination of processes and outcomes. *Crime and Delinquency*, 47, 243-264.

- ¹⁷⁰ Weisz, V., Lott, R. C., & Thai, N. D. (2002). A teen court evaluation with a therapeutic jurisprudence perspective. *Behavioral Sciences and the Law*, 20, 381-392.
- ¹⁷¹ Butts, J. A., Buck, J., & Coggeshall, M. B. (2002). *The impact of teen courts*. Washington, DC: The Urban Institute.
- Hisson, R. (1991).
- ¹⁷² North Carolina Administrative Office of the Courts, 1995 as cited in Leone et al. (1995).
- Seyfrit, C. L., Reichel, P. & Stutts, B. (1987). Peer juries as a juvenile justice diversion technique. *Youth and Society*, 18, 302-316.
- ¹⁷³ Forgays, D. K., & DeMilio L. (2005). Is teen court effective for repeat offenders? A test of the restorative justice approach. *International Journal of Offender Therapy and Comparative Criminology*, 49, 107-118.
- ¹⁷⁴ Butts & Buck. (2000, October).
- ¹⁷⁵ Butts & Buck. (2000, October).
- ¹⁷⁶ Coalition for Evidence-Based Policy. (2006). p. 1.
- ¹⁷⁷ Coalition for Evidence-Based Policy. (2006).
- ¹⁷⁸ Coalition for Evidence-Based Policy. (2006).
- ¹⁷⁹ National Mental Health Association. (2004).
- ¹⁸⁰ Lexcen, P., & Redding, R. E. (2000). Substance abuse and dependence in juvenile offenders (p. 1). *Juvenile Justice Fact Sheet*. Charlottesville, VA: Institute of Law, Psychiatry, & Public Policy, University of Virginia. Retrieved April 25, 2006 from http://www.ilppp.virginia.edu/Juvenile_Forensic_Fact_Sheets/SubAbuse.html
- ¹⁸¹ National Mental Health Association. (2004).
- ¹⁸² Burns, B. J., Schoenwald, S. K., Burchard, J. D., Faw, L., & Santos, A. B. (2000). Comprehensive community-based interventions for youth with severe emotional disorders: Multisystemic therapy and wraparound process. *Journal of Child and Family Studies*, 9, 283-314.
- ¹⁸³ Sheidow, A. J., Bradford, W. D., Henggeler, S. W., Rowland, M. D., Halliday-Boykins, C., Schoenwald, S. K., & Ward, D. M. (2004). Treatment costs for youths receiving multisystemic therapy or hospitalization after a psychiatric crisis. *Psychiatric Services*, 55, 548-554.
- ¹⁸⁴ Bureau of Labor Statistics. (2001).
- U.S. Department of Labor. (2003).
- ¹⁸⁵ Katsiyannis, A., & Archwamety, T. (1999). Academic remediation/achievement and other factors related to recidivism rates among delinquent youth. *Behavioral Disorder*, 24, 93-101.
- ¹⁸⁶ Drakeford, W. (2001). *The impact of an intensive program to increase the literacy skills of youth confined to juvenile corrections*. Unpublished doctoral dissertation, University of Maryland, College Park, as cited in Gagnon & Mayer. (2004). p. 33.
- ¹⁸⁷ Haberman, M., & Quinn, L. M. (1986). The high school re-entry myth: A follow-up study of juveniles released from two correctional high schools in Wisconsin. *Journal of Correctional Education*, 21, 133-140.
- Todis, B., Bullis, M., Waintrup, M., Schultz, R., & D'Ambrosio, R. (2001). Overcoming the odds: Qualitative examination of resilience among formerly incarcerated adolescents. *Exceptional Children*, 68, 119-139.
- ¹⁸⁸ Griller-Clark et al. (2004).
- LeBlanc & Pfannenstiel. (1991).

- ¹⁸⁹ Webb, S. L., & Maddox, M. E. (1986). The juvenile corrections interagency transition model: Moving students from institutions into community schools. *Remedial and Special Education, 7*, 56-61.
- ¹⁹⁰ Snyder, H. N., Espiritu, R. C., Huizinga, D., Loeber, R., and Petechuk, D. (2003, March). Prevalence and development of child delinquency. *Child Delinquency Bulletin*. Washington, DC: U.S. Department of Justice, Office of Justice Programs, Office of Juvenile Justice and Delinquency Prevention.
- ¹⁹¹ Snyder et al. (2003, March).
- ¹⁹² Burns, B. J., Howell, J. C., Wiig, J. K., Augimeri, L. K., Welsh, B. C., Loeber, R., & Petechuk, D. (2003, March). Treatment, services, and intervention programs for child delinquents. *Child Delinquency Bulletin Series*. Washington, DC: U.S. Department of Justice, Office of Justice Programs, Office of Juvenile Justice and Delinquency Prevention.
- ¹⁹³ University of Kansas Center for Research on Learning. (2006a). *Strategic instruction model* (p. 1). Lawrence, KS: Author. Retrieved April 20, 2006 from <http://www.ku-crl.org/sim/index.html>
- ¹⁹⁴ University of Kansas Center for Research on Learning. (2006b). *What is a content enhancement teaching routine?* (p. 1). Lawrence, KS: Author. Retrieved April 20, 2006 from <http://www.ku-crl.org/sim/ceroutines.html>
- ¹⁹⁵ University of Kansas Center for Research on Learning. (2006c). *What is a learning strategy?* Lawrence, KS: Author. Retrieved April 20, 2006 from <http://www.ku-crl.org/sim/lcurriculum.html>
- ¹⁹⁶ Gagnon, J. C., Wehby, J., Strong, A., & Falk, K. B. (2006). *Effective Mathematics and Reading Instruction for Secondary-Age Youths with Emotional and Behavioral Disorders*. In L. M. Bullock, R. A. Gable, & K. J. Melloy (Eds.), Sixth CCBD mini-library series (1-57). Arlington, VA: Council for Children with Behavioral Disorders.
- ¹⁹⁷ University of Kansas Center for Research on Learning. (2006d). *Teaming and support* (p. 1). Lawrence, KS: Author. Retrieved April 20, 2006 from <http://www.ku-crl.org/sim/teaming.html>
- ¹⁹⁸ Corbett, W. P., Clark, H. B., & Blank, W. (2002). Employment and social outcomes associated with vocational programming for youths with emotional or behavioral disorders. *Behavioral Disorders, 27*, 358-370.
- ¹⁹⁹ Corbett et al. (2002).
- ²⁰⁰ Black, T. H., Brush, M. M., Grow, T. S., Hawes, J. H., Henry, D. S., & Hinke, R. W., Jr. (1996). Natural Bridge transition program follow-up study. *Journal of Correctional Education, 47*, 4-12.
- ²⁰¹ North Carolina Department of Public Instruction. (n.d.). *VoCATS briefing* (p. 1). Raleigh, NC: Author. Retrieved April 26, 2006 from http://www.ncpublicschools.org/workforce_development/vocats/briefing/index.html
- ²⁰² North Carolina Department of Public Instruction. (n.d.). p. 3.
- ²⁰³ North Carolina Department of Labor. (n.d.). High school apprenticeship handbook. Raleigh, NC: Author. Retrieved April 26, 2006 from http://www.ncpublicschools.org/workforce_development/acrobat/hsappgd.pdf
- ²⁰⁴ Nelson et al. (2005, Summer).
- ²⁰⁵ Small, S., Reynolds, A., O'Connor, C., & Cooney, S. (2005). *What works, Wisconsin: What science tells us about cost-effective programs for juvenile delinquency prevention*. Madison, WI: University of Wisconsin-Madison.

- ²⁰⁶ Nelson et al. (2005, Summer).
- ²⁰⁷ Lipsey, Wilson, & Cothorn. (2000, April).
- ²⁰⁸ Hoagwood et al. (2001).
Rohde, P., Jorgensen, J. S., Seeley, J. R., & Mace, D. E. (2004). Pilot evaluation of the coping course: A cognitive-behavioral intervention to enhancing coping skills in incarcerated youth. *Journal of the American Academy of Child and Adolescent Psychiatry*, 43, 669-675.
- ²⁰⁹ Lipsey, Wilson, & Cothorn. (2000, April).
Bullis, M., Bull, B., Johnson, P., & Johnson, B. (1994). Identifying and assessing the community-based social behaviors of adolescents and young adults with emotional and behavioral disorders. *Journal of Emotional and Behavioral Disorders*, 2, 173-189.
Schonert-Reichl, K. A. (1993). Empathy and social relationships in adolescents with behavior disorders. *Behavioral Disorders*, 18, 189-204.
- ²¹⁰ Sidana, A. (2006). *PBIS in juvenile justice settings*. Retrieved April 28, 2006 from <http://www.neglected-delinquent.org/nd/resources/spotlight/spotlight200601b.asp>
- ²¹¹ Sidana. (2006).
- ²¹² Sidana. (2006).
- ²¹³ Sidana. (2006).
- ²¹⁴ Sidana. (2006).
- ²¹⁵ Sidana. (2006).
- ²¹⁶ The President's New Freedom Commission on Mental Health. (2003). *Achieving the promise: Transforming mental health care in America*. Retrieved April 19, 2006 from <http://www.mentalhealthcommission.gov/reports/FinalReport/toc.html>
- ²¹⁷ National Mental Health Association. (2004).
- ²¹⁸ Abram et al. (2004).
- ²¹⁹ Kadish, T. E., Glaser, B. A., Calhoun, G. B., & Risler, E. A. (1999). Counseling juvenile offenders: A program evaluation. *Journal of Addictions and Offender Counseling*, 19, p 88-97.
- ²²⁰ Dowden, C. (2003). The effectiveness of substance abuse treatment with young offenders. *Youth Justice Research Series*. Ottawa, Ontario Canada: Department of Justice-Canada. Retrieved April 25, 2006 from http://www.justice.gc.ca/en/ps/rs/rep/2003/rr03yj-1/rr03yj_1.pdf
- ²²¹ Dowden. (2003).
- ²²² Larson & Turner. (2002).
- ²²³ Unruh, D., & Bullis, M. (2005a). Community and self-report of the facility-to-community transition needs for adjudicated youth with disabilities. *Career Development for Exceptional Individuals*, 28, 67-79.
Unruh, D., & Bullis, M. (2005b). Female and male juvenile offenders with disabilities: Differences in the barriers to their transition to the community. *Behavioral Disorders*, 30, 105-118.
Unruh, D., Bullis, M., Booth, C., & Pendergrass, J. (2005). Project SUPPORT: A description and evaluation for a transition project of formerly incarcerated adolescents with special education and mental health disorders. In M. H. Epstein, K. Kutash, & A. Duchnowski (Eds.), *Outcomes for children and youth with emotional and behavioral disorders and their families: Programs and evaluation best practices*. Austin, TX: Pro-Ed, Inc.
Unruh, D., Bullis, M., Pendergrass, J., Booth, C., Waintrup, M., & Montesano, D. (2004). Project SUPPORT: A transition project of formerly incarcerated adolescents with special education and mental health disorders. In D. Cheney (Ed.),

Transition of students with emotional or behavioral disabilities from school to community: Current approaches for positive outcomes. Arlington, VA: Council for Exceptional Children, Division of Career Development and Transition.

²²⁴ Bullis, M., & Cheney, D. (1999). Vocational and transition interventions for adolescents and young adults with emotional or behavioral disorders. *Focus on Exceptional Children*, 31(7), 1-24.

²²⁵ Unruh, D., Gau, J., Waintrup, M. (in press). An Exploration of Factors Reducing Recidivism Rates of Formerly Incarcerated Youth with Disabilities Participating in a Re-Entry Intervention. *Journal of Child & Family Studies*.

²²⁶ Unruh & Bullis. (2005a).

Unruh & Bullis. (2005b).

Chapter Five Footnotes

²²⁷ Leone, P. E., & Meisel, S. (1997). Improving education services for students in detention and confinement facilities. *Children's Legal Rights Journal*, 71(1), 2-12.

Wolford, B. I. (2000). *Juvenile justice education: Who is educating the youth.* Richmond, KY: Training Resource Center, Eastern Kentucky University.

²²⁸ U.S. Department of Justice, Civil Rights Division, Special Litigation Section. (2000). *Juvenile correctional facilities* (p. 1). Washington DC: Author. Retrieved January 11, 2007 from <http://www.usdoj.gov/crt/split/juveniles.htm>

²²⁹ Gagnon, J. C. (in press). State level curricular, assessment, and accountability policies, practices, and philosophies for exclusionary school settings. *Journal of Special Education*.

²³⁰ Gagnon, Barber, et al. (2008).

²³¹ Leone, P. E., & Cutting, C. A. (2004). Appropriate education, juvenile corrections, and No Child Left Behind. *Behavioral Disorders*, 29, 260-265.

²³² Florida Department of Education, Bureau of Exceptional Education and Student Services. (2005, February). No Child Left Behind in juvenile justice education. FL: Author. Retrieved January 10, 2008 from <https://www.ecs.org/html/offsite.asp?document=http%3A%2F%2Fwww%2Efirm%2Eedu%2Fdoe%2Fcommhome%2Fpdf%2Fdjj%2Dall%2Epdf>

²³³ Leone & Cutting. (2004).

Snyder & Sickmund. (1999).

American Youth Policy Forum. (2006). p. 1.

²³⁴ Gagnon, Barber, et al. (2008).

Leone & Cutting. (2004).

²³⁵ Leone & Cutting. (2004).

²³⁶ Major, A. K., Chester, D. R., McEntire, R., Waldo, G. P., & Blomberg, T. G. (2002). Pre-post longitudinal evaluation of juvenile justice education. *Evaluation Review*, 26, 301-321.

²³⁷ National Center on Education, Disability and Juvenile Justice. (2007). *Transition planning and services*. Retrieved January 11, 2007 from <http://www.edjj.org/focus/TransitionAfterCare/transition.html>

²³⁸ Gagnon, J. C., & Leone, P. E. (2005). Elementary day and residential schools: Characteristics and entrance and exit policies. *Remedial and Special Education*, 26, 141-150.

²³⁹ Todis et al. (2001). p. 138.

²⁴⁰ Gagnon, J. C., & Mayer, M. (2004).

²⁴¹ Young, D. (2004). First count to ten: Innovation and implementation in juvenile reintegration programs. *Federal Probation*, 68, 70-77.

²⁴² Young. (2004).

Appendix Footnotes

²⁴³ National Center on Accessing the General Education Curriculum (2006). *About NCAC*. Retrieved December 3, 2006 from <http://4.17.143.133/ncac/index.cfm?i=371>

²⁴⁴ University of Kansas Center for Research on Learning (UKCRL). (2006). Homepage. Retrieved December 3, 2006 from <http://www.kucrl.org>

²⁴⁵ Council for Exceptional Children. (2006). *About CEC*. Retrieved December 3, 2006 from http://www.cec.sped.org/AM/Template.cfm?Section=About_CEC

²⁴⁶ Council for Exceptional Children. (2006). *Policy and Advocacy*. Retrieved December 3, 2006 from <http://www.cec.sped.org/Content/NavigationMenu/PolicyAdvocacy/IDEAResources/default.htm>

²⁴⁷ National Technical Assistance Center on Positive Behavioral Interventions and Supports (PBIS). (2006) *PBIS goals*. Retrieved December 3, 2006 from <http://www.pbis.org/PBISgoals.htm>

²⁴⁸ Burghardt, J., Schochet, P. Z., McConnell, S., Johnson, T., Gritz, R. M., Glazerman, S., Homrighausen, J., & Jackson, R. (2001). *Does Job Corps work? Summary of the National Job Corps Study*. Princeton, NJ: Mathematica Policy Research, Inc.

²⁴⁹ McConnell, S., Glazerman, S. (2001). *National Job Corps Study: The benefits and costs of Job Corps*. Washington DC: Mathematica Policy Research, Inc.

²⁵⁰ Schochet, P. Z., McConnell, S., & Burghardt, J. (2003). *National Job Corps Study: Findings using administrative earning records data*. Princeton, NJ: Mathematica Policy Research, Inc.

²⁵¹ McConnell & Glazerman. (2001).

²⁵² North Carolina Technical Education. (2006). Homepage. Retrieved December 3, 2006 from http://www.ncpublicschools.org/workforce_development/index.html

²⁵³ The National Evaluation and Technical Assistance Center for the Education for Children and Youth Who Are Neglected, Delinquent or At Risk. (2006). *About us*. Retrieved December 3, 2006 from <http://www.neglected-delinquent.org/nd/about.asp>

²⁵⁴ The Parent Advocacy Coalition for Educational Rights (PACER) Center. (2006). Homepage. Retrieved December 3, 2006 from <http://www.pacer.org/>

²⁵⁵ Project SUPPORT. (2006). Homepage. Retrieved December 3, 2006 from <http://www.uoregon.edu/~sset/SUPPORT/projectSupport.htm>

²⁵⁶ The Federal Youth Court Program. (2006). *About the federal youth court program*. Retrieved December 3, 2006 from http://www.youthcourt.net/about_yc/index.htm

PUBLICATION ORDER FORM

Shipping Information

Name _____
Organization _____
Shipping Address _____
City _____
State _____ Zip _____
E-mail _____
Daytime Phone _____

Pricing

Price per copy	1-10	11-50	51 & over
<i>Making the Right Turn</i>	\$20	\$15	\$5
Number of copies	At cost per copy (from above)	Total Cost	

If paying by check

Make check payable to Institute for Educational Leadership. Send check and form to NCWD/Youth, c/o IEL, 4455 Connecticut Ave., NW, Suite 310, Washington, DC 20008

If paying by credit card

Provide the following information

Circle type of card: (VISA) (MASTERCARD)

Name on card _____

Mailing Address for Credit Card _____

City _____ State _____ Zip _____

Expiration Date _____

Credit Card Number _____

By completing this portion of the form I am authorizing NCWD to charge the total amount due.

Send form and payment to

NCWD/Youth, c/o IEL
4455 Connecticut Ave., NW, Suite 310
Washington, DC 20008

Or fax form to (202) 872-4050

Or e-mail: publications@ncwd-youth.info

National Collaborative on Workforce and Disability for Youth
c/o IEL, 4455 Connecticut Ave., NW, Suite 310
Washington, DC 20008
1-877-871-0744 (toll free)
Fax: 202-872-4050
publications@ncwd-youth.info

For More Information, Please Contact:

**NATIONAL COLLABORATIVE ON
WORKFORCE AND DISABILITY
FOR YOUTH**

c/o Institute for Educational Leadership
4455 Connecticut Ave., N.W., Suite 310
Washington, D.C. 20008
1-877-871-0744 (toll free)
1-877-871-0665 (TTY toll free)
contact@ncwd-youth.info
www.ncwd-youth.info

