

# JUVENILE JUSTICE AND YOUTH WITH DISABILITIES

PACER Center • Building Program Capacity to Serve Youth with Disabilities • **Session 6**

## 1) Workshop Preparation Suggestions

When conducting a training workshop, there are several basic planning considerations that need to be made. Most of the trainers who use this curriculum will already have their procedures for workshop planning in place. Information is included in **Session # 1** for those who may need additional suggestions.

## 2) Introduction of Presenters and Attendees: *12 minutes*

To foster an atmosphere where participants are both comfortable talking and have the opportunity to do so, we recommend no more than 35 participants attend the session. Depending on the size of the audience, you will want to limit the amount of time for introductions. We suggest having each attendee state their name, the name of the organization they represent, and if time allows, briefly state their relevant professional or personal experience with people with disabilities. Speakers should role model presenting this information in roughly thirty seconds. (If the size of the group is too large, there will not be enough time to allow for this type of introduction.)

## 3) Agenda: *1 minute*

The workshop starts with a transparency of the agenda. Provide a quick overview highlighting the main points to be covered.

*\*(Refer to the Agenda overhead transparency – slide 1)*

- Introductions
- Juvenile Justice and Youth with Disabilities
- Transitioning From Corrections to Community
- Case Studies
- Resources and Evaluation

Also provide “housekeeping” information including ground rules for questions, timing of breaks, location of bathrooms and literature tables, and other pertinent information

**-Ask group: *Q: Are there any questions?***

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#### 4) Goal of this Session:

The **objective** of this session is to demonstrate the impact of disability on youth in Juvenile Justice (JJ) and to familiarize participants with basic strategies that help youth successfully transition back to the community from correctional settings.

**-Ask: Q: Are there any questions about what we will cover today?**

#### 5) Trends in Juvenile Justice

*\*(Refer to the Trends in Juvenile Justice overhead transparency – slide 2)*

- Increased criminalization of school based problem behaviors
- Increased number of youth referred to adult court
- Higher rates of incarceration despite declining juvenile crime rate
- Numbers of females referred to JJ system increasing
- Reliance on corrections system for the provision of mental health and special education services
- Inadequate legal representation of youth with disabilities in the JJ system

This slide presents some disturbing trends in Juvenile Justice (as of Spring 2003). More and more young people are being referred to the justice system in schools for behaviors that are not criminal. For example, a youth gets into a fight. Instead of being sent to the principal's office, as was the practice in years past, the police are called and students are charged with disorderly conduct or assault.

A growing number of youth are being brought into corrections and even into adult systems because they can be held accountable with stricter guidelines and receive a more severe punishment. This is a recent trend. This practice is increasing despite the fact that most recent research shows this punitive approach to accountability doesn't work.

Youth with difficult behaviors, often caused by a disability, are not given many chances. The rate of incarceration of youth has gone up even though the rate of crime and criminal behavior has gone down. The number of young women referred to the justice system is also increasing. The number of young women who have committed serious felon-level crimes is rising.

One disturbing trend reflects the failure of our current mental health system to meet the needs of youth with problem behaviors. As a result many professionals refer youth to the corrections system because they view it as the only available treatment option. A current mindset seems to be: "If you can't receive your mental health needs in your community, then call the police and you'll get mental health services through our justice system." Unfortunately, it appears that our justice system is being used as part of 'a mental health service of last resort'.

Few youth going to court understand their rights. Many have mental health issues and learning disabilities. They may have trouble understanding the language, be very suggestible, or have

problems with impulsivity or other kinds of behavioral issues. They are asked a bewildering number of questions, they do not understand the system, and are frightened by the process. Youth can be very vulnerable, may confess to crimes they have not committed, or otherwise be taken advantage of in the legal system.

We will briefly touch on each of these issues today.

*\*(Refer to Mental Health and Youth in the Juvenile Justice System transparencies – slides 3 & 4)*

**Cook County Chicago Study of Nearly 2000 Youth Arrested over a 6 month period:**

- $\frac{2}{3}$  of males and  $\frac{3}{4}$  of females were found to have one or more psychiatric disorders
- Excluding conduct disorder, nearly 60% of males and more than  $\frac{2}{3}$  of females had one or more psychiatric disorders
- Half of males and nearly half of females had a substance abuse disorder
- Rates of many disorders were higher among females, Caucasians and older adolescents (Teplin, et al 2002)
- The rate of depression was over 17% in males and 23% in females
- Rate of psychiatric disorder was highest among white youth (despite more African Americans)

This data comes from a recent study of two thousand youth in Chicago, Illinois. In this study, two thirds of the males and three quarters of the females arrested over a six-month period were found to have one or more psychiatric disorders.

Half of the males and half of the females surveyed had a substance abuse disorder. Substance abuse issues are often connected with attention deficit disorder, learning disabilities, depression, and bipolar disorder. Substance abuse is often found with these types of disabilities because individuals tend to self medicate. They feel better if they are using either drugs or alcohol.

The juvenile justice system currently responds to the behavior of the youth but does not ask what the cause of the behavior might be. And so for example, a youth will be treated for conduct behavior instead of the real cause, which could be an undiagnosed learning disability.

*\*(Refer to Negative Perspective of Behavior (The youth IS a problem) transparency – slide 5)*

- Thoughts: Mean, Disrespectful, Deliberate
- Feelings: Angry, Threatened
- Behaviors: Punish, Offer Ultimatum

Many times society treats youth as problems, without concern for the underlying causes of problem behaviors. There are youth who act out for reasons we may not understand, who seem very deliberate and disrespectful or mean to others. They may talk back; get right in people's faces, etc. We may respond to their behavior by feeling angry or upset and decide not to work with the youth anymore. We may feel the youth is not taking advantage of all the services and programs they've been provided with. We resort to ultimatums or punishment in attempts to stop their unwanted and disrespectful behavior.

From this perspective the youth is the problem. A more effective way to address inappropriate or disrespectful behavior is to approach it from a positive perspective.

*\*(Refer to the Positive Perspective of Behavior (The youth HAS a problem) transparency – slide 6)*

- Thoughts: Unhappy, Discouraged, Frustrated
- Feelings: Concern, Empathy
- Behaviors: Support, Encourage, Help

The positive approach to addressing problem behavior understands that the youth has a problem. The difference here is that when a youth gets in your face and calls you names and tries to sabotage the wonderful program that you've set up for them, you also acknowledge other things you know about this youth.

You may know that any type of change is a struggle for them, that they are working hard to stay off of drugs, to stay off the street, or to learn to read. Many things may be affecting how youth feel about themselves.

Instead of being threatened by their behavior, we can choose to understand all these factors and see their unhappiness, discouragement and frustration in their behaviors. Rather than thinking "this kid is not worth my time," we can act from a position of concern or empathy, asking "How can I help you through this?" We can look at youth in a whole different way: "This is an individual who can really use my help. They may not know it yet, but they really can benefit from my experience and assistance."

One of the questions we want to raise in this session is: "What are the reasons why these youth are not coming to school?" For some youth, it's that their family life is chaotic and they cannot get there. For many it may be that the school does not provide them an environment for which they feel safe, comfortable or competent.

**-Ask the group: Q: Any questions or comments about any of this?**

*\*(Refer to Estimates in Percent of Disorders Among Community and Delinquent Samples of Adolescents transparency – slide 7)*

Briefly walk through the statistics on this transparency to reinforce the point that disabilities are over represented in the JJ system.

*\*(Refer to How Youth with Disabilities May End Up in Corrections Settings transparency- slide 8)*

Here are some attributes that make many youth with disabilities susceptible to getting involved in the juvenile justice system:

- Vulnerability due to specific disabilities
- Poor choices
- Not consequence oriented
- Impulsive
- Need for peer approval
- Few marketable or academic skills
- Poor self-worth
- Not understanding what behavior is appropriate

### **Vulnerability**

What do we mean by this? Vulnerability to being used by others. For example, youth with developmental disabilities and a lower than average IQ can be very easily led by others. More than one such youth has ended up in a correctional facility after being befriended by a drug dealer who manipulates the youth into working for him.

Other attributes listed here may lead youth with disabilities to think, “Why should I stay in school? I can’t learn anything. It doesn’t matter what’s going to happen to me. I can’t get a good job anyway.”

Such decisions reflect a feeling of hopelessness. Part of the hopelessness stems from depression and poor self worth. Many youth who have come through the system are saying that their worst experiences are about being in school, feeling stupid and feeling like an outsider.

If you find yourself representing a youth in an IEP meeting or talking to their probation officer, be aware if the focus is only on the things the youth cannot do, doesn’t want to do or won’t do. You can challenge this perspective with a different and more productive approach. Reframe the discussion by suggesting that the group talk about positive aspects of this young person. What are some good things he (or she) is capable of? Brainstorm what he CAN do.

*\*(Refer to Juvenile Justice and Youth with Disabilities transparencies – slide 9 & 10)*

- 58% of youth with Serious Emotional Disturbance (SED) are arrested within 5 years of leaving school, in contrast to 30% of all students with disabilities.
- 48% of students with SED drop out of grades 9-12, as opposed to 30% of all students with disabilities and 24% of all high school students.
- 73% of students with SED who drop out of school are arrested within 5 years.
- 8% of students with disabilities, including SED, drop out before grade 9.
- 20% of students with SED are arrested at least once before they leave school compared to 9% of students with disabilities and 6% of all students. (*Wagner, 1995*)

Dropping out of school is a high risk factor. When looking at adult systems, almost 80% of adults in corrections do not have a high school diploma or vocational skills. They don’t possess

skills that are translatable to work or jobs. This is why earlier intervention is the key to addressing these issues.

**-Ask group: Q: Does anyone have questions or comments at this time?**

*\*(Refer to What To Ask? transparencies– slide 11& 12)*

If a youth with at-risk behaviors is charged with a crime advocates should consider whether disability is a factor. For example:

- If the youth has not been identified as having a disability, does his or her behavior warrant an evaluation?
- If the youth receives special education services, is there an IEP?
- How can the court integrate disability appropriate approaches more effectively?
- Does the youth communicate an understanding of the charges?
- How might the disability relate to the delinquent behavior?
- If a youth has had multiple placements, why have they failed?
- Given the youth's needs, is the recommended correctional setting able to provide appropriate services?

For example, does the youth communicate an understanding of the charges? Oftentimes, a youth says, "Yeah, I know what I did...so what? Big deal."

Unfortunately, many of these youth do NOT understand what is happening to them. Youth with disabilities in many of these cases can be immature. They are often up to one third younger cognitively than their actual age, so if the youth is fifteen years old, he maybe thinking like a ten year old.

America's current system of justice is considered a punitive one in that crime is dealt with through a series of punishments. An offender must repay society for the crime that has been committed. A central tenant of our justice system is that through intervention (punishment) an offender will realize the harmful effects of their actions and become rehabilitated.

But what happens when a youth with a disability commits a crime? Does he or she know what they did was wrong? All too often young people with disabilities become part of a system ill prepared to address the real cause of the behaviors. There are many challenges facing a punitive justice system trying to serve youth with disabilities:

*\*(Refer to Challenges to a Punitive System transparency – slide 13)*

- The corrections system is not meant to be a mental health provider.
- To what degree does the corrections system reinforce the mental health characteristics?
- How is it possible to provide mental health and education services in a fragmented inconsistent system?
- How can realities such as hopelessness, poor self-esteem, abuse and frustration be addressed?
- How can families be included in planning and intervention?

When working with people in the court system, we want to emphasize that we are not endorsing getting the youth 'off' without any punishment or consequences. The fact that a youth has been in jail or in the system repeatedly indicates that something is being overlooked. Why are they doing the same thing over and over again?

Perhaps a more constructive question is: How do we get our youth out of a punishment based system into a system where they will start to treat the disorder and understand what is really happening with this individual.

**-Ask group: Q: Does anybody have questions?**

Now let's look at some specific disabilities most prevalent in the juvenile justice system:

*\*(Refer to Attention Deficit Hyper Activity Disorder (ADHD) transparencies – slides 14 & 15)*

Characterized by:

- Inability to self-regulate emotion and behavior
- No ability to think about consequences
- Lack of impulse control
- Primarily male
- Girls overlooked because they are not usually disruptive
- Strong genetic component
- Symptoms change over time – looks different at different ages
- Peer rejection and ostracism a powerful predictor of how kids adapt to ADHD
- Can be a precursor of substance use disorder, depression and anxiety
- 30% of youth with ADHD develop conduct disorder

Often, these youth began to get into trouble in junior and senior high school. They have difficulty concentrating, dealing with information and then start to do poorly in school. They begin to hang out with other kids that do not have good impulse control.

Another common ADHD characteristic is that young adults with ADHD cause and experience more car accidents, more traffic tickets, have a higher rate of losing their license and drive without a license.

The following are factors that can foster delinquency:

*\*(Refer to ADHD Characteristics and Delinquency transparency – slide 16)*

- Impulsivity – strongest influence in delinquent behaviors
- Distractibility
- Low frustration tolerance
- Irritability
- All contributing to school failure

ADHD has a strong genetic component. The symptoms change over time. Children who are diagnosed with ADHD when they are six, seven or eight can look quite different than when they're older. It is often tied to heavy use of substances. Depression and anxiety can also be present with ADHD. One does not outgrow ADHD. One can, however, learn strategies and understand the behavior.

Medication is only part of the answer in ADHD. It is not something every youth is going to find helpful. Medication without strategies is not helpful. One strategy found helpful for young people with ADHD is involving youth in martial arts. Karate and Tai Kwan Do have been shown to be as effective as medication for some youth because they are engaged in a focusing activity. They are engaged in listening to and taking orders from an authority figure.

***-Ask the group: Q: Any questions?***

As noted earlier, it is estimated that as many as half of the youth involved in the JJ system have a learning disability. Here are some characteristics of learning disabilities:

*\*(Refer to Learning Disabilities transparency – slide 17)*

- Learning is a function of processing information
- Difficulties interpreting and decoding written and oral information
- May lead to frustration, stress, depression, behavioral and educational difficulties
- Often labeled lazy, hostile, willful and stupid
- Difficulties with organizing and completing work and following directions
- Lack of success in managing the disability

For example some youth may have difficulty expressing information or have short-term memory problems. These can present problems if not understood. For example, a police officer may ask, "Where were you at such and such a time?" Their response at one moment can be quite different from their response a few minutes later. They really can't remember or are not able to articulate it.

Fortunately, there are educational strategies to help these youth be successful in school: one on one, using computers, accessing other forms of learning to address their learning disabilities.

-Youth who have difficulty reading, may understand the information better by using books on audiotape.

-Using extended-timed testing for youth who require a longer amount of time to understand the question and write it out.

***-Ask the group: Q: Does anyone have any questions?***

As many as 90% of youth in the juvenile justice system have been estimated as having conduct disorder. Conduct disorder is the most popular term used in the juvenile justice system and unfortunately it is a misunderstood term. Unfortunately it is consistently used to refer to youth

who really don't deserve this classification. Research shows that an individual is not born with conduct disorder. It is a learned behavior. There is no medication to cure it. Often people with conduct disorder have one or more undiagnosed disabilities. Common conduct disorder traits include:

*\*(Refer to Conduct Disorder Characteristics transparencies – slides 18 & 19)*

- Aggressions to people and/or animals
- Bullying
- Fighting
- Uses weapons in fights
- Cruelty to persons seen as weaker or vulnerable
- Theft while confronting a victim
- Forced sexual activity
- Serious Violations of Rules-
- Truancy
- Running away
- Curfew violations
- Property Destruction
- Theft, Arson, Burglary, or Vandalism

These are some of the characteristics of conduct disorder. The kids who torture animals or deliberately set fires have conduct disorder. These are seriously problematic individuals. They initiate conflict and see everybody as their enemy. This maybe caused by having lived in an environment where they are treated like this in their families.

The use of the term conduct disorder only applies to persons until they reach the age eighteen. If a person engages in this type of behavior beyond eighteen, they are called psychopaths or are considered to have personality disorders. The key thing to remember is that a person with conduct disorder is quite different than an impulsive youth who's simply not thinking.

*\*(Refer to "What is an Emotional or Behavioral Disorder" handout for additional reading)*

**-Ask the group: Q: Are there any questions about any of this?**

*\*(Refer to Persons with Developmental Disabilities in the Juvenile Justice System transparency – slide 20)*

Youth with developmental disabilities are also at risk of involvement with the juvenile justice system. As you may recall, a developmental disability is defined as a severe, chronic disability of an individual 5 years or older that:

- Is attributable to a mental or physical impairment or combination of both
- Is evident before an individual reaches the age of 22
- Is likely to continue indefinitely
- Results in substantial functional limitations

- Often requires long-term coordinated services and supports
- May be “used” by other, more experienced delinquents in criminal acts
- Often crave friendships and are more suggestible
- May not acknowledge that they have a disability
- May have co-existing disorders such as ADHD and depression

One example: a teenager with developmental disabilities is on the Internet where he meets a woman who tells him a false story of hardship to manipulate and use him. Before long he has made a date with a woman and agreed to give her money. These individuals many times make poor choices. Some individuals may also have substance abuse issues.

*\*(Refer to If Arrested, Persons with Developmental Disabilities May transparency – slide 21)*

- Smile inappropriately, appearing to lack remorse
- Guess the answer in hopes they can go home
- Answer questions they don’t understand
- Have difficulty being understood
- Plead guilty more often

If charged with a crime youth with developmental disabilities may give authorities or the police incorrect answers. The police might tell them, “If you’ll just answer these few questions, you can leave.” Many times these youth will answer with anything because they are frightened, want to go home and don’t want anyone in the authority role to be angry with them. They don’t understand the significance of leading questions.

**-Ask the group: Q: Any questions?**

Let’s talk about juvenile justice interventions that work for youth with disabilities. Youth benefit from specific kinds of intervention.

As we discussed earlier, punishment-based responses often do harm rather than good. A youth with a disability may not fully understand what they are being punished for. Therefore the intervention will have little impact on future behaviors. Instead, they need to learn how they can change their behaviors -- how they can be more respectful in the classroom or in the community. They need to identify the accommodations they need to be successful and learn how to advocate for themselves in the classroom or work environment.

Many youth are told they have a disability, but really don’t know what it means. They need help in understanding that they have a disability, some insight as to what the disability is, and knowledge of how it impacts them. If the disability is a factor in causing the criminal behavior then any successful intervention will include addressing the disability itself.

Many young people (like many adults) are in denial about having a disability. This means they may need assistance as well as time to learn how to look at themselves differently. They need to learn what they can do, perhaps with appropriate accommodations, and build skills needed to become effective self-advocates.

*\*(Refer to Self Knowledge transparency – slide 22)*

- Accept disability
- Identify personal and academic strengths
- Know learning style
- Learn compensatory strategies

It is very important that youth have some understanding about what makes them who they are. What motivates them; what they value; what are their interests, etc?

For example, a young man with developmental disabilities informed his mother in a late night conversation, that he hates having a disability. This was the first time (he had just turned eighteen) he actually recognized that he was a person with a disability. His mother was glad that he had the recognition and, it was a reminder to her and the family that they needed to keep building and capitalizing on what his strengths were.

She responded, “Yes it is a bummer isn’t it? But you know, you’re still lucky because even though it can be hard, think of all the things you can do and have accomplished so far.” We all should be doing this from time to time, recognizing our limitations, working with our strengths, determining what our learning styles are, and learning what we need to perform our best. Learning how to compensate for things we need is an important skill.

*\*(Refer to Self Advocacy transparency – slide 23)*

- Communicate needs
- Develop positive self presentation
- Build on strengths
- Explore areas of interests

Here are some examples of correctional program elements that have a positive impact on youth with disabilities:

*\*(Refer to Preventing Recidivism: What Works transparency – slide 24)*

- Family and community centered programs
- Programs stressing skill and competency development, independent living skills, conflict resolution, development of internal controls
- Address problems in critical thinking skills
- Intensive aftercare and supervision of high risk young offenders
- Parent training and support

These suggestions are fairly self-explanatory.

Many who work in corrections believe in community-based interventions (not involving incarceration), which can be more effective than jail. Jail cannot be the most effective intervention when recidivism is currently at 75%.

**-Ask the group: Q: Are there any more questions about anything we have covered so far?**

**BREAK:** 10 minutes

## **6) Transition and Skills to Learn:** 20 minutes

So far we have looked at the impact of disability on youth who are in, or at-risk of being involved with the juvenile justice system. Now let's examine the challenge of transitioning youth involved with the JJ system back into the community and employment.

Many youth development and employment professionals who work with at-risk youth do so before or after those youth are involved in the JJ system. They are often charged with the task of finding a youth employment. The following sections highlight transition strategies for juvenile justice involved youth that may ease the transition back into the community, beginning with the functional behavioral assessment.

A functional behavioral assessment is an excellent way of looking at behavior. It looks at why a child or youth behaves the way they do given the nature of the child (due to an identified disability or just the way this child is responding to what's happening to them) and what's happening in the environment. It helps guide decision-making about what a particular youth needs. The functional behavioral assessment is usually conducted by school personnel to improve school success.

*\*(Refer to Functional Behavior Assessment transparency – slide 25)*

A functional assessment looks at why a youth behaves as he or she does given:

- The nature of the youth
- What is happening in the environment (home, school)
- Guides decision-making about needs
- Is legally required when a youth is to be removed from his or her special education program beyond ten days
- Considered when behaviors have not responded to standard interventions

It assists in identifying what types of strategies can be used to meet the youth's needs.

There is no one protocol for functional behavioral assessment. Basically, it consists of observations over a period of time, in different settings that look at two to three target behaviors that are causing the most problem for the youth. For example, consider a youth who is consistently disruptive in class (when he shows up), frequently skips school, is failing miserably, and is in trouble much of the time. Using some of the following criteria, information can be gathered about what the youth's specific issues are.

*\*(Refer to Functional Assessment of Behavior transparency – slide 26 )*

- What is the behavior of concern?

- Where does the behavior occur and not occur?
- What are the antecedents to the behavior (what happened beforehand)?
- Is there a consistent pattern?
- What are some possible reasons for the behavior?
- What replacement behaviors can be taught that serve the same function?

Sometimes it will be found that the behavior is medication related. Sometimes a youth can consistently act out right at the end of the period when their medication is losing its potency in their system. For some, problem behaviors may be associated with a specific task that they are being asked to do, or perhaps something they know they cannot do.

Examining outcomes that result for the youth as a consequence of the specific behavior, or what the youth “gains” in exchange for the behavior, are important to the assessment process.

Most of us will do the same thing over and over again if it meets our needs. Going to work every day because we are paid is a constant behavior. It’s not the only reason many of us work, but it certainly is a motivator for many people.

Functional behavior assessment identifies the behavior, helps identify what influences that behavior, and determines what needs of the youth are being met as a result of that behavior. It also identifies what behaviors can be used to replace problem behaviors and still meet the needs of the particular youth.

*\*(Refer to “Functional Behavioral Assessment and Positive Interventions: What Parents Need to Know” handout for further information)*

**-Ask the group: Q: Does anyone have examples, comments, or questions?**

In order for youth with disabilities who have been in the juvenile justice system (especially those who have been incarcerated for a lengthy period) to have successful education and employment outcomes, they will need strategies such as transition planning.

*\*(Refer to Special Education and Juvenile Justice System transparency- slide 27)*

Youth with disabilities age 14-21 are eligible for transition services under the Individuals with Education Act (IDEA). They have the right to a free, appropriate public education (FAPE) including special education and related services, wherever they live or attend school. This includes juvenile correctional placements, and with certain exceptions, adult correctional facilities.

When a youth who has been receiving special education transitions from school *to* the correction setting, he or she will need a new IEP because it is a change in placement. Meetings will need to be set up with the teachers, special education personnel and the social worker to discuss what is different now for the youth and how all parties involved will be supporting the youth.

*\*(Refer to “What Parents Need to Know About Teens with Disabilities and their Rights to Transition Services while Incarcerated” handout for additional information)*

Transition out of the correction system should begin the moment the youth enters into the system. Unfortunately, what happens more often is that a month before the youth is scheduled to be released from the correctional facility, people begin to look at what needs to be done for the youth. Promoting proactive planning the minute the youth enters the system will be a challenge for advocates as it is counter to the current norm.

Identifying and teaching youth various skills to be successful in the community is a process. They need to be taught by example, role-playing, and opportunities to practice their new skills. It may take corrections-involved youth some time to shed egocentric survival-based behaviors and move to a reflective way of thinking. Below are some examples of concrete skills helpful to youth attempting to reintegrate into the community:

*\*(Refer to Skills to Learn transparency – slide 28)*

- Learn how to deal with conflict
- Learn how to save money, open a bank account, budget
- Learn moral reasoning, empathy and problem solving
- Learn educational skills including computer competencies
- Develop independent living, social skills and work competencies
- De-emphasize subjects that represent failure (i.e. drugs or peers who have a negative influence)

One correctional practice effective in building the skill of empathy is called Restorative Justice. It works because it emphasizes paying back the community harmed by bringing offender and victim together in a healing process. For example, a youth with Attention Deficit Disorder (ADD) is charged with breaking into a house and causing extensive damage. By the time the trial happens the experience may be long out of the youth’s mind. By bringing him face to face with his victim the youth is encouraged to view his actions through the eyes of the person affected. The end result is a powerful learning tool that teaches empathy and reinforces the youth’s place in the community.

When planning for a transition back to the community it is imperative that youth are not set up to fail. If you know a youth has certain skills and limitations then, essentially, you can identify his strengths and weaknesses. Once can use that knowledge to cultivate employment (or other) opportunities that play to strengths. Many youth are released back into the community with unrealistic expectations imposed and few supports to help them along the way. Here are some examples of what happens to youth who are not appropriately supported through the transition back into their community:

It should be noted that there are different meanings to the term “transition” when working with youth with disabilities in various systems. In the world of Special Education, "transition" refers to the successful planning and segue of a student with disabilities from school to employment, postsecondary education, or independent living. In corrections, transition may refer to the successful reintegration of an offender into the community. Both concepts of transition are

based on the idea that it is a process that entails planning for employment, housing, financial and community supports so the individual is ready to and supported in their efforts to live independently in the community. For youth with disabilities in the corrections system, elements of both concepts of transition may come into play.

*\*(Refer to Without Transition Services transparency – slide 29)*

Without Transition Services, Young Adults with Disabilities Experience:

- Succession of jobs
- More failure than success
- Difficulty understanding what is happening (“Why am I failing?”)
- High dropout rates
- Limited enrollment in postsecondary programs

This is what can happen for young adults without transition services: numerous jobs, more failures, and difficulty connecting with employers. Most employers do not want to see a nineteen-year-old fresh from a correctional setting with a lengthy job history. They’re not interested in hiring him, assuming he can’t hold down a job, is irresponsible and unreliable.

The youth maybe asking himself, “Why do I keep losing my job?” He has difficulty understanding what the problems are and may have the perception it was the employer’s fault. “Well that guy was picking on me. He was always on my case.” Transition services can address these issues and support the youth in getting and retaining employment.

As a service provider there are strategies you can use to increase the chances of a successful transition back into the community. These services are helpful to any youth you work with. They are especially vital to youth with disabilities who are returning to the community from a correctional setting.

*\*(Refer to Examples of Needed Services transparency – slide 30)*

- Individualized academic instruction
- Work readiness skills
- Work experience training
- Independent living skills

*Individualized* academic instruction is looking at what works well with that particular individual’s learning style.

Work readiness skills-- there are some young adults who just can’t be in the workplace yet. It is too difficult for them and too much pressure for them at that particular time. Identify when and what is the right environment for this youth. Does he or she need more training?

Set up linkages with community organizations and businesses the youth may be familiar with. Suggest internships, trying out a position for a month and see how it works for the employer and the youth. Look at ways to promote the youth’s particular strengths and interests.

Independent living skills are very important. How can you help youth achieve independence in a way that they can feel proud that they are living responsibly, managing a budget, and so on? How can they learn to cope with disorganization? For example, organizing and paying bills before utility services such as gas or electricity are terminated.

**-Ask group: Q: Are there any questions about any of this?**

**7) Group Exercise with Case Studies:** 45 minutes; 15 minutes for small group brainstorming, 30 minutes for large group processing

This activity is designed to have participants apply what they have learned about juvenile justice issues for youth with disabilities.

Break the large group up into small groups of 3-5 people. Have participants count off 1 through 4 to mix up groups. Assign different case studies to each small group to brainstorm creative ways of addressing problems presented in case studies. Have the small groups discuss their case study for 15 minutes and prepare to report back to the large group. Facilitate large group discussion of each group's answers.

*\*(Refer to the "Juvenile Justice and Youth with Disabilities Scenarios" handout.)*

**Case Study #1.**

Monica is an eighteen-year-old Native American student whose constant truancy has forced her to drop out of a regular educational setting. She is new to your program and comes with a history of substance abuse but has no documentation of a disability. You notice that Monica is moody and unfocused in school and often has trouble completing tasks. Monica has a part time job, but her employer is growing tired of her angry outbursts when given direction. You are concerned that Monica will lose her job, leave your program and begin using drugs again.

**Q1: What are some possible reasons for Monica's behaviors at school and on the job?**

Possible Answers (suggested in pilot discussion groups):

- She may have a learning disability
- She may still be using drugs
- She has depression
- Something new and difficult may be happening in her home life
- Other?

**Q2: How could you use school, family or community resources to secure appropriate services for Monica?**

Possible Answers (suggested in pilot discussion groups):

- Have school or VR assess her for learning disabilities or possible mental health diagnosis
- She's eighteen, so we may or may not be able to have the school test her (If she hasn't graduated yet and has no diploma, she is still eligible for services from the school.)
- Some type of chemical evaluation or drug rehabilitation
- Connect her with possibly disability support groups if she is diagnosed with a disability

- Teaching her replacement behaviors, helping her come up with strategies to deal with her employer
- Provide coaching for the employer in how to interact and be supportive of Monica
- Other?

***Q3: What could you do to help Monica be successful on her job?***

- Job coaching
- Functional behavior assessment to determine cause of outbursts at work
- Get Monica's permission to talk with her family
- Other?

Ask the large group if they have other ideas to add to the discussion of this case study.

***Case Study #2***

Cho is a 16 year-old Hmong student who has been in this country for 5 years. He appears to be adapting to the American culture, though his parents continue to live according to their native country's traditions. Cho is considered intelligent by his teachers but has not been successful in the classroom because he does not hand in many of his assignments. Cho has been in your program for about a year and has a history of extreme mood changes, sleeplessness, physical complaints and has attempted to run away from home on several occasions. Cho has a diagnosis of ADD, but his school psychologist suspects a bi-polar disorder, and wants Cho re-assessed. Cho's parents are not willing to give their permission to have him re-tested. It is your task to find Cho employment but you are worried that his behaviors will sabotage his potential for success.

***Q1: How could you work with Cho's family to make sure their concerns are addressed?***

Possible Answers (suggested in pilot discussion groups):

- Work with the family through an intermediary organization experienced in working with Southeast Asian families.
- Offer meetings in their home rather than asking them to come to your office.
- Becoming familiar with aspects of Hmong culture may help decipher what the family's objections are.
- See if there is an older sibling or other respected family member or friend who acts as family's spokesperson.
- Other?

***Q2: Given the input from the school psychologist, how would you change programming strategies for Cho?***

Possible Answers (suggested in pilot discussion groups):

- Be mindful of the possibility of disability related causes for his behaviors.
- Consult Job Accommodation Network for specific ideas on how to help a person with bi-polar disorder successful on the job.
- Introduce Cho and his family to successful adult(s) with bi-polar disorder
- It would be hard to change programming without new documentation of disability
- Continue to work with him as an individual, just like all of our students
- Other?

***Q3: How could you work with Cho to help him understand his own disability?***

Possible Answers (suggested in pilot discussion groups):

- Work with Cho to help him understand his strengths, interests, learning styles, and environments in which he is successful
- Confirmation of new diagnosis important to get before addressing this subject
- Meet with peer group of youth with similar disabilities
- Understand that there may be a difference in how his culture perceives disability. It may take work to get him to even speak about it.
- Offer him resources, including support group information, about his disability if he is willing
- Work to help him understand that he can be successful in all aspects of life and that advocating for himself is a skill he will need to learn.
- Other?

***Case study #3***

Jeff is a 17 year-old who was diagnosed with ADHD at the age of eight. A few years ago he stopped taking medication that was helping him manage his disability because he didn't like "being different." Repeated truancy and curfew violations landed Jeff in a small court-ordered correctional treatment program. Jeff's program has lasted longer than expected due to the bad influence of his more sophisticated peers. Jeff's probation officer has identified your program as a good option for when Jeff leaves the facility. Among the terms of Jeff's probation will be successful school and employment outcomes. You have agreed to accept Jeff into your program when he is released in a week.

***Q: What types of program structures would you consider implementing to help Jeff be successful in your program?***

Possible Answers (suggested in pilot discussion groups):

- Pair him with a peer mentor who is more sophisticated in a good way
- Work on having him reassessed for medication by having him explore the pros and cons of taking medication
- Functional behavior assessment
- Contact and work with Jeff's special education case manager regarding transition planning
- Family training and counseling
- Other?

***Q2: What questions would you ask about Jeff's situation that is not addressed in the description above?***

Possible Answers (suggested in pilot discussion groups):

- What was the cause of his truancy?
- Is there a piece missing? What is the reasoning for him being there "longer than normal"? Why was he struggling? What was he not receiving so he could complete the program like everyone else?
- What is the structure of his home life? Are we sending Jeff back into the same situations that got him into trouble in the first place without any new strategies?
- Is he receiving appropriate classroom accommodations?
- What works for Jeff?
- Other?

***Q3: What would be your strategy for building work readiness and finding employment for Jeff?***

Possible Answers (suggested in pilot discussion groups):

- Find alternative learning strategies to teach him so he can focus on the material
- Identify his learning style, interests and strengths
- Involve him in an athletic program as well. It can help him burn off lots of energy. In a sports setting, he maybe able to act as a mentor or model to some other youth, which in turn can build his confidence.
- Other?

***Case Study #4***

Shari is a 19 year-old new addition to your program. She has 3 prior arrests for prostitution in the past 14 months and you suspect that she still may be working the streets. She has aged out of juvenile probation and has very little family support. You have access to her last set of school records, which are 4 years old. They indicate that Shari was diagnosed as having an Emotional Behavioral Disorder (EBD). Shari has not graduated. Her school attendance is inconsistent and she has never held a real job.

***Q1: What services could you access to address the possibility that she is prostituting herself again?***

Possible Answers (suggested in pilot discussion groups):

- Access community based organizations that may be doing outreach to prostitutes.
- Research local police or corrections programs dealing with prostitute diversion
- She may benefit from a psychological assessment or some type of counseling to help her process her experiences and intentions
- See if she qualifies for government support programs like Medicaid or food stamps, something that may help get her an assessment and support in independent living.
- Other?

***Q2: What would you look for when reviewing her records to help you strategize for her programming and services?***

Possible Answers (suggested in pilot discussion groups):

- Records may indicate academic strengths and weaknesses that could be built upon in school and employment
- Academic record may offer a better idea of the nature of her disability
- Record would allow program to pick up academically where she left off
- Get written permission from Shari to contact school case manager regarding a function behavior assessment or documentation of effective accommodations
- What is her family history? Could you get her permission to talk with her parents? Is there a past history of sexual abuse?
- Other?

***Q3: What strategies could you use to expose Shari to the world of “appropriate” employment?***

Possible Answers (suggested in pilot discussion groups):

- First we would talk with her to try and understand what needs are being through prostitution. Does she do it only for the money or might there be other reasons?
- Apply a career assessment tool to show her the many possibilities for appropriate employment.
- Access local community based organizations to see if any former prostitutes now successful in the community could act as a mentor in some capacity.
- Incorporate regular program strategies such as job readiness skills, literacy training, and job shadowing
- Other?

**Ask the large group if they have anything to add to the discussion of each case study.**

## **8) Resources:**

- Handouts:**
- 1) “What is an Emotional or Behavioral Disorder?”
  - 2) “Functional Behavioral Assessment and Positive Interventions: What Parents Need to Know”
  - 3) “What Parents Need to Know about Teens with Disabilities and their Rights to Transition Services while Incarcerated”
  - 4) “Juvenile Justice and Youth with Disabilities Scenarios”

- Resources:**
- 1) Refer to the “Building Program Capacity to Serve Youth with Disabilities: *Resource List*”

Highlight various organizations and websites.

## **9) Evaluations: 5 minutes**

Ask the participants to take the last few minutes and fill out the evaluation form.

## **10) Close:**

Thank them for their participation.