



NOT JUST CHILD'S PLAY

The Role of Behavioral Health Screening and Assessment
in the Connecticut Juvenile Justice System

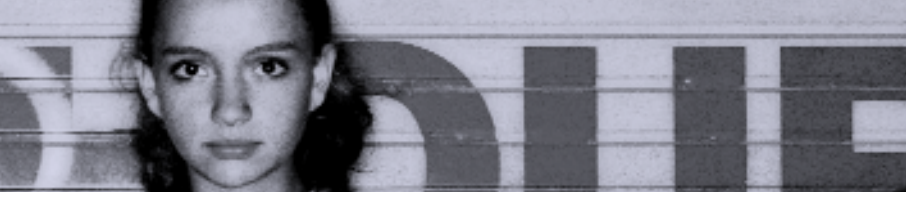
Executive Summary

Behavioral health screening and assessment can provide vital information about the emotional and behavioral problems, needs, and strengths of children in the juvenile justice system. This report describes how behavioral health screening and assessment can help those children and their families to overcome problems such as depression, substance abuse, and trauma so that they have a better chance at building healthy lives and safe communities. The report addresses the following key issues:

- **WHY** screening and assessment are needed in order to improve children's lives and reduce recidivism.
- **HOW** screening and assessment are done by behavioral health specialists in the juvenile justice system.
- **WHAT** the scientific evidence indicates is necessary for behavioral health screening and assessment to be accurate and helpful for judges; probation, parole, and detention staff; rehabilitation and counseling staff; teachers, parents, and the children themselves.
- **WHERE** changes in policies, procedures and practices concerning behavioral health screening and assessment could make a positive difference for children in the juvenile justice system, their families, and adults working with them.



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Children in the juvenile justice system are four times more likely than children in the community to have serious behavioral health problems.

In this report, “behavioral health problems” means a wide range of emotional, psychological, and substance use problems, as well as related problems with learning, getting along with other people, and healthy development. The children in the juvenile justice system typically are youths who range in age (and developmental phase) from elementary school age (10 years old) to middle adolescence (16 years old), and in some cases as old as late adolescence (18 years old). As many as three out of four children in the juvenile justice system in the United States have one or more psychiatric disorders, such as depression, anxiety, attention deficit hyperactivity disorder, conduct disorder, and post-traumatic stress disorder (PTSD) — all of which can contribute to or exacerbate problems with delinquency, substance abuse, school failure, peer and family conflict, and dangerousness to self or others. These problems interfere with a child’s emotional, social, and educational/vocational development, compromising the child’s ability to become (and continue in adulthood as) a contributing member of the community.

Timely behavioral health screening and assessment are crucial first steps to providing effective treatments that can help break the cycle of repeated and escalating problems with the law. However, nationwide, many children in juvenile justice systems who have behavioral health problems are neither identified by screening nor provided with a thorough behavioral health assessment. As a result, these children either do not receive behavioral health services or receive services that are not targeted to their specific needs.

While some states recently have begun to recognize the need for identifying and responding to the behavioral health needs of children in their juvenile justice systems, the behavioral health assessments and services provided in those states vary greatly in type, quality and methods. Often, what is called a behavioral health “assessment” is, instead, a brief screening that points out a need for services but does not identify a child’s specific needs or the most appropriate services to meet those needs.

Behavioral health screening identifies issues that require urgent attention or further investigation, while behavioral health assessment provides a more comprehensive or in-depth picture of the child’s specific needs and strengths. Screening is a first step which, if done upon a child’s entry to a facility or juvenile justice setting, can prevent crises by identifying problems such as suicidality. When behavioral health needs are identified by screening, a more detailed assessment can then determine the best plan for services to address specific behavioral health issues, including:

- **Adversities (problems):** violence and other forms of trauma; poverty; homelessness; stigma and discrimination; genetic risk factors; personal or family mental or medical health problems; personal or family substance abuse; difficulties or delays in healthy mental, social, and physical development.
- **Resiliency (strengths):** knowledge; education; creativity; talents; supportive relationships; positive role models and values; involvement in cultural, faith, recreational, or community activities and groups; genetic inheritance; family resources.



Connecticut is a leader in this area, as the result of having instituted systematic screening and assessment processes for some — but not all — children involved in juvenile justice programs. This report describes those promising efforts in the context of the workings of juvenile justice systems historically, and the limitations of current behavioral health screening and assessment programs in Connecticut's juvenile justice system.

We also define the standards and methods necessary for a truly "evidence-based" approach to behavioral health screening and assessment. "Evidence-based" practices are methods of behavioral health screening and assessment that follow guidelines based upon scientific research. Briefly, recommended best practices are:

- **Reliable and valid** standardized screening and assessment instruments should be used in a manner that is individualized for every child and family.
- Screening and assessment measures and procedures should be sensitive to **individual** differences such as age, gender, ethnocultural background and cognitive ability.
- Assessors must be **experienced** in children's behavioral health and in forensic issues.
- When deciding whether behavioral health screening or assessment should be done, courts should consider both children's rights to confidentiality and protection from self-incrimination and the **potential value** to the child's well-being and rehabilitation of providing services that address pressing behavioral health concerns.
- Behavioral health screening and assessment should focus on **recent** rather than past symptoms, and periodic re-assessments should occur for children who continue to be involved in the juvenile justice system.
- Screening and assessment should identify two key groups: (1) **psychologically impaired** children who need immediate treatment; and (2) **high-risk** children who should be provided with education, skills, and supervision in order to prevent future serious problems, functional impairments, and costly treatments.
- The less visible "**internalizing**" behavioral health problems (for example, depression and anxiety) should be identified, as well as the more obvious "externalizing" problems (for example, drug and alcohol disorders, aggression, and impulsivity).
- Screening and assessment should be **strength-based**, focused on adaptive abilities and resources as well as on symptoms and adjustment or behavior problems.
- Screening and assessment should use input from multiple sources that include **parents and other caregivers**, both to get the caregivers involved in a positive way and because children often under report behavioral health problems.

This report concludes with the following policy and practice recommendations to help ensure that every child with behavioral health needs in Connecticut's juvenile justice system can receive timely screening, accurate assessment, and effective behavioral health services.

When behavioral health needs are identified in screening, detailed assessment can then determine the best plan for services and supports to help each child and family...

- Screening services should be provided for all children upon their entry to the juvenile justice system, in order to identify those in crisis and those who have behavioral health needs warranting assessment. In addition, every child with serious behavioral health problems who remains in the juvenile justice system for an extended time should receive periodic rescreening and reassessment, and appropriate adjustments to behavioral health services.
- A quality assurance and continuous-improvement system is needed to guide screening procedures, to credential and monitor the work of assessors, and ultimately to ensure that all behavioral health screenings and assessments adhere to best-practice standards and provide information that meets the needs of judges, justice personnel, teachers, parents, and youths. Behavioral health professionals who supervise screenings or conduct court-ordered assessments should have the general professional credentials necessary to provide services (such as a license for independent practice and training and supervised experience in children's behavioral health and assessment) and also the specialized training and supervised experience to ensure that they are competent to deliver these services in the juvenile justice system. A credentialing and quality assurance model such as that developed by the State of Massachusetts or the Cook County (Illinois) courts ensures that all behavioral health screening and assessment procedures, recommendations, and reports are conducted by qualified professionals and meet standards of best practice.
- New laws are needed to prevent the results of behavioral health screening or assessment from being used against any child or family in either a current or future legal proceedings. Concerns about stigmatization and self-incrimination currently prevent many children with behavioral health problems from being appropriately identified to receive timely services. Some states, such as Texas, that provide universal behavioral health screening for delinquents, have introduced legislation to protect clinical information. An advisory group of legal, behavioral health, and child advocacy professionals should review the statutory and ethical issues concerning behavioral health screening and assessment within the juvenile justice system, and recommend reforms. The group should review state statutes, policies, regulations, practice guidelines, and practice patterns relevant to improving screening and assessment services in the juvenile justice system for Connecticut children with serious behavioral health needs.

Copies of the full report are available at

www.chdi.org

or by calling

860.679.1519



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