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Reclaiming lost opportunities: Applying public health models in juvenile justice

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ABSTRACT

This paper frames juvenile justice as a public health concern and articulates a public health approach to intervention with incarcerated youth. The authors review the founding principles of juvenile justice and examine current practices through the lens of public health concepts. Although the knowledge base is incomplete, existing literature suggests dismal outcomes including high recidivism and low productivity; it also reveals promising evidence-based practices that require ongoing scrutiny and continuing elaboration. The authors' main recommendation concerns the application of a three-tiered prevention logic model that encompasses appropriate, evidence-based interventions, national implementation, and empirical validation. We advocate comprehensive, coordinated planning models that focus on outcomes, operate under shared infrastructure, and incorporate data analysis. The transformation of the juvenile justice system will require careful coordination, improved data systems, and multiple levels of focus. We assert that, despite the numerous challenges facing today's juvenile justice system, incarceration presents an opportunity for youth rehabilitation through effective interventions. Systemic reform has the potential both to improve outcomes for youth and to accrue public benefit through crime reduction and cost efficiencies.

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1. Introduction

In 1899, the juvenile justice system was established to separate adult and juvenile offenders (Mazzotti & Higgins, 2006). At its founding, the goal of the juvenile justice system was rehabilitation. The system has been in existence for over a century, its structure and processes reflecting prevailing views of human nature, development, and the meaning of childhood. As youth with increasingly challenging circumstances are channeled into a system ill-equipped to handle their myriad needs, the contemporary juvenile justice system appears to be both overwhelmed and ineffective. In the words of Todis et al. (2001), "there is perhaps no group as misunderstood and as underserved as adolescents who exhibit extreme antisocial behaviors and who are incarcerated for those actions" (p. 119).

The juvenile justice system was founded on two related notions. First, children and adult offenders are fundamentally different. Adult antisocial behavior is considered to be well ingrained and the sole responsibility of the offender. The adolescent's development is incomplete; behaviorally, the adolescent is mutable and open to influences, both positive (rehabilitative) and negative (antisocial). This perspective on adolescence relates to a second founding notion: juvenile criminals should be separated from their adult counterparts and experience opportunities for rehabilitation outside the influence of adult criminals. Views of juvenile culpability are tempered by the belief that external (social) factors shape the development of criminal behavior and by a corresponding desire to alter the developmental trajectory of youth offenders. The founding of a separate juvenile justice system belies an assumption of societal duty to intervene, both to protect the public from harm and to benefit the offender.

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Despite these notions, today's juvenile justice system has a diminished focus on rehabilitation, such that punitive or "retributive" paradigms dominate (Bazemore & Umbreit, 1995). Sentencing and incarceration experiences of juveniles increasingly resemble those of their adult counterparts. The last 20 years have witnessed more punitive sentencing of juveniles (Inderbitzin, 2006; Walker et al., 1996) and a 72% increase in the overall number of children in juvenile detention facilities since the early 1990's despite the lowest rate for violent crimes committed by youth in a generation (Mazzotti & Higgins, 2006; Snyder & Sickmund, 2006). For several decades, scholars and policy analysts have criticized the juvenile justice system's evolution from a mission of social welfare to one of social control. In particular, Feld (1999) argued that the structures that define juvenile justice are irrelevant in today's society, in part because of their disproportionate influence in the lives of poor and minority youth.

The increase in juvenile detention is due in part to a reversal of prior efforts to deinstitutionalize juveniles; recently, more status offenders, including runaways and "incorrigible" youth, have been sentenced to detention (MacDonald & Chesney-Lind, 2001). Youths in the juvenile justice system have high recidivism rates, poor academic outcomes, and limited chances for success in adulthood (e.g., Pullman et al., 2006; Robertson et al., 1998).

Entry into the juvenile justice system is the culmination of a range of risks, the failure of prevention efforts, and the absence of viable, community-based alternatives. Nevertheless, the founding philosophy of the system suggests that incarceration and its alternatives should serve as an opportunity to address risk and build resilience to avert costly, deleterious outcomes. Extensive resources are allocated to the development and validation of programs to rehabilitate juveniles. According to the Coalition for Juvenile Justice, federal funding streams channeled over \$300 million to juvenile justice programs, research, and prevention in fiscal year 2006. Despite the best efforts of researchers to determine what works best for young offenders, "unambiguously effective programs were, and are, exceedingly rare" (Fass & Pi, 2002, p. 364).

While entering the juvenile justice system is the culmination of risk, detention itself has become a risk factor for continuing difficulty. The system can be a platform for future criminality, effectively sentencing a juvenile to a lifetime of low expectations, limited academic success, and diminished employment options. Admission into the juvenile justice system can serve as an opportunity to *alter* a trajectory that may otherwise lead toward increased delinquency and bleak futures. We argue that involvement in the juvenile justice system has the potential to initiate positive change, but that potential is largely untapped. Developmental science has demonstrated that effective interventions can change the balance between protection and risk, leading to more adaptive outcomes (National Research Council and Institute of Medicine, 2000). Systems change is needed if we are to reclaim the opportunities for rehabilitation that framed the original intent of the juvenile justice system.

At its best, the juvenile justice system can provide offenders legitimate chances at rehabilitation; at minimum, the system is charged with responding to the basic educational, behavioral, and health care needs of incarcerated youth. Providing real change opportunities necessitates adopting a different perspective on care. For the purposes of this paper, "care" within the juvenile justice system refers to meeting the behavioral, academic, vocational, mental health, and physical health needs of the juvenile, as well as providing the requisite family and public services to facilitate transition back into the community.

This paper envisions youth involvement in the juvenile justice system as a public health concern. The authors' perspective is informed by behaviorism, educational reform, and an emphasis on empirically-validated practices. We articulate a public health approach to prevention and management of chronic conditions. Rather than viewing the system as a tertiary, terminal intervention, we embed juvenile justice within a public health model with the intent of applying an alternative framework for examining risk, outcome, and potential solutions relevant to one of our country's most vulnerable populations. Accordingly, subsequent sections define the juvenile population, provide a truncated history of juvenile justice, delineate public health definitions and models, and apply these definitions and models to juvenile justice. We then summarize current knowledge of risk, examine associated conditions and outcomes, and briefly review current screening and intervention. Subsequently, we discuss the promise of comprehensive models of intervention and make general recommendations for systems change.

2. Definitions and history

2.1. Definition of juvenile

There are nearly 73 million people under the age of 18 in America, roughly 25% of the population (Snyder & Sickmund, 2006). For the purposes of this paper, the term "juvenile" is used interchangeably with "youth" and refers to any person under age 18. The population of interest to the authors, youths involved in the juvenile justice system, consists of juveniles who have been incarcerated. Youths who have probation officers, who are arrested, and who exhibit antisocial behavior are not the primary focus of this paper; this discussion is restricted to youth who have been in the care and custody of the juvenile justice system. In other words, this paper addresses interventions for juveniles for whom preventive measures, including parole, probation, and diversion, have been ineffective.

As a separate matter, defining juvenile delinquency is not an easy task. Some sociologists consider delinquency to be a behavior violating the norms of a social group (Calhoun, Light, & Keller, 1989). Others view delinquency to be the culmination of many factors, including the failure of personal and social controls, and a sign of deep social and socioeconomic problems (Tomovic, 1979). For youths, delinquency can refer to behavior that would be criminal if the child were an adult (Yoshikawa, 1995). The authors define juvenile delinquency as chronic law-violating behaviors for anyone under the age of 18. This paper focuses on youth in the care of the juvenile justice system, whether or not they meet the authors' definition of juvenile delinquency.

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