Working with Children in Florida's Juvenile Justice System

Randy K. Otto, PhD, ABPP
College of Psychology
Nova Southeastern University
Ft. Lauderdale, FL
rotto1@nova.edu

USF's Criminal Justice, Mental Health, & Substance Abuse Technical Assistance Center

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Agenda

- The History and Changing Focus of the Juvenile Justice System
- Some Important Facts About Children in the Juvenile Justice System
- How Mental Health Professionals Can Contribute
 - Assessment
 - Treatment
- Resources

Kids and the Criminal Court

- Until the end of the 19th century, there were no juvenile courts, and minors were tried as adults
 - Infancy to age 6: Age was an absolute defense to criminal responsibility
 - Ages 7 to 14: Rebuttable presumption of capacity/responsibility
 - Ages 15 and above: Presumed capacity/responsibility

The Juvenile Court

- The first juvenile court was established in 1899 in Chicago, based on two related assumptions...
 - Children who committed crimes were different from adults who committed crimes in important ways
 - Responses to children who violated the law needed to be different from responses to adult offenders

The Juvenile Court and Juvenile Justice System in America: 1900-1960s

• Claimed greater emphasis on rehabilitation

• Significant involvement of social service professionals

Relaxed legal procedure (quid pro quo)

Critiques of the Juvenile Court and Juvenile Justice System

- In a series of cases in the 1960s the Supreme Court
 - Described some juvenile courts as "kangaroo courts," (In re Gault, 1967)
 - Concluded that kids in juvenile court were subject to the "worst of both worlds" (Kent v. US, 1966), and
 - Ruled that kids in juvenile proceedings were entitled to many protections afforded adults in criminal court, including...

Constitutional Rights in Juvenile Proceedings

Notice

Attorney

Avoid self incrimination

Hearing

Confront accusers

Proof of responsibility beyond a reasonable doubt

 What two important rights are adults in criminal court guaranteed that children in juvenile court are NOT guaranteed?

Abuse of Juveniles in Florida



• Arthur G. Dozier School for Boys

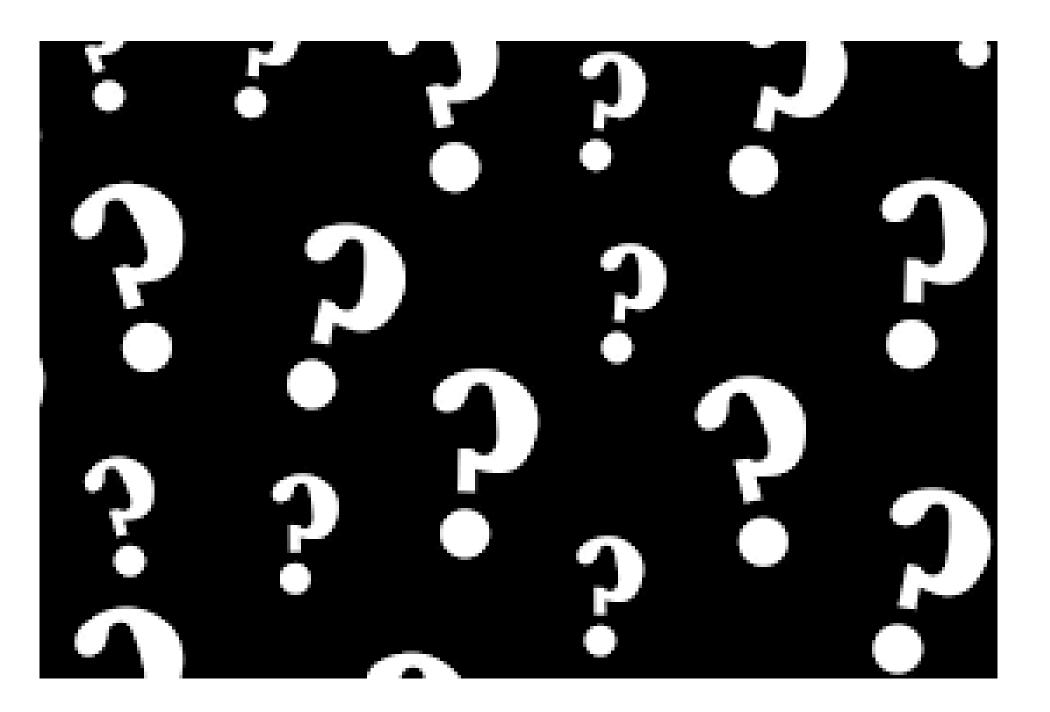
Changes in the Juvenile Justice System: 1980s-1990s

- Beginning in the 1980s there was a diminished focus on rehabilitation in the juvenile system based on concerns about violent juvenile crime that was characterized by
 - Increasingly punitive dispositions
 - Increased number of transfer/waiver of kids from the juvenile court to criminal court

Changes in the Juvenile Justice System: 2000+

 In a series of decisions, the US Supreme Court recognized how developmental issues limit juveniles' decision making and culpability when compared to adults, and the Court limited the states' ability to punish juveniles in response

- Roper v. Simmons
- Graham v. Florida
- Miller v. Alabama



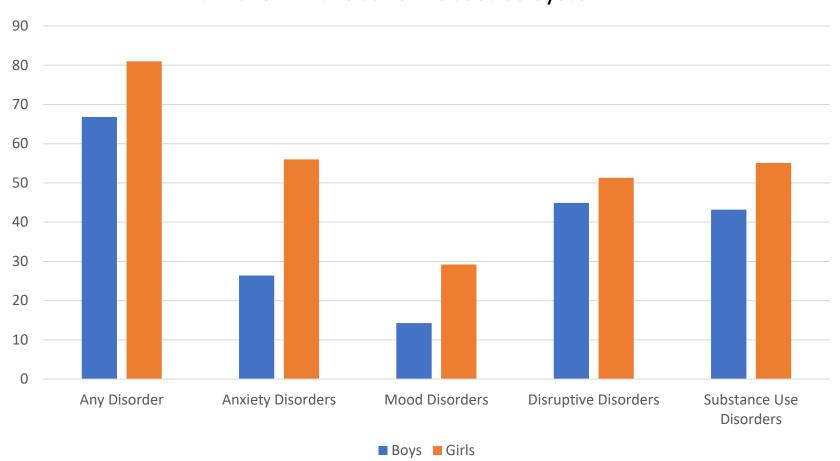
Some Important Facts About Kids in the Juvenile Justice System

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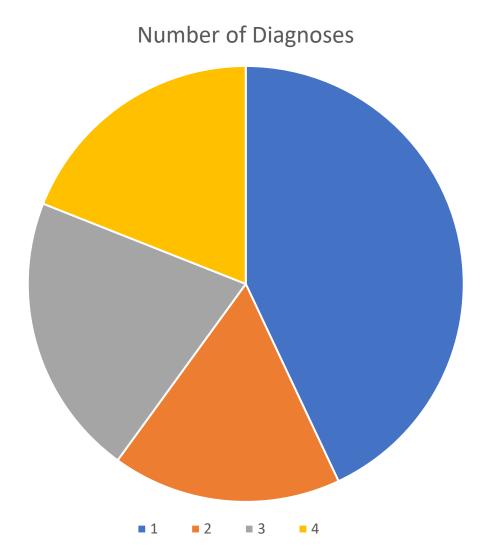
- Boys are over-represented
- Children from racial and ethnic minorities are over-represented
- Children from families in distress (single parent, low SES, challenging neighborhood, struggling schools, trauma history) are over-represented
- Children with academic and learning challenges are over-represented
- Children with (co-occurring) substance abuse, emotional, and behavioral disorders are over-represented

A Multistate Survey Prevalence Study (Shufelt & Cocozza, 2006)

Prevalence of Mental Disorders Among Children in the Juvenile Justice System

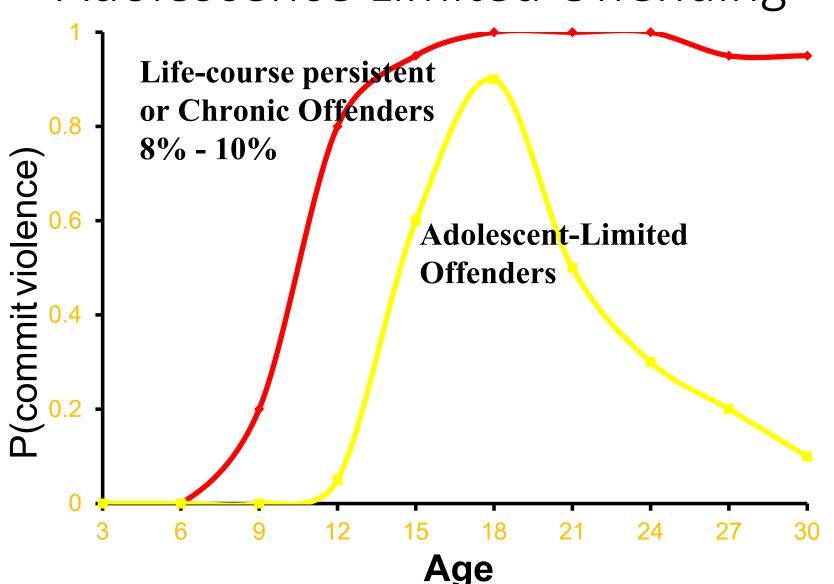


A Multistate Survey Prevalence Study (Shufelt & Cocozza, 2006)





Life Course Persistent v. Adolescence Limited Offending



Assessment of Children in the Juvenile Justice System

Disposition and treatment planning

Competence

Transfer/waiver

FS 985.18 Medical, Psychiatric, Psychological, Substance Abuse, and Educational Examination and Treatment

• (1) After a detention petition or a petition for delinquency has been filed, the court may order the child named in the petition to be examined by a physician. The court may also order the child to be evaluated by a psychiatrist or a psychologist, by a district school board educational needs assessment team, or, if a developmental disability is suspected or alleged, by a developmental disabilities diagnostic and evaluation team with the Agency for Persons with Disabilities. If it is necessary to place a child in a residential facility for such evaluation, the criteria and procedures established in chapter 393, chapter 394, or chapter 397, whichever is applicable, shall be used.

FS 985.185 Evaluations for Disposition

- (1) A comprehensive evaluation for physical health, mental health, substance abuse, academic, educational, or vocational problems shall be ordered for any child for whom a residential commitment disposition is anticipated or recommended by an officer of the court or by the department.
- (2) Prior to making a final disposition of the case, the court may order additional evaluations and studies to be performed by the department, by the county school system, or by any social, psychological, or psychiatric agencies of the state. The court shall order the educational needs assessment completed under s. 985.18(2) to be included in the assessment and predisposition report.

FS 985.19 Incompetency in Juvenile Proceedings

• (1) If, at any time prior to or during a delinquency case, the court has reason to believe that the child named in the petition may be incompetent to proceed with the hearing, the court on its own motion may, or on the motion of the child's attorney or state attorney must, stay all proceedings and order an evaluation of the child's mental condition.

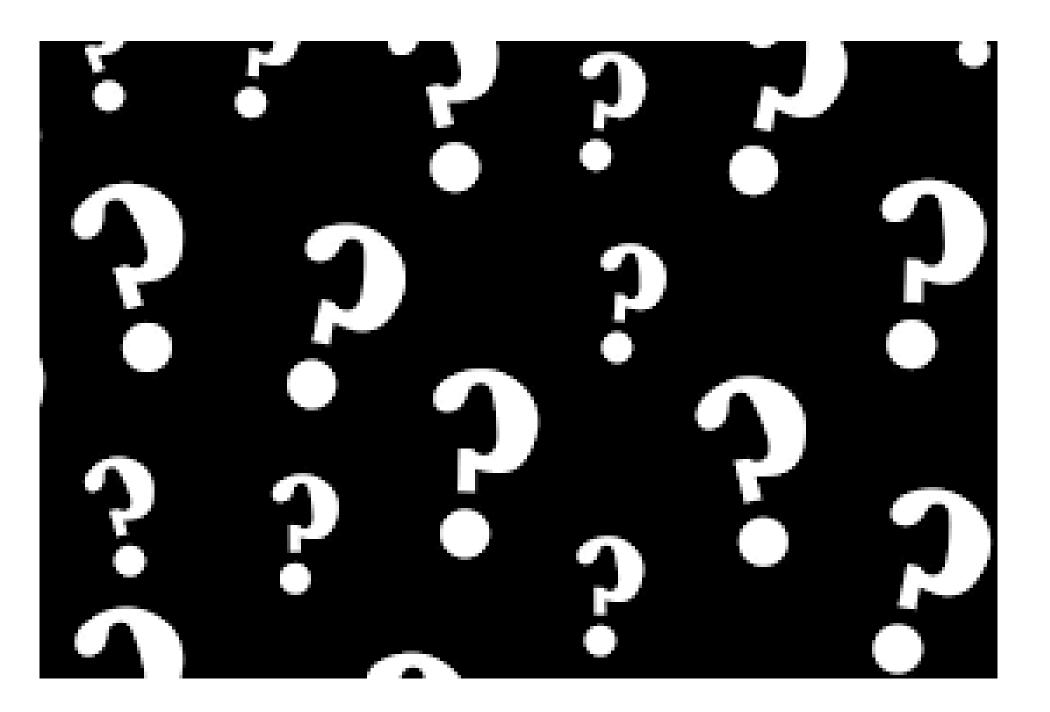
• https://www.usf.edu/cbcs/mhlp/training/forensic-evaluation-and-juvenile-justice.aspx

FS 985.556 Waiver of Juvenile Court Jurisdiction; Hearing

- 4) WAIVER HEARING.—(a) Within 7 days, excluding Saturdays, Sundays, and legal holidays, after the date a petition alleging that a child has committed a delinquent act or violation of law has been filed, or later with the approval of the court, but before an adjudicatory hearing and after considering the recommendation of the juvenile probation officer, the state attorney may file a motion requesting the court to transfer the child for criminal prosecution.
- (b) After the filing of the motion of the state attorney, summonses must be issued and served in conformity with s. <u>985.319</u>. A copy of the motion and a copy of the delinquency petition, if not already served, must be attached to each summons.

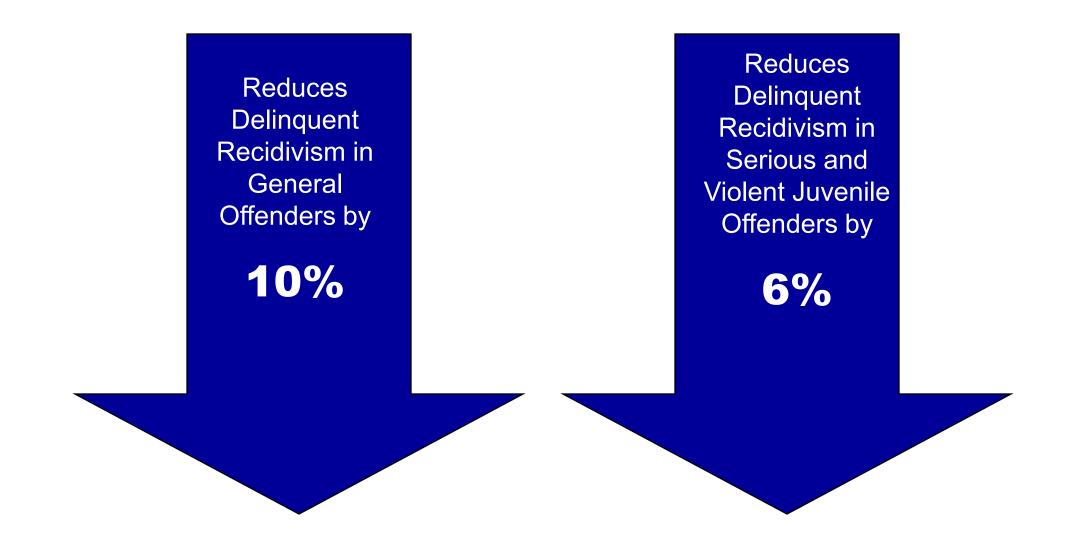
FS 985.556 Waiver of Juvenile Court Jurisdiction; Hearing

- (c) The court shall conduct a hearing on all transfer request motions for the purpose of determining whether a child should be transferred. In making its determination, the court shall consider:
- 1. The seriousness of the alleged offense to the community and whether the protection of the community is best served by transferring the child for adult sanctions.
- 2. Whether the alleged offense was committed in an aggressive, violent, premeditated, or willful manner.
- 3. Whether the alleged offense was against persons or against property, greater weight being given to offenses against persons, especially if personal injury resulted.
- 4. The probable cause as found in the report, affidavit, or complaint.
- 5. The desirability of trial and disposition of the entire offense in one court when the child's associates in the alleged crime are adults or children who are to be tried as adults.
- 6. The sophistication and maturity of the child....(important additional sections excised)



Treatment/Intervention

We Know The Right Treatment Can Work.....



Some Treatments Work Better

- Encourage youth and family participation in planning
 - Try to get the buy-in (from everyone)

- Identify criminogenic risks and needs, and target them for Intervention
 - No one-size fits all interventions
 - Consider multiple domains and environments

Some Treatments Work Better

- Build necessary skills and provide necessary treatment in a coordinated way
 - Informed by identification of this youth's needs via the assessment
 - Academic interventions
 - Problem solving, anger management, communicate
 - Substance abuse, depression, anxiety
 - Parenting

Use Structured Approaches: All Treatment Modalities Are Not Equally Effective

Behavioral
 25% Improvement

Skill-Oriented
 20% Improvement

Individual Counseling 8% Improvement

Deterrence 24% Worse

- Social Learning Approaches
 - Family Therapy
 - Cognitive Approaches

Some Treatments Work Better

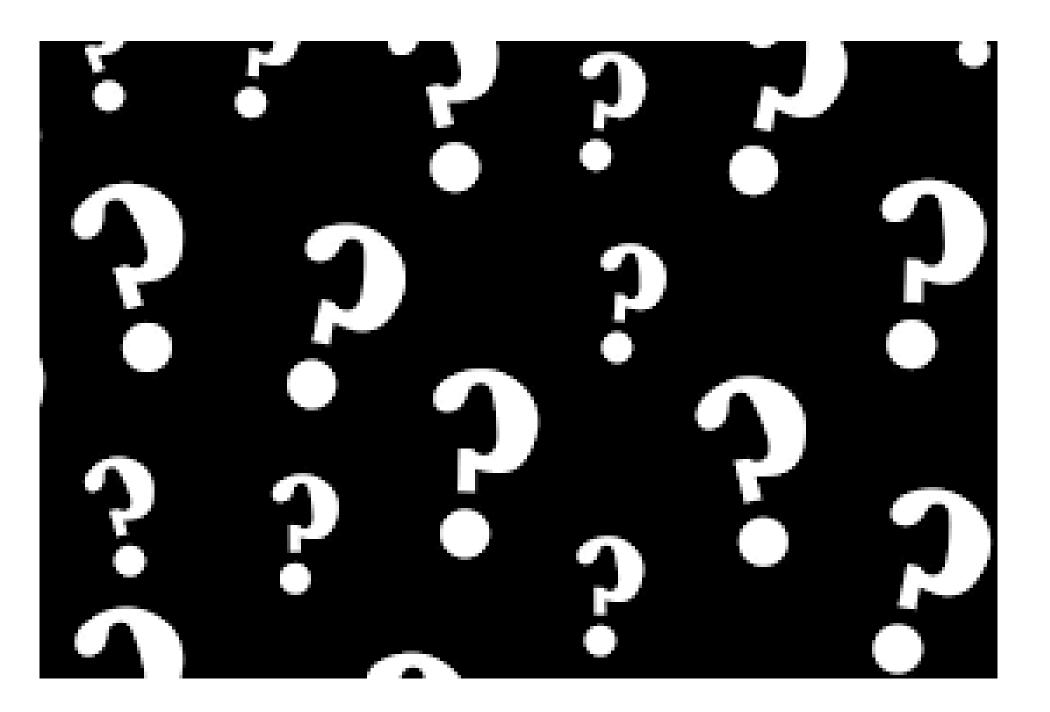
Allocate intensity according to risk level (programmatic)

• Consider matters of age, gender, and culture

Troubleshoot potential barriers to compliance

Coordinate with all potential contributors

Implement and evaluate



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