

## FACT SHEET: Youth with Mental Illness in the Criminal Justice System

The prevalence of mental illness in the youth population has not increased, but our awareness of children and adolescents with mental health problems has.<sup>i</sup> Similarly, as medical knowledge and awareness of these issues grow, so must our ability to diagnose and properly treat children and adolescents with mental health problems. The needs of youth with mental illness are being neglected. Families are denied services, placed on extreme waiting lists, or services simply do not exist. The situation has negative consequences for the youth, the families, and communities.

- Nationally the prevalence of mental disorders is higher in juvenile justice population than the general population.<sup>ii</sup>
- 70-100% of youth in the juvenile justice system have a diagnosable mental disorder.<sup>iii</sup>
- 1 in 5 (20%) of these youth will have a serious mental disorder.<sup>iv</sup>
- In 2003, 12,700 families relinquished custody of their children for the sole purpose of accessing mental health services for their child,<sup>v</sup> 9,000 to the juvenile justice system.<sup>vi</sup>
- The rate of suicide among juveniles while incarcerated is four times that of youth overall.<sup>vii</sup>
- Youth with mental health disorders are at increased risk of victimization by other in juvenile detention centers.<sup>viii</sup>
- Reports estimate that juvenile detention facilities spend \$100 million each year to house youth who are waiting for mental health services.<sup>ix</sup>

Without adequate community services many of our youth end up in the criminal justice system. These environments are not supportive and often exacerbate their mental health problems. Many of the techniques used in correctional facilities like prolonged isolation and restraints actually lead to increased, not decreased acting out, antisocial behavior, and self-harm, particularly among youth with mental illnesses.<sup>x</sup> Often correctional facilities are slow to respond to the needs of undiagnosed youth leading to further deterioration in mental status, increased violations of rules, and increased discipline. The unfortunate reality is that the more experiences that youth with mental illnesses have in juvenile detention centers, the more likely it is that they will descend deeper and deeper into the criminal justice system. The initial placement in juvenile detention becomes a self-fulfilling prophecy.

### Virginia Overview

Virginia detention centers reflect similar trends to national statistics in terms of a disproportionately high number of youth with mental illness in the correctional system and the acute need for care by these youth.

- A 2003 study found that 40% of males and 60% of females in Virginia Detention Homes are in need of mental health services; 7% of males and 15% of females qualified for urgent mental health treatment needs.<sup>xi</sup>
- A 2007 study indicated an increase with 65% of youth committed to Virginia's justice system have a diagnosed mental illness prior to admittance.<sup>xii</sup>
- The study also found that girls once in the system have more mental health problems due to trauma and abuse.<sup>xiii</sup>
- Virginia has 64 state psychiatric beds for children and 224 private psychiatric beds for adults.<sup>xiv</sup>

## Recent Developments in Virginia

- In 1993 Virginia created the Comprehensive Services Act (CSA) designed to provide the Commonwealth youth with child-centered, family-focused, community-based and cost-effective treatment. This program pools fund and resources to best meet the needs of the youth and would effectively end the practice of custody relinquishment for treatment in Virginia if funded adequately. Mandated populations, such as foster care, received \$263.7 million in 2005 while non-mandated populations received only \$9.5 million.<sup>xv</sup> Juvenile offenders fall into the non-mandated category.
- In 2000 the General Assembly appropriated \$500,000 for 2 years toward the recruitment and retention of psychiatrists in medically underserved areas.<sup>xvi</sup>
- In 2005 Virginia funded a community based program through eight of the state's Community Services Boards. The programs target children with mental illness in the detention centers providing assessments, case management, group counseling, individual counseling, crisis intervention, medication.<sup>xvii</sup>
- After the shootings at Virginia Tech, the 2008 General Assembly appropriated \$5.8 million to children's mental health and \$1.9 million to help with the training for law enforcement as first responders to crisis.<sup>xviii</sup>

## Next Steps and Needed Developments

- More formal interagency commitment and collaboration are needed to plan integrated, comprehensive service delivery systems for juvenile offenders with mental illness.<sup>xix</sup>
- Divert youth with mental health issues from the criminal system by developing robust in-home and community-based services to prevent serious crisis. Services include crisis stabilization, family support, respite, in-home, and psychiatric care. With effective and evidence-based treatment and supports, children and youth with serious mental illness can experience success in the home, school, and community.<sup>xx</sup> A crucial aspect to the success of these services is adequate and accurate screening instruments for early identification.

<sup>i</sup> Joint Committee on Behavioral Health Care. (2001). Studying Treatment Options for Offenders who have Mental Illness or Substance Abuse Disorders.

<sup>ii</sup> Bazelon Center for Mental Health Law. (2004). Thousands of Children with Mental Illness Warehoused in Juvenile Detention Centers Awaiting Mental Health Services.

<sup>iii</sup> National Center for Mental Health and Juvenile Justice. Key Issues.

<sup>iv</sup> Ibid

<sup>v</sup> Koppelman, J. (2005). Mental Health and Juvenile Justice: Moving Toward More Effective Systems of Care. National Health Policy Forum, Issue Brief, 805. George Washington University.

<sup>vi</sup> Ibid

<sup>vii</sup> Pastor, Reuben, & Falkenstern. Parental Reports of Emotional or Behavioral Difficulties and Mental Health Service Use among U.S. School-Age Children. SAMHSA Center for Mental Health Services.

<sup>viii</sup> Bazelon Center for Mental Health Law. (2004). Thousands of Children with Mental Illness Warehoused in Juvenile Detention Centers Awaiting Mental Health Services.

<sup>ix</sup> Ibid

<sup>x</sup> Carothers, C. (2004). Juvenile Detention Centers: Are they Warehousing Children with Mental Illnesses? Presented to the Governmental Affairs Committee

<sup>xi</sup> Virginia Commission on Youth Virginia. (2003). Juvenile Offenders. General Assembly.

<sup>xii</sup> Commitment to the State. (2007). Juveniles Participating in the Recreation & Extracurricular Activities Program (IREAP). Department of Juvenile Justice.

<sup>xiii</sup> Ibid

<sup>xiv</sup> Kaiser Family Foundation (2003). Virginia: Percent of Children (1-17) with Emotional, Developmental, or Behavioral Problems that Received Mental Health Care.

<sup>xv</sup> Reinhard, J. *DMHMRSAS System Transformation: Allocation of New Funds, Access to Children's Mental Health Services, and MH/Criminal Justice Cross-Cutting Issues*. Presented to the Senate Finance Committee on October 29, 2008.

<sup>xvi</sup> Joint Committee on Behavioral Health Care, 2001. Studying Treatment Options for Offenders who have Mental Illness or Substance Abuse Disorders.

<sup>xvii</sup> McGaughey. (2008). Comprehensive Services Act for At Risk Youth and Families. Office of Comprehensive Services for at Risk Youth and Families.

<sup>xviii</sup> Funding to Improve Virginia's Mental Health System will Stay in the Budget. News Report from WDBJ7 on February 20, 2008.

<sup>xix</sup> Joint Committee on Behavioral Health Care, 2001. Studying Treatment Options for Offenders who have Mental Illness or Substance Abuse Disorders.

<sup>xx</sup> Skowrya & Coccozza. (2007). Blueprint for Change: A Comprehensive Model for the Identification and Treatment of Youth with Mental Health Needs in Contact with the Juvenile Justice System. A report by the National Center for Mental Health and Juvenile Justice in conjunction with the Office of Juvenile Justice and Delinquency Prevention.