

Beyond Delinquency:
Specialized Housing and Services for Youth in
Detention

**Central Juvenile Hall,
Los Angeles County**

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Los Angeles County—Juvenile Justice

- Location: Los Angeles County – most densely populated county in the U.S., 9.9 million in pop.
- Massive Juvenile Justice System- overcrowded, overloaded JJ system
- Although the overall trend for juvenile crime in CA has been steadily declining for several decades now* the volume of delinquent youth processed through the L.A. County system remains vast
 - Average number of youth housed at CJH is ≈350-400. The facility's configuration has been restructured over the years to accommodate the volume (i.e., converting single rooms to double ones; day/common areas to dormitories)

* (Center on Juvenile and Criminal Justice, 2011)

- Delinquent youth population continues to exceed resources
 - Strained resources, costs for out-of-home placement beds – whether in juvenile detention, camp or suitable placement—remain significant
- Concurrently, the lack of resources to address JJ youths' specialized needs remains challenging

Central Juvenile Hall

AKA, Eastlake Juvenile Hall

Brief History and Overview

- Oldest of three juvenile halls in L.A. County (circa 1912)
- Located in Central region of L.A., 22.5 acres of land
- Facility structure: Living Units (accommodating separate male and female units), 2 infirmaries, 2 school buildings (ea. gender specific), 2 gyms, kitchen facilities, recreation areas, chapel and visiting center

Central Juvenile Hall- Staff Demography

Collaborative Partners (In-house)

- Probation Department—Host Agency
- Health Services
- Department of Mental Health (DMH)
- Los Angeles County Office of Education (LACOE)

Juvenile Justice Trends- Probation

Los Angeles County

- Resources
- Staffing
- Youth
 - Populations
 - Sub-populations
- AB 109 Impact

Juvenile Justice- Mental Health

- Trends
- Serving Mentally Ill Youth
- Special Populations
- Funding

Los Angeles County Probation Department

- Specialized Housing Units
 - History
 - Need for Specialized Housing Units
 - Impact to Juvenile Justice

Specialized Behavioral Services

- Integration of Services
 - Probation Department
 - Intake and Initial Screening
 - Department of Mental Health
 - Intake and Initial Screening
 - Referrals
- Mental Health Needs
 - Psychiatric disorders
 - Higher rates of PTSD (personal, familial and generational)
 - Mood Disorders (Depression, Bipolar D/O's)
 - Behavioral Disorders (ODD, DBD, Conduct D/O's)
 - ADHD
 - Psychotic Disorders
 - Higher incidence of child abuse/neglect
 - Services have doubled at CJH over the last 2 years
 - More than half of detained youth (during the past 5 months) receives ongoing MH Services

Overview

- Next 2 slides provide overview of all specialized housing at Central Juvenile Hall
- 6 Specialized Units (Special Handling, Enhanced Supervision Unit, *ESU*, Collaborative Assessment and Rehabilitation Education *CARE*, Elite Family Unit *EFU*, Commercial Sexual Exploitation of Children, *CSEC* and the Developmental Disabilities Units)

Program Name	Inception	Target Population	Criteria	Expectations Youth	Staff
Specialized Housing Unit (SHU)	1997	<ul style="list-style-type: none"> • Female • Male • Youth experiencing acute mental health problems • Acute SI/HI 	<ul style="list-style-type: none"> • Unable to function in reg. housing (due to crisis/acute issues) 	<ul style="list-style-type: none"> • Crisis Intervention work with DMH clinician and SHU staff 	<ul style="list-style-type: none"> • Lead: DMH • Collaborative team work (DMH and Probation) in helping youth resolve crisis and transition him/her back to reg. housing unit
Collaborative, Assessment, Rehabilitation and Education (CARE)	2002 2003	<ul style="list-style-type: none"> • Female • Male • Serious MI • Internalized behavioral impairments 	<ul style="list-style-type: none"> • History of serious MI, Incl. documented diagnosis and treatment • Unable to function in reg. housing • History of internalized acting out behaviors 	<ul style="list-style-type: none"> • Participate in weekly group sessions • Participate in Individual sessions and treatment with DMH clinician 	<ul style="list-style-type: none"> • Lead: DMH • Collaborative team work (DMH and Probation) in helping youth maintain Emotional stability by learning positive coping skills
Enhanced Level of Supervision Unit (ESU)	2006	<ul style="list-style-type: none"> • Female • Male • Serious MI • Externalized behavioral impairments • Self-harm/assaultive 	<ul style="list-style-type: none"> • History of serious MI, Incl. documented diagnosis and treatment • Unable to function in reg. housing • History of externalized acting out behaviors 	<ul style="list-style-type: none"> • Participate in weekly group sessions • Participate in Individual sessions and treatment with DMH clinician 	<ul style="list-style-type: none"> • Lead: DMH • Collaborative team work (DMH and Probation) in helping youth resolve crisis, establish a pattern of stability and maintain stability over a period of time

Program Name	Inception	Target Population	Criteria	Expectations Youth	Staff
Developmental Disabilities Youth Program (DDYP)	1/2012	<ul style="list-style-type: none"> • Female • Male • Previous diagnosis or suspected diagnosis of DD/MB/Autism • Past or current referral to Regional Center 	<ul style="list-style-type: none"> • Identified with or possible dev. disability • Housed in DD unit, CARE or ESU • <u>depending on severity of MH issues</u> 	<ul style="list-style-type: none"> • Participate in weekly group sessions • Participate in individual sessions and treatment with DMH clinician 	<ul style="list-style-type: none"> • Lead: Probation • Prob. facilitates weekly group sessions • Prob. works collaboratively w/ DMH, LACOE, and Regional Centers regarding specific case issues
Commercial Sexual Exploitation of Children (CSEC)	11/2010	<ul style="list-style-type: none"> • Female • Victim or Survivor of Sexual Abuse, Trauma or Trafficking 	<ul style="list-style-type: none"> • Identified as survivor or victim • Housed in either (2) main girls' units 	<ul style="list-style-type: none"> • Participate in wkly. group sessions • Participate in Individual sessions and treatment with DMH clinician 	<ul style="list-style-type: none"> • Lead: Probation: • Facilitate/Provide weekly group sessions • Prob. works collaboratively with DMH regarding specific case issues
Elite Family Unit (ELITE)	1/2008	<ul style="list-style-type: none"> • Female • Male • Crossover youth—dually supervised (DCFS/Probation) 	<ul style="list-style-type: none"> • Dually supervised (WIC300/600) • Dual supervision assigned DPO • Unit Orientation and Interview with Coordinator • History of internalized acting out behaviors 	<ul style="list-style-type: none"> • Housing in ELITE unit • Participate in Arts Program and other wkly. Rehabilitation group • Participate in Individual sessions and treatment with DMH clinician 	<ul style="list-style-type: none"> • Lead: Probation: • Facilitate/Provide weekly activities • Graduate-level interns: Provide weekly Art Program • Prob. works collaboratively with DMH regarding specific case issues

Focus on 3 Specialized Housing Units

- CARE

- DD

- ESU

Profiles

- Profiles of four youth:
 - Regular Housing
 - CARE
 - DD
 - ESU

Outcomes

- Benefits
 - For youth (individual)
 - Systemic (juvenile justice)
- Stats. and Outcomes by Program
 - CARE
 - DD
 - ESU

Implementation of Specialized Housing

- Buy-in/Collaboration
 - What are the benefits (Individual/Departmental/facility)
- Training Needs
 - Specialized Training
 - Behavioral Interventions
 - Treatment vs Punishment
 - Habilitation vs Rehabilitation
- Resources
 - Staffing
 - Policies
 - Protocols
- Barriers/Obstacles
 - Systemic
 - Perspectives
 - Bureaucracies
 - Financial
 - Measuring Progress
- Tips
 - We are a guest in Probation's house

Policy Implications

- Administrative support
- Culture changes
 - Discipline vs Punishment
 - Reward and Behavior Management
- Research

THANK YOU

Questions?


