

Journal of Applied Juvenile Justice Services

NPJS – Passionate about Professional Improvement

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Juvenile Detention Centers and Alternative Programs

The National Partnership for Juvenile Services (NPJS) issues Position Statements on issues impacting the operations of juvenile detention facilities and the juvenile justice system. These Position Statements seek to recognize the basic rights and needs of juveniles who are placed under a level of physical restriction by a court of jurisdiction. The Position Statements propose a minimum level of service to meet those needs and rights. Position Papers strive to establish best practices in juvenile justice services.

INTRODUCTION

Juvenile justice practices are ever evolving in response to a number of influences such as evidence about which interventions are successful, the introduction of new strategies, i.e., risk and other assessments, detention alternative initiatives, Balanced and Restorative Justice (BARJ), etc., and changes in local, state and national political beliefs.

NPJS strives to educate and train the field about what to expect from adolescents who are trying to cope with abnormal life circumstances. NPJS not only acknowledges that there is always room for personal and professional improvement, but we embrace improvement and growth because it is what we expect from those in our care and custody.

The National Partnership for Juvenile Services (NPJS) is an association that provides professional development and technical assistance and promotes best practices and standards to the field of juvenile justice and delinquency prevention. NPJS, through the work of its Critical Issues and Policy Direction Committee, provides opportunities for collaboration among practitioners, experts, researchers and advocates to create and disseminate Position Statements on critical and timely issues confronting the juvenile services profession. Through these Position Statements, NPJS seeks to provide those responsible for the care and custody of court-involved youth with information about how to best meet the basic rights and needs of juveniles under their supervision. Position Statements strive to establish best practices in juvenile justice services.

NPJS recognizes that states and local jurisdictions vary in legal requirements and restrictions and in philosophic practice, and that facility administrators are obligated to follow the directions of their governing entities. The purpose of Position Statements is to articulate and promote best

practice across the juvenile justice system to ensure the system is as effective as possible in protecting public safety and providing appropriate services to juveniles and their families. While each Position Statement provides guidance around a specific issue, the combined Position Statements offer a holistic approach to juvenile justice service provision.

The members of NPJS identify the critical issues addressed in NPJS Position Statements. In many cases, these issues arise in discussions among members during networking opportunities. During these discussions common experiences or concerns often surface that lead to an exploration of how others have addressed the issue. Many times these are issues that impact a large number of members and their agencies. When this happens, the NPJS Critical Issues and Policy Direction Committee will add the issue to a prioritized agenda to be addressed by the committee.

The committee convenes monthly electronic meetings using web services and teleconferencing to discuss, draft and sometimes to revise existing Position Statements. Generally, select members of the committee, along with topic experts who are collaborators with the NPJS, offer a draft position statement to the committee. The committee thoroughly reviews and edits the draft to make sure the format is consistent with other Position Statements and the content reflects the consensus of the group. The committee has demonstrated a consistent practice of examining each issue from a national perspective rather than from a local or personal perspective. After the committee reaches consensus on the draft Position Statement, it is distributed to the NPJS membership for review and comment. Members of the committee then review comments from the field, and after appropriate adjustments are made to the statements, they are presented to the NPJS Board of Directors for final approval.

Any member-in-good-standing may serve on the Critical Issues and Policy Direction Committee. At a minimum, the committee must consist of representatives from each of the NPJS Councils (Confinement, Training and Education). The discussions among committee members, while respectful, challenge members to constantly look beyond what is occurring or what has been acceptable, toward what is in the best interests of the youth. There have been many occasions when a committee member has stated “But there are barriers that stand in the way of meeting that expectation in our facility.” And consistently, the response has been, “If you could, wouldn’t you want to try to do this?”

NPJS Position Statements have served to guide local and national policy. At the local level, they often serve as a catalyst for debate and discussion toward new policy or protocol. At the national level, the Position Statements have at times influenced public policy and federal law.

Position Statements are a resource NPJS members may use to influence trends, practices and budget decisions. Through member input, NPJS Position Statements provide a powerful message from practitioners who are not only passionate about what they do, but invest their lives in offering hope and a new direction to troubled and often challenging youth. If you are not already a member of the NPJS, you can join now by going to <http://npjs.org/membership/>.

Existing NPJS position statements can be found below or by visiting <http://npjs.org/position-statements/>.

DETENTION AS DISPOSITION
Adopted by NPJS Board of Directors ~ October 20, 2014

STATEMENT OF THE ISSUE

The purpose of juvenile detention has historically been for “the temporary and safe custody of juveniles whose alleged conduct is subject to court jurisdiction and who require a restricted environment for their own and the community’s protection while pending legal action” (Definition of Juvenile Detention, as revised by National Juvenile Detention Association in 2007). However, use of juvenile detention facilities by the court as a disposition continues. This practice has been accompanied in many jurisdictions with statutory changes authorizing such use.

NATURE OF THE ISSUE

- Use of juvenile detention facilities, without any supplemental behavioral health intervention, as a dispositional option emphasizes punishment over behavior change.
- Use of juvenile detention facilities as a dispositional option mixes populations and may adversely affect treatment or programming.
- The academic needs of youth in short term detention are significantly different than those of youth in longer term dispositional care. Co-mingling of these youth provides a disservice to each population.
- Use of juvenile detention facility as a dispositional option may aggravate overcrowding in juvenile detention centers.
- Use of juvenile detention facilities as a dispositional option is often utilized simply because other, more preferable, alternatives are not available.
- Use of juvenile detention facilities as a dispositional option discourages the development of more appropriate, less costly alternatives.
- Use of juvenile detention facilities as a dispositional option may result in the negative influence of institutionalization and deny the opportunity for positive experiences in the community (i.e. school, religious activities, sports, family involvement).
- Physical plant design for short term facilities may not provide for the programming needs of youth who are in care for longer periods (i.e. space for activities, visitation, service provision, etc.)
- Staffing (e.g. recruitment, selection, training and skills, staff ratios) for short-term detention facilities may not be adequate to meet the needs of youth placed as a disposition.

POSITION STATEMENT

The National Partnership for Juvenile Services (NPJS) opposes the use of secure detention programs as a disposition. Juvenile detention programs are primarily designed to provide a secure environment (both structurally and through staffing) to protect the individual, community and when necessary to ensure a court appearance.

However, NPJS does support the use of secure facilities when disposition requires facilities to provide services that are designed to address criminogenic factors and result in constructive re-entry to the community. This may at times involve the use of buildings historically used as detention, when:

- Youth placed for disposition are segregated from pre-dispositional youth,
- The operations offer individualized and accelerated educational programming that will allow youth to be successful upon reentry to the community,
- The operations ensure that the programming and behavior management system are integrated to meet the behavioral health needs of the youth and promote sustainable pro-social behavior change,
- The operations provide comprehensive assessment of criminogenic needs and youth/family strengths and establish individualized intervention plans that lead to positive reentry, and
- The operations provide opportunities and strategies to effectively engage family and community resources designed to successfully reintegrate the child back into society as a productive citizen.

The Partnership discourages the use of any dispositional option that is not supported by evidence to improve outcomes and/or diminish recidivism.

USE OF ELECTROSHOCK DEVICES IN JUVENILE DETENTION AND SECURE RESIDENTIAL FACILITIES

Adopted by NPJS Board of Directors ~ October 18, 2011

STATEMENT OF THE ISSUE

Juvenile detention and secure residential facilities are physically safe and secure programs that are intended to address the needs of confined youth according to their developmental needs. Those facilities are not meant to duplicate adult jails and prisons in how services are provided, nor should they be designed to serve a strictly punitive purpose. In order to adequately serve young people in juvenile detention and secure residential facilities, there must be a sufficient number of properly trained staff members who act empathetically and free of prejudice. Those facilities must also offer a range of helpful programs and services that are planned to offer rehabilitative, restorative and growth-producing opportunities. With well-trained staff members and a variety of beneficial programs, incidents involving physical acting-out on the part of youth in facilities are minimized and harsh and punitive interventions, generally based on an adult corrections model, are seldom necessary. When the safety and security of youth and staff in a facility do require the use of physical control techniques, that intervention should only consist of methods and practices that are designed for a juvenile population and which emphasize the least amount of restraint necessary to attain control. The use of such pain-compliant techniques and tools as electroshock devices within a facility that is already secure is not necessary.

NATURE OF THE ISSUE

- Amnesty International has called the use of electroshock devices “inhuman” based on their research of deaths resulting from the use of electroshock devices.
- The United Nations has deemed electroshock device to be a form of torture.
- There is significant documentation in professional literature of deaths resulting from such causes as asphyxia, excited deliria and acute cardiac death, subsequent to the use of electroshock devices in correctional facilities.
- Certain risk factors make many individuals more at-risk of harm when electroshock devices are used on them. Staff in juvenile detention and secure residential facilities may not know if the young people in their facilities have such risk factors.
- Electroshock device policies for law enforcement agencies address such issues as storage, inspection and maintenance, physician involvement and training requirements, including frequency (typically annually) and amounts (at least four to eight hours). Juvenile facilities and their staff would secure greater benefit from training staff members on subjects specifically related to the needs of young people in the juvenile justice system including such issues as adolescent development, mental health issues, and verbal de-escalation techniques.
- The mere presence of electroshock devices in juvenile facilities sends a message to both staff and youth that such extreme measures are considered acceptable and appropriate and can heighten the likelihood that they will be used in place of less severe techniques for managing youth behavior.

- Young people in juvenile detention and secure residential facilities should be monitored and managed by well-trained staff in sufficient numbers to address both group dynamics and individual needs of youth. Electroshock devices and other tools to control behavior should not substitute for an adequate number of trained juvenile justice employees.
- A range of planned, organized and constructive programs for youth in juvenile detention and secure residential facilities offers opportunities for those youth to participate in beneficial activities and minimizes behaviors that could endanger themselves or others.

POSITION STATEMENT

The National Partnership for Juvenile Services (NPJS) advocates juvenile detention and secure residential facilities have an adequate number of well-trained staff members and a range of helpful programs in order to serve those youth appropriately and to diminish the need for the use of force. The NPJS opposes the use of electroshock devices, in juvenile detention and secure residential facilities.

**HOLDING JUVENILES BEING CHARGED AS ADULTS
IN JUVENILE DETENTION**
Adopted by NPJS Board of Directors ~ March 26, 2013

STATEMENT OF THE ISSUE

Juvenile detention, as part of the juvenile justice continuum, is a process that includes the temporary and safe custody of juveniles whose alleged conduct is subject to court jurisdiction and who require a restricted environment for their own and the community's protection while pending legal action. (*Definition of Detention, Approved by National Juvenile Detention Association, October 14, 2007*)

In many jurisdictions, juveniles may be tried as adults. This practice raises questions regarding the appropriate place of confinement for juveniles who are charged as adults.

NATURE OF THE ISSUE

- Lowering the age for which juveniles may be criminally prosecuted does not change the fact that they are still adolescents.
- The number of juveniles who commit serious and/or violent offenses is a small percentage of all juvenile offenders.
- There are basic philosophical differences between the juvenile justice system and the adult criminal system.
- Juvenile detention professionals have training and experience necessary to serve this population effectively.
- Juveniles receive more developmentally appropriate programs and services in juvenile detention facilities than in adult jails.
- Holding juveniles being criminally prosecuted in adult settings exposes them to more career and hardened criminals.
- Research has shown juveniles are more likely to commit suicide if they are held in adult jails.
- Many adult jails lack the physical structure, programming and trained personnel to effectively serve juveniles.

POSITION STATEMENT

The National Partnership for Juvenile Services (NPJS) understands that the behaviors, risks and needs of juveniles entering the justice system have changed over time and will continue to change in the future. Nevertheless, it remains our belief that all juvenile offenders have the right to access rehabilitation and treatment services, which are the fundamental principles of the juvenile justice system and of juvenile detention.

NPJS advocates a comprehensive strategy to deal with juvenile offenders. It is the position of NPJS that waived or transferred juveniles accused of committing a crime and requiring temporary holding in a secure setting, be held in juvenile detention pending judicial

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determination to the contrary. NPJS opposes any action that places juveniles at risk of being victimized by adult offenders.

**MINIMUM DIRECT CARE STAFF RATIO
IN JUVENILE DETENTION AND CORRECTIONAL FACILITIES
*Adopted by NPJS Board of Directors ~ October 21, 2013***

STATEMENT OF THE ISSUE

Juveniles require adequate adult guidance and direction to ensure their healthy development. The typical population of juveniles held in detention or correctional facilities requires greater support and supervision than non-confined juveniles. It is important to supervise the juvenile's actions, statements, and developing relationships through meaningful interaction with staff.

To be effective, supervision of juveniles requires a sufficient number of trained and competent staff members, in a sufficient staff-to-juvenile ratio. Confined juveniles are sometimes being housed in facilities that are overcrowded and understaffed.

NATURE OF THE ISSUE

Juvenile detention and correctional facilities face constant pressure to reduce budgets. As staffing accounts for 70 to 90% of the total fiscal operations, many administrators are pressured to reduce staff or house additional juveniles to achieve a lower per diem rate.

- Some juvenile facilities utilize modern design and technology features as an intended substitute for appropriate levels of direct care staffing and associated costs.
- In times of population crisis and regardless of design, all facilities may experience periods when they have insufficient staff-to-juvenile ratios due to exigent circumstances.
- An adequate number of direct care staff is necessary to monitor the behavior of juveniles and to engage them in helpful programs and services without reliance on segregation of misbehaving juveniles.
- Juvenile detention centers generally do not control their admissions or releases and their staff-to-juvenile ratios can increase quickly. Therefore, those facilities must have a system for enhancing the direct care staff-to-juvenile ratio accordingly.
- Unique juvenile facility populations, such as those with mental health diagnoses, sex offenders or others requiring specialized services, may require a larger staff-to-youth ratio to safely and effectively be served.
- The OJJDP *Conditions of Confinement: Juvenile Detention and Corrections Facilities Research Report* states, "One important element of security is staffing levels. Without sufficient staff, juveniles are more likely to be able to harm each other, staff, or themselves. In addition, lack of staff causes low staff morale and higher levels of stress for staff." When the staff to juvenile ratio exceeds national standards, programming effectiveness will diminish, which increases the likelihood of physical intervention occurring.

DEFINITION

Direct Care Staff ~ Employees whose exclusive responsibility is the direct and continuous supervision of juveniles. Direct care staff must be in the same room, trained and responsible to ensure a safe environment for juveniles.

POSITION STATEMENT

The National Partnership for Juvenile Services advocates that regulation, policy, procedure and practice ensure a minimum ratio of one direct care staff to no more than eight (1:8) juveniles during waking hours, and a ratio of one direct care staff member to no more than sixteen (1:16) juveniles during sleeping hours, with a minimum of two direct care staff on duty at all times regardless of population. At least one direct care staff of the same gender as residents served shall be on duty at all times. Further, if the design of a facility limits direct care staff members' direct interaction with residents or if a facility's population has specialized characteristics or needs, that facility should increase the number of direct care staff beyond minimum recommended ratios. Monitoring technology may be used as a supervisory enhancement but shall not be a substitute for direct supervision of youth.

**PLACEMENT AND TREATMENT OF
PRE-ADOLESCENTS IN A DETENTION FACILITY**
Adopted by NPJS Board of Directors ~ October 18, 2011

STATEMENT OF THE ISSUE

Pre-adolescents (children 11 years of age or younger) have unique needs and when placed in secure juvenile detention facilities pose specific programmatic, safety, and security issues.

NATURE OF THE ISSUE

Pre-adolescents, due to the developing maturity level and limited ability to make rational cognitive choices:

- Behave differently and require age appropriate behavior management programs.
- Have emotional needs that require a more nurturing environment. °
- Have different educational and recreational needs.
- Have unique healthcare needs.
- Require a different level of supervision and classification to protect them from harm and possible victimization. °
- Require that staff have different skill sets and specific training to address the developmental and emotional needs of this population.

POSITION STATEMENT

The National Partnership for Juvenile Services (NPJS) opposes the placement of pre-adolescents in secure juvenile detention facilities. The NPJS believes that this population is best served through the professional and effective collaboration among child welfare, mental health, and juvenile justice agencies. In the event that a placement occurs in a secure juvenile detention facility, services should address the specific safety, health care, and developmental needs of the child. An alternative placement consistent with public safety should be facilitated immediately.

SEXUAL ABUSE IN JUVENILE CONFINEMENT FACILITIES / PREA
Adopted by NPJS Board of Directors ~ October 18, 2011

STATEMENT OF THE ISSUE

Although the problem of sexual abuse of incarcerated individuals is not new, the recognition of the duty to protect those individuals from harm is a relatively recent development. The United States Congress affirmed the duty to protect incarcerated individuals from sexual abuse by unanimously enacting the Prison Rape Elimination Act (PREA) of 2003.

NATURE OF THE ISSUE

- Juveniles in confinement are “much more likely than incarcerated adults to be sexually abused, and they are particularly at risk when confined with adults.” (*National Prison Rape Elimination Commission (NPREC) Report*, June, 2009)
- Certain individuals are more at risk of sexual abuse than others. Factors such as age, gender, stature, lack of experience, mental illness and sexual orientation may contribute to a person’s vulnerability. These factors are inherent in the population served by juvenile facilities.
- The NPREC reported that a large number of sexual abuse incidents in juvenile facilities were staff-on-resident acts.
- Sexual abuse contributes to the spread of sexually transmitted diseases and has been shown to increase suicide risk, exacerbate pre-existing psychiatric disorders, hasten or cause the development of anxiety, depression, Post Traumatic Stress Disorder or Rape Trauma Disorder or other psychological or psychiatric conditions.
- In many cases, juvenile services staff have not been adequately trained to properly prevent, detect, or respond to reports or incidents of sexual abuse.
- Juveniles need to be educated regarding their right to be free from sexual abuse and how to report sexual abuse incidents.

POSITION STATEMENT

The National Partnership for Juvenile Services (NPJS) fully supports the Prison Rape Elimination Act of 2003 and compliance with the “National Standards To Prevent, Detect and Respond to Prison Rape”. The NPJS also supports quality pre-service and on-going training and education, in accordance with PREA standards. The NPJS further supports the implementation of effective policies and procedures that help to prevent, detect, respond to and investigate sexual abuse incidents.

**RECRUITMENT, SELECTION, AND RETENTION
OF JUVENILE JUSTICE PROFESSIONALS**
Adopted by NPJS Board of Directors ~ October 18, 2011

STATEMENT OF THE ISSUE

The most valuable resource in the juvenile justice field is a highly qualified, committed, and professional workforce who will implement programs and provide meaningful services for youth. Juvenile justice facility administrators identify critical problems or challenges in the ability to effectively recruit, select, and retain a stable, professional workforce in juvenile justice organizations. Failure to recruit and retain quality individuals into the juvenile justice profession will result in the diminishing of helpful services provided to youth.

NATURE OF THE ISSUE

Many organizations in the juvenile justice field experiences a high degree of staff turnover that inhibits the development of a consistent team and often negatively impacts the delivery of effective services and the ability to provide effective programming, supervision, and safe, secure environments for youth.

Frequent staff turnover in the juvenile justice field presents a significant fiscal challenge to facilities due to increased overtime during the periods of staff vacancies, additional training expenditures, administrative time spent conducting the recruiting and selection process.

The juvenile justice field needs to identify the selection strategies of hiring practices that contributes to the development of a productive, effective, and stable professional workforce.

POSITION STATEMENT

The National Partnership for Juvenile Services (NPJS) recognizes that, in order to meet the professional expectations, organizations should develop and implement effective staff recruitment, selection, and retention strategies to ensure a stable, professional workforce.

NPJS strongly advocates for increasing the professional standards of juvenile justice practitioners by providing a myriad of staff development opportunities, technical assistance, professional journals and publications, conferences/workshops, certification programs, etc. devoted to the wide range of facility personnel. NPJS encourages the development of sound management practices in juvenile justice facilities that create a positive, productive work environment, provides meaningful incentives for positive performance, and ensures adequate compensation for juvenile justice professionals.

REPURPOSING JUVENILE JUSTICE FACILITIES
Adopted by NPJS Board of Directors ~ October 20, 2014

STATEMENT OF THE ISSUE

When less restrictive alternatives are not appropriate, the role of juvenile justice facilities should be to provide the physical and structural amenities necessary to assure the safety of the placed youth and the safety of the community while offering treatment, rehabilitation and supervision. When these facilities close, communities are left with difficult choices. Many youth either are left without services or are moved far from their homes. However, opportunities to repurpose facilities and reinvest resources into community-based alternatives that can support cost-effective programs for youth may exist.

NATURE OF THE ISSUE

- Substantial reductions in juvenile arrests, combined with the growth of more cost-effective community-based alternatives have resulted in decreased reliance on institutional care.
- When communities close residential facilities, they are still responsible to keep their citizens safe and to provide services for youth.
- Local juvenile justice facilities can be redesigned to offer community-based support and services.
- Staff members from local juvenile justice facilities are trained to respond to the needs of at-risk youth and have demonstrable skills that can be applied to youth at risk of removal from the community as well as to youth returning home.
- When local facilities are not available, youth often are placed far from their homes and lose opportunities for successful reintegration.
- Ready access to legal counsel, family, local school system and local physical and/or behavioral health resources improve outcomes and transition home.
- Evidence shows that youth who have increased access to positive community support and family resources are at decreased risk for recidivism.

POSITION STATEMENT

The National Partnership for Juvenile Services (NPJS) supports the repurposing of juvenile justice facilities and staff as dispositional resources. NPJS believes that youth should be served in the least restrictive environment possible. Repurposing facilities allows local jurisdictions to provide secure care and/or alternatives that may be accessed when such an environment is essential to protect the youth and the community. In addition, repurposed facilities must create opportunities for programming and education that address the behavioral health needs of the youth and provide access to community resources designed to successfully reintegrate the youth back into society as a productive citizen.

**SUICIDE PREVENTION
IN JUVENILE JUSTICE FACILITIES**
Adopted by NPJS Board of Directors ~ October 20, 2014

STATEMENT OF THE ISSUE

Suicide is more common among youth in juvenile justice facilities than those in the community-- and is the leading cause of death among juveniles in custody. A study of youth in detention found one in ten had thought about killing themselves in the past six months and a little over one in ten had made an actual suicide attempt at some point in their lives--with many trying to kill themselves more than once. Fewer than half of the youth with recent suicidal thoughts had told anyone about them.

As the number of detained and incarcerated youth declines, those who remain in juvenile detention and correctional facilities tend to have high rates of violence, mental health and substance use disorders, psychotropic medication, and trauma—all risk factors for adolescent suicide. Death can seem like the only option to youth in juvenile justice facilities who feel hopeless, alone, anxious or depressed, and who want to escape unbearable potential futures, psychological pain, or distressing circumstances. For this reason, all juvenile justice facilities must develop and implement comprehensive suicide prevention programs to identify potentially suicidal youth and respond in ways that reduce their suicidal thoughts and behavior.

NATURE OF THE ISSUE

- Youth in juvenile justice facilities often have a multitude of suicide risk factors, placing them at an elevated risk of killing themselves. Studies of youth in custody have found 63% to 92% met criteria for a mental health or substance use disorder, both significant risk factors for suicide. Youth with co-occurring disorders are at even higher risk.
- Residing in a juvenile justice facility can be stressful, and youth do not have access to many of their typical coping strategies.
- Some signs of depression (e.g., irritability, agitation, aggression) are frequently overlooked or misinterpreted as negative behavior and suicidal threats/behaviors may be viewed as “manipulative.” Youth may also exhibit suicide-related acts as the result of intense anger or frustration that is not necessarily tied to depression.
- Many suicide prevention efforts in juvenile justice facilities focus on how to respond once youth state they are suicidal, rather than preventing youth from becoming suicidal in the first place.
- Suicide prevention training is often too brief, not given to all relevant staff, and too focused on youth who are not in custody
- Not all facilities use Qualified Mental Health Professionals (QMHP’s) to assess and provide treatment to suicidal youth. QMHPs are licensed and have the education, training and experience to deliver these services.
- Some youth are never re-screened for suicide risk after initial questioning at intake. Even when they are, youth may not disclose suicidal thoughts or feelings.

- Some juvenile justice facilities contain hazards that provide increased opportunity for suicidal youth to take their own lives.
- Some strategies used to keep suicidal youth safe during confinement can unintentionally increase youths' feelings of isolation, hopelessness or shame (e.g., removal of clothes, suicide smocks, no programming, restrictive housing, constant observation). Restrictive housing (e.g., room confinement) is one of the most high-risk environments for youth to take their own lives.
- Stigma related to suicide exists in many juvenile justice facilities; staff and peers may send subtle or blatant messages that youth who experience suicidal thoughts and feelings are weak, vulnerable, and unable to cope—decreasing the chances youth will seek or accept help.

POSITION STATEMENT

The National Partnership for Juvenile Services (NPJS) recommends that juvenile justice facilities have a comprehensive suicide prevention program that identifies potentially suicidal youth and responds in ways that reduce their suicidal thoughts and behavior. The NPJS advocates the use of national standards and best practice in the areas of suicide prevention (*see reference list) among youth in custody to develop and implement a comprehensive suicide prevention program which shall include the following components:

- Policy & Procedures
- Suicide Prevention Training
- Suicide Screening & Referral
- Suicide Assessment & Evaluation
- Treatment Issues
- Intensive Monitoring
- Safe Housing of Suicidal Youth
- Communication About Youth
- Responding to an Active Suicide Attempt
- Reporting and Notification of Suicidal Behavior
- Debriefing & Review

For detailed information for each of the above components see the *NPJS Desktop Guide on Quality Practice for Youth in Confinement* (Chapter 11). www.desktopguide.info

OTHER CONSIDERATIONS

Preventing youth from becoming suicidal is key to suicide prevention. The following can help create a positive culture that decreases the distress, loneliness, and hopelessness experienced by some youth in custody:

- repeated positive interactions with well-trained juvenile justice, mental health, medical, and education professionals,
- interesting and relevant programming,
- involvement of parents/caregivers,
- strength-based behavior management systems, and
- positive environments that encourage youth to seek support when feeling sad, angry, scared, hopeless, or suicidal, without being viewed as “crazy” or weak.

Articles, standards and studies specifically used for this position paper include:

- Mental Health Services (Daily Practice), NPJS/NIC Desktop Guide to Quality Practice for Working with Youth in Confinement, Boesky, 2014
- Suicide Prevention Among Youth in Custody, Training Curriculum for Juvenile Justice Facilities--National Center for Youth in Custody/National Partnership for Juvenile Services, 2014
- Training Curriculum and Program Guide on Suicide Detection and Prevention in Juvenile Detention/Correctional Facilities and Residential Programs--Hayes, 2013
- Juvenile Offenders with Mental Health Disorders: Who Are They & What Do We Do With Them--Boesky, 2011
- Standards for Health Services in Juvenile Detention and Confinement Facilities--National Commission on Correctional Health Care, 2009
- Suicidal Ideation and Behaviors Among Youth in Juvenile Detention--Abram, et al., 2008
- Deaths In Custody Statistical Tables: State Juvenile Correctional Facility Deaths 2002-2005--Bureau of Justice Statistics, 2009
- Prevalence of and Gender Differences in Psychiatric Disorders Among Juvenile Delinquents Incarcerated for Nine Months--Karnik, et al., 2009
- Psychiatric Disorders in Youth in Juvenile Detention--Teplin, et al., 2002.
- Survey of Youth in Residential Placement: Youth's Needs and Services-- Sedlak & McPherson, 2010

USE OF ISOLATION

Adopted by NPJS Board of Directors ~ October 20, 2014

STATEMENT OF THE ISSUE

Juvenile justice facilities must continuously move toward performance improvement efforts that address the rehabilitative needs of the youth. Many practices historically used in response to youth behavior must be carefully evaluated to determine if they are still effective and more importantly do not cause harm. Isolation has been used for varying reasons and with varying results, however in many cases it has been found to be detrimental to youth. Juveniles inside confinement facilities bring with them a variety of characteristics and fall into various, sometimes duplicative, categories. Juveniles can be volatile and aggressive; prone to either being victims or victimizers; mentally compromised or unstable; the subject of an investigation; or the subject of frequent disciplinary action. Juveniles may be placed in institutions that are understaffed or in those with fewer mental health staff and resources. Given all of these considerations, in relation to the potential risks of harm, the use of isolation must be critically evaluated so that its use is limited, prudent and applied for legitimate and documented safety and security reasons.

NATURE OF THE ISSUE

- Juvenile detention and secure residential facilities frequently house youth with significant behavioral issues and isolation has often been used in these facilities as a means of control and/or discipline. Research has shown that isolation can lead to elevated suicide/self-harm risk in youth and possibly further mental health trauma through sensory deprivation.
- Over the years, federal lawsuits and the research that has been done on the use of isolation has increased understanding and led to an array of new ways for facilities to alter behavior management programs to lessen the use of isolation while still maintaining security and safety. There are no studies that show the use of isolation in juvenile facilities is effective in changing or improving violent or anti-social behavior.
- Practitioners in many facilities believe isolation is a necessary safety tool that can allow a youth time to calm down and can be used to separate a volatile youth from their source of aggression.
- Some youth “self-isolate” by asking staff for time in their room alone, choosing to use that time for reflection and to calm down.
- Research has shown that young people in isolation may experience depression through a lack of interaction, may miss out on needed school time, and are more likely to harm themselves or commit suicide. Teenagers who experience punitive, sometimes ad hoc use of isolation, without positive behavior management programs, often increase their own level of defiance and aggressiveness from their anger at extensive, punitive isolation time. In essence, the use of isolation, intended to solve a problem, can cause more problems.
- Practitioners are divided in the guidelines that should be established when isolating youth. Many have concerns that too little isolation use will lead to more violence, staff

apathy and a lack of institutional control. Others insist on its abolition, citing concerns over youth mental health consequences and because alternative means of behavior management are available.

DEFINITIONS

Isolation refers to separating youth from other residents during non- sleeping hours by placing them alone in a room or cell. Common terms used to describe isolation include:

- Seclusion (e.g. medical)
- Segregation
- Lockdown
- Room Confinement
- Protective Custody (safety housing)

POSITION STATEMENT

The position of the National Partnership for Juvenile Services (NPJS) is that the use of isolation should only occur when no other means can be used to accomplish the safety and security of the youth and staff. The use of room confinement should be for as short a time as possible. Once the young person no longer poses a threat, the room confinement should be ended and the youth should be reintegrated back into programming with whatever consequences are appropriate and needed to address the youth's inappropriate behavior choices prior to the isolation.

**USE OF JUVENILE DETENTION FACILITIES
FOR YOUTH WITH SEVERE MENTAL HEALTH ISSUES**
Adopted by NPJS Board of Directors ~ October 18, 2011

STATEMENT OF THE ISSUE

Large numbers of youth with serious mental illness, significant developmental disabilities, and youth that are severely emotionally disturbed are housed in juvenile detention facilities. Increasingly, detention facilities are viewed as the only legitimate managers of these youth because they have physical plants that are able to securely maintain severely disturbed youth.

NATURE OF THE ISSUE

- Juvenile detention facilities are forced to house youth with severe mental health issues who have committed incidental offenses, due to the lack of available appropriate community resources.
- Juvenile detention facilities are required to admit juveniles who have severe mental health issues who are charged with serious delinquent offenses.
- Juvenile detention staff are not sufficiently trained or equipped to provide adequate care for youth with severe mental health issues.
- Juvenile detention facilities do not provide an appropriate therapeutic environment conducive to the provision of appropriate services.

POSITION STATEMENT

The National Partnership of Juvenile Services (NPJS) strongly advocates that juvenile offenders who have been identified by qualified mental health professionals as having severe mental health issues, be placed in the appropriate therapeutic environment, instead of juvenile detention facilities.

When juvenile detention facilities are forced to house youth with severe mental health issues, NPJS promotes the provision of adequate services by appropriately trained and licensed specialists.

UNIT AND FACILITY SIZES
Adopted by NPJS Board of Directors ~ July 1, 2002

STATEMENT OF THE ISSUE

The juvenile justice system's foundation is based on concepts such as *parens patriae*, the least restrictive environment, rehabilitation, and treatment. Recent political and fiscal pressures have caused many juvenile systems and jurisdictions to choose to operate facilities with a bed capacity above 150 juveniles and living units with more than twenty-five youth. The credible evidence, to date, indicates that this practice increases the likelihood of negative outcomes in the areas of conditions of confinement and safety, including increased youth violence and victimization.

The establishment and maintenance of standards developed by juvenile justice practitioners must supersede the vagaries and the ebb-and-flow of politics and fiscal considerations and should serve the best interests of community protection and public safety through the return of the juvenile to a law-abiding lifestyle.

NATURE OF THE ISSUE

The ACA Standards 3-JTS-2B-03, 3-JTS-2B-05 and 3-JDF-2B-02 were developed by the Standards Committee using conventional wisdom, descriptions of "best practices", and reviews of "best research" regarding size of living units and overall size of facilities as it relates to the safety of incarcerated youth. The research continues to indicate that group size has an effect on outcomes for children and adolescents. Most juvenile justice practitioners indicate that size of living units and overall facility size do make a noticeable difference in the management of youth and successful reentry to productive community living.

The National Partnership for Juvenile Services is unaware of research that contradicts the relationship between group size and outcomes as described above. The OJJDP Study of Conditions of Confinement Report of 1994 does not repudiate this research and does not address directly the issues of living unit or facility sizes.

The National Partnership for Juvenile Services, comprised of the National Association of Juvenile Correctional Agencies, the National Juvenile Detention Association, the Juvenile Justice Trainers Association, and the Council for Educators of At-Risk and Delinquent Youth, advocates for youth, families and communities and promotes best practices and quality in professional standards. The National Partnership for Juvenile Services strongly advocates for the conduct of research on the issues of facility and living unit size and outcomes regarding youth safety.

POSITION STATEMENT

The National Partnership for Juvenile Services recognizes the evolving nature of professional standards and the need to revisit and/or revise them periodically. However, the revision of a professional standard must be based on principles of due diligence, including a competent review of current research and "best practices". A long-standing, accepted standard that continues to guide practice should not be changed without new and compelling information to guide the

change. The principles of due diligence must prevail in the standards development and revision process.

The National Partnership for Juvenile Services strongly disagrees with the changes to ACA Standards 3-JTS-2B-03 and 3-JTS-2B-05 made at the ACA Standards Committee meeting in January of 2002.

The National Partnership for Juvenile Services strongly advocates for the conduct of research on the issues of facility and unit sizes and outcomes regarding youth and staff safety.

The National Partnership for Juvenile Services urges the ACA Standards Committee to (a) rescind the aforementioned changes made to standards 3-JTS-2B-03 and 3-JTS-2B-05 and (b) not revise other juvenile standards addressing facility and living unit size until research results indicate the need to do so.

ABOUT THE AUTHOR

Wayne R. Bear, MSW is currently the Executive Director of the Juvenile Detention Centers and Alternative Programs (JDCAP) an affiliate of the County Commissioners Association of Pennsylvania (CCAP).

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Wayne has worked in the field of juvenile justice for over 30 years. Over the course of this time, he has provided direct service with juvenile offenders and their families and has worked in management within secure juvenile treatment facilities and juvenile detention. He obtained a Master in Social Work degree from Temple University.

In his current position, Wayne is actively involved in the development of resources to improve access to data for juvenile justice facilities in Pennsylvania and is currently developing a web-based case management software application for juvenile justice facilities. He also works to create opportunities for affordable training resources through his association. Some of the training opportunities Wayne has supported include; Mental Health Training Curriculum for Juvenile Justice (MHTC-JJ), Motivational Interviewing, Youth Mental Health First Aid, Prison Rape Elimination Act (PREA), Training for Training Directors/Managers, in addition to hosting an annual juvenile justice service provider conference.