Overview of Mental Health and Substance Abuse Services For DJJ Youth

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Prevention and Victim Services
25,219 youths served FY 10-11

Civil Citation
(Statewide implementation authorized during 2011 Legislative Session)

Delinquency Referrals
66,934 youths referred FY 10-11

Probation and Community Intervention
29,532 youths served FY 10-11

Detention Centers
25,008 youths served FY10-11

Residential Services
8,443 youths served FY10-11

Data Sources:
FDJJ 2010-11 Annual Report
FDJJ 2010 Comprehensive Accountability Report
DJJ Mental Health and Substance Abuse Services

Probation and Community Intervention
Mental Health and Substance Abuse Screening, Assessment and Treatment

Initial Intake Screening in Juvenile Assessment Center (JAC) or Juvenile Probation Officer (JPO) Unit:

- PACT Screening
- Review PACT and other Available Information
- Further Assessment Indicated? (mental health and/or substance abuse)
- Referral for Comprehensive Assessment (SAMH-2/SAMH-3)
The Positive Achievement Change Tool (PACT) is administered to every youth arrested.

- PACT items include screening for mental health and drug abuse problems

- The Massachusetts Youth Screening Instrument (MAYSI) will be administered in the future.
Comprehensive Assessments

✓ Comprehensive Assessments are primarily accomplished through administration of the psychosocial assessments provided in the community by Treatment Alternatives for Safer Communities (TASC) providers under DCF funding.
Diversion Services as defined in Rule 63D-10.002 F.A.C., are non-judicial alternatives to keep youth who have committed a delinquent act from being handled through the traditional juvenile justice system.

- Diversion Services include programs such as the Drug Court, Teen Court, Juvenile Alternative Services Program (JASP), Intensive Delinquency Diversion Services (IDDS), Civil Citation, Boy and Girl Scouts, Boys and Girls Clubs, mentoring programs, and alternative schools.

- Youth referred for diversion services may have a variety of conditions or sanctions of supervision they must follow. Participation in mental health and/or substance abuse counseling may be required as a condition of his/her supervision.
Probation and Community Intervention

- **Redirection Services** include the delivery of family-centered evidence-based practices to youth who are at risk for return to, or placement in, a secure residential commitment program. Through these practices, youth and the environment in which the youth reside are provided with skills, including mental health or substance abuse services, to strengthen his/her pro-social behavior and to strengthen the family unit.

- Redirection Services include treatment models such as:
  - Multisystemic Therapy (MST)
  - Functional Family Therapy (FFT)
  - Brief Strategic Family Therapy (BSFT)
  - Parenting with Love and Limits (PLL)
Overview - Multisystemic Therapy (MST)

- MST is an intensive family and community-based treatment that addresses the multiple determinants of serious antisocial behavior in juvenile offenders.

- Target Population: MST targets chronic, violent or substance abusing juvenile offenders ages 12-17 at high risk for out-of-home placement and the youth’s family.

- Program Content: MST strives to promote behavior change in the youth’s natural environment, using the strengths of each system (e.g., family, peers, school, neighborhood, support network) to facilitate change.

- Intervention MST is provided using a home-based model of services delivery. Strategies include family therapy, behavioral parent training, and cognitive behavior therapies. Interventions typically aim to:
  - Improve caregiver discipline practice
  - Enhance family affective relations
  - Decrease youth association with deviant peers & increase youth association with pro-social peers
  - Improve youth school or vocational performance
  - Engage youth in pro-social recreation outlets and
  - Develop a support network of extended family, neighbors, and friends to help caregiver achieve and maintain change.

- The typical MST service is 4 months in duration with multiple therapist-family contacts occurring each week. (DJJ requires MST therapists work under the direct supervision of a licensed mental health professional.)
Overview - Functional Family Therapy (FFT)

FFT is a family based approach to providing treatment for youth between the ages of 10 and 18 who demonstrate significant behavioral problems (e.g., delinquency, substance abuse, Conduct Disorder, Oppositional Defiant Disorder, Disruptive Behavior Disorder)

- FFT focuses largely on the interpersonal relationships that exist with a family system.

- Targeted Family Interventions emphasize:
  - Communication skills
  - Family interaction
  - Problem-solving and
  - Promoting constructive behaviors

- The three phases of FFT emphasize:
  - Engagement and motivation
  - Behavior change
  - Generalization

- FFT is typically delivered in home-based settings. FFT consists of one-hour sessions that typically occur over the course of three months, with as few as 8 sessions or as many as 30 sessions. The typical FFT service is 8 to 12 sessions.

- DJJ requires FFT therapists work under the direct supervision of a licensed mental health professional
Overview - Brief Strategic Family Therapy (BSFT)

- BSFT is a short-term, problem focused family intervention aimed at treating children and adolescents between the ages (6-17) who are displaying behavior problems, including rebelliousness, truancy, substance abuse, conduct problems and delinquency.

- The goal of BSFT is to improve the youth’s behavior problems by improving family interactions that are presumed to be directly related to the youth’s symptoms.

- The three primary components of BSFT are:
  - Joining: understanding resistance and engaging the family in therapy;
  - Diagnosis: identifying the interaction patterns that encourage problematic youth behavior; and
  - Restructuring: developing a specific plan to help change maladaptive family interaction patterns by working in the present, reframing and working with boundaries and alliances.

- A typical BSFT session is 60 to 90 minutes. The average length of treatment is 12-15 sessions over three months. For more severe cases, the average number of sessions and length of treatment may be doubled.

- DJJ requires BSFT therapists’ work under the direct supervision of a licensed mental health professional.
PLL combines group therapy and family therapy to treat children and adolescents (aged 10-18) who have severe emotional and behavioral problems (e.g., conduct disorder, oppositional defiant disorder, ADHD) and frequently co-occurring problems such as substance abuse, truancy, domestic violence etc.

PLL teaches families how to re-establish adult authority through consistent limits and reclaiming a loving relationship.

The goal of PLL is to re-establish the parent position of authority and revert the family hierarchy to its rightful shape, dissipating or eliminating adolescents extreme behavior problems.

PLL is conducted within six multi-family group therapy sessions and six or more family therapy sessions. The parents/caregivers and adolescents attend group together to receive a new skill once each week, and that same week each parent and youth receives family therapy “coaching” to practice this new skill.

Three to four family therapy sessions are recommended for low or moderate risk youth, and up to 20 sessions may be recommended for youths with more severe problems.

DJJ requires PLL therapists work under the direct supervision of a licensed mental health professional.
Probation and Community Intervention

- **Conditional Release** is designed to provide monitoring and services to those youth who are transitioning back to the community after being in a residential program. These youth have court-ordered sanctions and services that they must complete.

- Youth on Probation or Conditional Release may be ordered by the Court (or referred by the Department) to attend a Day Treatment program while they are being supervised. Day Treatment programs provide additional monitoring of youth and typically offer an alternative educational setting.

- Under Rule 63D-12.003(5) F.A.C., Day Treatment Programs are required to ensure youth have access to mental health and substance abuse services based upon the identified treatment needs of the youth.
Probation and Community Intervention

Day Treatment - Rule 63D-12.003(5) provides:

Mental Health and Substance Abuse Treatment Services shall be provided in accordance with the following provisions:

(a) The non-residential program shall ensure that youth in the program have access to, at a minimum, the following mental health and substance abuse services based upon the identified treatment needs of the youth:

1. Mental health and substance abuse screening
2. Comprehensive mental health and substance abuse evaluation
3. Individualized mental health and substance abuse treatment planning and discharge planning;
4. Individualized, group and family therapy
5. Behavioral therapy;
6. Psychosocial skills training;
7. Psychiatric services;
8. Suicide prevention services;
9. Mental health crisis intervention;
10. Emergency mental health and substance abuse services; and
11. Developmental disability services for youth with a developmental disability
Youths anticipated or recommended for commitment receive a pre-disposition comprehensive evaluation which includes a comprehensive mental health & substance abuse evaluation prior to disposition and placement in a residential commitment program. This allows for placement in a commitment program best suited to meet the youth’s treatment needs.
Overview of Residential Services

- Budgeted operating capacity of approximately 3,300 Residential Commitment Beds
- Two-thirds of residential beds are dedicated to providing treatment to address specialized needs.
- 8,443 Total Youths Served
DJJ Specialized Treatment Services in Residential Commitment Programs:

- Comprehensive Mental Health Services
- Intensive Mental Health Services
- Substance Abuse Services
  - Substance Abuse Treatment Programs
  - Substance Abuse Overlay Services
- Mental Health Overlay Services
- Behavioral Health Overlay Services
Residential Services

Intensive Mental Health Services Programs

Provided to youths with serious to severe mental disturbance whose level of impairment and maladaptive behavior impedes their ability to function in a general offender program. Also provides substance abuse treatment for youths with co-occurring mental health and substance related disorders.
Residential Services

**Overlay Services Programs**

- Provided to youths who have mental health and/or substance use disorders in DJJ residential commitment programs that receive an enhanced per diem rate specifically for specialized treatment provided to eligible youths.

- Substance Abuse Overlay Services
- Mental Health Overlay Services
- Behavioral Health Overlay Services (Medicaid Funded)
THE END
THANK YOU

Contact Information

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