# Research and Program Brief

Research and Program Briefs are periodic publications aimed at improving policy and practice for youth with mental health disorders in contact with the juvenile justice system. This publication is supported by a grant from the John D. and Catherine T. MacArthur Foundation.

### Youth with Mental Health Disorders in the Juvenile Justice System: Results from a Multi-State Prevalence Study

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#### Background

Over the last decade, concern has escalated over the number of youth with significant mental health needs involved with the juvenile justice system. The presence of these youth in the juvenile justice system poses significant challenges to the juvenile justice and mental health systems both at the policy and program level and is seen as presenting a major crisis for the juvenile justice system (Coalition for Juvenile Justice, 2000). Until recently, little has been known about the exact prevalence and types of mental health disorders among this population. According to a 1992 comprehensive review of the research literature, studies examining the prevalence of mental health disorders among justice-involved youth were methodologically weak and produced estimates that varied widely. This variation resulted from a number of factors, including inconsistent definitions of mental disorders, non-standardized measures, and problematic study designs (Cocozza, 1992). The lack of information about the mental health needs of justiceinvolved youth has hindered the juvenile justice system's ability to understand the needs of the youth in its care and develop appropriate responses.

Significant steps forward have been made in recent years, particularly with respect to the development of standardized screening and assessment instruments tested for use with this population. These instruments represent an important advancement for research because they allow for comparisons among studies that utilize them, as well as among subpopulations within the juvenile justice system. Researchers have begun utilizing these tools, thereby capitalizing on the opportunities they present. Their use in research has expanded the knowledge base with respect to the prevalence of mental health disorders among justice involved youth, and have yielded more consistent estimates, ranging from 65% to 70% among youth in residential juvenile justice facilities (Wasserman et al., 2002; Teplin et al., 2002). Research utilizing these instruments with non-residential juvenile justice populations (i.e. youth at probation intake) has found mental health prevalence estimates of approximately 50% (Wasserman et al., 2005).

While this new research has overcome many of the limitations cited in the 1992 review, several issues remain. Many of these studies have drawn their sample from one region of the country or from one level of care within the juvenile justice system, such as just pre-adjudication youth in short-term detention centers. Therefore, it has been suggested that the high prevalence rates found in these studies may not be representative of the juvenile justice population nationwide and may instead be attributable to the particular geographic region or facility in which the study was conducted. Furthermore, these studies have been limited by the fact that they often contained very small samples of girls and certain ethnic minorities.

#### Overview of Study

In response to the perceived need for new research to overcome these remaining limitations, the National Center for Mental Health and Juvenile Justice (NCMHJJ), in collaboration with the Council of Juvenile Correctional Administrators (CJCA), conducted the most comprehensive mental health prevalence study to date on youth involved with the juvenile justice system. The NCMHJJ prevalence study was funded by the Office of Juvenile Justice and Delinquency Prevention (OJJDP). This paper summarizes the results of the NCMHJJ study.

The primary goal of this research endeavor was to comprehensively examine the prevalence of mental health and substance use disorders among youth involved with the juvenile justice system by collecting information on youth from three previously understudied areas of the country. As a result, three states – Louisiana, Texas, and Washington – were selected to represent these understudied areas. In each state, data were collected on youth from three different juvenile justice settings: community-based programs, detention centers, and secure residential facilities. Overall, data were collected on over 1,400 youth from 29 different programs and facilities. In addition, girls and certain minority youth (Hispanics and Native Americans) were oversampled in an effort to improve the knowledge base regarding these understudied populations.

Additional information on the study methodology and sample characteristics is available upon request from the NCMH, J.J.

## Prevalence of Mental Health and Substance Use Disorders

The data collected during this study clearly indicate that the majority (70.4%) of youth in the juvenile justice system meet criteria for at least one mental health disorder<sup>1</sup>. A shown in Table 1 below, the rate of mental health disorder found in this study is consistent with the findings of other recent studies.

Table 1. Comparison of Mental Health Prevalence Findings From Recent Juvenile Justice Studies	
Authors (Year)	% with a Positive Diagnosis
NCMHJJ Prevalence Study (2006)	70.4%
Teplin et al. (2002)	69.0%
Wasserman et al. (2002)	68.5%
Wasserman et al. (2004)	67.2%

In addition, the results of this study indicate that youth in contact with the juvenile justice system experience high rates of disorder across the various types of mental health disorders. Disruptive disorders (46.5%) such as conduct disorder are most common, followed by substance use disorders (46.2%) such as alcohol abuse, anxiety disorders (34.4%) like obsessive-compulsive disorder, and mood disorders (18.3%) such as depression.

Questions have been raised around whether the high prevalence rates that have been found in recent studies are actually due to the fact that the criteria used to identify certain disruptive disorders (e.g., conduct disorder), which are the most common types of disorders among youth in the juvenile justice system, are very similar to the characteristics of delinquent youth in general. However,

<sup>1</sup> Mental health disorders were identified using the Diagnostic Interview Schedule for Children – Voice Version IV (Voice DISC-IV; Shaffer et.al, 2000). The Voice DISC-IV is a structured contingency-based interview designed to measure the presence of over 30 different psychiatric diagnoses common among adolescents. All analyses exclude Separation Anxiety Disorder.

upon analysis, it was evident that the high rate of these types of disorders does not account for the high rate of mental health disorders in general. This is because, even after removing conduct disorder from the analysis (i.e. calculating the prevalence of any mental health disorder except conduct disorder), 66.3% of youth still met criteria for a mental health disorder other than conduct disorder.

Similarly, it was possible that many of these youth were adjudicated for drug-related offenses and that, as a result, substance use diagnoses accounted for the high prevalence of disorder. However, after removing substance use disorders from the analysis, 61.8% of youth still met criteria for a mental health disorder other than a substance use disorder. In fact, even if both conduct disorder and substance use disorders are removed from the analysis, almost half (45.5%) of the youth were identified as having a mental health disorder. Clearly, neither conduct disorder nor substance use disorders by themselves adequately account for the high prevalence rate of mental illness found in this study.

#### Comorbidity and Co-Occurring Disorders

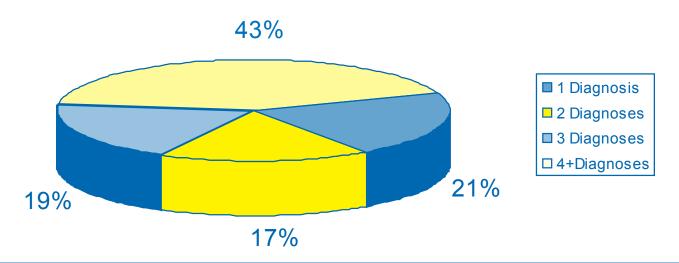
Another criticism of past research has been that the studies were only able to identify one diagnosis among youth. As a result, there was a lack of information about the extent to which youth experience multiple mental health disorders, or co-occurring mental health and substance use disorders. This study was designed to overcome this limitation by assessing the presence of multiple diagnoses.

In this study, the vast majority of youth who meet criteria for a DSM-IV diagnosis actually meet criteria for multiple disorders. In fact, 79% of youth who met criteria for at least one mental health disorder actually met criteria for two or more diagnoses. What is particularly striking is that over 60% of these youth were diagnosed with three or more mental health disorders. Figure 1 below depicts the number of diagnoses among youth with at least one disorder.

For many youth in the juvenile justice system, their mental health needs are significantly complicated by the presence of a co-occurring substance use disorder. In fact, among those youth with a mental health diagnosis, 60.8% also met criteria for a substance use disorder. Co-occurring substance use disorders were most frequent among youth with a disruptive disorder, followed by youth with a mood disorder.

Youth with comorbid and co-occurring disorders pose a unique challenge to the juvenile justice system. Not only is the intensity of their needs likely to be greater, but proper response to their multiple needs requires increased collaboration, continuity of care, and the ability to recruit and retain providers with the ability to treat multiple needs. This is particularly true for those youth with both mental health and substance use needs (Abram, Teplin, McClelland, & Dulcan, 2003).





## Gender Differences in the Prevalence of Mental Health Disorders

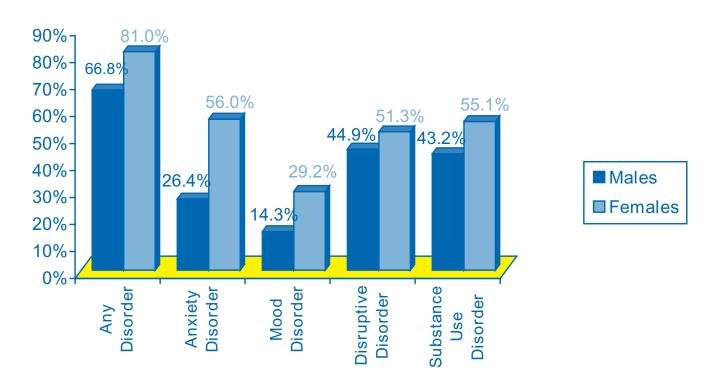
Over the past decade, the proportion of female offenders in the juvenile justice system has steadily risen (American Bar Association and National Bar Association, 2001). The growth of this population has brought with it new and unfamiliar challenges to the juvenile justice system. Justiceinvolved girls are at higher risk for mental health disorders than boys<sup>2</sup> (Wasserman, et. al., 2005). In this study, more than 80% of the girls in this sample met criteria for at least one disorder, in comparison to 67% of boys. Much of this difference is attributable to higher rates of internalizing disorders (i.e. anxiety and mood disorders) among girls. In contrast, girls and boys experience more comparable rates of disruptive disorders and substance use disorders. For many of these girls, histories of trauma further complicate the effective response on the part of the juvenile justice system (Hennessey, et. al. 2004). Figure 2 depicts the prevalence of anxiety, mood, disruptive and substance use disorders for males and females in this sample.

#### Severe Mental Health Disorders

Severe mental disorders are those that are serious enough to require significant and immediate treatment. However, there is no standard operational definition of severe mental illness for youth. Definitions may be based on level of impairment, diagnosis, or service utilization (Narrow et al., 1998). As a result, there has been no clear picture of the exact prevalence of severe disorders among youth with mental health disorders in the juvenile justice system.

However, researchers have estimated that the prevalence of severe disorders among this population is approximately 20% (Cocozza & Skowyra, 2000). The results of this study suggest that the prevalence of severe mental illness (i.e. they meet criteria for certain severe disorders, or have been hospitalized for a mental disorder) may be even higher. Approximately 27% of the overall sample had a mental disorder severe enough to require significant and immediate treatment. This suggests that more than a quarter of youth should be receiving some form of mental health services while involved in the juvenile justice system.

Figure 2. Prevalence of mental health disorders among males and females in the juvenile justice system.



<sup>2</sup> Controlling for age, race/ethnicity, type of facility, and state.

#### Conclusion

This study confirms the high rates of mental health disorders found by other recent studies and suggests that regardless of geographic area or type of juvenile justice facility, the vast majority of youth involved with the juvenile justice system, from 65% to 70%, have at least one diagnosable mental health disorder. Strikingly, over 60% of youth met criteria for three or more diagnoses. Girls are at significantly higher risk (80%) than boys (67%) for a mental health disorder, with girls demonstrating higher rates of internalizing disorders than boys. Substance use continues to be a major problem for many youth in the juvenile justice system, with 60.8% of youth with a mental health diagnosis also meeting criteria for a substance use disorder. This new information broadens the collective understanding of the prevalence of these disorders among the juvenile justice population, and can serve to help juvenile justice and mental health administrators and policy makers make more informed decisions about effective interventions for these youth. This multi-state study confirms the high rate of disorder found in earlier studies that often were limited to a particular site or level of care, and provides further support for the critical need for improved mental health services for justice involved youth.

#### About the Authors

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#### About the National Center for Mental Health and Juvenile Justice

Recent findings show that large numbers of youth in the juvenile justice system have serious mental health disorders, with many also having a co-occurring substance use disorder. For many of these youth, effective treatment and diversion programs would result in better outcomes for the youth and their families and less recidivism back into the juvenile and criminal justice systems. Policy Research Associates has established the National Center for Mental Health and Juvenile Justice to highlight these issues. The Center has four key objectives:

- Create a national focus on youth with mental health disorders in contact with the juvenile justice system
- Serve as a national resource for the collection and dissemination of evidencebased and best practice information to improve services for these youth
- Conduct new research and evaluation to fill gaps in the existing knowledge base
- Foster systems and policy changes at the national, state and local levels to improve services for these youth

For more information about the Center, visit our website at www.ncmhjj.com.

Joseph J. Cocozza, PhD Director

#### For more information...

about this study, the following agencies and services may be helpful:

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