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SAFE ROUTES SEND KIDS TO SCHOOL WITH CONFIDENCE

by Dave Marsden

Communities send many messages to citizens in an effort to solve problems. Prevention activities to protect children send positive messages of support to kids and to their families—and messages about vigilance to those who might do them harm. The Safe Routes initiative (known by several different names) undertaken by several Forum cities is an example of an activity that sends messages supportive to the community and its families.

Safe Routes to School (SRTS) is a federally sponsored initiative adopted in many communities. The program aims to make it possible for all kids to transit to school safely and without fear. Each state participating in SRTS has a designated coordinator who, according to the SRTS Web site, can assist in establishing that these "programs are sustained efforts by parents, schools, community leaders, and local, state, and federal governments to improve the health and well-being of children by enabling and encouraging them to walk and bicycle to school."

SRTS programs examine conditions around schools and conduct projects and activities that work to improve safety and accessibility. They also reduce traffic and air pollution in the vicinity of schools. In so doing, SRTS programs help make bicycling and walking to school safer—and more appealing as transportation choices—thus encouraging a healthy and active lifestyle from an early age.

Forum cities also use this concept to create volunteer monitoring of children on their way to school to protect them from violence and emotional harm, and from exposure to crime and other activities that are inappropriate to the mission of helping these young people concentrate on their education.

A Change for the City of Small Neighborhoods

Philadelphia, Pa., has perhaps the largest SRTS program in a Forum city. It is called Safe Corridors and is coordinated in the Office of Public Safety with the Philadelphia Police Department, the Mayor's Office, the School District of Philadelphia, and SEPTA (for Southeastern Pennsylvania Transportation Authority), according to Philadelphia Forum Coordinator Julie Wertheimer. There are 750 Town Watch citizen groups in Philadelphia. Together they are the key to and the most essential part of this

TWO OF EVERY THREE YOUTHS IN U.S. RESIDENTIAL FACILITIES HAVE AT LEAST ONE MENTAL HEALTH DIAGNOSIS

by Elizabeth Spinney



Youths involved in the juvenile justice system face numerous challenges, and one of the most difficult has to do with mental health.

In 2010, some 1.6 million juveniles were arrested,¹ and on any given day there were roughly 71,000 youths being held in residential placement facilities, either as part of court-ordered dispositions after adjudication or while they awaited trial in detention centers.² Although the youth confinement rate in the United States is declining, the nation still leads the industrialized world in locking up young people.³ About half of the nonresidential juvenile justice population and between 65 percent and 70 percent of all youths in residential facilities have at least one mental health diagnoses.⁴ Additionally, about one fourth of the juvenile justice population has a severe mental illness, which means that their ability to function is significantly impaired and that their disorders are serious enough to require significant and immediate treatment.⁵

Are Their Needs Being Met?

Given the high need for mental health services among this population, one would hope that the level of services available would be meeting this need. Unfortunately, this is seldom the case. Most studies find that the percentage of juvenile justice system-involved youths who receive services is much lower than the percentage who need them.⁶ Exacerbating this problem, disparity exists in who receives these much-needed services, and often mental health needs alone do not determine who gets treated. Recent studies find that juveniles who are younger,⁷ white,⁸ female,⁹ or who already have a history of treatment¹⁰ are more likely to be referred, even when taking into account psychosocial functioning and mental health needs. Other studies find that even when services are provided, they are often inadequate and inappropriate.¹¹

Some Enter the System to Receive Services

While access to quality mental health services in the juvenile justice system is often lacking, the troubling reality is that in many places, there is the perception that these services are more accessible there than in the community. Sometimes, youths are intentionally placed into the juvenile justice system to receive mental health services. Too often, parents who desperately want their children to be treated appropriately turn to the juvenile justice system as a last resort.¹² In other instances, given the lack of treatment in the community, many children become physically aggressive or violent, which results in forced placement into the juvenile justice system in response to the symptoms of an untreated mental health problem.¹³

Are There Risks to Involving Youths With Mental Health Issues in the Juvenile Justice System?

Involvement in the juvenile justice system can

collaboration. Because of the recent closing of 23 schools, the program has been reinvigorated as the "Walk Safe Program," an expansion of Safe Corridors. This was significant to the Philadelphia Forum effort in that five of the closed schools were in the 22nd Police District, the focus area for Forum activity. The problem Philadelphia had to address was to create new routes to schools that fell outside of the traditional neighborhoods that Safe Corridors had traditionally addressed. "These new routes had to be monitored more closely," she added, "as this was a change from the concept of Philadelphia as a city of small neighborhoods." There was fear of children walking in unfamiliar neighborhoods and problems were anticipated. However, nothing unfortunate has happened as yet. "It is too soon to tell whether the Walk Safe program is responsible but it appears to be working," according to Ms. Wertheimer.

More than 200 Walk Safe Volunteers were recruited and trained in Philadelphia. Between 120 and 180 of these volunteers are on the job every day to keep young people safe as they walk to school. About \$50,000 was spent on this new initiative to upgrade radios and repeaters used by volunteers, as well as identifying safety vests. Flyers were distributed to inform citizens about the program, and signs established to let children, families, and perhaps those who would bully or harass transiting children, that they were on the job.

In addition, owing to the closures, three schools in the 22nd District were designated as welcoming schools, which took on students displaced by the closures. Walk Safe helps ensure that the walk is part of the welcome, and children can feel completely safe in their new environment.

A Lesson From a City With a Big Footprint

Detroit, Mich., has a different approach to the concept of safe routes to school. Its Safe Routes to School program addresses the problem somewhat differently. Detroit is a city that has been dramatically depopulating in recent decades, dropping from more than 1.8 million people in 1950 to just over 700,000 today. Combined with the fact that its geographic footprint (its total area) is one of the largest in the United States, covering entire routes to school was almost impossible.

"What we've done is establish a student safety framework that is compatible with the surrounding community needs and safety efforts," says Detroit National Forum Coordinator Annie Ellington, adding that such a framework "maximizes school related-travel safety and security."

Detroit's Safe Routes to School partnerships include

- Regular volunteer and paid patrol coverage of Safe Routes to School in selected areas
- Coordinated efforts between the City of Detroit, Detroit Public Schools, and community partners to address blight and business code enforcement
- Development of a software application to report threats of safety for students traveling to and from school

Last spring, a peer-to-peer conference call was convened at the request of Philadelphia to examine what Detroit was doing, since Philadelphia was undergoing changes caused by the aforementioned school closures. Philadelphia city leaders learned from Detroit the wisdom of concentrating on key schools and

have devastating effects.¹⁴ For example, given the stress of being placed in secure detention, even juveniles with mild symptoms can act out in ways harmful to themselves, to staff members, and to other youths.¹⁵ Additionally, some treatments, such as group therapy, can actually lead youths to become worse if delivered in the juvenile justice system—given the negative influence of others in the groups.¹⁶ There are also legal issues, trust issues, and other challenges to effectively treating youth in the juvenile justice system.¹⁷

What Can Be Done?

In the past few years, some important reports have been published which present helpful information on how we can better serve youth with mental health needs who are involved in the juvenile justice system.¹⁸ These reports make many of the same recommendations, including

1. ***Increase access to quality mental health services within the community to prevent involvement in the juvenile justice system.*** Access to services in the community for at-risk youths can prevent involvement in the juvenile justice system given the intentional use of the juvenile justice system to access services as well as the use of the juvenile justice system in response to the physically aggressive symptoms of some untreated mental health problems.¹⁹
2. ***Implement systematic strategies for identifying mental health needs among youths who come in contact with the juvenile justice system.*** To better respond to mental health treatment needs, we must be able to systematically identify these needs. The development of a sound screening and assessment capacity in juvenile justice systems is imperative. A recent study showed that detention centers that introduced mental health screening were more likely to increase their efforts to obtain services such as clinical consultations and to take suicide precautions for those who needed them.²⁰ Over the past decade, new research-based mental health and screening assessment tools and protocols have been developed, which can help the juvenile justice system improve their response to youth with mental health needs.²¹
3. ***Whenever possible, divert youth from the juvenile justice system into effective community-based mental health treatment.*** Study after study show that youth respond better when treated in the community as compared to being detained

intersections (street corners) to enhance the safety of students as they made their way to school.



Not Every City Is Suited to Safe Routes

A useful program, certainly, but all Forum cities' educational circumstances are different and some may not benefit from this particular type of program. New Orleans, La., Forum Coordinator Chris Gunther reported that his city does not have a Safe Routes program. After Hurricane Katrina struck in 2005 the structure of education in New Orleans was altered drastically. In a Forum listening session conducted last year, when the city was added to the Forum family, this author learned that there were several decentralized school systems operating in New Orleans as part of its recovery from the storm. These consisted of the Recovery School District that operated outside of the School Board, the charter school system, and the recently reestablished public schools under a newly elected school board. According to Gunther: "The city allows open enrollment in school regardless of neighborhood. As a result, many students travel several miles by bus to their school every day."

Safety is a feeling as much as a reality. When young people feel protected and secure, they can develop in appropriate ways and concentrate on education and on simply being kids. Safe Routes to School are a credit to the Forum and to the hard work the Forum cities are doing. A city that provides this level of safety sends a message to its citizens that violence prevention and protection are a priority.

NEWS
& VIEWS

or confined, especially youth that are at lower risk to the community.²² Youth with mental health needs should be treated with the same consideration.

4. ***Make effective treatment available within the juvenile justice system for youth who cannot be diverted.*** Some youth are not appropriate for diversion but still need treatment while securely detained or confined. For some youth, this may be the first time a mental health problem is diagnosed and is an important opportunity to treat it appropriately.

To achieve these goals, there must be improved collaboration between agencies serving youth—especially between the juvenile justice and mental health systems—from initial contact with law enforcement through reentry and aftercare. Additionally, evidence-based strategies should be used. Several evidence-based practices and programs have been identified as successful in treating youths in the juvenile justice system, including cognitive-behavioral therapy, wraparound, Multisystemic Therapy (MST), Functional Family Therapy (FFT), and Multidimensional Treatment Foster Care (MTFC).²³

MST targets youths between the ages of 12 and 17 who present with serious antisocial and problem behavior and with serious criminal offenses. Through intense involvement and contact with the family, MST aims to uncover and assess the functional origins of adolescent behavioral problems. It works to alter the youth's ecology in a manner that promotes prosocial conduct while decreasing problem and delinquent behavior. There are different versions of MST depending on the population. For example, the Multisystemic Therapy–Family Integrated Transitions (MST–FIT) program provides integrated individual and family services to juvenile offenders who have co-occurring mental health and chemical dependency disorders. These services are provided during a juvenile's transition from incarceration back into the community to provide necessary treatment to youth, thereby reducing recidivism. The overriding goal of MST is to keep adolescents at home, in school, and out of trouble.

FFT is a family-based prevention and intervention program for high-risk youth ages 11 to 18.

Targeted youths generally are at risk for delinquency, violence, substance use, or other behavioral problems such as Conduct Disorder or Oppositional Defiant Disorder. FFT addresses complex and multidimensional problems through clinical practice that is flexibly structured and culturally sensitive. The FFT clinical model concentrates on decreasing risk factors and on

Reports

New Report Shows That 4–H Youths Excel Beyond Their Peers

4–H is the nation's largest youth development organization program and serves more than 7 million youths in urban neighborhoods, suburban schoolyards, and rural farming communities across the United States and throughout the world. A report on the impact of 4–H, titled [*The Positive Development of Youth: Comprehensive Findings From the 4–H Study of Positive Youth Development*](#), was published in December 2013. This report shares the findings of a longitudinal study that began in 2002 that surveyed more than 7,000 adolescents across 42 U.S. states. The study found that, compared with their peers, youths involved in 4–H programs were more likely to excel in several areas of health, education, and civic engagement. For more information about the study and to access the report, [look here](#).

Youth Confinement Decreased by 32 Percent Nationwide Between 2001 and 2010

The National Juvenile Justice Network and the Texas Public Policy Foundation recently authored a report titled [*The Comeback and Coming-From-Behind States: An Update on Youth Incarceration in the United States*](#). This report examined youth confinement reduction trends nationwide, in nine "comeback" states, and in four "coming-from-behind" states. This report updates the information in a previous report, titled [*The Comeback States: Reducing Youth Incarceration in the United States*](#), and expands the scope of the research to include the "coming-from-behind states," which are states that have not experienced sharp declines in their reliance on youth incarceration but have adopted significant incarceration-reducing policies in recent years.

New Book Available to Help Policymakers and Practitioners Prevent Youth Gang Involvement

In fall 2013, the National Institute of Justice (NIJ) and the Centers for Disease Control and Prevention (CDC) together published [*Changing Course: Preventing Gang Membership*](#). This free, online book offers evidence-based principles to prevent and reduce the impact of gangs on youth, families, neighborhoods, and society at large. The goal of the volume, which was written by some of the nation's top public health and criminal justice researchers, is to help policymakers and practitioners understand what the research says about keeping young people out of gangs.

Study Links Young Men's Recreational Sedative Use to Some Sexual Victimization

Daniel J. Snipes, Brooke A. Green, Eric G. Benotsch, and Paul B. Perrin. 2014. "The Nonmedical Use of Prescription Drugs and Lifetime Experiences of Sexual Victimization Among College Men."

A study published in *The Journal of Interpersonal Violence* found associations between recreational use of illicit and prescription drugs and experiences of sexual victimization among college men. Daniel J. Snipes and colleagues (2014) found that 17 percent (about 1 in 6) of a sample of 253 undergraduate men who chose to take an online survey examining drug use and lifetime sexual victimization experiences reported having been sexually victimized in their lifetime across four domains: being coerced, threatened, physically forced, or taken advantage of while

increasing protective factors that directly affect adolescents, with a particular emphasis on familial factors.

MTFC is a behavioral treatment alternative to residential placement for youth who have problems with chronic antisocial behavior, emotional disturbance, and delinquency. There are three versions of MTFC, each serving specific age groups ranging from ages 3 to 17. The intervention is multifaceted and occurs in multiple settings. Activities include behavioral parent training and support for MTFC foster parents, family therapy for biological parents, skills training for youth, supportive therapy for youth, school-based behavioral interventions and academic support, and psychiatric consultation and medication management, when needed.

More information about these programs and practices can be found at CrimeSolutions.gov.

Some other helpful resources:

- [The National Center for Mental Health and Juvenile Justice](#)
- [The Mental Health and Juvenile Justice Collaborative for Change](#)
- [The MacArthur Foundation's Models for Change initiative](#)
- [OJJDP's Model Program Guide](#)

(See References, bottom at right.)

ANNOUNCEMENTS & UPCOMING EVENTS

Funding Opportunities

National Institute of Justice to Fund ±\$15M in School Safety Research

The National Institute of Justice (NIJ) will make available about \$15 million for multiple grants to address school safety nationwide, under the Comprehensive School Safety Initiative. The grants will fund research to examine the root causes of school violence, develop new technologies, apply evidence-based approaches, and test pilot programs to enhance school safety. Visit [NIJ's funding Web page](#) for grant opportunities. Read about the [Supportive School Discipline Initiative](#), launched by the U.S. Departments of Justice and Education.

The Bureau of Justice Assistance (of the U.S.

incapacitated. Across all domains of sexual victimization, nonmedical sedative use was robustly associated with sexual victimization in a multivariate model controlling for recreational drug use and demographics. Implications for interventions for male sexual victimization survivors are discussed. [Read the report.](#)

News

February Is National Teen Dating Violence Awareness Month [Data show](#) that almost 1 high school student in 10 was hit, slapped, or physically hurt on purpose by a boyfriend or girlfriend in the past year. To bring awareness of and to promote action in addressing teen dating violence, [Break the Cycle](#) hosts the [Teen Dating Violence Awareness Month](#) Web page, which provides information on teen dating violence data, resources, and recommendations for taking action. Additionally, the National Criminal Justice Reference Service also has a [special feature on teen dating violence](#) this month.

Massachusetts Launches Pay for Success Initiative to Reduce Recidivism Among At-Risk Youth

The commonwealth of Massachusetts recently [announced the launch](#) of the nation's largest financial investment in a [Pay for Success initiative](#). The goal of the Massachusetts Juvenile Justice Pay for Success Initiative is to improve outcomes for at-risk young men and reduce recidivism in the state by providing intensive outreach, life skills, and employment training. In partnership with [Third Sector Capital Partners](#) and funders from the commercial and philanthropic sectors, this program will allow [Roca](#), a community-based nonprofit service provider, to serve more than 900 high-risk young men in Boston and other urban areas of Massachusetts with the hope that these efforts will improve the lives of the young men served by the program, reduce crime, promote safer communities, and save taxpayer dollars.

Michigan Moves Toward Ban on Mandatory Juvenile Life Without Parole

This month, Michigan state lawmakers moved three bills forward that would change the state's mandatory sentencing system for juveniles. These bills technically eliminate mandatory sentences of life without parole for young people, bringing Michigan into compliance with *Miller v. Alabama*. However, advocates worry whether this change really signifies fair sentencing practices; they argue that the bills leave too much room for "extreme and even unconstitutional sentencing." [Read the online article](#) from the National Juvenile Justice Network.

New Partnership Formed to Reform School Discipline Policies

The [Children's Defense Fund](#) and the [School Superintendents Association](#) have announced a partnership to reform school discipline policies and practices across the country. This initiative is designed to support school superintendents who have demonstrated a commitment to improving their discipline policies and practices to prevent suspensions and expulsions and to keep children in school. Ten school districts across the country have been selected to participate. [Read the press release.](#)

Other Resources

Call for Abstracts for Family Violence and Child Victimization

Department of Justice) announces a competitive grant, "National Training and Technical Assistance: Intellectual Property Enforcement Program." Applications are due at 11:59 p.m. (EDT) on March 17, 2014. Applicants must register with Grants.gov before applying. View the [full solicitation](#).

The Bureau of Justice Assistance (of the U.S. Department of Justice) also announces the competitive grant "Second Chance Act Reentry Program for Adult Offenders With Co-Occurring Substance Abuse and Mental Health Disorders." Applications are due at 11:59 p.m. (EDT) on March 18, 2014. Applicants must register with Grants.gov before applying. View the [full solicitation](#).

System of Care Expansion [planning grants](#) and [implementation cooperative agreements](#), awarded by the Substance Abuse and Mental Health Services Administration, will support efforts to develop, expand, and maintain a system of care providing mental health services for children and youth with serious emotional disturbances and their families. Planning grant applications must be received by March 19; implementation grant applications are due March 21.

Training Opportunities

Registration is still open—barely—for the National Council of Juvenile and Family Court Judges' [Family Law Institute for Judges and Lawyers](#), March 2–5. Topics will include e- discovery and ethics, psychotropic medication effects, child toxic stress, neglect, cyberstalking, and modern parenting.

On March 19, 2:00–3:00 p.m. (EDT), the Missing and Exploited Children's Program and the U.S. Department of Justice's Center for Faith-Based and Neighborhood Partnerships will cohost a [Webinar on fundraising titled "Making Dollars and Sense."](#) The Webinar will discuss the foundations for successfully applying for grant funding, the steps required to design an effective and fundable grant budget, and measuring performance for a sustainable program. The broadcast is the last of a three-part Webinar series that provides information on strategies and best practices for improving partnerships, building capacity, and effectively applying for and managing grants. The series is based on the U.S. Department of Justice's Center for Faith-Based and Neighborhood Partnerships' 2012 publication, *Faith and Communities in Action: A Resource Guide for Increasing Partnership Opportunities to Prevent Crime and Violence*.

On April 14–16, the Center for the Study and Prevention of Violence at the University of

Research Conference

The Family Research Laboratory (FHL) and the Crimes Against Children Research Center at the University of New Hampshire are [seeking abstract submissions](#) from professionals and researchers interested in presenting at the [2014 International Family Violence and Child Victimization Research Conference](#) to be held July 13–15, 2014, in Portsmouth, N.H. Abstracts are sought in all areas of family violence representing diverse methodological approaches, including research on understudied populations, with an emphasis on minority issues in family violence and child victimization. The FHL abstract submission deadline is March 7, 2014. Email fri.conference@unh.edu or call 603.862.0767 for additional submission information. Learn more about OJJDP's [series](#) on the National Survey of Children's Exposure to Violence. Learn more about the [Attorney General's Defending Childhood Initiative](#). View or download the [Report of the Attorney General's National Task Force on Children Exposed to Violence](#) or [order a print copy](#).

Robert F. Kennedy National Resource Center for Juvenile Justice

The Robert F. Kennedy (RFK) National Resource Center for Juvenile Justice recently announced the launch of its new [Web site](#). The RFK National Resource Center, which is led by Robert F. Kennedy Children's Action Corps, provides support to state and local jurisdictions by offering presentations, training, and consultation to improve the performance of juvenile justice systems and outcomes for youth, with a special concentration on youths who are involved with both juvenile justice and child welfare. You can join the resource center's mailing list [here](#).

Guidance for Schools to Meet Their Student Discipline Obligations

In January 2014, the U.S. Department of Education and the U.S. Department of Justice issued [guidance](#) to assist public elementary and secondary schools in meeting their obligations under federal law to administer student discipline without discriminating on the basis of race, color, or national origin. In addition to the guidance, [a Web page](#) hosted by the U.S. Department of Education provides in-depth information and resources on school climate and discipline.

'Mental Illness Behind Bars,' References

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Colorado, Boulder, will host its [Blueprints for Healthy Youth Development 2014 conference](#) at the Denver (Colo.) Downtown Sheraton Hotel (registration fee: \$350.00). OJJDP Administrator Robert Listenbee will be a keynote speaker. The conference will focus on evidence-based programs in youth education, problem behavior, self-regulation, mental and physical health, and positive relationships and will provide support for practitioners implementing these programs in their communities.

Coalition for Juvenile Justice Annual Conference

The Coalition for Juvenile Justice will hold its [2014 Annual Conference, "Looking Back, Planning Ahead: A Vision for the Next 40 Years in Juvenile Justice,"](#) during June 18–21, at the Omni Shoreham Hotel in Washington, D.C. The conference immediately follows the OJJDP 2014 Core Requirements Training, which runs June 17–18.

Reducing Racial and Ethnic Disparities in Juvenile Justice Certificate Program

The application window for the [2014 Reducing Racial and Ethnic Disparities in Juvenile Justice Certificate Program](#) is open now through April 18, 2014. This intensive training, which is operated jointly by the Center for Juvenile Justice Reform and the Center for Children's Law and Policy, is designed to support local jurisdictions in their efforts to reduce racial and ethnic disparities in their juvenile justice systems. The target audience includes leaders in the juvenile justice field and representatives from related child-serving agencies.

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