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Solano County's Juvenile Diversion Program: Diverting Mentally III Youth Offenders

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Solano County's Juvenile Diversion Program: Diverting Mentally Ill Youth Offenders

Submitted by

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for

EMPA 396 Graduate Research Project

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March 2, 2019

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<u>Abstract</u>

In June 2015, Solano County was awarded a budget grant through the Mentally Ill Offender Crime Reduction (MIOCR), grant program by the Board of State and Community Corrections (BSCC), in the sum of \$761,322 to reduce recidivism of juvenile mentally ill offenders. The award provided funding to implement and sustain early intervention and diversion programs for juvenile mentally ill offenders. The Solano County Youth Diversion program, a multi-agency collaboration program, seeks to provide early intervention services and programs to non-serious juvenile offenders whom may be experiencing issues associated with mental health. Diverting youth from the juvenile justice system by providing necessary mental health services and instilling positive behaviors, such as accountability and the promotion of school activities or functions, are the overall goals of this program. A review of scholarly literature relevant to this study will seek to provide further knowledge into the topic of recidivism of juvenile offenders with mental illnesses and the effectiveness of the juvenile diversion program in Solano County. Data will be collected from a multitude of agencies involved in this program to measure the Solano County Diversion program's overall effectiveness in preventing juvenile recidivism. Results of the study may provide further knowledge into whether the Solano County Youth Diversion program has been an effective early intervention and prevention tool in preventing youth recidivism in mentally ill offenders.

Introduction

Background of the Problem

With incarceration and recidivism rates in juvenile and adult mentally ill offenders on the rise, in 1998, the California State Sherriff's' Association and Mental Health Association established Mentally Ill Offender Crime and Rehabilitation Act by backing SB1485. Through the establishment of MIOCR, the California State Sherriff's Association and Mental Health Association hoped to reduce recidivism rates and incarceration rates of mentally ill offenders by providing funding to county programs for prevention and early intervention. The Mentally Ill Offender Crime Reduction Grant Program provides competitive funding to counties throughout California seeking to develop or implement new ways to assist both adult and juvenile offenders suffering from mental illnesses. Solano County was awarded a grant by the Board of State and Community Corrections through MIOCR, proposing the Solano County Project to assist in reducing recidivism rates in adults and juveniles. In acceptance of this funding in 2016, Solano County proposed a unique program called the Solano County Mentally Ill Offender Crime Reduction Diversion Program to implement early intervention for juvenile offenders suffering from mental illnesses to keep them from entering the juvenile justice system.

Statement of the Problem

Juvenile offenders suffering from mental illnesses are becoming more prevalent in the juvenile criminal justice system. This poses a necessity for increased availability of services to address the needs of mentally ill juvenile offenders. Prior to 2016 and the program becoming fully operational, there was no diversion program available for mentally ill juvenile offenders in

Solano County. Juvenile offenders suffering from impairments and undiagnosed or untreated mental disorders commonly are facing run-ins with the juvenile justice system, often not having any type of resources to deter them from recidivating or recommitting crimes. With the lack of resources and early intervention programs available, comes an increased probability of these mentally ill juvenile offenders recidivating. With increased needs for early intervention programs, or programs to keep juvenile offenders out of the juvenile criminal justice system comes the implementation of new programs such as the Mentally Ill Offender Juvenile Diversion program in Solano County which has been in effect since late 2016. The data is still raw and the program has yet to be determined effective in its goal to prevent recidivism in mentally ill juvenile offenders. Evaluation of the program both the quantitative and qualitative data collected throughout research may help determine the program's overall effectiveness in preventing recidivism.

Early Intervention and Diversion

Solano County proposed a concept in creation of a juvenile diversion program for mentally ill offenders to keep juvenile offenders from being mixed in with adult offenders and creating unnecessary risks or negative influences. Additionally, the diversion program intended to increase the availability of valuable resources to help prevent recidivism in mentally ill juvenile offenders. Recidivism has become such a problem in mentally ill juvenile offenders, only further indicating a need to combat this issue. Integrating and implementing early intervention programs for juvenile offenders within the juvenile justice continuum and within the school system can show potential successes in combatting recidivism. Effective local youth

programs, in collaboration with diversion programs, can often offer more valuable resources and alternatives to juvenile incarceration and assist in reducing recidivism rates (Klein, 2018).

Significance of the Study

An in depth analysis of Solano's Juvenile Diversion Program and thorough review of arrest/citation records, school behavioral records, and mental health records may help identify the positive effects in preventing recidivism. This information may assist in determining whether the implementation of the juvenile diversion program for mentally ill offenders has been a beneficial early intervention program in the prevention of recidivism for youth in Solano County. In turn, the results of this study may not only be beneficial for the County of Solano and its constituents, but for other juvenile justice systems throughout California that may wish to consider implementing a juvenile diversion program for its mentally ill juvenile offenders. It must also be considered that the collection and analysis of this data may also determine it is not the most effective early intervention program for juvenile offenders and alternative methods may be recommended.

Research Question and Hypothesis

The effectiveness of Solano County's juvenile diversion program for mentally ill offenders and preventing recidivism is the basis of this research proposal. This research paper presents the issue as to whether or not the juvenile diversion program has been effective in the prevention of recidivism in mentally ill juvenile offenders within Solano County.

The hypothesis for the research proposal purposes; Mentally ill juvenile offenders in Solano County enrolled in the juvenile youth diversion program are less likely to recidivate or recommit crimes rather than offenders not enrolled in the juvenile diversion program. The

reason for the proposed hypothesis; that mentally ill juvenile offenders enrolled in the juvenile youth diversion program are less likely to recidivate than juvenile offenders not enrolled, is simply in part due to the successes of early intervention programs used throughout various juvenile justice systems worldwide, and is backed by a plethora of research. The hypothesis will be tested both quantitatively and qualitatively to decipher whether it holds true or merely is unfounded. Additionally, it has been found that participation in early intervention programs has been beneficial tool on the front lines in preventing recidivism in juvenile offenders when the program best meets specific needs of the offender. Whether or not diversion is an effective tool in the preventing recidivism in mentally ill juvenile offenders remains to be seen.

Assumptions and Limitations

It is assumed that mentally ill juvenile offenders enrolled in the MIOCR juvenile diversion program are less likely to recidivate than juvenile offenders who are not enrolled in the MIOCR diversion program. The largest limitation throughout course of the research within this study is going to be time. There is essentially eight weeks to either prove or disprove the hypothesis proposed in this research. The contents of this research will not compare or contrast other early intervention methods for juvenile offenders and their successes or pitfalls simply due to time constraints and the lack of available research or secondary data in other areas of early intervention programs. Solano County's MIOCR diversion program for mentally ill juvenile offenders has only been functioning for two full years and is now going into its third year as an operating early intervention program for mentally ill juvenile offenders. Another issue foreseen is the lack of citation or arrest data for mentally ill juvenile offenders prior to 2016 since the program had not yet been in place and no assessments for mental health in offenders were taking place.

Definition of Terms

Juvenile is a term widely used throughout the contents of this paper and should be accurately defined as many may have different perspectives of just what age a juvenile is through the eyes of the justice system. Per California W&I (Welfare and Institutions Code) *602, Section 707,* any person who is under 18 years of age when he or she violates any law of this state or of the United States or any ordinance of any city or county of this state defining crime other than an ordinance establishing a curfew based solely on age, is within the jurisdiction of the juvenile court, which may adjudge such person to be a ward of the court. Criminal offenses committed at the age of 14 or over, if deemed serious through the California courts (murder and attempted murder, setting fire to a building with people in it, robbery with a weapon, rape, kidnapping or carjacking, crimes with guns, drug crimes, and escaping from a juvenile detention facility), may be tried in adult court.

Operational Definitions

Juvenile Mentally Ill Offender:

For the purposes of this study, Solano County's probation department whom oversees the Juvenile Diversion program defines a juvenile mentally ill offender as a juvenile whom has committed a criminal offense and been referred to the juvenile diversion program for screening of potential underlying mental health issues that may be contributing factors to the act of offending. Not all juvenile offenders are considered to be "mentally ill offenders." A prescreening is conducted via self-administered questionnaire. Results of the questionnaire are scored and a determination is made upon the juvenile offender as to whether or not he/she meets requirements to be admitted into the youth diversion program.

Juvenile Diversion:

For the purposes of this study, The Solano County Juvenile Mentally Ill Offender Crime Reduction Diversion Program (2018) defines "Juvenile Diversion" as early interventions in Solano County's juvenile justice continuum.

Juvenile Diversion Program:

For the purposes of this study, Juvenile Diversion Program is defined as early intervention services to non-serious juvenile offenders experiencing mental health issues (C. Grove, personal communication, Nov 27, 2018). The objectives for this program is to divert youth from formally entering the Juvenile Justice System by providing necessary mental health services, while holding them accountable for their delinquent behavior and promoting their participation in school and pro-social activities. (Solano County MIOCR Diversion Program Guide, 2018).

Enrolled:

Young juvenile offenders are typically diverted from the juvenile justice system at probation and police levels and enrolled or admitted into the juvenile diversion program upon determination made by MIOCR officer pending results of DSM-V (Diagnostic and Statistical Manual of Mental Disorders). Once youth are screened by Fairfield Police Officers assigned to the program to determine eligibility, they are then assigned to the probation officer assigned to the MIOCR program who screens the youth on a mental health assessment questionnaire (C. Grove, personal communication, Nov 27, 2018).

Less Likely to Recidivate:

For the purposes of this study, recidivate means to recommit or reoffend (personal communication, Grove, 2018). Then California State Office of Attorney General Kamala D. Harris (2014) defined Recidivism as, "an arrest resulting in a charge within three years of an

individual's release from incarceration or placement on supervision for a previous criminal conviction." Less likely to recidivate, within the scope of this study, will propose at least a 25% less likelihood juvenile offenders enrolled in the juvenile diversion program have recidivated.

Recidivism can be broken down into three sub-categories:

- Offense Type- Crimes Against Persons, Property Crimes, Drug Crimes, Other (<u>oag.ca.gov</u>, 2018).
- 2. Frequency- Number of times an individual commits an act of recidivism within the threeyear period (<u>oag.ca.gov</u>, 2018).
- Timing- Time within the three-year period in which an individual commits an act of recidivism. Categorized at six-month, one-year, two-year, and three-year intervals (<u>oag.ca.gov</u>, 2018).

Expected Impact of Research

The impact of this study cannot yet be determined as the bulk of the research has yet to be conducted and data has yet to be collected. There are though, potential impacts that can be assumed though from the hypothesis variables within this study. Further analysis into Solano County MIOCR diversion program and whether it has been an effective program in preventing recidivism may prove true through the analysis of data such as citation and arrest records, behavioral records, school and truancy records. The information obtained from key informant interviews may also assist in the determination of the effectiveness of this program. Conducted research may also show this program is not effective and that alternative methods of early intervention may need to be sought out and implemented into Solano County's offense on recidivism in mentally ill juvenile offenders. The research obtained from this study may show

entirely that diversion programs, whether for mentally ill offenders or not, may not be the most

effective alternative to incarceration in juveniles. This finding could also assist in determining

alternative or best practices for early intervention in juvenile offenders.

Chapter 2 - Literature Review

The link between early intervention and prevention programs and recidivism in juvenile offenders is an ongoing study throughout many different states and countries. There is a copious amount of literature available to support the benefits of early intervention programs and prevention programs (diversion) in the juvenile justice system and their effects on recidivism. What is known of the effects of juvenile diversion programs on recidivism rates in juvenile offenders is further described and evaluated in the review of literature below. The key themes of this literature review include the following: Mental Illnesses in the Juvenile Justice System; Successes of Early Intervention Programs; the Effects of Early Intervention Programs on Recidivism and Alternative Approaches to Early Intervention.

Mental Illness in the Juvenile Justice System

During the early 1990s, the juvenile justice system was primarily focused more on the punitive actions of juvenile offenders rather than rehabilitation. This has since changed, as juveniles suffering from mental illnesses are becoming the norm within the juvenile justice system thereby requiring a differing approach. Hoeve et. al (2013) discuss the increased likelihood in juvenile offenders to reoffend when suffering from mental health concerns, though note the lack of research into how severe of an offense when recidivating. Hoeve et. al (2013) further state the need to assess juvenile offenders for mental health disorders in order to identify which youth will reoffend in an attempt to protect public safety. Juvenile offenders with mental health identifiers or diagnoses may assist in the identification of pre-indicators to delinquent behavior in juveniles.

Pre-indicators to delinquent behavior and mental disorders in juveniles are not always

easy to identify. Sprague and Walker (2000) believe violent behavior within schools (bullying, fighting, weapon use), emotional and physical abuse at home, tardiness and excessive absences all show potential for delinquency and emotional needs in juvenile offenders. Zhang et. al, (2011) point out just how prevalent youth with emotional disorders is becoming the norm in the juvenile justice system and the need for more research to be conducted across the United States given the lack of available data. Zhang et. al, (2011) found youth more likely to suffer from either delinquent behavior, cognitive, or emotional behavior when a family member has been convicted of a felony or if the juvenile was a participant in the foster care system. White (2016) states, "Youth with certain mental health problems are more likely to end up in the juvenile justice system and they tend to be treated more severely when processed through the system." Far too often is the juvenile justice system seeing delinquent behavior from offenders later found to be suffering from undiagnosed mental disorders. White (2016), further states, "Often mental health problems in youth go unrecognized and untreated until they come under the attention of the juvenile justice system." Shufelt and Cocozza (2006), mention in their research and program brief on juvenile mental illness that 65-70% of all youth in the juvenile justice system suffer from some type of mental illness or mental disorder. Of that percentage, nearly 25% of those juveniles suffer from impairment so severe, they have lost significant ability to function (Shufelt & Cocozza, 2006). With the increase in mental health disorders disproportionately suffered by young people in trouble with the juvenile court system, there poses an immediate need to better treat these illnesses in mentally ill juvenile offenders. With increased emotional needs in juveniles, the Juvenile courts are attempting to divert affected youth from the justice system to alternative programs such as health and social care services (Kelly and Armitage, 2015). Programs that focus on juvenile mental health are more suitable to better meet their mental,

emotional and cognitive needs and further assist in preventing recidivism amongst mentally ill juvenile offenders.

This research further uncovers a strong need for mental health assessments in the juvenile justice system for mentally ill youth offenders to assist in preventing incarceration and recidivism. With mental illness becoming more common in today's juvenile offenders, comes a growing necessity for action. Juvenile offenders in the justice system suffering from mental illnesses require additional services given both their mental health issues and increased need for assistance throughout the juvenile justice continuum. The availability and serviceability of these programs is what seems to be an issue, most notably in communities with poor or minority children. Belcher (2011) suggests that these communities are less likely to get needed resources that might mitigate the effects of their mental health problems.

Successes of Early Intervention Programs

Through early intervention programs, it is believed by many professionals in the fields of education, probation, corrections, law enforcement and mental health that juvenile mentally ill offenders can be diverted from the justice system and be prevented from recidivating entirely. Haney-Caron (2016), states, "Keeping students from entering the juvenile justice system is an important step in curbing the flow of the school-to-prison pipeline and making sure they can get their lives back on track. Diversion programs help keep youth out of the system, and these programs work best when youth are diverted before they're even arrested." Wong, Bouchard et. al (2016), conducted a Meta-Analysis on at risk youth and whether or not they can be diverted from crime. Given the potential damaging effects of incarceration on youth and juvenile offenders, diversion programs are seen as well suited approaches for alternatives to incarceration

(Wong, Bouchard et. al, 2016). Cullen and Gendreau (2001), only further add to the notion that diversion programs are successful in preventing recidivism. Youth typically have higher probabilities of re-offending and increased rates of poor outcomes in high school graduation, employment and more (Seigle et. al, 2014), therefore, one would understand the necessity for these early intervention programs, much like the Diversion program for the mentally ill youth offenders here in Solano County. Though early intervention programs and their successes in preventing recidivism can be seen as impactful, one must also consider the pitfalls that may come out of diversion programs and sometimes the inability to serve as the barrier or preventive tool between the juvenile offender and the juvenile justice program. Carney and Buttell (2003) suggest, "failure for any particular program is often viewed as a failure for diversion programs generally, rather than failure for the type of youth programs served, the size of the caseloads, or lack of community support." It would be understood for any type of failure within a diversion program in preventing recidivism in juveniles, which is the overall goal in most, would be seen as a measure of ineffectiveness. Ultimately this could cast a shadow on certain early intervention programs like community based programs and diversion. "Unfortunately matching youth with programs having the necessary level of support and structure becomes particularly problematic in a system where diversion program referrals are made, not based on individual needs, but on program availability and funding considerations," (Carney and Butell, 2003). When rehabilitative programs and early intervention programs are suggested in the juvenile justice program for juvenile offenders, it is important to not only consider the offense of the juvenile, or the age, but to meet specific needs of the individual. In summary, Montgomery et. al (1994), believe juvenile offenders should be connected to services meeting individual needs and when an appropriate service is found initially, only 41% of the offender base actually return to court.

Effects of Early Intervention Programs on Recidivism

Nancy Rodriguez (2007) discusses juvenile restorative justice programs and their possible effect on juvenile recidivism rates. With supporting arrest data obtained from the Maricopa County Juvenile Probation System, Rodriguez (2007) analyzes which juvenile restorative program had the greatest effect on recidivism rates in juveniles. Rodriguez (2007) suggests much of the study focuses on a growing body of research primarily focused on data and research collected outside of the United States on various programs elsewhere (outside of the US). Rodriguez (2007) looks at recidivism rates in both juvenile offenders and compares recidivism rates to that of a comparative group of offenders in rehabilitative programs. Rodriguez utilizes an ethnically mixed juvenile group to assist in obtaining more accurate data to further her research. Sullivan and Latessa (2011) examine the effects of early intervention programs on delinquent youth across multiple levels of risk in various intervention modalities. Data obtained from various juvenile case management systems, departments of youth services and individual offender records and statewide corrections and offender databases assist in the examination of effects of early intervention programs on delinquent youth offenders. This study focuses on several areas within diversion programs revealing risk levels associated with youth. While too brining in other studies conducted pertaining to youth diversion, this study focuses on the many different types of treatments available to delinquent youth, (Sullivan and Latessa, 2011). Wilson and Hoge (2013) add to the argument that programs that caution or warn the juvenile offender tend to serve youth better or divert them without any further action.

Given the recent implementation of the Juvenile Diversion program here in Solano County in 2016 and supporting research of the positive effects of early intervention programs, it

would be fair to say Juvenile Diversion programs may have a potential positive impact on the prevention and reduction of recidivism rates in mentally ill juvenile offenders here in Solano County.

Alternative Approaches to Early Intervention

Franklin, Lehmann et al. (2016) investigate the relationship between goal commitment, solution building, and program completion in a sample of first-time offenders charged with domestic violence toward a non-intimate family member. Data associated in this study was collected by youth enrollment status in intervention programs and by self-administered questionnaires. Franklin, Lehmann et. al (2016) conduct a review pertaining to prior research on studies suggesting the positive effects of both strength-based approaches and positive intervention programs for juvenile offenders. These approaches consist of therapeutic programs in approaches to juvenile diversion and how they have been effective based off of prior research and studies conducted. Through specific strength-based approaches, diversion of juveniles is often seen as an alternative method or remedy to intervene juvenile delinquent behavior. With effective strength-based approaches, Franklin, Lehmann et. al (2016) mention the importance of Goal Setting Theory and the necessity for future-focused programs in order to achieve goals set during commitments made within diversion programs. Other approaches to early intervention in mentally ill juvenile offenders found to be successful include pre-incarceration programs such as structured schedules, expectations and consequences provided by committed, caring adults (Todis et. al, 2001). Programs such as these allow juvenile offenders to attain educational degrees, acquire job skills, seek substance abuse treatment and learn both problem solving and coping skills. Belcher (2013) adds to this notion of alternatives to early intervention citing behavioral intervention that focuses on self-monitoring, self-regulation and positive

reinforcement. Alternatives such as these have shown great improvements in juvenile delinquency and behaviors associated with nonconforming behavior.

Conclusion of Supporting Literature

With the increase in cognitive and social behaviors contributing to psychological distress in juveniles, the need for early intervention in mentally ill juvenile offenders is evident. Behaviors such as these have led to delinquency in some and non-conforming behavior in others. From these behaviors stem other more violent tendencies ultimately resulting in the incarceration of juveniles and admittance into the juvenile justice system. Essentially, there is not enough being done to combat this issue. With the increased likelihood of a juvenile suffering from mental illness ending up in the juvenile justice system, approaches to early intervention in the form of mental health evaluations need to be the new norm in early stages of adolescent years and juvenile years. Early identification of mental health issues in juveniles is one of the first steps in combatting both incarceration in juveniles and recidivism. Though there is strong supporting evidence in regards to the effectiveness of early intervention programs such as diversion and strength based approaches, it is hard not to argue the effectiveness of early mental health screening in juvenile delinquents and the potential impact it has on recidivism in juvenile offenders. Kim et. al (2013) explain in their research how studies conducted on early intervention programs only assess effectiveness of a particular program, rather then which program is most effective in preventing recidivism. This has led to an increased need for information pertaining to comparative effectiveness of different early intervention program types.

Chapter 3 - Research Methodology

Introduction

A mixed method research design was used for the research of this study. Both quantitative and qualitative methods were used to obtain primary and secondary research data in this study. Quantitative methods used in the research process of this study consisted of in-person interviews conducted between the researcher and five subject matter experts directly associated the Solano County MIOCR Diversion program. Additionally, secondary research data pertaining to MIOCR Diversion Program juvenile referrals from years one and two was obtained from Solano County Probation for analysis to measure potential effectiveness of MIOCR. Qualitative methods used in this study consisted of site visits and in-person observations by the researcher where he/she assumed the roles of observer, participant and volunteer.

The overall purpose of this study is to determine whether or not the Solano County Juvenile Diversion program has been effective early intervention program in reducing recidivism rates in mentally ill juvenile offenders. Quantitative and qualitative data was collected via key informant interviews with personnel assigned to the Juvenile Diversion program such as Fairfield Police staff, Solano County Probation staff, and Fairfield-Suisun Unified School District staff in support of this study.

Research Question:

What has been the most effective collaborative and multidisciplinary prevention/early intervention program or service Solano County has implemented in ensuring juvenile offenders suffering from mental illnesses are not recidivating.

The proposed plan of research stemming from this question assisted in an extensive plan

of action to determine which early intervention program for mentally ill juvenile offenders has been the most effective in preventing recidivism. The proposed research question assisted in the identification of additional early intervention programs available to juvenile offenders and highlighted specific actions in the collection process needed to obtain both qualitative and quantitative data.

Research Hypothesis:

Mentally ill juvenile offenders in Solano County enrolled in the youth juvenile diversion program, are less likely to recidivate or recommit crimes rather than offenders whom are not enrolled or participate in the juvenile diversion program.

The research hypothesis was essential in forming a plan of action in the data collection process for this research paper. The hypothesis helped assist in the determination and identification of several key informants and subject matter experts associated with the MIOCR Juvenile Diversion program here is Solano County. Information from key informant interviews with these subject matter experts may assist in determining whether or not the hypothesis proposed will prove to be factual or unfounded.

Dependent and Independent Variables:

The dependent variable in this study is: are less likely to recidivate or recommit crimes rather than offenders whom are not enrolled in the MIOCR Juvenile Diversion program. The independent variable in this study is: mentally ill juvenile offenders in Solano County enrolled in the MIOCR Juvenile Diversion Program. The inter-relationships between both the dependent and independent variables in this research study are closely related given participation and enrollment in the MIOCR diversion program for mentally ill juvenile offenders. It is expected

that enrollment in this program is going to show a significant positive effect on recidivism rates in mentally ill juvenile offenders and support both the dependent and independent variables in this study. Additional factors that will influence the dependent variable in this study and support findings are behavioral habits, frequency of tardiness and absences as well as external influencers such as possible substance abuse and parental interaction.

Operational Definitions

Mentally Ill Juvenile Offender:

For the purposes of this study, Solano County's probation department whom oversees the Juvenile Diversion program defines a juvenile mentally ill offender as a juvenile whom has committed a criminal offense and been referred to the juvenile diversion program for screening of potential underlying mental health issues that may be contributing factors to the act of offending. Not all juvenile offenders are considered to be "mentally ill offenders." A prescreening is conducted via self-administered questionnaire. Results of the questionnaire are scored and a determination is made upon the juvenile offender as to whether or not he/she meets requirements to be admitted into the youth diversion program.

Juvenile Diversion:

For the purposes of this study, The Solano County Juvenile MIOCR Program (2018) defines "Juvenile Diversion" as early interventions in Solano County's juvenile justice continuum.

Juvenile Diversion Program:

For the purposes of this study, Juvenile Diversion Program is defined as early intervention services to non-serious juvenile offenders experiencing mental health issues (C. Grove, personal communication, Nov 27, 2018). The objectives for this program is to divert

youth from formally entering the Juvenile Justice System by providing necessary mental health services, while holding them accountable for their delinquent behavior and promoting their participation in school and pro-social activities. (Solano County MIOCR Diversion Program Guide, 2018).

Enrolled:

Young juvenile offenders are typically diverted from the juvenile justice system at probation and police levels and enrolled or admitted into the juvenile diversion program upon determination made by MIOCR officer pending results of DSM-V (Diagnostic and Statistical Manual of Mental Disorders). Once youth are screened by Fairfield Police Officers assigned to the program to determine eligibility, they are then assigned to the probation officer assigned to the MIOCR program who screens the youth on a mental health assessment questionnaire (C. Grove, personal communication, Nov 27, 2018).

Less Likely to Recidivate:

For the purposes of this study, recidivate means to recommit or reoffend (personal communication, Grove, 2018). Then-California State Office of Attorney General Kamala D. Harris (2014) defined recidivism as, "an arrest resulting in a charge within three years of an individual's release from incarceration or placement on supervision for a previous criminal conviction." Less likely to recidivate, within the scope of this study, will propose at least a 25% less likelihood juvenile offenders enrolled in the juvenile diversion program have recidivated.

Recidivism can be defined into three sub-categories:

Offense Type- Crimes Against Persons, Property Crimes, Drug Crimes, Other (<u>oag.ca.gov</u>, 2018).

- 5. Frequency- Number of times an individual commits an act of recidivism within the threeyear period (<u>oag.ca.gov</u>, 2018).
- Timing- Time within the three-year period in which an individual commits an act of recidivism. Categorized at six-month, one-year, two-year, and three-year intervals (<u>oag.ca.gov</u>, 2018).

Data Collection Plan Overview

Primary data in this study was collected in a multitude of ways. One on one interviews were conducted with subject matter experts and stakeholders of the MIOCR Juvenile Diversion Program. Secondary data for this study was collected during site visits at the Sullivan Interagency Youth Services Center from both Solano County Youth Probation Staff and Fairfield Police staff assigned to the MIOCR Diversion Program. Personal observations were also conducted during on-site visits with youth enrolled in the MIOCR Diversion Program.

Data for this research proposal was collected from multiple agencies directly involved with the Solano County MIOCR Juvenile Diversion Program. Agencies instrumental in the implementation of the MIOCR Diversion Program since its founding in 2016 such as the Solano County Probation Department, Fairfield Police Department, Fairfield-Suisun Unified School District and A Better Way (mental health clinician assigned to MIOCR), provided both primary and secondary research data. During the one on one interviews, thirteen open-ended questions were administered to each of the subject matter experts. The questionnaires were all identical for the purpose of obtaining accurate point of views, constructive feedback, current practices and any recommendation for change to the current MIOCR Diversion program. During the in person observations conducted on school campuses and after school programs available youth in Solano

County, the researcher assumed the roles of interested observer, participant and volunteer in some cases. Field notes during the in-person observation process were not taken initially in order to appear as unobtrusive as possible and to not affect the outcome of the counseling sessions with the juvenile and MIOCR Diversion Officer. Field notes were transcribed by the researcher immediately following the counseling session for the purpose of interpretation of procedures conducted with the MIOCR Diversion Program participants. Readily accessible data such as program referrals to participant data, arrests, citations, types of offenses and referral status information was collected from FPD staff and Probation staff assigned to the MIOCR Diversion Program for further analysis.

Since the Juvenile Diversion program was streamlined in 2016, much of the data collected was from 2016-2018. Key informant interviews were conducted with several staff members instrumental to the implementation and functionality of MIOCR in Solano County. Fairfield Police Department's MIOCR Juvenile Diversion Officer, Solano County Probation staff assigned to MIOCR, Fairfield-Suisun Unified School District Administrative staff and MIOCR Mental Health Counselors assigned to the MIOCR Diversion program were all interviewed and provided their points of view on the effectiveness of the MIOCR diversion program. The Fairfield Police Department MIOCR Diversion Officer's duties consist of initial intake of Juvenile Offenders following citation or arrest. Within 4-7 days, the FPD Diversion Officer receives a referral and makes a determination whether the juvenile offender is suitable for the MIOCR Juvenile Diversion program depending on several factors; i.e. the severity of the offense committed and any potential for underlying mental health conditions based off of behavioral preindicators or risk factors. There are three risk levels associated to the MIOCR Diversion Program assigned to juvenile offenders, low, moderate and high risk. Whether the juvenile

shows any of these pre-indicators determines if the juvenile has a potential for underlying mental health issues that need to be addressed. If the juvenile is believed to have some underlying mental health issues, he/she is then referred to the mental health clinician for further assessment. The MIOCR mental health clinician determines whether the juvenile is in need of further assistance or has an underlying mental health condition in need of treatment.

Other key informant interviews were aimed at the administrative and supervisory staff of the MIOCR program, specifically the Deputy Probation Officer in charge of receiving referrals for juvenile offenders and assessing needs to mental health clinicians. The Deputy Probation Officer assigned to MIOCR was instrumental in providing key primary and secondary data to the researcher, providing expertise in other areas of the MIOCR Diversion Program and providing additional key informants to the researcher to assist in obtaining secondary data for the proposed research.

Internal Validity:

Some of the factors that may affect the internal validity include non-responsiveness to questions, untruthfulness in primary or secondary research data in juvenile MIOCR assessments, unfamiliarity with the MIOCR program during key informant interviews (staffing) due to turnover rates and attrition and the fact the MIOCR Juvenile Diversion program has only been functioning for just over two years. This could certainly create issues in internal validity when looking at numbers pre-MIOCR and post-MIOCR implementation.

External Validity:

This research should have external validity with similar diversion programs implemented in surrounding counties within California. Some counties to look at for external validity may be

Yolo County, Sacramento County and Contra Costa County should they have Juvenile Diversion programs.

Limitations:

Limitations of this study may include the availability of information from outside county programs available to mentally ill juvenile offenders. Due to time constraints, there very well may not be enough time to access such information to be able to support the external validity of this study. One issue encountered is the lack of useable data for mentally ill juvenile offenders prior to June of 2016. The reason for this is there were no mental health assessments being conducted on juveniles committing offenses prior to the implementation of the program in June 2016. Juvenile offenders were subject to the juvenile justice and probation system prior to the availability of the MIOCR diversion program. There are available citation and arrest records prior to 2016, though they will not be brought into the discussion of my research. These citation and arrest records do not pertain to the current MIOCR diversion program and were considered non-assessed juvenile offenses in that these juvenile offenders may or may not have been considered for the MIOCR diversion program at the time. Additionally, some of the key informants summoned for this study were not available which could very well affect the outcome of this research and the number of respondent's personal perspectives gathered from this study. Summary:

Concluding an extensive process of gathering and analyzing research data, conducting inperson observations, site visits and one on one interviews, it is proposed this study will show whether or not the MIOCR Diversion Program has been effective in preventing recidivism in mentally ill juvenile offenders. Research will also support whether or not participation in the MIOCR Diversion Program has reduced behavioral issues and attendance issues of the

participants in the MIOCR Diversion Program. The research hypothesis will be tested via an analysis of the research conducted for this study. Aware of the limitations associated with this study, the researcher is prepared to address any barriers that may limit the findings in the next chapter of this study.

Chapter 4 - Results and Findings

Introduction

The purpose of this study was to determine whether or not the Solano County MIOCR Diversion program has been effective in preventing recidivism amongst mentally ill juvenile offenders. Data was collected using structured interview questions from five key informant subject matter experts employed at several agencies associated with the MIOCR Diversion program. Researcher on-site observations were conducted with subjects enrolled in the MIOCR Diversion program during visits from the FPD Diversion Officer. Lastly, MIOCR Diversion Program referral data of juvenile offenders, 12yrs-19yrs old (Ward of Juvenile Courts) from the years 2016-2018 was collected and evaluated by the researcher from the Solano County Probation staff assigned to the MIOCR Diversion Program.

The data obtained in this study was used to support the research hypothesis of this study was: mentally ill juvenile offenders in Solano County enrolled in the MIOCR Diversion Program, are less likely to recidivate or recommit crimes rather than offenders whom are not enrolled or participate in the MIOCR Diversion Program.

This chapter provides an overview of results from this study's key informant interviews along with additional results and findings of the research conducted in this study. Areas of change founded in this study are also identified during this chapter and are addressed further in depth within the contents of the next chapter.

In-Person Interview Results and Findings:

Five key informant interviews were conducted with subject matter experts from agencies consisting of Solano County Mental Health, Fairfield-Suisun Unified School District, Solano

County Probation, and the Fairfield Police Department. Thirteen questions were provided to

each of the seven interviewees in-person and conducted accordingly. Answers were all

consolidated into each question category.

Interviewees:

Interviewee#1 Position: Fairfield Police Department Youth Diversion Officer Conducted on 2/8/19 Location: Sullivan Interagency Youth Services Center

Interviewee#2 Position: Student Services Fairfield-Suisun Unified School District Conducted on 2/8/19 Location: Sullivan Interagency Youth Services Center

Interviewee#3 Position: MIOCR Deputy Probation Officer Conducted on 2/8/19 Location: Sullivan Interagency Youth Services Center

Interviewee#4 Position: MIOCR Diversion Supervisor Conducted on 2/8/19 Location: Solano County Probation Department

Interviewee#5 Position: MIOCR Diversion Mental Health Assessor Conducted on 2/14/19 Location: Sullivan Interagency Youth Services Center

Question #1. Besides the MIOCR, what other early intervention programs are available in Solano County for juvenile offenders?

• School counselors are located at all school sites. Additionally, Solano County mental

health services, Fairfield PD PAL center are alternative early intervention services available to

juvenile offenders.

• I am not familiar with any other early intervention programs available in Solano County for juvenile offenders.

• Juvenile Community Accountability Program (JCAP), Misdemeanor Diversion and Felony Diversion programs are all available. Additionally, the police departments in the local area offer some types of diversion programs.

• Local law enforcement diversion programs, Juvenile Probation Programs (JCAP, Misdemeanor Diversion, Felony Diversion, MIOCR Diversion, Juvenile Traffic Hearings.

• I'm unsure of other early intervention programs such as the MIOCR program, although there are agencies within Solano County that provide support for youth in the juvenile court system. Seneca holds space in their wrap-around program for youth who may benefit from higher level of care; this means the youth will be eligible for support by a case manager and therapist, individual and group therapy, job-related skills, provided transportation if needed, and routine meetings with the support team to 'wrap around' the client and make sure their needs are met. Additionally, First Place for Youth has a program for youth who are specifically either in the juvenile court system or foster care system. These programs are designed for a bit higher level of care than the MIOCR clinician would provide.

Four out of five respondents are aware of alternative programs available to juvenile offenders for early intervention other than MIOCR Diversion. There are other diversion programs available to juvenile offenders if they are not suitable for the MIOCR Diversion program. Additionally, if juveniles are not referred to Diversion or other early intervention programs, A Better Way For Youth has available case managers for youth as well as job specialty training and ensuring individual needs of juveniles suffering from mental illnesses are met. Of Course, this is all dependent upon the level of offense, impact on victim etc. One respondent was unaware of any other type of early intervention programs available to juvenile

offenders for reasons unknown. This could potentially be a lack of information sharing or

communication from interagency involvement.

Question #2. What, if any, early intervention programs other than the MIOCR for juveniles were recommended prior to 2016?

- The respondent referred to the above answer for the answer to this question as well.
- I have been in my current position since 2009 and have no knowledge of any other

intervention programs for juveniles prior to 2016.

- JCAP and Misdemeanor/Felony Diversion Programs were also available.
- Police Diversion Programs, JCAP, Misdemeanor Diversion, Felony Diversion and Juvenile Traffic Hearings.

• Respondent (Mental Health Clinician) believed the answer to this question to be out of her scope of work.

Three out of five respondents were aware of early intervention programs available to juvenile offenders prior to 2016 and the implementation of MIOCR. There were a multitude of programs available to juveniles such as diversion programs for misdemeanor and felony offenses, juvenile probation, police diversion programs and additional programs offered through juvenile probation services. Moreover, no programs provided mental health assessments to address needs in juveniles who potentially were suffering from mental illnesses prior to 2016. One respondent was completely unaware of the other programs available for early intervention in juveniles. One respondent believed this question to be out of her scope of work.

Question #3. Are all juveniles who are cited in or out of school referred to Diversion program?

• All juvenile arrests go through the Fairfield PD Youth Services Bureau. Once there, it is determined if the youth is eligible for diversion or not. Not all juveniles will be eligible to be placed on Diversion.

• Not all juveniles who are cited in or out of school are referred to the Diversion program. The intent of the Diversion program is to prevent "low level" first time offenders from having their first contact with the juvenile justice system if they can be deterred.

• No. Each case is screened for eligibility for Diversion, but not all qualify or meet the criteria. Juveniles are assigned to Diversion on a case-by-case basis. Victim impact, seriousness of offense, and other significant factors are all considered prior to referring the case for diversion services.

• All citations received by the Probation Dept. are reviewed by Juvenile Intake Deputy Probation Officers to determine eligibility for Diversion Programs. A majority of citations are referred to the Diversion Programs listed above, depending on the crime (felony or misdemeanor offense, victim impact, seriousness of the offense, amount of restitution if exceeds \$1000 and other factors). Citations that do not qualify for the Diversion Programs will be forwarded to the District Attorney for their review and determination if they will file formal processing in Juvenile Court.

• Respondent (Mental Health Clinician) believed the answer to this question to be out of her scope of work.

Four out of five respondents to the questionnaire expressed knowledge in some type of screening process to determine a juvenile's eligibility for the Diversion Program. Based on the responses from the subject matter experts in this study, it appears as though there is some type of criteria that must be met in order to be eligible for entry into the MIOCR Diversion Program. If

a juvenile does not meet the criteria or is deemed to be ineligible, the subject is then referred to probation and the case if referred to the Solano County District Attorney's Office. A juvenile who may be considered a low-risk offender, may carry more weight in terms of eligibility rather than an offender who committed a more serious offense.

Question #4. What types of offenses are typically referred to the Diversion Program officer, and which offenses would be omitted entirely from the program?

• Youth eligible for Diversion include first time offenders for all infraction and misdemeanor offenses and felony offences on a case-by-case review. Cases such as truancy, fighting, theft, vandalism, are the most common cases in the Diversion Program.

• The Fairfield Police Department's Diversion Officer reviews non-felony offenses, (presumably the juvenile's first offense), to determine if the juvenile meets the criteria for Diversion. I believe the Diversion Officer has Diversion Criteria, which he/she follows. Felony offenses, juveniles who are repeat offenders, and juveniles who are already on probation do not qualify for/would be omitted entirely from Diversion with the Fairfield Police Department's Diversion Officer.

• Any offenses that are considered very serious in nature; for example gun offenses, sex offenses, any offense that resulted in great bodily injury. Additionally, if the details of the offense involve significant impact to a victim or pose a serious risk to the community, they will not be eligible. Any offense committed under 707(b) W&I Code are automatically disqualified from entry into diversion.

• Any offenses serious in nature, violent, and pose a great risk to community safety/victim: firearms/weapons offense, sex offenses, great bodily injury to the victim.

• Respondent (Mental Health Clinician) believed the answer to this question to be out of her scope of work.

Four out of five respondents expressed having knowledge of types of offenses that would be considered as eligible for consideration in the MIOCR Diversion Program. First time offenders, depending on the severity and impact of the offense, are typically eligible for entry into the MIOCR Diversion Program. The overall goal of the program is to prevent juveniles from entering the juvenile justice system and to prevent recidivism. All respondents agree that if a juvenile offender is a repeat offender, on current probation, has committed some type of serious offense, is a risk to the community (high risk offender), then he/she is not eligible for the MIOCR Diversion Program. These responses show that there is a structured risk level that goes into the consideration of eligibility for juvenile offenders.

Question #5. What offenses would immediately be omitted from the program and referred to probation?

• Offenses such as murder or attempted murder, robbery, assault with a deadly weapon, felony battery, battery with great bodily injury, rape and most sexual assaults are not eligible for Diversion and are immediately referred to Solano County Probation.

• Felony offenses, juveniles who are repeat offenders, juveniles who are already on probation, would be referred to probation.

• Offenses committed under 707(b) W&I Code are omitted from the program and referred to probation or the criminal justice system.

• Any 707(b) W&I offenses are disqualified.

• Respondent (Mental Health Clinician) believed the answer to this question to be out of her scope of work.

Based on the five responses from subject matter experts in this study, it appears as though any type of offense that causes great bodily injury, crimes associated with sexual assault or rape, or may fall under California Welfare and Institutions Code 707, subsection b, would not be considered for eligibility for MIOCR Diversion and would therefore immediately be referred to Solano County Probation or entry into the juvenile justice system. One respondent was not aware of the type of offenses associated with the program and could address a need for better interagency communication.

Question #6. What are some common factors contributing to juvenile delinquency and individuals enrolled in this juvenile diversion program?

• Common factors contributing to juvenile delinquency are lack of a sound family structure, influential friends/peer pressure, lack of good social skills and the disregard for other people's property.

• Common factors contributing to juvenile delinquency and individuals enrolled in the juvenile diversion program include but are not limited to: poor decision making skills, lack of support at home, substance abuse, chronic absences (excused or unexcused) from school, homelessness, lack of school engagement, single parent households (or juveniles in the care of others), mental health issues, poor peer interactions, adverse childhood experiences.

• Some common factors are neglect, truancy, mental health and substance abuse.

• Mental Health Issues, Truancy, Negative Peer Associations, Lack of Pro-social peers and pro-social activities, Neglect, Abuse, Trauma, Substance Abuse, lack of supervision/structure from parents, etc.

• Part of my role as clinician is to complete a mental health assessment for each referred youth. From the mental health perspective, common factors of referred youth included: at least

one estranged parent, lack of parental support, low socioeconomic status, history of trauma experiences, identifying as male, and identifying as ethnic minority.

All five respondents believe contributing factors to juvenile delinquency are lack of parenting or periods of neglect. Neglect could stem from a number of things such as substance abuse in the home, physical or mental abuse from parents, or simply a lack of a good support network in the home. Two out of the four respondents highlighted truancy as a contributing factor to delinquency, whereas the other two respondents mentioned lack of social support or peer support as contributing factors to delinquency. It appears as though all factors mentioned by the respondents could stem from a juvenile's home life or the lack thereof.

Question #7. What are the parents involvements in the diversion program?

• Parents are required to attend the Diversion meeting and take a proactive role in keeping the juvenile out of trouble. The parents are expected to communicate with the Diversion officer and report any violations of the contract at all times.

• If the parents are part of the juvenile's life, the parents attend Diversion meetings with the juvenile and take a survey regarding their perspective of the juvenile.

• The parents are required to appear for their appointments and sign the diversion agreement along with the probation officer, mental health clinician and the youth offender.

• Parents come to appointments for Police Diversion Programs and Probation Dept. Diversion Programs and sign the diversion contract along with the youth. Parents transport the youth to appointments and any counseling/therapy and they also report any issues or concerns.

• Parents are required to sign consent for their youth to participate in mental health treatment; however, youth are able to sign their own consent if they are 18 years old or over.

Parents are then required to participate in completing the mental health assessment, collaborate on their youth's treatment plan, and sign the treatment plan. Treatment plans ask the parents to participate in check-ins or sessions with their youth and clinician 1-3 times per month; however, parents' work schedules or involvement often limit these interactions. Parents are requested to also participate in any mental health assessment updates, and planning for the youth's closure from mental health support.

Based on the subject matter expert's responses in this study, parents appear to be large stakeholders in the MIOCR Diversion program and hold important responsibilities. Parents are part of the contract for the juvenile offenders in that they have to maintain contact with Diversion Program staff, attend meetings for their child in the Diversion Program and to ensure they are reporting any other violations, presumably per Diversion Contract. If a parent is not as committed to their child's Juvenile Diversion contract as much as the child, there can certainly be issues. Increased parent involvement in the MIOCR Diversion program could potentially increase a Juvenile Offender's chances at success in the program and potentially decrease their chances at recidivating.

Question #8. How can parents, if anything, better assist their child in ensuring success?

• Parents need to hold their kids accountable for their actions. Parent's agreement to hold their children more accountable for wrongdoing and hold the kids to the punishment issued to them. Parents can make sure the kids complete all sanctions given to the juvenile such as community service and life skills classes.

• Parents/guardians play a key role in ensuring their child's success. Parents/guardians should: set high expectations for their children, listen and talk to their children on a regular basis regarding those expectations, emphasize the significance of education; emphasize the importance

of making good life long decisions, look out for signs that their child may be at risk and take advantage (immediately) of assistance if and when needed, communicate regularly with school staff and be involved with their child's education, talk and prepare for the future (visit colleges, career interests), get involved in church/community volunteer work (give back in some way), recognize and support behaviors they want to see, don't enable child or make excuses for child's poor decisions, model healthy relationships.

• Supporting their therapy goals as outlined at the beginning of the program, ensuring they are getting to/from mandated appointments, monitoring proper amount of medication compliance and respecting the minor's privacy during sessions.

• By supporting, encouraging, and making sure the youth follows through with completing all terms of the diversion contract (counseling/therapy, community service hours, substance abuse treatment, restorative justice, apology letters to victims, etc.)

• Many youth are raised by single parents or guardians, which often makes collaborating with parents difficult. Many parents have difficulties asking for time off work, have transportation barriers, or work multiple jobs. While these are legitimate barriers to parents' participation in mental health treatment, youth would benefit from more parental involvement and insight into their youths' experience. Parents may better support their child by making space for a clinician to support them in understanding their youth's emotional experience and provide feedback to the clinician into ways the youth may be better understood in order to ensure they have their mental and emotional needs met. Additionally, it's very helpful when parents learn the coping skills youth are learning in sessions, and remind youth to practice them at home.

Findings from the above respondents identify the increased need for parent involvement within the MIOCR Diversion Program. Some issues shared with the researcher include lack of

parental involvement, lack of support and encouragement from parents and accountability.

Parents need to hold their children accountable to their contracts while in the NMIOCR

Diversion Program and ensure they provide insight or feedback to staff to better serve the youth and address their individual needs.

Question #9. How often are site visits at schools and homes conducted by diversion officer?

• Site visits are done at least once at the half waypoint of the Diversion contract and more often if time permits.

• Information related to how often the Fairfield Police Department's Diversion Officer visits students at school and/or at home is not available to me.

• School visits are rare and only conducted if there are transportation concerns, scheduling concerns or risks of absconding. We (MIOCR Staff) do not want to be visiting minors at school during core learning time and it is avoided when possible.

• School visits were not conducted while the youth was in class...after school or at their homes as needed.

• Respondent (Mental Health Clinician) believed the answer to this question to be out of her scope of work.

Question #10. How does staff ensure answers to questions are truthful during their assessment for entry into MIOCR program?

• Reviewing the questionnaire with the juvenile and parent to see if answers were given correctly is the best practice so far. Juveniles are asked to be honest with all answers prior to being issued the questionnaire.

• Information related to answers to questions a student is asked to answer during their assessment for entry into the MIOCR program is not available to me.

• The assessment is a self-reporting tool and subject to the information provided by the youth; however, we have a lot of information regarding the offense and can often discuss concerns/discrepancies with the minor to maintain the integrity of the assessment. Additionally, we explain the answers are private and not to be used against them, which usually assists in obtaining more truthful answers.

• Youth referred to diversion programs complete an assessment questionnaire (self-report), which is verified by asking the youth about any discrepancies or concerns. Diversion officers have the police report and can ask additional probing questions. Also, the youth are informed of confidentiality and that their statements will not be used against them.

• The clinician completes an extensive mental health assessment and subsequent screeners. This assessment screens for emotional and behavioral areas of concern, trauma history, substance use, and risk factors including suicidal ideation, access to weapons, and involvement in legal system. The clinician then uses this information to diagnose the youth, per the Diagnostic Statistical Manual. The mental health diagnosis indicates that the youth (or anybody else receiving a diagnosis) is experiencing clinically significant impact to functioning in their home, school/work, and peer setting. Typically, this processes rules out untruthful responses.

Based off the answers provided to the researcher by the respondents in this study, it does not appear as though there is a definitive way to ensure that there are truthful answers provided to the assessments of the youth offenders to MIOCR Diversion staff members during periods of assessment. Staff express that the juvenile subjects answering the assessments are screened for any potential background issues or concerns that would make a significant impact on the assessment. This assists in determining whether responses have the potential to be untruthful.

One respondent said having a parent present during assessment assists in obtaining truthful answers.

Question #11 How do tardiness and absences affect juveniles in the diversion program?

• Tardiness and absences are a big issue while on Diversion. Students sign a contract where they agree to attend school while in session. If students are found to have excessive tardiness and absences they could fail diversion or be given additional consequences.

• Information related to a student's truancy and the impact their truancy has related to the diversion program is not available to me.

• Information related to a student's truancy and the impact their truancy has related to the diversion program is not available to me.

• Grades/Attendance/Behavior reports were accessed by the Diversion Officer through FSUSD staff located at the Sullivan Center. Diversion officers would contact the youth if they were truant, tardy, or had excessive absences to address the issue.

• I meet with many youth in their school setting. School tends to be the easiest place to hold meetings as it limits transportation and/or scheduling barriers. However, if youth are not present at school, this means they also forego their therapy session for that week, unless schedules can align to reschedule. Frequent missed therapy sessions impacts the youth's therapeutic progress, and can impact their Diversion success as their contract requires them to attend therapy sessions.

Tardiness and absences appear to have a significantly large impact on youth in the Diversion Program based off the answers from the respondents in this study. If a student is scheduled for an on-site visit either at home or at school and they fail to appear to school, they would then miss their appointment with either the MIOCR Diversion Officer or the Mental

Health Clinician assigned to MIOCR. This presumably would have a negative impact on both the subject's Diversion contract and their overall success in the program. Tardiness and absences are reported to an attendance review board and referred to the Diversion Officer to determine if an on-site visit is necessary. Additionally, it does not appear as though there is enough in-person visits conducted by MIOCR staff and it is dependent upon a case-by-case basis and whether the truancy is habitual.

Question #12. If you had one recommendation that would improve the MIOCR program, what would you propose?

• In my experiences with the MIOCR Diversion Program, I have learned that many parents condone the actions of their children and do not feel they have done anything wrong. Parents will often argue the actions and offenses their juvenile committed are not wrong and do not feel they should be punished for them. I feel that parent classes should be assigned to help parents learn how to deal with delinquent juveniles.

• My one recommendation to improve the MIOCR program would be to make arrangements to have one mental health clinician at every school site. We must focus on early intervention (grades k-3).

• The program needs more clinicians to work with the youth for a longer period of time. The current clinician can only keep them for a maximum period of 6 months, at which time they are linked to long-term care with their health care plan (i.e. Medical, Solano Children' Mental Health, School Based Treatment etc.). It would be ideal, though not always practical, to keep a physician assigned to a juvenile for a longer term. Unfortunately this is not always an option, though on the plus side, the clinicians keep the juveniles until they are confirmed to be attending ongoing treatment with their permanent provider.

• As the part of the MIOCR sustainability plan, Probation expanded the MIOCR program county-wide and includes youth on formal probation. To improve this service, two additional mental health clinicians were hired to provide services.

• The team of professionals who created and implemented the MIOCR program were wonderful. There was a passion for helping these youth, and all partners were understanding of each other's role in these youths' treatment. An additional mental health clinician and group therapy support may have better benefitted the youth in the program. Also, this program would have befitted more youth if the initial guidelines of specific schools and cities were lifted.

Four out of five respondents recommended additional assistance from Mental Health clinicians, citing the necessity for additional staff at each school site. One respondent from the study recommended courses or educational services for parents to assist with having to deal with delinquency in juveniles. It was also recommended by one respondent that while there needs to be increased Mental Health staff assigned to the MIOCR program, there also should be assessment beings conducted on youth at a much younger age (grades K-3), to assist with early identification of mental issues in youth.

Question #13. What are some key lessons learned since the implementation of the diversion program?

• I have learned that most juveniles are one-time offenders that do not reoffend. The juveniles that have poor family structure are more likely to reoffend and will remain in the juvenile justice system.

• Although I can appreciate the attempts to divert children who are mentally ill from the juvenile justice system, we can predict a student's success by looking at a student's rate of

truancy, reading ability, adverse childhood experiences, by the third grade. By the time a child has access to MIOCR, it is too late. If we truly want to make a difference in the life of a child, we need to intervene much earlier.

• Many youth were being adjudicated or going through the court process without being diagnosed for any type of mental health condition. We have received a lot of positive feedback from minors expressing how therapy has helped them cope with everyday interactions. Many youth had never received any type of therapy and this has benefited them greatly. Also, it is worth noting that we have a high success rate. Another lesson is the realization that some minors do not commit to the long-term therapy after diversion is closed or they are placed on a waitlist by their healthcare provider, which ultimately can lead to the youth feeling discouraged and not wanting to complete therapy or seek the help they so desperately need. All in all, I am happy about this program and the youth it has served. It is a realization we have come to that some offenders will reoffend, but the success rate shows the majority of youth in this program are in fact successful and are able to receive the help they need

• All collaborative agencies being located at the Sullivan Center helped the success of the program. Communications were good amongst the agencies. MIOCR Team meetings were easy to schedule. Interventions with youth were effective. The MIOCR program was successful in diverting youth with mental health issues from formal processing in the Juvenile Justice System with minimal re-offense. Youth who completed the MIOCR Diversion Program continued with mental health treatment through Solano County Mental Health or their healthcare provider.

• A big lesson was realizing that many of these youth aren't being diagnosed and treated for their mental health needs, which significantly impacts their decision-making and placement

on Diversion. Also, this program was so successful because of the relationships and shared vision of all partnering agencies.

Through effective and collaborative efforts, it appears as though the MIOCR Diversion Program has been effective in diverting youth from the criminal justice system while addressing mental health needs, often gone undiagnosed in the past. The largest lesson learned per the respondents in this study appears to be the vast majority of juvenile offenders previously suffering from undiagnosed mental illnesses. The MIOCR Diversion Program has substantially increased the availability of mental health services to juveniles in need.

Secondary Data and Findings

Secondary MIOCR Program data for this study was collected from both the Fairfield Police Department and the Solano County Probation Department to determine the MIOCR Diversion Program's successes or failures in preventing recidivism in mentally ill juvenile offenders. The process in considering whether a juvenile offender is appropriate for the program entails several steps. Once a juvenile is cited for an offense or arrested, the citation then is referred to Fairfield PD Youth Services Officer. The officer then reviews the citation and determines whether the offender is appropriate for the program. If the offender is determined not to be appropriate, he/she is then referred to the Juvenile Probation Department. If a juvenile is deemed appropriate for the program a Diversion hearing is conducted. If a mental health issue is suspected in the juvenile then the juvenile is referred to the mental health clinician. A mental health assessment is then conducted on the juvenile to determine the underlying mental health issue, if any. A treatment plan is then developed if the juvenile is found to have a mental health issue and the MIOCR contract is then completed with the juvenile and his/her parent. If the

juvenile is found not to have a mental health issue then he/she is referred back to the FPD Diversion officer for the completion of a Diversion Contract.

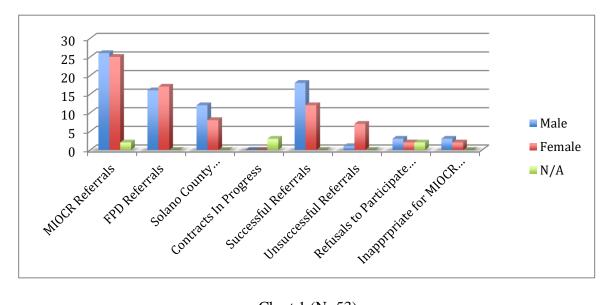
The results for the MIOCR Diversion Program referrals from the years 2016-2018 are as follows. During the first full year of the MIOCR Diversion Program (2016-2017), there were approximately 53 juvenile referrals to the MIOCR Diversion Program for offenses ranging from battery (fighting) on school campus, vandalism, theft, possession of methamphetamine, assault with a deadly weapon, possession of a loaded firearm on school grounds, burglary, arson and resisting arrest. Of the referrals, approximately 26 (49%) of them were male referrals and 25 (47%) of them female referrals with just 2 deemed n/a. Approximately 61% of the male referrals and 68% of the female referrals for the program came from the Fairfield Police Department via citation or arrest whereas 46% of the male referrals and 48% of female referrals came from Solano County Probation. As of the close of FY (Fiscal Year) 2017, there were approximately 3 MIOCR Diversion contacts in progress.

It was found that approximately 18 of the 26 (69%) male referrals to the MIOCR Diversion Program were successful in completing their Diversion contracts and avoided recidivating. Only 12 out of 25 (48%) female referrals to the MIOCR Diversion Program were successful in completing their Diversion Contracts and did not recidivate or recommit a crime. Overall, 53 (56%) referrals to the MIOCR Diversion Program from 2016-2017, were deemed successful by MIOCR Diversion Program standards. There were approximately 8 (15%) unsuccessful referrals (failures) in the MIOCR Diversion Program for the first year of the program. This means that the juveniles were terminated from the program for a multitude of reasons to include non-compliance, not attending mental health treatments and abandoning the program or reoffending (recidivated). Lastly, there were approximately 7 (13%) juveniles that

refused to participate in the MIOCR Diversion Program for reasons unknown. Of the 53

juveniles referred to the MIOCR Diversion Program, only 5 (9%) were found to be inappropriate

for the program. See Chart 1 below.



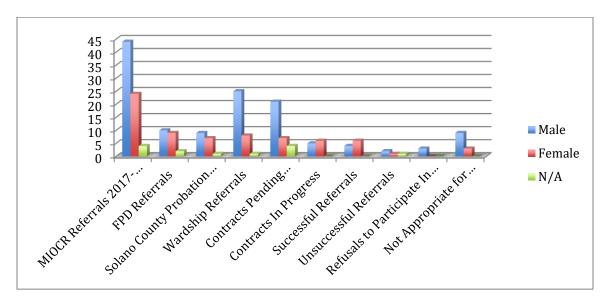
MIOCR Diversion Program referrals for 2016-2017

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Chart 1 (N=53)
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During the second full year for the MIOCR Diversion Program (2017-2018), approximately 72 juveniles referred to the MIOCR Diversion Program in Solano County. Approximately 44 (61%) juvenile males and 24 (33%) females referred to the MIOCR Diversion Program with just three referred to the program as n/a for unknown reasons. Approximately 22% of the male referrals and 37% of the female referrals for the program came from the Fairfield Police Department via citation or arrest whereas 20% of the male referrals and 29% of female referrals came from Solano County Probation. Interestingly enough, 56% of the male referrals to the MIOCR Diversion Program for the year 2017-2018 and 33% of female referrals came from Juvenile Wardship. As of the end of year 2018, there were approximately 21 out of 44 (47%) juvenile male contracts still pending a mental health assessment for entry into the MIOCR Program whereas there were approximately 29% (7 of 24) juvenile female contracts still

pending a mental health assessment for entry. Currently as of the close of FY 2018, there are still 11 MIOCR Diversion Program Contracts in progress.

For the 2017-2018 year in the MIOCR Diversion Program, it was founded that approximately 4 out of 44 (9%) males referred to the MIOCR Diversion Program and 25% (6 of 24) of juvenile females were successful in completing their contracts and did not recidivate or recommit a crime. So cumulatively, there were only a total of 10 (13%) successful contracts for juvenile offenders during the year 2017-2018. There were only a total of 4 unsuccessful contracts for the year 2017-2018, two of them juvenile males and one of them a juvenile female whereas the remainder was n/a for unspecified reasons. The reasons for being unsuccessful ranged anything from non-compliance, to not attending mental health treatments and absconding or reoffending (recidivated). Lastly, of the 72 juvenile offenders referred to the MIOCR Diversion Program in 2017-2018, 12 (16%) were found to be inappropriate for the program. See Chart 2 below.



MIOCR Diversion Program referrals for 2017-2018

Chart 2 (N=72)

The most notable findings for this secondary data for juvenile referrals to the MIOCR Diversion Program are as follows:

Between years one and two, there was a significant increase in referrals to the MIOCR Diversion program, most notably in juvenile males. There was approximately a 69% increase in juvenile male referrals to the MIOCR Diversion Program from year one through year two and a 4% decrease in female referrals. All male referrals from year one came from the Fairfield Police Department and Solano County Probation, whereas during year two, the majority of male referrals came from Juvenile Wardship. The same cannot be said about female referrals from year one to year two considering the referrals that had come from a multitude of agencies and did not show any significant increase or decrease from one agency such as male referrals had shown. Due to the MIOCR program being in the into reason for such a significant increase in referrals from year one to year two has not entirely been identified. It is presumed the causation for the sudden increase in referrals over a span of 12 months is due to increased awareness of the services available for juveniles in the MIOCR Diversion Program as well as increased involvement of local law enforcement communities, parents and community members.

The most notable finding from this referral data would certainly be the amount of successful contracts completed on MIOCR Diversion during year one from year two. During year one there were approximately 30 successful contracts out of the 53 juveniles referred to the program. During year two, there were only 10 successful contracts. The exact reason for this is unknown, though it could very well have something to do with the amount of juveniles pending a mental health assessment at the close of FY2018. Something worth noting would be the large increase in referrals as well from year one to year two, as there was approximately a 35%

increase in referrals. As previously discussed in this section, the causation of this increase in referrals is potentially due to the increased awareness of the services available for juveniles in the MIOCR Diversion Program as well as increased involvement of local law enforcement communities, parents and community members. Lastly, it is assumed once the juveniles pending mental health assessment are assessed, these numbers most certainly will reflect a different number of potential successful or unsuccessful MIOCR Diversion Program Contracts.

Site Visit Results and Findings:

Over the course of the past eight weeks, the researcher had the privilege to conduct two site visits at various schools within the Fairfield-Suisun Unified School District one site visit at the Sullivan Interagency Youth Services Center and three site visits at the Fairfield Police Activities League Center, co-located at Sullivan Interagency Youth Services Center. During these site visits, the researcher assumed the role of interested observer and participant. The researcher accompanied both the Fairfield Police Department MIOCR Diversion Officer and the MIOCR Diversion Mental Health Clinician during the school site visits. Some of the observations during these site visits were considered to be confidential and were not transcribed for reasons of patient confidentiality.

The first two site visits conducted were in schools with the Fairfield Police MIOCR Diversion Officer over a period of six weeks. Per the Fairfield Police MIOCR Diversion Officer, site visits are only conducted up to three times (beginning of contract, middle and end), unless additional are requested by FSUSD Staff or parents (in-home) if the juvenile is not holding up to terms of their contract. The following two school site visits were requested per FSUSD administrative staff employed at the school.

Site Visit One Conducted at Grange Middle School:

A 14-year-old juvenile offender enrolled in the MIOCR Diversion Program who was under contract had been habitually tardy and causing issues with staff assigned to the school. The juvenile was causing multiple disruptions on school campus several times throughout the week both in and out of classrooms, making the learning environment for other students on campus increasingly difficult. The juvenile was also not passing all of the courses he/she was enrolled in at school. The juvenile was not holding up to the terms of his MIOCR Diversion contract signed by both he/she and the parent of the juvenile. The juvenile was called up to a counselors officer where just he/she are counseled by the schools administrative staff with the MIOCR Diversion Officer present. The school offenses were laid out in front of the MIOCR Diversion Officer along with a record of absences/tardiness for the juvenile. The MIOCR Diversion Officer took note of the discipline records laid out before him and made a determination that the juvenile be removed from the MIOCR Diversion Program. The juvenile pleaded with the MIOCR Diversion Officer and school administrative staff not to be removed from the program. The MIOCR Diversion Officer decides to give the juvenile another chance at holding up to their contract though has to now attend an on-site California State Prison tour with Law Enforcement Staff at a date to be determined. The juvenile agreed to hold up to the terms of the contract and attend the tour when notified to do so.

Site Visit Two Conducted at Grange Middle School:

The same 14-year-old juvenile is still causing issues at school, though not as severe as the previous instances. He/she continues to disobey teachers during the course of his/her day

continuing to cause a campus disruption and affect others learning environment. The MIOCR Mental Health Clinician assigned to the program decided to pay a visit to the juvenile subject to see what else may be affecting the potential success for the juvenile. During the site visit a one on one counseling session between the mental health clinician and the juvenile subject are conducted in privacy. Per the mental health clinician, the results of the counseling session cannot be shared with the researcher for patient confidentiality reasons (medical reasons). The amount of site visits conducted by mental health clinicians and juveniles in the MIOCR Diversion program were not provided to the researcher.

The juvenile subject mentioned in these site visits is still enrolled in the MIOCR Diversion Program and awaiting approval for a site visit to a California State Prison in the local area for educational purposes.

Site Visit Three at Sullivan Interagency Youth Services Center:

During this site visit the researcher assumed the role of observer in order to obtain a keen idea on the operations and availability of services at the center. A multitude of agencies are centrally located on the site here. The Fairfield Police Department Youth Services Board, Homeless Intervention Team, Solano County Probation (Youth), FSUSD Attendance Liaisons, Mental Health Services and FSUSD Student Administrative Services are all located on site conveniently to better serve the multi-collaborative agency assistance for youth services and the MIOCR Diversion Program. During the on-site visit, the researcher observed a smooth flowing working environment that seemed to be running effectively. All agencies seemed to have established a good rapport with the other agencies also co-located on campus. The campus is an old school campus converted into offices that are within direct proximity of each other. If

something comes up that needs immediate attention, the agency that needs to be contacted is directly across the way or right next door. The most important take way from this site visit was a definitive convenience factor for issues that may come up throughout the day that may need to be addressed immediately.

Site Visits Four through Seven, Fairfield Police Activities League:

During these next three site visits conducted at the Fairfield Police Activities League, the researcher assumed the role of observer, participant and volunteer. The Police Activities League Program is located at the Sullivan Interagency Youth Services Center. The program is unique in that it offers local teens a place, to grow, learn and build the skills they need today and in the future (Fairfield.ca.gov, 2019). The program offers a variety of programs to teens to help them with schoolwork and everyday life. The program assists working families and offers enrichment programs for the teens in the program. The program also assists teens with career planning, fitness, sports and recreation, leadership and character building and teaches life skills components to the teens. The program is primarily an after school program available to teens that are either members to the program for a small fee of \$10 per year, or mandated to the program per Diversion or Probation requirements. The program is open 3:00-9:00 pm Monday-Thursdays, and 3:00-10:00 pm on Fridays. On any given evening there could be upwards of 150+ kids at the center. The center has a designated set of rooms, each with a general purpose or activity assigned to the room. During the site visit, the researcher participated in cooking activities, crafts, fitness and athletic activities and general one on one conversation with the youth enrolled in the PAL program. Several of the MIOCR Diversion Program enrollees were also present at the program during the researcher's site visits. Per their contracts they have to

conduct a certain number of hours of community service at the PAL. Many of the youth in the program expressed appreciation for the staff and services offered to them by the program. It was notable that many of the youth in the program requested more police officer and first responder presence to come and show support for the youth in the program. Other youth in the program said they do not have a structured family life at home or have no family life, for unknown reasons. Adult and law enforcement interaction with the youth seemed to really encourage the kids in the program to go out of their way and interact with others in a positive light while the researcher was present.

Significant Findings

During the course of the past eight weeks, the researcher of this study had the privilege to conduct an in-depth analysis of the Solano County MIOCR Diversion Program. During the research portion, data collection and analysis phase of this study, the researcher took note to some significant findings that should be discussed with the stakeholders and involved agencies of the MIOCR Diversion Program at an appropriate time. The findings are discussed more in depth below.

Finding One: Lack of follow-up data for juveniles kicked out or not appropriate for MIOCR Diversion

During the data analysis phase of the research, it was discovered that for any juvenile offender who is assessed and deemed not appropriate for the MIOCR Diversion Program, is kicked out for one reason another or another, whether for recommitting crimes while on MIOCR Diversion or refusing to be under contract, there is no follow-up research being conducted. There is no

follow-up data available for the juveniles either kicked out of the program or not suitable for the program, so realistically, stakeholders of this program do not know if they are recidivating or not.

Finding Two: Significant increase in referrals from year one to year two

The program also had a significant increase in referrals from year one to year two with a decrease in successful contracts from these years. The reason for this could be due to the fact that the first year of a program is always considered a pilot year, so policy and procedure may have been tweaked with a bit to ensure proper assessment was being conducted on juvenile offenders. Additionally, there are a great deal of juvenile offenders referred to the program who are awaiting mental health assessment which will almost certainly affect the numbers of successful/unsuccessful contracts in the program to determine recidivism rates.

Finding Three: Lack of on-site visits

It is understood that staff do not want to interrupt a program participant while at school, but there is only three on-site visits being conducted by the MIOCR Diversion Officer during the course of a juvenile's contract on MIOCR Diversion unless otherwise requested. The school staff has the ability and authority to request additional visits by the MIOCR Diversion Officer when needed, though it appears they are waiting for problems to build up in the juvenile participants when it is too late to take action.

Finding Four: The Need For Earlier Adolescent Assessment

Many of the respondents in this study feel that juvenile mental health assessments need to be conducted at an earlier age to ensure their needs are being addressed. If and when needed, assessments should be conducted on juveniles as early as medically possible, in hopes of potentially deterring delinquency in juveniles and preventing the committal of crimes.

Finding Five: The desire for increased participation from stakeholders and local agencies involved with the PAL (Police Activities League)

Many youth to include juveniles enrolled in the MIOCR Diversion Program, who attend the Police Activities League, lack family structure or ethical parental figures at home, so they come here to the PAL program to feel a sense of empowerment, belonging and security. Several of the participants shared their desire to have more involvement from local law enforcement and other stakeholders of the program. All of the staff are on a volunteer basis and also encourage more involvement from the local law enforcement community, as it would assist in building bridges and mending gaps within the communities. Law enforcement showing more interest and involvement in these programs, whether through volunteering or being a mentor could very well assist in building legitimacy and trust within the local communities. Increased involvement from stakeholders could also assist in funding from the local communities and parents/families involved in the program.

Chapter 5 - Conclusions and Recommendations

The purpose of this study was to determine whether or not the Solano County MIOCR Diversion program has been effective in preventing recidivism amongst mentally ill juvenile offenders. Through a mixed method of research and gathering both qualitative and quantitative data, the following research hypothesis was put to the test; mentally ill juvenile offenders in Solano County enrolled in the youth juvenile diversion program, are less likely to recidivate or recommit crimes rather than offenders whom are not enrolled or participate in the juvenile diversion program. After a thorough analysis and review of both raw and secondary quantitative and qualitative data, it was founded that enrollment in the MIOCR Diversion Program is effective in preventing recidivism amongst mentally ill juvenile offenders; though like any other early intervention program there remains questions left unanswered.

Success rates of juvenile diversion programs are backed by expert research and have proven to be effective on the front lines in preventing recidivism in juvenile offenders. Since its implementation in 2016, Solano County's MIOCR Diversion Program has shown it has not only the capability, but also the sustainability as an early intervention program for juvenile offenders. The type of interaction and contact with mentally ill juvenile offenders can provide to be an excellent opportunity for early intervention and avoid formal judicial processing. Though not all juveniles enrolled in the MIOCR Diversion Program avoided recidivism, the program as a whole seemed to accomplish its goals in reducing overall recidivism rates in juvenile offenders. Additionally, the MIOCR Diversion Program successfully ensured front-end mental health interventions and appropriate mental health services are being provided to juvenile offenders in order to meet their needs. It would be difficult not to argue the need for follow-up longitudinal research into the MIOCR Diversion Program as a whole in order to measure its true effectiveness

in reducing recidivism or preventing incarceration in juvenile offenders once they reach adulthood.

Recommendations:

Though the MIOCR Diversion Program has been successful thus far in preventing recidivism in mentally ill juvenile offenders, there are some concerns and general recommendations for changes to the program that if implemented, could potentially ensure this program's successes and address future needs of the program moving forward.

Recommendation One: Increase site visits and implement a system to track progress of juvenile offenders post MIOCR Diversion Program (after they fail out of MIOCR or are deemed unfit for the program)

Implementing a method to track juvenile subjects either kicked out of, or deemed unfit for the MIOCR Diversion Program could be of use to this study for further research. This could potentially ensure there is a control group for future measures of failure or success in the prevention of recidivism in mentally ill juvenile offenders for this program. One suggestion to address this recommendation would be to develop a small team of individuals within the MIOCR Diversion Program unit or Probation Department for that matter, who conduct further research into the lives of these juvenile offenders post MIOCR Diversion Program. A recommendation would be to follow the juveniles through adolescence and into early adulthood up until the age of twenty five years old, conduct on-site visits at their schools, homes (if permitted by parent or guardian) and even their jobs (if permitted). Once all relevant data is collected, this team could then report the findings back on at least a quarterly basis to the MIOCR Diversion Program.

This could provide a better understanding as to what may be occurring in the lives of these juvenile offenders post MIOCR and into early adulthood.

Recommendation Two: Implement a program to conduct early assessment for mental health issues in juveniles

Several staff members associated to the MIOCR Diversion Program expressed further need to develop some type of assessment that would assist in diagnosing potential underlying mental health issues in juveniles at an earlier age than is occurring now. With growing concerns of undiagnosed mental health issues in juveniles, it would only make sense to implement a program for early assessment in juvenile offenders for underlying mental health conditions to ensure their social, mental and cognitive needs are being identified at an earlier age. Early diagnosis of underlying mental health conditions in juveniles has the potential to have a positive effect on juvenile recidivism rates as well given the current successes early intervention programs have had on juvenile offenders.

Recommendation Three: Increased Police and stakeholder participation during afterschool activities

The County of Solano has certainly established an incredible program in the Police Activities League located at the Sullivan Interagency Youth Services Center. The program invests in the surrounding communities youth, ensuring they have a facility to feel empowered and a sense of belonging. Many of the youth vested in this program express the desire for increased law enforcement presence at the center and overall participation within the program whether it be through one on one conversations to something as simple as volunteering at the center. One

recommendation to improve the outlook of this program through the eyes of the youth attending the program would be to have increased law enforcement support from not only Fairfield Police department, but from the surrounding communities who also participated in the MIOCR Diversion Program from 2016-2018. Increased law enforcement presence at the center would almost certainly instill a sense of pride in some of these troubled youth and develop stronger community relations with the law enforcement agencies in Solano County. If this program is truly an investment for the local law enforcement communities, why not invest in it a bit more?

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