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Pregledni članak

ADVANCES IN THE ASSESSMENT AND TREATMENT OF JUVENILE OFFENDERS¹

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SUMMARY

This paper provides an introduction to best practices in the assessment and treatment of juvenile offenders. Many of the guidelines presented in the paper derive from recent theory and research in criminology and psychology. Much of that research has been conducted in western societies, and it remains to be seen to what extent conclusions from that research can generalize beyond those settings. However, clinical experience suggests that many of the principles of best practice do have application across a broad range of cultures. This paper reflects a child welfare/rehabilitation orientation toward the treatment of the juvenile offender. As explained below, current theory and research from psychology and criminology support the position that juvenile justice systems focusing on the identification and amelioration of criminogenic deficits in the youth and their circumstances produce more positive outcomes than other approaches, including those focusing on punitive sanctions. As well, the implications of the child welfare/rehabilitation model for the treatment of the youth are fully consistent with the UNICEF Guiding Principles for Organizations and Individuals Dealing with Child Welfare and the United Nations Convention on the Right of the Child. The paper begins with a discussion of alternative approaches to the treatment of offenders within juvenile justice systems. This is followed by a brief introduction to contemporary theory and research on the causes and correlates of youth crime and the most efficacious approaches for addressing this serious problem. A discussion of best practices in the assessment of juvenile offenders is then presented. This includes an identification of some useful assessment instruments and procedures as well as practical guidelines in the conduct of assessments. The following section presents a discussion of effective strategies for case planning and management, including the identification of evidence-based treatments.

Key words: *juvenile offenders, assessment, instruments and procedures, guidelines*

1. ALTERNATIVE APPROACHES TO THE TREATMENT OF JUVENILE OFFENDERS IN JUVENILE JUSTICE SYSTEMS

Comparing juvenile justice systems across societies reveals considerable variations in philosophy, goals, practices, and attitudes (Winterdyk, 2002). Even within systems we often encounter variety and ambiguity about practices. For example, Canadian provinces, while all governed by the same federal Youth Criminal Justice Act, display some differences in the actual treatment of the offender.

While something of an oversimplification, juve-

nile justice systems can be characterized in terms of a continuum ranging from a child welfare/rehabilitation orientation to a crime control/punitive orientation (Corrado, 1992). The following is an elaboration based on that continuum.

A. Child Welfare/Rehabilitation Model

This model accepts controlling antisocial behaviour in young people as its goal, and the fundamental assumption of the model is that this can be best achieved by enhancing their behavioural and emotional competencies and by addressing deficits in their environment. This model is generally imple-

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mented within a formal justice system, but there may be less emphasis on legal processing and more concern with providing rehabilitative interventions. Legal sanctioning and punishment generally play a smaller role in systems guided by child welfare concerns than those located closer the crime control end of the continuum. The system often reflects a *parens patriae* concept whereby the state reserves a right to assume responsibility for the well-being of the young person.

B. Corporatist Model

This model has been presented by Corrado (1992), Corrado, Turnbull (1992) and Pratt (1989) as a variation on the Child Welfare Model. The model shares with the latter an emphasis on interventions aimed at specific deficits in the youth and his or her environment but departs from the Child Welfare Model by emphasizing the importance of integrating all services for children, whether they originate in the judicial or child welfare systems: "The Corporatist Model emphasizes not the role of police (according to the Crime Control Model), nor the role of lawyers (according to the Justice Model), nor the role of social workers and other helping professions (according to the Welfare Model), but rather the role of all of these groups acting in an interagency structure which efficiently diverts minor offenders, requires less serious property offenders and violent offenders to participate in attendance programs and sentences the few serious offenders to custodial institutions." (Corrado, Turnbull, 1992, 77)

The key to this model, then, is an emphasis on the integration of services for the young person and the diversion of youths from the justice system. The Corporatist Model represents an ideal type of system for those who embrace a child welfare and rehabilitation orientation and who are critical of the fragmented system of youth services seen in many jurisdictions. It is difficult to identify systems representing pure forms of a Corporatist Model, although the systems in Scotland and the Canadian province of Quebec at least approach this ideal.

C. Modified Justice Model

This model combines elements of both the Child Welfare and Justice Models. It reflects a child welfare orientation by recognizing that the control of youth crime depends ultimately on providing young people with the resources to lead a prosocial life style, and that this is best achieved through the

provision of prevention and intervention programs. On the other hand, these rehabilitation efforts are delivered in the context of a legal system with its concerns for legal rights and judicial processing.

There is clearly an inherent tension within this model, and this concerns the relative emphasis placed on the child welfare and judicial processing components. There may also be pressure in this type of model toward the crime control end of the continuum, with its concern for immediate measures to control crime.

Manifestations of this tension may be seen in the American, Canadian, and British juvenile justice systems over the past 10 or 20 years. To illustrate, juvenile offenders in Canada were governed until 1984 by the Juvenile Delinquents Act of 1908. The latter reflected a modified justice orientation but with a strong child welfare component. It was based on a *parens patriae* orientation where the youth was denied basic legal rights and where it was assumed that the court would look after their best interests. There was some use of custodial sanctions for serious crimes, but the general approach was to attempt to intervene to remove whatever factors were contributing to the delinquency.

This act was replaced in 1984 by the Young Offenders Act which, while retaining some aspects of the child welfare and rehabilitation orientations, provided for protection of the legal rights of the youth and introduced judicial processing procedures similar to those of the adult system. Implementation of this act resulted in reductions in the use of rehabilitative interventions and increases in the use of legal sanctions, including probation and custody. This in turn has been supplanted by the Youth Criminal Justice Act (2003) which, while enhancing punitive sanctions for very serious crimes, places emphasis on diversion and rehabilitative services for less serious offenders.

D. Justice Model

The focus in this model shifts from a concern for the needs of the individual offender and toward the criminal act and appropriate legal responses to that act. The principal goals in this case are to insure that the civil rights of the youth are protected, that prescribed legal procedures are observed, and that a disposition appropriate to the crime is achieved.

Juvenile justice systems reflecting this orientation will vary somewhat in terms of legal processing procedures, but the major source of variation probably concerns sanctioning procedures. The

latter generally involves debates about the relative value of individual deterrence, group deterrence, or punishment as the primary purpose of sentencing. Similarly, there is always debate in this type of system over the extent to which diversion, probation, or custody sanctions should be employed. There may be some provision for rehabilitation efforts in this type of system, but, because of the concern for due process, participation is usually voluntary.

E. Crime Control Model

This model shares with the previous model a dependence on formal legal processing procedures. However, while the focus in the Justice Model is on legal rights and procedures, the primary concern in this model is with the use of legal sanctions against offenders to insure protection of society. There is, then, less concern with the individual offender in this model than in any of the others. Feld (1999), Schwartz (1992), and other observers have noted shifts in the direction of this orientation in many communities in the United States. It is also a model that guides the treatment of juveniles in many jurisdictions throughout the world (Winterdyk, 2002).

Both this and the preceding model derive largely from the Classical Theory of Crime. Criminal acts are viewed as willful, representing moral transgressions. The only appropriate response to these acts are criminal sanctions, preferably involving incarceration. While more minor cases might be dealt with through diversion procedures, there is generally little concern in this approach with rehabilitation efforts.

F. Preferred Model

While arguments can be developed for and against all of the models described above, the fundamental assumption underlying this paper is that current theory and research supports a child welfare/rehabilitation orientation as the optimal means for addressing antisocial behaviours in youth. Ideally, this will be delivered in the larger context of the education, mental health, and social service systems (Corporatist Model), but it can be delivered in the context of a Justice Model as long as the primary focus is on addressing deficits and needs in the young person. Note that implementing such a strategy does not run counter to holding the youth accountable for his or her actions. Accountability does not require harsh punishment. It can take the form of close supervision, some restrictions of

privileges, restitution, or other action that does not interfere with rehabilitation goals.

2. CONTRIBUTIONS FROM CONTEMPORARY THEORY AND RESEARCH

We are fortunate that we are now able to draw on a considerable body of theory and research from both criminology and psychology to guide us in our management of youthful offenders. One body of research derives from developmental psychology which is giving us valuable clues regarding the conditions contributing to the appearance of anti-social behaviours in children and adolescents (see Lahey, Moffitt, Caspi, 2003; Rutter, Giller, Hagell, 1998). Also useful are broad, integrative models such as those proposed by Andrews and Bonta (2006), Catalano and Hawkins (1996), and Elliott and Menard (1996). Research from criminology and forensic psychology is important because of guidance regarding factors specifically associated with criminal behaviour and evaluations of alternative strategies (see Guerra, Kim, Boxer, 2008; Krisberg, Howell, 1998; Lipsey, 1995, 2006; Lipsey, Wilson, 1998). The following are discussions of some of the more important conclusions from this work.

A. General Conclusions from the Research and Theory

While there remain unanswered questions about youth crime and areas of controversy continue to exist, it is possible to state some general conclusions from this body of research.

1. Efficacy of Early Prevention Efforts

There is now sample evidence from evaluation research that early prevention efforts, as long as they are carefully targeted, begun early enough, and reflect best practices, can be effective in reducing negative outcomes in childhood and adolescence. The evidence is particularly strong in the case of early compensatory education and head start type programs. The best of these programs can produce positive results regarding antisocial behaviours, school drop-out, and employment success many years after they are delivered (e.g., Schweinhart, Barnes, Weikart, 1993). There is also evidence for the effectiveness of carefully targeted behavioural interventions for children at risk for criminal activity delivered during the early childhood years (Offord et al., 1998; Tremblay, Craig, 1995). For example, a group of Canadian researchers has

shown that a family and school-based intervention programme directed toward boys showing conduct problems during the preschool years can be effective in reducing the likelihood they will continue to develop antisocial behaviours during later childhood and adolescence (Tremblay et al. 1995).

2. Ineffectiveness of Punitive Sanctions

Evaluation research demonstrates conclusively that punitive sanctions such as incarceration, shock incarceration, or boot camps do not have positive effects on reoffending rates (Andrews, Bonta, 2006; Lipsey, 1995; Lipsey, Wilson, 1998). This research shows that under some circumstances, and for some youth, incarceration produces small decreases in reoffending rates. In most cases, however, imprisonment is associated with increased reoffending rates. There are likely a number of reasons for this. For one thing, incarceration of youth is generally not accompanied by meaningful interventions directed toward the deficits placing them at risk for criminal activities. Second, congregating antisocial youth together will generally have the effect increasing the risk level of lower risk youth.

3. Efficacy of appropriate interventions

The reviews and meta-analyses cited above clearly support the conclusion that interventions reflecting best practices and delivered with integrity can be effective in addressing youth crime and reducing the probability of reoffending. Note two important qualifications included in this conclusion. First, the intervention or treatment strategies we use must reflect proven intervention strategies. We will review these elements of best practice below. Second, the interventions based on best practice must be delivered with integrity. In many cases strategies proven effective in other settings do not work because they are not delivered well.

4. Cost effectiveness of interventions

A growing body of sophisticated cost/benefit research has become available and is showing that programs reflecting best practice and empirically shown as effective can be cost effective (Aos et al., 2001). In other words, money spent on these programs can produce significant savings later in reduced criminal activity, improved school and employment performance, better mental health, etc. For example, the Functional Family Therapy programme for addressing problems of parenting and family dynamics yields an average return of \$28.34 for every \$1.00 invested. Aggression Replacement Training, a cognitive programme for addressing

violence issues, yields on average a return of \$45.91 for every \$1.00 spent.

B. Identification of Risk and Need Factors

Contemporary research has also made an important contribution by helping us identify the risk and need factors associated with youthful criminal activity (see Heilbrun, Lee, Cottle, 2005; Lipsey, Derzon, 1998; Loeber, Dishion, 1983). This work is important because it forms the basis for much of the subsequent discussion of best practice.

Risk factors refer to characteristics of the youth or his or her circumstances that place them at risk for antisocial behaviours. *Need factors* refer to the subset of risk factors that can be changed through interventions, and, if changed, reduce the chances of future antisocial behaviours. These are sometimes referred to as dynamic risk factors. To illustrate, a history of conduct disorder constitutes a risk factor; youths exhibiting such a history are at higher risk for criminal behaviour than those who don't. However, this is an historical variable and can't be changed. Antisocial peer associations is another risk factor, but this can be considered a dynamic risk or need factor. We can intervene to reduce these associations, and, if we succeed, will reduce the youth's risk for reoffending (see Andrews, Bonta, 2006; Andrews, Bonta, Hoge, 1990a; Hoge, 1999a for further discussions of these concepts).

Table 1 provides a summary of the major risk/need factors involved in juvenile criminal activity. These are divided into two groups: proximal factors are those having a direct impact on the youth, while the distal factors generally operate indirectly through the proximal factors.

Table 1. Summary of the Major Risk/Need Factors

Major Risk/Need Factors	
Proximal Factors	
<ul style="list-style-type: none"> • Antisocial attitudes, values, and beliefs • Dysfunctional parenting • Dysfunctional behaviour and personality traits • Poor school/vocational achievement • Antisocial peer associations • Substance abuse • Poor use of leisure time 	
Distal Factors	
<ul style="list-style-type: none"> • Criminal/psychiatric problems in family of origin • Family financial problems • Poor accommodations • Negative neighbourhood environments 	

Most research on risk and need factors has been conducted in western societies, and a question can be raised about their generality across cultures. We

do have support from research conducted in western societies that the factors are relevant for both boys and girls and for various cultural groupings within those societies. However, while their generality across geographically diverse cultures remains to be determined, clinical experience would suggest that they do have broad relevance.

The identification of risk and need factors is important because of two evidence-based principles of best practice (Andrews, Bonta, 2006; Andrews, Bonta, Hoge 1990a). The *risk principle of case classification* states that intensive intervention services should be reserved for high risk cases, while lower risk cases should receive less intensive services, or, in the case of youth with very few risk factors, no intervention at all. The *need principle of case classification* states that interventions should target the specific risk and need factors of the youth. In other words, interventions should be individualized and tailored to the youth. These principles will be explored more fully below.

One other concept should be introduced at this point, although there is less research on the issue. *Responsivity factors* refer to characteristics of the youth or his or her circumstances that, while not directly related to his or her criminal activity, should be taken into account in case planning. Examples include reading ability, motivation to change, and emotional maturity. We can also include here strength or protective factors, such as the availability of a cooperative parent or an interest in sport. The *responsivity principle of case classification* states that the choice of interventions should reflect these factors. For example, the youth's reading ability may not have an effect on their antisocial behaviour, but it would have to be taken into account in selecting a treatment program requiring the comprehension of written materials.

C. Identification of Evidence-Based Best Practices and Evidence-Based Programmes

Evidence-based best practices refer to intervention strategies shown in evaluation research to be associated with positive outcomes, including reduced reoffending rates. For example, research has demonstrated that interventions targeting concrete behavioural and attitudinal problems are more effective than those that focus on vaguely defined personality problems. Information about these best practices provide us with general guidance in developing interventions. *Evidence-based*

programmes, on the other hand, are specific treatment programmes shown by research to be effective in addressing the needs of the juvenile offender. An example is Aggression Replacement Training. Reviews and meta-analyses of both the evidence-based practice and evidence-based programme literatures are available from Andrews, Bonta, 2006; Guerra, Leaf, 2008; Krisberg, Howell, 1998; Lipsey, 1995, 2006; Lipsey, Wilson, 1998. These principles will be introduced in our discussion of assessment and case management issues.

3. RECOMMENDED ASSESSMENT PRACTICES

The careful assessment of the youth, including their risk, need, and responsivity characteristics, is important, and it is unfortunate that in so many juvenile justice systems there are either no assessment procedures at all or, if they exist, they are based on very unsystematic clinical procedures. In fact, in most cases assessments are conducted through brief, informal interviews with the youth. However, the research cited above shows clearly that programs employing structured and standardized assessment procedures are more effective than those that do not. More specifically, the research shows that effective programs employ structured assessments of risk, need, and responsivity. This is an important evidence-based principle of best practice.

A. Purposes of Assessment

Assessment involves collecting information about youth and his or her circumstances, whether through interviews, administration of formal tools, or reviews of file information. One purpose of this activity is to form a *risk assessment*. That is, we want to evaluate the likelihood that the youth will continue to engage in some sort of antisocial behaviour. Evaluation of the youth's level of risk is important because it can have a bearing on the level of supervision security we might impose on the youth and because, consistent with the risk principle, we should adjust the intensity of our interventions to level of risk. One problem we encounter is that many risk assessments are based on informal procedures and on a narrow range of risk factors (Hoge, 1999a, Hoge, Andrews, 1996; Wiebusch, Baird, Krisbert, Onk, 1995). We will see below that considerable progress has been made in developing more valid risk assessment tools.

The identification of needs relevant to the criminal activity constitutes another purpose of assess-

ment, and here we talk about *needs assessment*. Not only do we want to identify the factors placing the youth at risk for criminal activity, but we also want to identify those risk factors that we can address to reduce the propensity to engage in antisocial behaviours. These were identified earlier in Table 1. We will describe some risk/needs instruments below that are designed to provide a broad assessment of criminogenic risk and need factors.

B. Forms of Assessment Procedures and Instruments

Structured or standardized assessment procedures or instruments assume a wide variety of forms, but in general they employ structured format, scoring, and interpretation procedures. The Wechsler Intelligence Scale for Children and the Minnesota Multiphasic Personality Inventory – Adolescent are two standardized instruments many will be familiar with.

A variety of types of standardized tests and procedures are of potential value in assessing offenders. These include personality tests, behavioural checklists and rating scales, attitude measures, structured interview schedules, and tests measures of cognitive and academic competencies (see Hoge, 1999b; Hoge, Andrews, 1996; Sattler, Hoge, 2006). Some of these measures require special qualifications and expertise and are normally used only by psychologists or other mental health professionals. These are appropriate where the youth exhibits evidence of serious emotional or behavioural disorder and where a full mental health assessment is recommended (see appendix A for an example of a psychological assessment battery).

Other measures not requiring advanced mental health training can be useful in assessing the youthful offender. Measures of behavioural and emotional disorders such as the Child Behavior Checklist (Achenbach, Edelbrock, 1983) and the Massachusetts Youth Screening Instrument (Grisso, Barnum, 2003) and measures of antisocial attitudes such as the How I Think Questionnaire (Barriga et al., 2001) are examples of measures that can be useful in gaining insight into the functioning of the youth. These do require some training in administration and scoring but do not require an advanced degree.

C. Comprehensive Risk/Needs Measures

Standardized risk/needs instruments constitute another category of assessment tools, ones particularly useful in juvenile justice systems. These are

designed to evaluate the youth's risk for reoffending and to identify his or her needs (dynamic risk factors) to aid in case planning. A number of comprehensive risk/needs measures have become available over the past few years (see Borum, Verhaagen, 2006; Grisso, Vincent, Seagrave, 2005). These represent advances over the earlier more primitive risk measures because they are based on a wider range of risk variables and provide a focus on needs as well as risks. Some of these are actuarial instruments yielding empirically based estimates of risk and need, while others are standardized clinical instruments. All of these help synthesize information about the youth and can help guide decisions about appropriate community or residential placements, level of supervision, and appropriate treatments. These are designed for use by a range of service providers, including mental health professionals, probation and parole officers, and child care workers. All do require some specialized training in administering, scoring, and interpreting the measures. Two of these measures will be described as illustrations.

The Youth Level of Service/Case Management Inventory (YLS/CMI; Hoge, 2005; Hoge, Andrews, 2002) is a standardized actuarial measure providing estimates of risk for reoffending and a framework for developing case plans based on a risk/needs assessment. The risk/needs section of the inventory contains 42 items reflecting characteristics of the youth (e.g., "truancy", "chronic drug use") or his or her circumstances (e.g., "parent provides inadequate supervision"). The section yields an overall risk/needs score and scores for the following domains: Prior and Current Offences/Dispositions; Family Circumstances/Parenting, Education/Employment, Peer Relations, Substance Abuse, Leisure/Recreation, Personality/Behaviour, and Attitudes/Orientation. An opportunity is also provided to indicate areas of strength. Subsequent sections provide formats for developing a case plan based on the risk/needs assessment. Reliability and validity research has been reported for the measure. An application of the measure will be described later in the paper.

The Estimate of Risk of Adolescent Sexual Offence Recidivism-2 (ERASOR; Worling, Curwen, 2001) is an example of a structured clinical assessment tool focusing on youthful sex offenders. It is designed to evaluate risk for sexual reoffending on the part of individuals who have previously committed a sexual assault and to offer guidance in the development of treatment strategies. Twenty five risk items are represented, including "deviant sexual

interest,” and “antisocial interpersonal orientation.” The assessor categorizes the level of risk as low, moderate, or high based on the total number of items checked and the assessor’s judgements about the pattern of risk observed. Psychometric research has been reported for the scale.

Other instruments in this category include the Early Assessment of Risk List for Boys (EARL–20B; Augimeri, Koegl, Webster, Levene, 2001), Structured Assessment of Violence Risk in Youth (SAVRY; Bartel, Borum, Forth, 2005), and the Washington State Juvenile Court Assessment (WSJCA; Barnoski, 2004). Borum and Verhaagen, (2006) and Grisso et al, (2005) have provided extended discussions of these measures.

D. Some Practical Considerations in Conducting Assessments

While assessments of the youth are critical to the process of dealing with the youthful offender, there are a number of cautions to observe. First, it is important to employ the best standardized measures of risk, need, and responsivity available. This involves keeping current with the literature. Second, and related, care must be taken to insure that individuals administering, scoring and interpreting the measures have the required competencies and expertise. We have seen that some of the tools require advanced training in a mental health field. Others do not, but they do require specialized training in using the procedures.

Insuring that assessment instruments and procedures are appropriate to the purpose of the assessment is also important. An instrument designed to estimate risk of general offending may not be useful in evaluating risk for violent offending. The appropriateness of the instrument for the youth being assessed should also be considered. A psychological test proven valid for children ages 6 to 10 may not be appropriate for an adolescent. Assuming that measures that work for adults will also apply to children is a common error. Similarly, instruments appropriate for one cultural group may not be of value for those from another group. This has to be established through research.

The sources of information on which the assessment is based must also be evaluated. An interview with the youth is nearly always required, and the more thorough and probing that interview the better. The following guides for conducting the interview are derived from Gratus (1988), Miller and Rollnick (2002), and Sattler and Hoge (2006):

- Establish rapport: Treating the youth with respect and expressing empathy will help in creating a positive relationship.
- Listen carefully: Eliciting good information from the client depends on listening carefully to what he or she has to say.
- Remain objective: While the interviewer should maintain a positive attitude and treat the youth’s responses in a respectful manner, this does not necessarily mean endorsing the youth’s responses.
- Facilitate communication: Insure that questions and responses are clearly understood by the youth.
- Maintain control: The youth should be treated with consideration during the interview but not allowed to direct or divert the questioning.
- Avoid argumentation: Engaging the youth in lengthy arguments and confronting the youth in a hostile manner are usually counterproductive.

Interviews with collateral sources such as parents, teachers, or other professionals will be desirable as well, is the use of information from school, police, probation or other type of file information. In general, the more information collected the better, although you will often be challenged with the necessity of resolving contradictory data.

Ethical and legal issues are always involved in conducting assessments in juvenile justice settings (see Borum and Verjaagen, 2006; Grisso et al., 2005; Hoge, 2008; Hoge, Andrews, 1996). Some guidelines will be imposed by professional associations within the jurisdiction. For example, the conduct of psychological assessments in the United States is governed by procedures of the American Psychological Association and state psychological associations. There will also be legal considerations. For example, the use of risk/needs assessments in adjudication and disposition decisions can be very problematic. Generally speaking, these assessments are most relevant to decisions about programming once a disposition has been imposed by the court.

4. SOME GUIDES FOR CASE PLANNING AND PROGRAMMING

This section will present some guidelines for case planning and programming with juvenile offenders. Some of the guidance is based on the evidence-based principles of best practice and evidence-based programmes cited above. In other cases the guidelines will be based on clinical experience.

A. Evidence-Based Best Practices

Evidence-based practices or strategies identified in the reviews and meta-analyses cited above will be discussed in this section. One of the principles of best practice has already been discussed: Effective programmes utilize standardized assessments of risk, need, and responsivity. Other evidence-based principles are as follows:

1. Observe the risk principle

Effective programs provide intensive services for high risk cases and less intensive services for lower risk cases. For example, in the case of probation close and intensive monitoring should be reserved for those at greatest risk for continuing antisocial behaviour. Similarly, lengthy and expensive treatment programmes should involve those with high levels of need. The principle is important for a number of reasons. First, we have limited resources and should not waste them on youth who do not really require the services. Second, overinvolvement of lower risk youth in the system may have negative consequences (see Dishion, McCord, Poulin, 1999; Dodge, Dishion, Lansford, 2006). This is illustrated where low risk youth incarcerated with high risk youth begin to show increased levels of risk.

2. Observe the need principle

Effective programs target the specific needs of the youth; that is, they focus on eliminating or ameliorating those factors placing the youth at risk for antisocial behaviour. If the youth's delinquency relates to inadequate parenting and associations with antisocial peers, then interventions should focus on those specific areas of need. There are two considerations underlying this principle. First, by observing the principle we make maximum use of our limited resources; we are going to target them where they are most needed. Second, research discussed in the reviews and meta-analyses cited above demonstrates that interventions have their greatest impact where they focus on the needs of the individual. Unfortunately, many juvenile justice systems are rigid in the programming and do not permit the needed levels of individualization.

3. Observe the responsivity principle

Effective programs take account of responsivity factors in case planning; that is, characteristics or circumstances of the youth not directly related to their criminal activity are taken into account in planning interventions. For example, there is little point in placing a youth with limited read-

ing skills in a cognitive behaviour modification programme requiring the reading of complicated material. Another illustration would involve a girl whose criminal activities are clearly associated with her associations with an antisocial group of youth and drug abuse. However, she may also be suffering from depression and anxiety associated with past abuse, and those conditions would have to be taken into account in planning an intervention.

We have also included strength or protective considerations as responsivity factors, and it is important to consider these in case planning. For example, if a cooperative parent is available, they should certainly be involved in the intervention. Similarly, a risk related to poor use of leisure time could be easily addressed where the youth has an interest in a particular in a sport.

4. Utilize community-based interventions

Research demonstrates that delivering interventions to the offender in his or her community setting is more effective than intervening in institutional settings. This result should not be surprising. The young person's risk for criminal activities relates to conditions in their home, neighbourhood, and school, and efforts to address those conditions are best addressed in those settings. We will see below that wrap-around programmes such as Multisystemic Family Therapy are particularly effective, and one reason is because they are delivered in the youth's environment. The new Canadian law governing youthful offenders (Youth Criminal Justice Act) places considerable emphasis on diverting youth out of the criminal justice system and delivering interventions in community settings, and this is fully consistent with this particular principle. One caution though: the success of these efforts will depend on the availability of quality services in the community.

5. Addressing needs in the institutional setting

Research demonstrates that, where institutionalization is necessary, success depends on providing interventions that will address the needs of the youth. Simply incarcerating youth without any efforts to address their behavioural, emotional, social, or educational needs does not reduce reoffending rates. In fact, it often has the opposite effect of increasing their anger and sense of alienation.

5. Treatments are multimodal

Effective programs address the entire range of interacting problems presented by the client. Youth do not come to us with isolated issues. Instead they

often present to us a range of connected risk and need factors, and interventions that address the set of needs are more effective than those that have a narrow focus. This is why, for example, placing a youth in a substance abuse program without acknowledging that the problem is linked with supervision problems in their home, an association with a substance abusing friend, and frustration with school failure will not be very successful. The success of the wrap-around programmes can be explained by their goal of addressing the totality of the youth's situation.

6. Structured programmes with concrete behavioural and attitudinal goals are used

The efficacy of juvenile offender interventions that are highly structured and directed toward altering specific behavioural and attitudinal deficits in the youth is strongly supported by research. The most effective goals entail social problem solving and decision skills, moral reasoning, and the development of prosocial attitudes, values, and beliefs. Programmes based on behaviour modification, cognitive-behavioural, and skill training procedures are particularly effective. Additional information about effective programming will be presented below.

7. After-care services are provided following institutional treatment

Effective programmes provide continuing services to the youth after release from custody or other institutional settings. This is essential to insure that any gains made in the institution transfer to the youth's home, community, and school environment. Release planning should be an important part of any residential program.

8. Programme delivery and impact are carefully monitored

Effective programs have in place formal procedures for describing and evaluating service delivery (process evaluation) and programme impact (summative evaluation). An expanding body of research demonstrates that the effectiveness of our interventions depends very directly on the care with which programmes are delivered. Ideally, evaluation efforts will be done internally and externally. The importance of independent external evaluations is particularly important.

B. Clinically-Based Best Practices

We can identify other principles of best practice which, while not empirically derived, have considerable support from clinical experience. These will

be listed here without additional comment:

- Individuals responsible for the offender are selected with care and provided adequate training and support.
- Agency has clear guidelines regarding the treatment of clients.
- Treatment goals are realistic and attainable.
- Staff take care to insure that they represent prosocial models.

One other potential guideline that has received relatively little attention concerns the use of strengths or protective factors within the youth or his or her environment in case planning. It is the risk factors that have received the most attention, but it is also very important to identify and utilize strengths in the youth. For example, the young person may confront problems in the home environment and be associating with a negative peer group, but the fact that they are bright and actually like school can be leveraged to help address their risk factors.

C. Evidence-Based Programmes

A growing body of research is focusing on the identification of effective programmes for the juvenile offender (Andrews, Bonta, 2006; Greenwood, 2005; Guerra et al., 2008; Krisberg, Howell, 1998). Those identified as effective generally reflect the principles of best practice identified above. More specifically, they tend to be multimodal, delivered in community setting, take account of the risk, need, and responsivity characteristics of the youth, and depend on behavioural and cognitive-behavioural techniques.

The following are some structured programmes for which there is evidence of effectiveness:

- Functional Family Therapy
- Multisystemic Family Therapy
- Multidimensional Treatment Foster Care
- Aggression Replacement Therapy
- Coping Course
- Time to Think
- Viewpoints

However, it must be acknowledged that these programmes have not been evaluated for all situations and all types of youth. For example, we are still somewhat limited in our understanding of effective programming for female juvenile offenders (see Hoge, Robertson, 2008). As well, there is a dearth of data on programmes for delivery in custodial settings.

Some of the programmes identified above are designed for delivery in the community setting

and are multimodal in focus. *Multisystemic Family Therapy* (Henggeler, Bordoin, 1990) is one example. This family-based intervention provides services to the youth and his or her parents in the family, neighbourhood, and school settings. There is an effort to address the entire range of interacting problems presented by the youth. Other programmes identified in the table are more narrow in focus, generally addressing specific behavioural or attitudinal issues. For example, *Viewpoints* (Guerra, Slaby, 1990) is a cognitive mediation training program designed to improve the youth's social problem solving skills and develop more positive beliefs regarding aggression. The programme can be delivered in a community or institutional setting.

The research cited above also informs us about the types of programming that generally does not work with juvenile offenders:

- Client centred/ non-directive therapies
- Psychoanalytic approaches
- Most drug education programmes
- Self-Help programmes
- Shaming strategies
- Enhancing self-esteem strategies
- Purely punitive strategies

There may be individual circumstances where these approaches are appropriate, but generally speaking, they are neither effective nor economic in juvenile justice systems.

D. Case Planning and Implementation

Effective case planning depends on the careful matching of characteristics of the young person and his or her circumstances with appropriate programmes. As we have seen, assessment of risk, need, and responsivity are critical to this planning process. The recommended procedure is as follows:

- Assess risk, need, and responsivity in the client.
- Determine the level of service appropriate to reflect the risk level of the youth.
- Identify goals of the intervention to reflect the needs identified.
- Identify barriers to achieving those goals.
- Identify strengths and incentives that will help in achieving the goals.
- Select interventions most likely to achieve the goals.

Appendix B illustrates an application of this procedure.

We now have some knowledge of best practices and information about the kinds of programming

that works best for juvenile offenders. However, we will still encounter practical issues in implementing effective programmes. Guerra and Leaf (2008) have identified political, economic, and practical barriers to implementing effective treatment programmes.

1. Political Barriers

Efforts to implement rehabilitative strategies for youth often run into pressure from some politicians and members of the public who advocate for tough-on-crime policies. This is often associated with demands for use of incarceration and other forms of punitive sanctions, measures that run counter to a rehabilitation approach. The pressure is sometimes based on an exaggerated fear of crime and from a lack of understanding of the most effective ways of addressing youth crime. However, these fears are real and the only solution is to try to address the misapprehensions through education.

The political barriers may exist internally as well. Many employees in juvenile justice system do not share an enthusiasm for a rehabilitative approach and may continue to advocate for harsh punitive measures. This can only be addressed through improved selection procedures and efforts to educate staff in the conclusions from recent research.

2. Economic Barriers

Economic issues become involved because many of the programmes effective in addressing the needs of the youth are expensive. Programmes such as Multisystemic Family Therapy are costly in terms of staffing and other resources. Similarly, implementing an intensive probation programme accompanied by interventions to address the youth's educational and emotional needs may require considerable resources. These costs will be the basis for resistance to the efforts from politicians and policy makers. There may also be economic barriers associated with funding policies. For example, funding for treatment efforts may be designated only for institutional placements, discouraging the use of more effective community-based placements.

Two responses to these economic barriers are appropriate. First, many of the community-based programmes, even the more costly ones, are often less expensive than incarceration. Second, many of the programmes are cost effective. In other words, if the interventions are implemented effectively, the costs will be recovered through future reductions in offending rates, lower school dropout rates, lesser demands on adult mental health facilities and other such outcomes. Fortunately, we are beginning to

obtain good information from cost/benefit analyses that provide actual figures on the economic returns of the programmes (see Aos et al., 2001; Tyler, Ziedenberg, Lokke, 2006).

3. Practical Barriers

There are a number of practical barriers to implementing effective programmes. First, the range of options may be limited by economic and resource considerations. We all have limited resources, and sometimes difficult choices must be made. The only response is to observe, as closely as possible, the principles of best practice. This also applies to those cases where the juvenile justice system contracts out services: efforts must be made to monitor the quality of services being delivered.

Another practical obstacle we encounter derives from the fragmented nature of many human service systems. Our youth often exhibit special needs in many areas and may have contacts outside the juvenile justice system, including special services in the schools, treatment in the mental health system, and services from child protection and other such service agencies. All of these systems must work together to effectively address the needs of the youth, but in too many cases barriers exist to that cooperation.

E. Examples of Integrated Programmes

The following are brief descriptions of some community and residential-based programmes that attempt to incorporate a variety of features of best practice in addressing the needs of specific communities.

A Different Street is a residential programme created by John Howard Society of Ottawa and Eastern Ontario Youth Justice Services. The programme is designed for young men released from custody who would normally be homeless, a group at particularly high risk for reoffending. The goal is to ease their transition to the community and address their behavioural, emotional, social, educational, and vocational needs. The programme is located in an apartment building housing 24 clients. The professional staff of the facility is responsible for providing individual counseling and arranging referrals to community services. Considerable emphasis is placed on developing life skills and vocational competencies. Appendix C provides an example of the type of case planning utilized.

Boys Town USA, Staff-Secure Detention Program for Female Offenders is a somewhat unusual program since it is designed for high risk/need girls detained prior to trial. Although girls remain in the

program for relatively short periods of time, an intensive assessment is conducted at intake, and the plan developed on the basis of that assessment is designed to follow the client through subsequent placements. The plan encompasses both short and long term goals. The majority of the girls accepted for the program are members of minority groups, come from high risk family environments, and exhibit a range of academic, social, behavioural, and emotional needs.

The staff of the program is predominantly female, and all are provided intensive training in gender-specific programming. Individual and group treatment focuses on addressing mental health and behavioural issues as well as developing life skills counselling. Treatments involve families wherever possible. The ultimate goal is to address deficits in the young woman and assisting her in reintegrating into society.

The Ottawa Police Service Diversion Programme, managed by the Boys and Girls Club of Ottawa and Ottawa Police Services, is designed to satisfy a provision of the Canadian Youth Criminal Justice Act requiring the diversion from the formal police and judicial system of youth committing relatively minor crimes. The initial referral is made by the police officer with initial contact with the youth and then an assessment of eligibility for the programme is made by programme staff. The latter involves an assessment of risk and needs of the youth. In many cases no further action is recommended beyond a warning, but in the case of youth exhibiting significant areas of risk or need, referrals are made to community agencies providing appropriate interventions. This is a prevention programme designed to address risks and needs before they lead to more serious antisocial behaviours.

The Sexual Abuse: Family Education and Treatment Programme was developed at the Thistletown Regional Centre for Children and Adolescents in Toronto, Ontario. This specialized community-based programme is directed toward children and adolescents with sexual behaviour problems, including those convicted of sexual offences. The treatment is based on individual, peer group, and family counseling, with therapeutic techniques based on cognitive-behavioural strategies. Emphasis is placed on altering dysfunctional cognitions and behaviours. The programme reflects the importance of beginning treatment of this condition early in development and the involvement of the family.

Examples of other exemplary programmes can be found in Howell (2003) and Loeber, Farrington (1998).

5. SOME FINAL WORDS

This paper has emphasized the efficacy of a child welfare/rehabilitation approach to the treatment of youth in juvenile justice systems. I believe that this approach is supported by contemporary theory and research, is consistent with guidelines presented by the United Nations and other organizations concerned with youth, and reflects a humane concern for young people. However, it is important to acknowledge that this position represents only one

of a number of positions regarding the appropriate treatment of youth in conflict with the law. Whatever position is favoured, the high, personal, social, and financial costs associated with youth crime make it absolutely imperative that we recognize this as an issue of paramount concern and adopt a willingness to commit whatever resources are needed to address the problem. The potential profits from this commitment are immense.

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APPENDIX A**EXAMPLE OF A COMPREHENSIVE PSYCHOLOGICAL ASSESSMENT BATTERY****Review of file information****Interviews**

- Semi-structured interview with youth
- Semi-structured interview with mother
- Telephone interview with school principal

Measure of cognitive functioning

- Weschler Intelligence Scale for Children

Behavioural adjustment measure

- Child Behavior Checklist (Parent)

Personality test

- Basic Personality Inventory

Attitudinal measures

- How I Think Questionnaire
- Criminal Sentiments Scale

Broad-based risk/needs measure

- Youth Level of Service/Case Management Inventory

APPENDIX B

EXAMPLE OF CASE PLAN

PREDISPOSITION REPORT

Date: xx/xx/2006
Name: Michael
Date of Birth: xx/xx/xxx
Officer: xxx

CASE SUMMARY

SOURCES OF INFORMATION

This report is based on information from the following sources: review of file information (prior probation reports), interview with the mother, telephone interview with school principal, telephone interview with juvenile police officer, and a two and one-half hour interview with Michael.

BACKGROUND

Michael is a 17-year-old youth convicted of two Felony and one Misdemeanor Assaults. He has a lengthy criminal history and has served periods of probation and custody. He has been held in detention since his arrest. As documented below, there are significant family problems in this case and associations with antisocial gang members.

There have been no disciplinary concerns during the current period of detention, and Michael seems to have adjusted well to this confinement. He presented as friendly and cooperative during the interview.

Prior and Current Offences/Dispositions

Michael has been convicted of two Felony and one Misdemeanor Assaults. The assaults relate to two incidents where he was part of a group of four to five youths who forced themselves into homes and assaulted the occupants. Accused and victims are known to be involved in the drug trade in a small way. Michael neither admitted nor denied the offences.

Michael's criminal history began at 12 years of age. He has been convicted of assault (x7), robbery, burglary, and disorderly conduct (x4). Most of the crimes have been in association with a loosely

organized gang. There is no evidence that any of the assaults produced significant physical injuries. He claims that most of the assaults have resulted from efforts to protect family or friends.

Michael has received four probation and one secure custody (8 months) dispositions and has been violated three times for failure to observe court orders.

Family Circumstances/Parenting

Michael lives with his mother, three younger sisters, and two younger brothers. Although dysfunctional in many respects, the family members are close to one another, and Michael seems to have a very protective attitude toward his siblings. There has been no contact with the biological father for some years, and there are some indications that Michael experiencing some psychological effects of his perception that the father deserted the family.

The mother is on probation for convictions for welfare fraud and possession of cocaine. She has a minor criminal history and a history of drug and alcohol abuse, although she has apparently been abstinent for several months. The two younger brothers have minor criminal histories and the biological father had served some time in prison. The family has been mainly supported through social assistance and has moved often because of evictions.

Although Michael and his mother appear to care for each other, the mother has provided very inadequate parenting. Although she does try to set some rules, she rarely follows through consistently in enforcement. Her primary form of discipline is to yell at the kids; and their usual response is to ignore her and do what they please. On the other hand, the mother is committed to her children and is motivated to address family problems.

Special note should be made of the strong and cohesive bond that exists among the mother and siblings. This can be considered a potential strength factor in this case.

Education/Employment

Michael's academic performance has generally been rated as poor to adequate. School personnel have usually felt that he has performed significantly below his capacity. There are no indications of attention span problems or learning disabilities. He is able to stay on task and perform well when he chooses or when the environment is structured and supportive. He was frequently truant when enrolled in school.

While Michael has presented no serious problems in the classroom setting, his relations with other students in other school settings have been contradictory. On the one hand he is capable of exhibiting good social skills and relating easily to others, while on the other hand he has been involved in some serious physical confrontations with some students. He claims these fights have been justified to protect his "honor" and that of his family. He has been recently expelled because of assaultive behaviour (0 tolerance policy). Since his expulsion he has been urged to seek either full or part-time employment but has shown no interest to date.

Peer Relations

Most of Michael's friends are three to four years older and are members of a loose-knit gang. Most of his friends and acquaintances have a criminal history. His most recent convictions resulted from actions carried out with this gang. He has virtually no positive associations. He claims he is not seriously involved with any girls at the present time.

Substance Abuse

Michael denies any problems with drugs or alcohol. Drug screens have consistently come back negative. He does admit to using marijuana on occasion. There are suspicions that he may be dealing drugs, but there is no evidence to support this.

Leisure/Recreation

Michael is not involved in any positive organized activities. Mostly he plays basketball with his friends or just hangs out with them. The family has limited funds and this has probably hindered efforts to involve him in organized sports or hobbies.

Michael expresses some interest in sports, motor cycles, and photography but has not acted on those interests.

Personality/Behaviour

Michael has a history of verbal and physical assaults against youths. There are indications of poor frustration tolerance and the absence of skills for dealing maturely with perceived insults to himself and his family. He has shown little evidence of sympathy for his victims (feeling they have generally deserved what they got). On the other hand, Michael can behave in a pleasant manner and adults generally feel some sympathy for his condition and a willingness to help him deal with his problems. The latter could be considered a potential strength.

Attitudes/Orientation

Michael expresses a lack of respect for the police and judicial system. He feels that the system is biased against poor people. He feels that his assault convictions simply represented acts where he was defending the honour of his family or himself. While some of these attitudes and feelings may be justified, Michael must learn to respond to these situations with non-violent strategies. There is no evidence that he is incapable of feeling empathy; witness his attitude toward family members.

Michael is not actively seeking help, but he has generally seemed willing to participate in court directed programming. He has actually responded well to some previous intervention efforts.

YOUTH LEVEL OF SERVICE/CASE MANAGEMENT SUMMARY

Michael obtained a total score of 31 on the Youth Level of Service/Case Management Inventory (YLS/CMI), placing him in the High Risk category. He exhibits high needs with respect to: Family Circumstances/Parenting, Education/Employment, Peer Relations, Leisure/Recreation, and Attitudes Orientation. He exhibits moderate needs regarding Substance Abuse and Personality/Behaviour. Strengths are shown regarding Family Circumstances and Personality.

SUPERVISION PLAN

The Supervision Plan is based on the assessment of Michael's risk and need factors. It is based on a sentence of Intensive Supervised Probation with the condition of a custody sentence if the conditions of

the Probation Order are not observed. Condition: attend and successfully complete adult/junior day treatment programme.

Goal 1

- Address anger management issues

Barriers

- Deep-seated anger over father abandonment & discrimination issues
- Poor insight
- Peers who support aggression

Strengths/incentives

- Family supports for addressing issue
- Michael seems to be tiring of conflicts

Means of achievement

- Attend individual counselling sessions in day program
- Complete anger management program in day program

Goal 2

- Address peer relations and leisure/recreation issues

Barriers

- Peer associations are important to him
- Little opportunity to engage in leisure activities

Strengths/incentives

- Some members of group moving on
- Michael is beginning to recognize costs with current peer associations
- Has some interests: mechanics, photography

Means of achievement

- Continued attendance at day treatment program
- Enrol in motor cycle mechanics and photography programs in program
- Join program basketball league

Goal 3

- Improve home situation/parenting

Barriers

- Financial problems in home
- Mother has history of drug abuse
- Family somewhat isolated

Strengths/incentives

- Mother seems generally motivated to address problems
- Mother has been abstinent for 3 months and making good progress in treatment
- Family seems to have stabilized recently

Means of Achievement

- Mother will continue to attend drug treatment program
- Mother and children will attend family service agency counseling program

OTHER CONDITIONS

- Submit weekend plans to probation officer or program coordinator on Friday
- Observe all curfew's
- Attend program every week day unless formally excused

Case plan to be reviewed in three months.

APPENDIX C

EXAMPLE OF CASE PLAN FROM A DIFFERENT STREET PROGRAMME

Case Management Review Plan

The information presented in this example is based on a review of case progress after three months.

Name: Samuel

Date of Admission: July 8, 2003

Client's age: 17 years

BACKGROUND

Criminal Record

Current convictions/sentence

Assault and breach x2

Mischief, breach x2

Breach of undertaking

Uttering death threats

Eighteen months Secure Custody followed by 6 months probation

Past convictions/sentences

Impaired driving, fail to remain at scene of accident and breach - 57 days pre-trial custody, 3 months open custody, 18 months probation.

Possession of controlled substance, possession of stolen vehicle x2, breaches – 4 weeks open custody.

Assault x2, mischief – conditional discharge.

2000 - Probation for assault x2 and mischief

YLS/CMI Risk/Needs Assessment

Initial YLS/CMI Total Score Level – 29 – High Risk

3-month update YLS/CMI Total Score Level – 27 – High Risk

Domain Scores

Criminal History - High

Family/Parenting – Moderate

Education/Employment – Moderate

Peers – High

Alcohol/Drugs – High

Leisure/Recreation – Moderate

Personality/Behaviour - High

Attitudes/Orientation – Moderate

Other Assessments

Other assessments completed during initial intake indicated significant problems relating to procriminal attitudes and substance abuse.

CASE SUMMARY EXPLANATION

The attached form is a *Case Summary* for a four-week period. **Overarching Goals** reflect the goals identified in the basis of the intake and review assessments and indicate what the treatment team plans to accomplish prior to the youth's release. The primary objective is to develop and implement interventions that will decrease the youths' propensity for recidivism, and promote the acquisition of self sufficiency skills in preparation for living independently. **Intermediary goals** (Means of Achievement) identify how we intend accomplish the overarching goals. These interventions are implemented until success is achieved or when all possible interventions to gain change have been tried but we are unable to achieve a higher level of success. These intermediary goals are modified as we identify barriers to success and when progress is made an intervention area.

CASE SUMMARY

1. Overarching Goals

1. Diminish *substance abuse*
2. Improve *anger management and impulse control skills*
3. Diminish *antisocial attitudes and beliefs*
4. Increase *prosocial structured time*
5. Improve *educational performance*
6. Increase self sufficiency

2. Previous Intermediary Goals (Met [M], Partially Met [PM], Not Met [NM])

1. Enroll and stabilize in school program
 - i) enrol in remedial vocational education program - **M**
 - ii) assist Samuel in obtaining necessary school supplies - **M**
 - iii) contact teacher, Mr. Omeara and determine if he can assist in motivating Samuel to increase attendance- **M**
 - iv) determine if there is value to incentive program- **NM**
2. Increase ability to anticipate high risk triggers and plan to avoid them

- i) practice self management plans- **M**
 - ii) complete daily activity sheets the day prior to assist in structuring day- **M**
 - iii)enroll in Alternatives to Aggression group - **M**
 - iv) complete exercises that identify high risk situations, risky thinking and reframed thinking-**M**
3. Increase ability to cope with reduction in alcohol use
 - i) use coping skills exercises from Structured Relapse Prevention (SRP)- **PM**
 - ii) widen support network by encouraging attendance at NA- **PM**
 4. Increase ability to cope with stress and anger
 - i) teach imagery techniques - **PM**
 - ii) teach deep breathing techniques- **PM**
 5. Increase budgeting skills
 - i) use delay of gratification by holding money for him-**PM**
 6. Increase understanding of thoughts, feelings, behaviour interaction, as well as procriminal beliefs
 - i) complete Cognitive Self Change program- **postponed**
3. Barriers to Intermediary Goals
Continued rigid and distorted thinking, although some progress made in self management skills; poor motivation to address substance abuse issues; continued contact with gang members outside of the residence.
 4. Advances in Treatment
Doing relatively well in the school program; some progress in developing case management skills; positive visit from mother; early indications that is beginning to recognize harm he is causing himself with continued drug and alcohol use.
 5. Revised Intermediary Goals
 1. Continue attending vocational education program
 - i) explore options around apprenticeship program for mechanics
 - ii) introduce value to incentive program
 2. Increase ability to anticipate high risk anger/aggression triggers avoid them
 - i) practice self management plans
 - ii) complete daily activity sheets the day prior to assist in structuring day
 - iii)complete exercises that identify high risk situations, risky thinking and reframed thinking
 3. Increase ability to cope with reduction in alcohol use
 - i) use coping skills exercises from SRP
 - ii) widen support network by encouraging attendance at Narcotics Anonymous NA
 - iii)provide prosocial alternatives to boredom as incentive to reduce alcohol use (e.g., participate in athletic equipment repair program)
 4. Increase Samuel's ability to cope with stress and anger
 - i) teach imagery techniques
 - ii) teach deep breathing techniques
 - iii)teach muscle relaxation techniques
 5. Increase budgeting skills
 - i) use delay of gratification by holding money for him
 - ii) complete budget plan to distinguish wants verses needs and to prioritize costs per month
 6. Increase understanding of thoughts, feelings, behavioural interaction, as well as procriminal beliefs
 - i) challenge distorted thought patterns when used in daily inventory sheets
 - ii) explore benefits and costs of distorted beliefs specific to high risk situation
 - iii)commence Cognitive Self Change

NOVINE U PROCJENI I TRETMANU MALOLJETNIH POČINITELJA KAZNENIH DJELA

SAŽETAK

Rad predstavlja prikaz učinkovite prakse u procjenjivanju i tretmanu maloljetnih počinitelja kaznenih djela. Mnoge smjernice prikazane u ovom radu proizlaze iz aktualnih istraživanja na području psihologije i kriminologije. Mnoga od tih istraživanja provedena su u zemljama "zapadnog svijeta" te ostaje otvoreno pitanje koje zaključke je moguće generalizirati i proširiti i izvan ovog područja. Ipak, iskustvo stručnjaka potvrđuje da se mnogi principi učinkovitog tretmana mogu generalizirati u širem kulturološkom spektru. Rad odražava usmjerenost na pristup zaštite i dobrobiti djece te rehabilitaciju maloljetnih počinitelja kaznenih djela. Nadalje je objašnjeno kako suvremena teorija i istraživanja iz područja psihologije i kriminologije potkrepljuju činjenicu kako sustav usmjeren na identifikaciju i unapređivanje spoznaja o kriminogenim rizicima kod djece i njihovih životnih okolnosti utječe na pozitivne ishode kod mladih te je učinkovitiji od ostalih pristupa, uključujući i one koji su usmjereni na kažnjavanje. Jednako tako, implikacije modela tretmana djece i mladih usmjerenog na zaštitu i rehabilitaciju u potpunosti su konzistentne s UNICEF-ovim smjernicama za organizacije i pojedince koji djeluju u sustavu skrbi i zaštite djece, te s Konvencijom o pravima djeteta. Rad započinje s razmatranjem alternativnih pristupa tretmanu maloljetnih počinitelja unutar pravosudnog sustava za maloljetnike. Nadalje, slijedi kratki prikaz suvremene teorije i istraživanja o uzrocima i povezanosti između maloljetničkog kriminaliteta i pristupa ovom ozbiljnom problemu. Zatim su prikazana načela dobre prakse procjenjivanja maloljetnih počinitelja kaznenih djela, koja uključuju identifikaciju korisnih instrumenata za procjenjivanje rizika i potreba kao i praktične smjernice u provedbi procjene. Posljednje poglavlje prezentira djelotvorne strategije za planiranje i vođenje slučaja, uključujući identifikaciju učinkovitih tretmana.

Ključne riječi: maloljetni delinkventi, procjena, instrumenti i procedure, smjernice