

# ADDRESSING GENDER-BASED DIFFERENCES IN VICTIMIZATION AND SUBSTANCE USE AMONG JUSTICE-INVOLVED YOUTH

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# Justice System-Involved Girls

- Girls in the juvenile justice system are an understudied population.<sup>1,2</sup>
- In the last two decades, there has been a dramatic increase in girls served by the system<sup>3-5</sup>; currently girls account for nearly 30% of juvenile arrests in the U.S.<sup>4</sup>
- This increased presence is attributed to elevated physical and mental health problems, lower school achievement, substance abuse, family dynamics, and recurrent delinquency.<sup>1,6-7</sup>

# Justice System-Involved Girls

- Girls formally involved in the juvenile justice system are more likely than their male counterparts to report **direct trauma and victimization**, including **sexual and physical abuse, mental health issues, and fragmented families**.<sup>6-11</sup>
- These factors may lead to substance abuse as a coping mechanism in girls.<sup>11-13</sup>
- Delinquent girls are being diagnosed with more than one **mental health disorder**,<sup>8,10-11,14</sup> and with having more issues with **substance abuse** compared to delinquent boys.<sup>1,6-8</sup>

# Differential Treatment Needs

- Justice-involved girls appear to have different treatment needs compared to justice-system involved boys.
- **Gender specific treatment programs** are effective in addressing specific needs of girls with substance use problems.<sup>16-17</sup>
- Some research has shown that when gender-specific treatment programs and services are available, **recidivism decreases.**<sup>18</sup>

# Juvenile Drug Courts and Reclaiming Futures Initiative

- Funded by The Office of Juvenile Justice and Delinquency Prevention, the Substance Abuse and Mental Health Services Administration's Center for Substance Abuse Treatment and the Robert Wood Johnson
- The mission is to improve the effectiveness and efficacy of juvenile drug courts (JDCs) by integrating the Juvenile Drug Court: Strategies in Practice (SIP) and the Reclaiming Futures (RF) models

# The Models

## Reclaiming Futures

- 1) Initial Screening
- 2) Initial Assessment
- 3) Service Coordination
- 4) Initiation
- 5) Engagement
- 6) Transition

## Juvenile Drug Court: Strategies in Practice

- 1) Collaborative Planning
- 2) Teamwork
- 3) Clearly Defined Target Population & Eligibility Criteria
- 4) Judicial Involvement and Supervision
- 5) Monitoring & Evaluation
- 6) Community Partnerships
- 7) Comprehensive Treatment Planning
- 8) Developmentally Appropriate Services
- 9) Gender-Appropriate Services**
- 10) Cultural Competence
- 11) Focus on Strengths
- 12) Family Engagement
- 13) Educational Linkages
- 14) Drug Testing
- 15) Goal-Oriented Incentives and Sanctions
- 16) Confidentiality

# Cross-site Evaluation

- Conducted by University of Arizona's Southwest Institute for Research on Women (SIROW), Chestnut Health Systems, and Carnevale Associates, LLC
- Multi-site, four-year evaluation of the Juvenile Drug Courts and Reclaiming Futures Initiative
- Charged with evaluating the processes, impact, and cost-effectiveness of integrating the JDC: SIP and RF

# Methods

- Sample included 8 JDCs not implementing RF, 7 adolescent intensive outpatient programs, and 8 JDCs implementing RF across the U.S.
  - Out of 2,416 justice-involved adolescents enrolled in the selected programs, **73.1%** were boys and **26.9%** were girls.
- Adolescent clients completed the **Global Appraisal of Individual Needs Assessment<sup>15</sup>** at intake to assess client demographics and characteristics.
- **Gender-appropriate treatment utilization** was measured using a 1-5 scale of “never” to “always” by program staff
- Independent sample t-tests were used to examine differences in characteristics between girls and boys.
- Hierarchical linear regressions were employed to assess the impact of gender-appropriate treatment on client outcomes.



# Variables of Interest

- Vocational and educational engagement
- Juvenile justice involvement
- Homelessness and living situation
- Substance use and abuse
- Mental health issues
- Victimization and abuse

# Results: *Demographics*

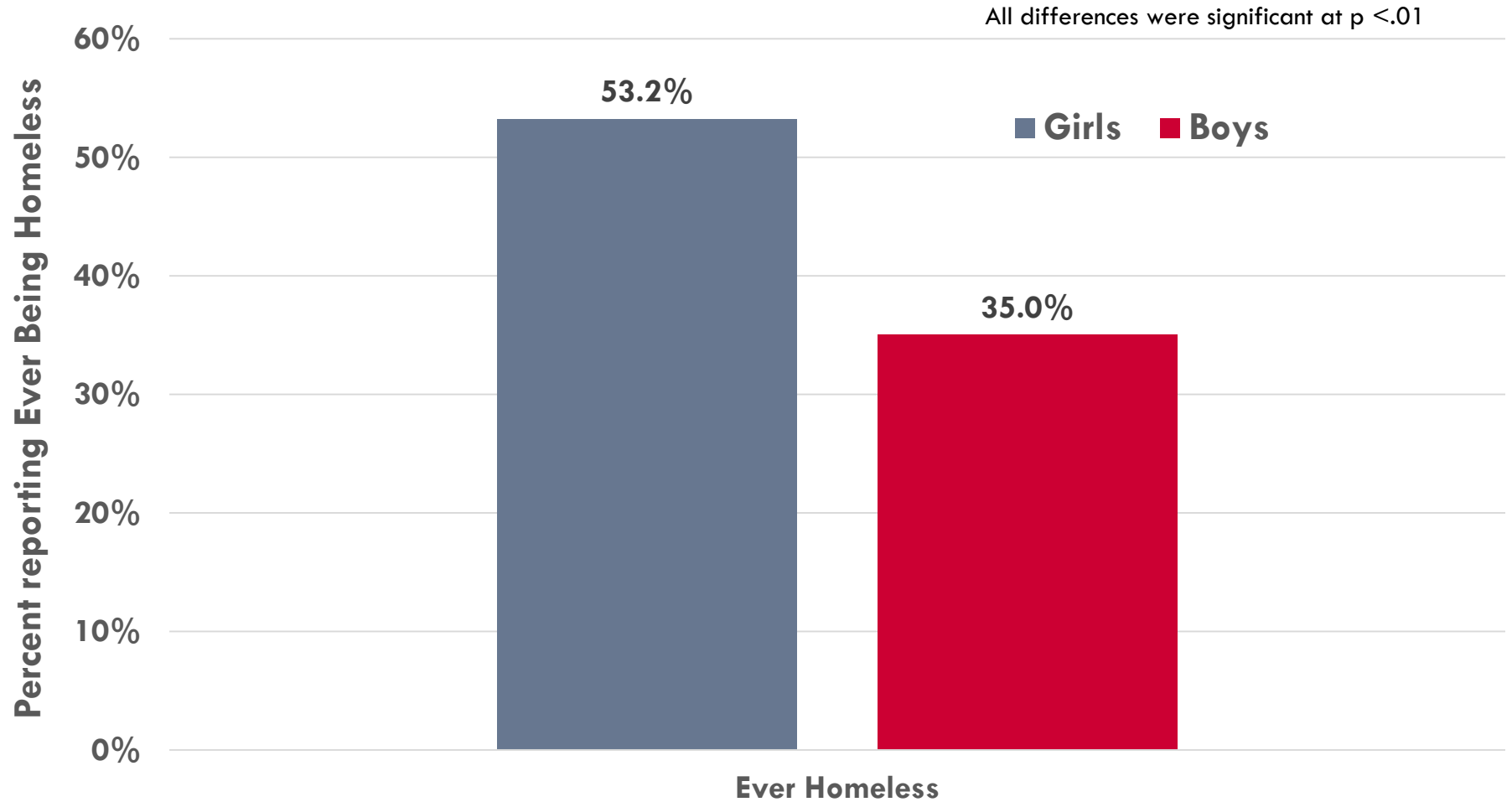
- The average age of participants was **15.8** and the age range was **12-19**
- A larger percentage of the girls were between 12-14 years of age (**17.9%**) compared to boys (**12.8%**).



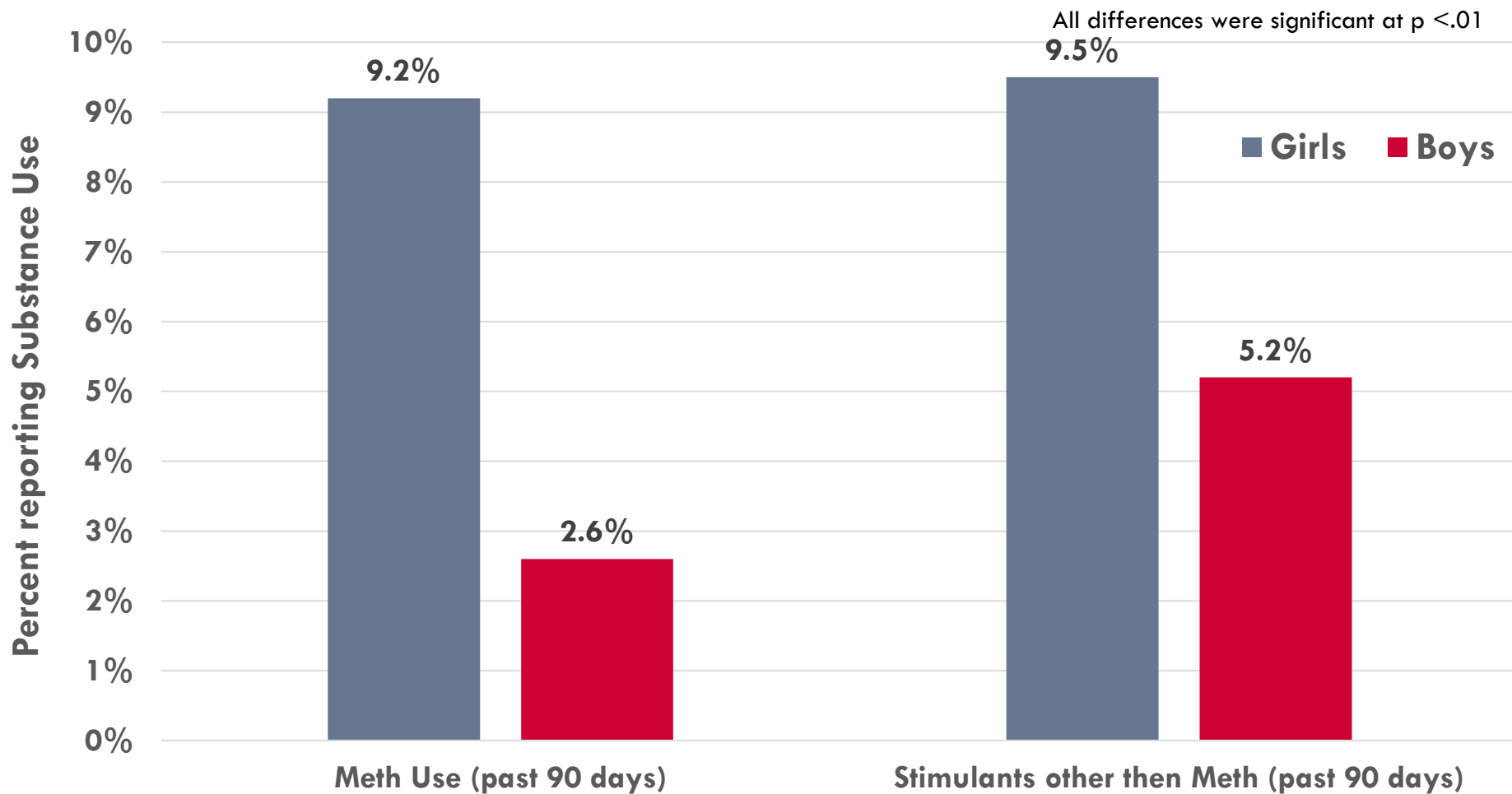
# Results: *Race and Ethnicity*

	Boys		Girls		
<i>Race</i>	N=1,765		N=651		p value
<b>Caucasian/White</b>	<b>581</b>	<b>32.9%</b>	<b>284</b>	<b>43.6%</b>	<b>&lt;.001</b>
Multiracial	101	5.7%	60	9.2%	.002
<b>African American/Black</b>	<b>279</b>	<b>15.8%</b>	<b>43</b>	<b>6.6%</b>	<b>&lt;.001</b>
Other	58	3.3%	50	7.7%	<.001
<b>None of the Above (usually Latin@)</b>	<b>746</b>	<b>42.3%</b>	<b>214</b>	<b>32.9%</b>	<b>&lt;.001</b>
<i>Ethnicity</i>					
<b>Hispanic/Latin@</b>	<b>859</b>	<b>48.8%</b>	<b>269</b>	<b>41.4%</b>	<b>.001</b>

# Gender Differences: Housing

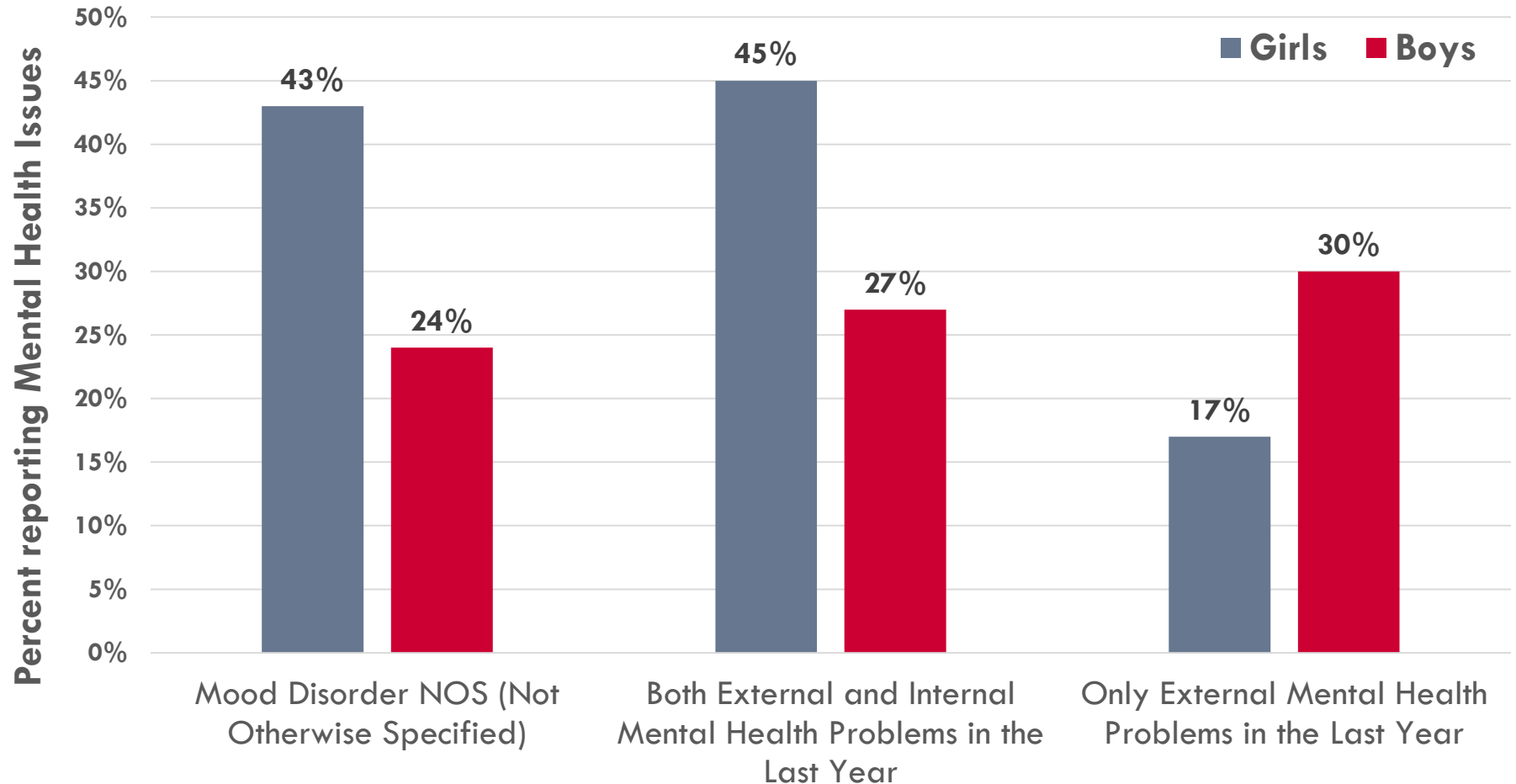


# Gender Differences: Substance Use

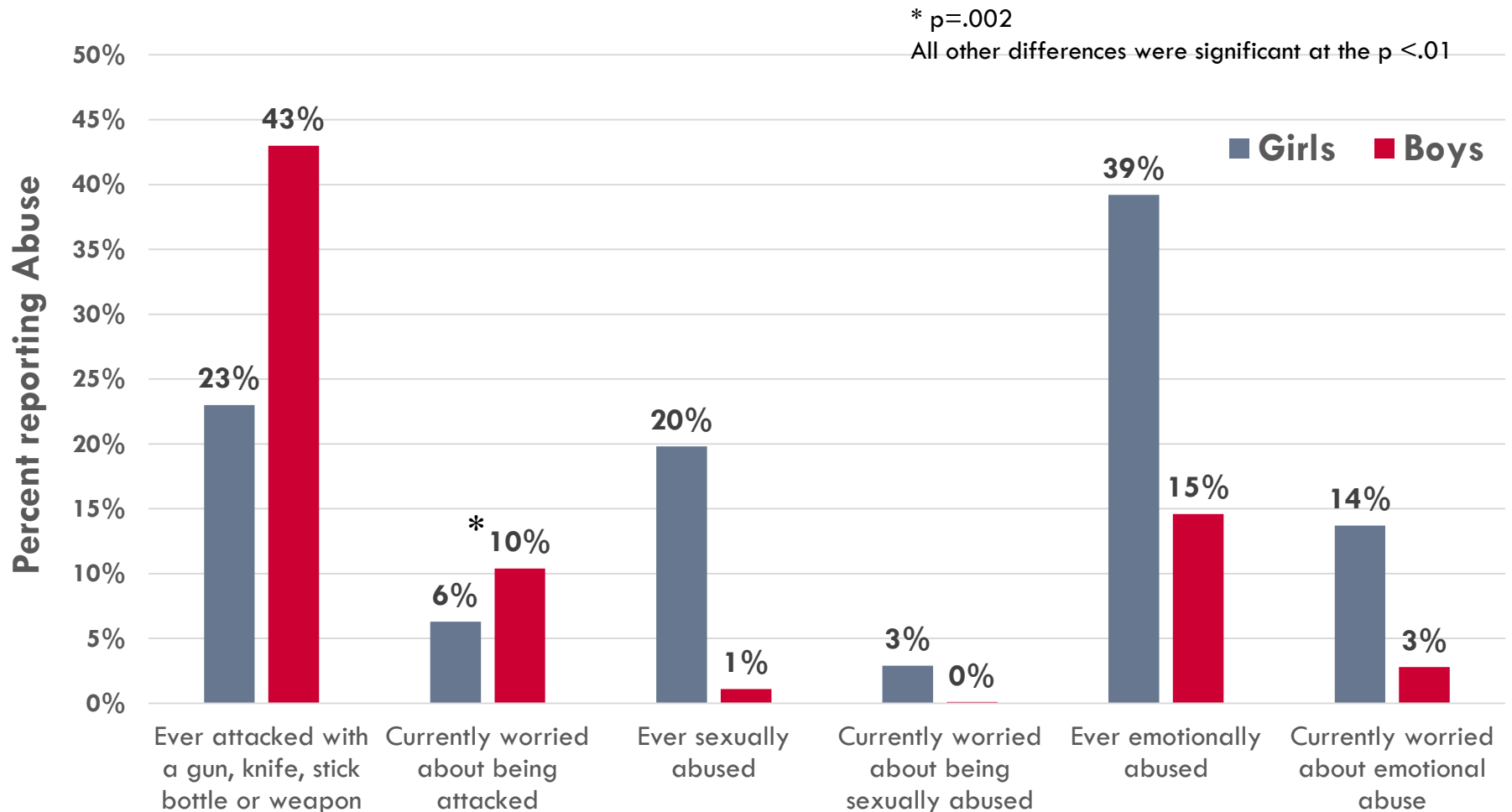


# Gender Differences: Mental Health

All differences were significant at the  $p < .01$

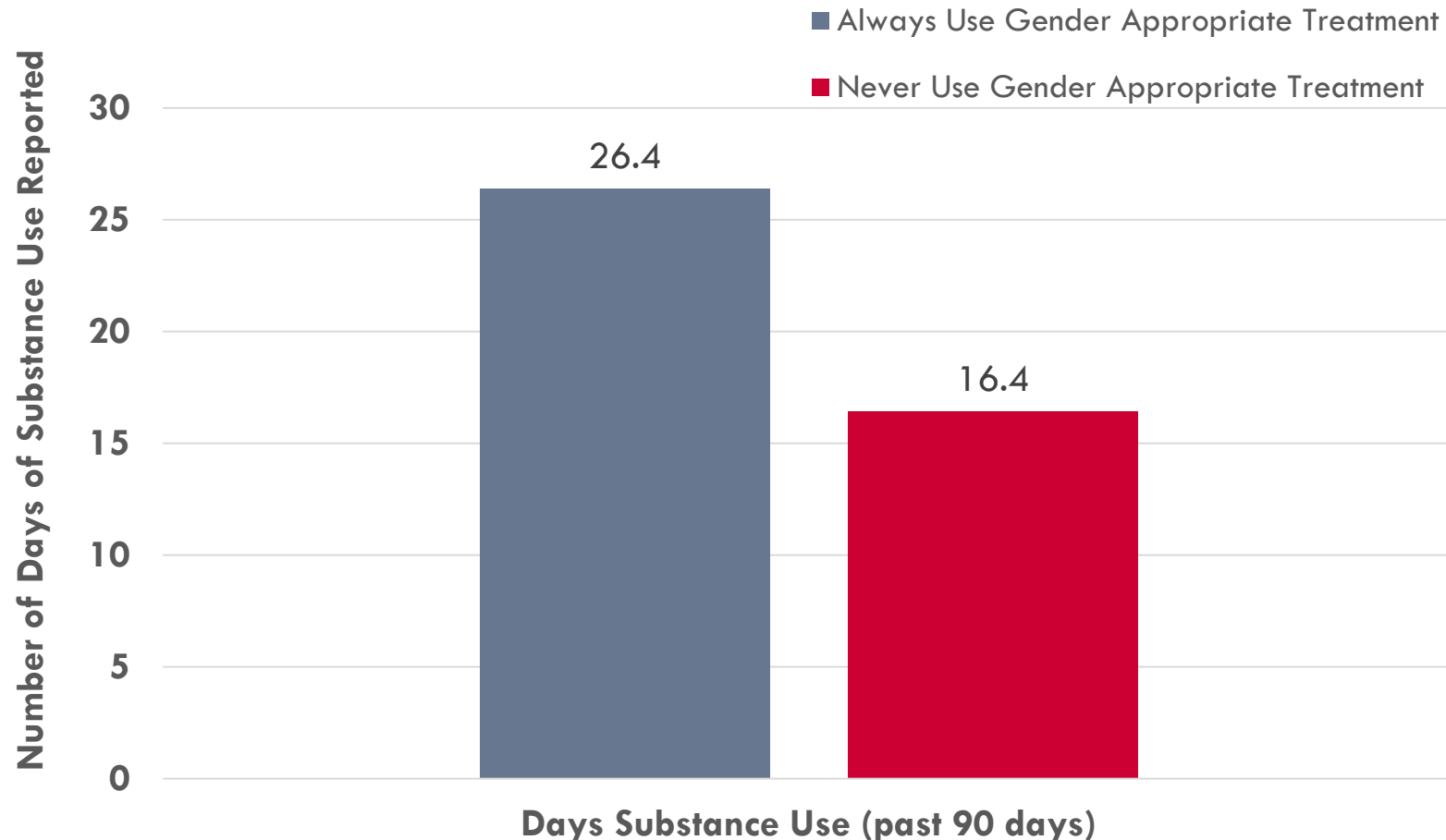


# Gender Differences: Victimization and Abuse



# Impact of Gender-Appropriate Treatment on Substance Use – Six Months Post Intake

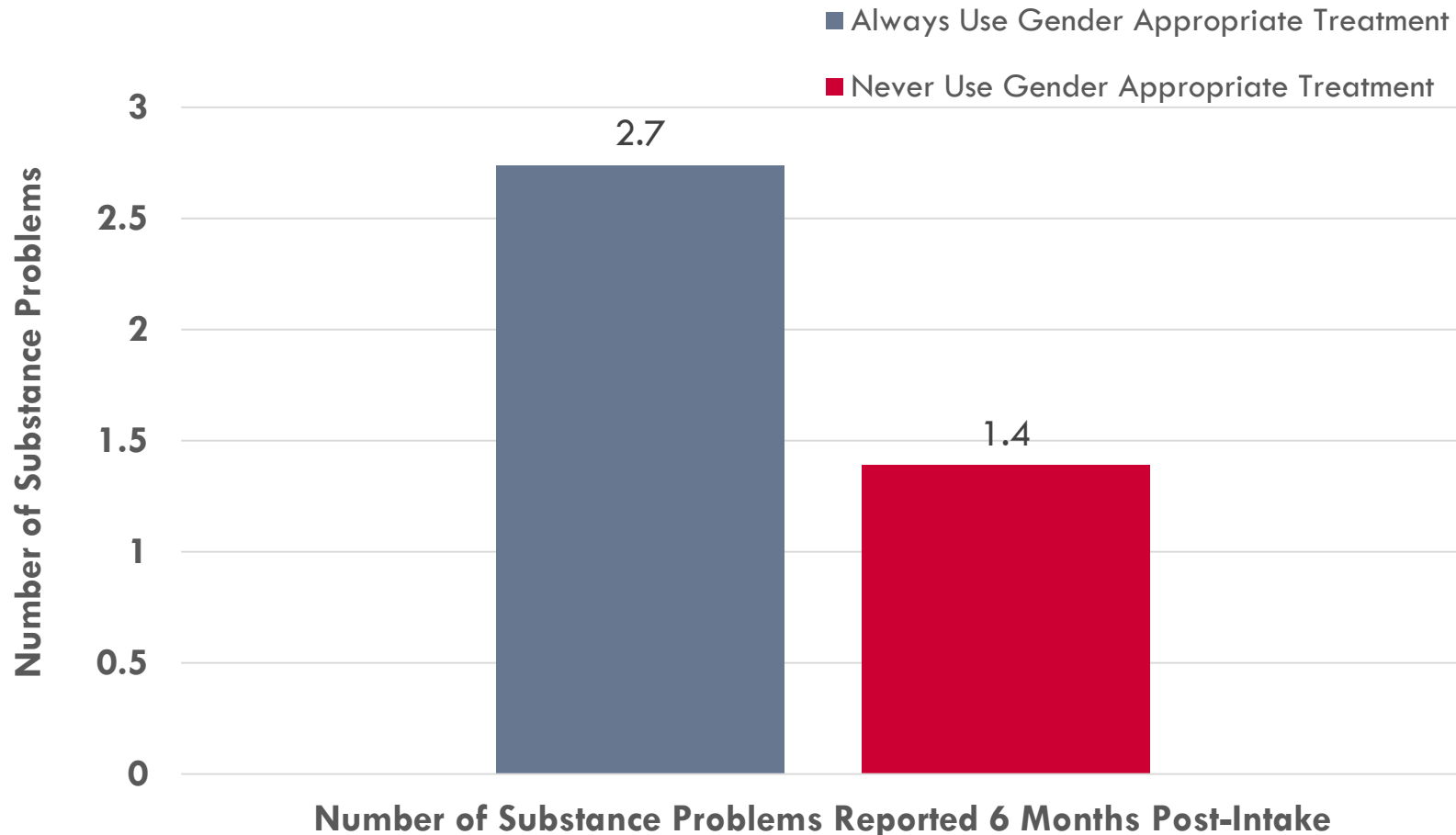
All differences were significant at the  $p < .05$





# Impact of Gender-Appropriate Treatment on Substance Use – Six Months Post Intake

All differences were significant at the  $p < .05$



# Summary

- Juvenile-justice involved girls experience higher rates of **meth use, stimulant use (other than meth), homelessness, mood disorders, and internal and external mental health problems** compared to juvenile justice-involved boys.
- Juvenile-justice involved girls also experience much higher rates of **sexual and emotional abuse and concerns about future sexual and emotional abuse** compared to juvenile justice-involved boys.



# Summary

**Gender-appropriate treatment** was shown to decrease substance use and substance problems for this population



# Policy Implications and Conclusions

- Since **gender-specific**<sup>18</sup> treatment programs and services have been shown to reduce recidivism, such tailored treatments should be implemented within JDCs and other treatment modalities.
- Given the complexity of issues for justice-involved girls (unstable housing, mental health issues, abuse, victimization, criminality, substance abuse), JDCs and IOPs need to implement **effective clinical assessments** to determine the array of services needs for each adolescent girl.
- Given the complexity of issues for girls, JDC's and IOPs should collaborate with a **variety of service agencies**, with procedures for sharing appropriate levels of client data, to increase treatment effectiveness

# Gender-Responsive Treatment

According to SAMHSA/CSAT Treatment Improvement Protocols

- Recognizing the role and **significance of personal relationships** in women's/girls' lives.
- Addressing the **unique health concerns** of women/girls.
- Acknowledging the importance and role of **socioeconomic issues** and differences among women/girls.
- Promoting **cultural competency** that is specific to women/girls.
- Endorsing a **developmental perspective**.
- Attending to the relevance and presence of various **caregiver roles** that women/girls assume

# Gender-Responsive Treatment

According to SAMHSA/CSAT Treatment Improvement Protocols

- Recognizing that **culturally-ascribed roles and gender expectations** affect society's attitudes toward women/girls with substance abuse.
- Adopting a **trauma-informed** perspective.
- Using a **strengths-based** treatment model for women/girls.
- Incorporating an **integrated and multidisciplinary** treatment approach for women/girls.
- Maintaining a **gender-responsive treatment environment** across all settings.

# Policy Implications and Conclusions

- Additional research is needed to ascertain the most effective ways to treat and rehabilitate justice-involved girls involved in JDCs and IOPs.



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# Questions?



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