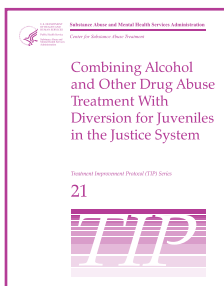


# Quick Guide

*For Clinicians and  
Administrators*

**Based on TIP 21**  
**Combining Alcohol and Other  
Drug Abuse Treatment With  
Diversion for Juveniles in the  
Justice System**



U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES  
Substance Abuse and Mental Health Services Administration  
Center for Substance Abuse Treatment  
[www.samhsa.gov](http://www.samhsa.gov)

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# **Quick Guide**

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## ***For Clinicians and Administrators***

### **Based on TIP 21**

### ***Combining Alcohol and Other Drug Abuse Treatment With Diversion for Juveniles in the Justice System***

This Quick Guide is based entirely on information contained in TIP 21, published in 1995. No additional research has been conducted to update this topic since publication of the original TIP.

## **WHY A QUICK GUIDE?**

The purpose of a *Quick Guide* is to provide succinct, easily accessible information to busy clinicians.

This *Quick Guide* is based on *Combining Alcohol and Other Drug Abuse Treatment With Diversion for Juveniles in the Justice System*, number 21 in the Treatment Improvement Protocol (TIP) Series, published by the Center for Substance Abuse Treatment (CSAT), Substance Abuse and Mental Health Services Administration. It will help substance abuse treatment providers, juvenile justice system personnel, and social services workers develop diversion programs.

The *Quick Guide* is divided into sections to help readers quickly locate relevant material. For more in-depth information on the topics in this *Quick Guide*, readers should refer to TIP 21.

## WHAT IS A TIP?

The TIP Series was launched in 1991. The goal of these publications is to disseminate consensus-based, field-tested guidelines on current topics to substance abuse treatment providers.

### *TIP 21, Combining Alcohol and Other Drug Abuse Treatment With Diversion for Juveniles in the Justice System*

- Explains the tasks required to organize a diversion program for substance-abusing youth in the juvenile justice system (JJS)
- Describes the collaboration among the JJS, the substance abuse treatment system, and community health and social services needed for a diversion program to be successful.

*To order a copy of TIP 21, see the inside back cover of this Quick Guide.*

### **INTRODUCTION**

Diversion of juveniles to substance abuse treatment programs can prevent these youth from committing more serious crimes and having future involvement in the justice system.

Juvenile justice system (JJS) diversion programs for youth with substance abuse disorders require close cooperation among the systems that care for adolescents:

- The substance abuse treatment system
- The JJS
- Community health services
- Social services.

As described in this *Quick Guide*, diversion

- Is an alternative to placing a youth in a juvenile detention center or institution
- Empowers the treatment community with the juvenile court's authority to require compliance with treatment
- Provides the juvenile court with an additional intervention for troubled youth.

Collaboration among the systems provides

- Individualized screening, assessment, and treatment for young offenders
- The opportunity for youth to be accountable for themselves and to the community
- A mechanism for youth to improve their social, educational, vocational, coping, and communication skills
- Protection for the community.

The purpose of diversion is not to take away the power of the court but to use that power to facilitate treatment.

*(For more information, see TIP 21, pages 1-3.)*

## JUVENILE JUSTICE SYSTEM ISSUES

A juvenile in the context of the JJS is a person who, by the reason of his or her age (usually older than 10 years and younger than 18), falls under the jurisdiction of the juvenile court. The following categories of juveniles are usually eligible for diversion:

- **Delinquent offender**—A juvenile who commits an act that would be a crime if it was committed by an adult.

- **Status offender**—A juvenile who commits an offense that would not be a crime if it was committed by an adult (e.g., truancy).
- **Preadjudicated delinquent offender**—A juvenile who is in the jurisdiction of the juvenile court because of a referral, complaint, or affidavit or who has been formally charged by petition.
- **Adjudicated youth**—A juvenile who has been judged delinquent.
- **Probation violator**—A juvenile who was not previously diverted to substance abuse treatment but who has violated his or her probation. If the violation is substance related, the juvenile is a candidate for diversion to treatment.

The youth who commit violent or sex offenses or who are dangerous in other ways may not be eligible for diversion, and their offenses should be considered on a case-by-case basis.

Diversion can occur

- Before referral to the court, such as when a police officer suspects a youth of substance abuse
- At juvenile court intake, before a petition is filed
- At juvenile court intake, after a petition has been filed but before a hearing
- After adjudication, in lieu of formal disposition.



The court may postpone its decision to sentence serious but nonviolent offenders or chronic minor offenders to see if they complete substance abuse treatment successfully.

Staff at the substance abuse treatment program to which a juvenile offender is diverted must understand that

- Diversion to treatment does not halt the court’s formal authority over and oversight of the youth.
- The court gives authority to the treatment program but retains the central role and may impose further sanctions if the juvenile does not complete treatment.
- To be effective, a diversion program must assure the court and the community that the youth is participating in treatment.

*(For more information, see TIP 21, pages 35-38.)*

### **Community-Based Treatment**

To deal with crime associated with substance abuse, local human services systems must collaborate to build on the strengths of the youth, the family, and the community.

Community-based substance abuse treatment

- Allows the family access to treatment

- Provides continuity of care
- Establishes a support system for the juvenile
- Helps meet the diverse needs of juveniles from special populations.

### **Juvenile Justice System (JJS) Goals**

- **Community protection and public safety**—The JJS protects the community from crime. Juvenile offenders who pose potential safety threats should not be eligible for diversion programs.
- **Youth accountability**—Juveniles who commit an offense should experience the consequences of and accept responsibility for their behavior.
- **Competence development**—Juvenile offenders should leave the JJS with skills to live productively and responsibly.
- **Individualized assessment**—The JJS considers a youth's unique social and cultural background, circumstances, talents, and deficiencies when determining the appropriate legal category and disposition for him or her.
- **Due process for juveniles**—Juvenile offenders should not be diverted automatically. Due process should include access to assessment and possible diversion. Juveniles need legal representatives to explain options and their consequences.

- **Caseload management**—Assessment, case classification, and case planning are part of case management. The case plan identifies a youth’s problems, strengths, and weaknesses and states appropriate treatment objectives. The caseload of a juvenile officer depends on the number of youth referred to him or her, the officer’s responsibilities and qualifications, and the degree of supervision required for that juvenile.
- **Family involvement**—A juvenile’s problems may reflect or exacerbate the family’s problems. Although the youth may be separated from his or her parents, the family is a youth’s primary attachment and can serve as a source of support.
- **Victim involvement**—The JJS attempts to involve the victim by
  - Having the victim participate in the process
  - Seeking restitution (e.g., community service) from the offender
  - Attempting victim-offender mediation.

*(For more information, see TIP 21, pages 6-21.)*

## **ADOLESCENT TREATMENT**

Effective substance use treatment requires a comprehensive approach. Treatment should

- Focus on age-appropriate skills development
- Include services such as screening, assessment, diagnosis, and matching the client to the type and intensity of treatment selected
- Use a variety of behavioral, cognitive, and family therapies
- Include relapse prevention and continuing care (aftercare)
- Tailor ancillary services to a youth's specific needs (e.g., education, job training, health care, transportation)
- Include the family in assessment and treatment.

Family treatment may include

- Group education that empowers parents and helps them resolve issues
- Individualized family therapy techniques
- Substance abuse education.

### **Mental Health**

Many juveniles have mental health issues that complicate treatment. Accurate diagnosis and

appropriate treatment of mental health problems are necessary for successful diversion.

### **Treatment Criteria**

A diversion program should provide

- Rewards for early progress in treatment
- Sanctions for noncompliance.

Treatment criteria must be established and agreed to early in the diversion process. The criteria should be specified in a diversion plan or contract. Treatment criteria might stipulate that the juvenile is attempting to

- Solve problems identified in the treatment plan
- Improve his or her behavior in school, at home, and in treatment
- Develop relapse prevention and recovery plans
- Develop long-term educational and vocational plans.

Benchmarks indicating that a youth has met diversion program goals might include

- Resolution of conflicts with family members
- Acceptance of responsibility for the offense
- Maintenance of positive behavior at home, school, or work

- Work toward achieving personal goals
- Demonstrated resistance to peer pressure.

A youth might be considered noncompliant by

- Leaving the program
- Testing positive for drugs in a urinalysis
- Committing delinquent acts
- Not participating in treatment
- Failing to comply with the diversion contract.

### **IMPLEMENTATION TASKS**

Twelve tasks must be considered when setting up a juvenile diversion program.

#### **Task 1. Identify Participants and Key Leaders**

Involve key leaders and stakeholders in all aspects of planning and implementation. Include

- Those who are aware of the issues involved and who understand juvenile justice and substance abuse problems
- Decisionmakers and leaders who can ensure that productive change occurs.

Organize a collaborating committee that includes representative from all the systems caring for juvenile offenders such as

- **Juvenile court**—judges, probation and parole officers, prosecutors, public defenders, and law enforcement officers
- **Substance abuse treatment system**—youth substance abuse treatment providers and community-based treatment resources
- **Physical/mental health and social services system**—healthcare professionals, social services professionals, and local school professionals
- **Community**—support/self-help groups, victim advocacy groups, business community, parent groups, clergy, community leaders, funders, local officials, and volunteer organizations.

Each system should become familiar with the goals, principles, and missions of the participating systems. Develop education/training programs that

- Inform court personnel about substance abuse and treatment programs
- Help treatment providers and public health officials understand the functions of the JJS.

The collaborating committee should

- Use a consensus-building process that encourages dialog among participants and ownership of the diversion process
- Develop the diversion concept and identify the points at which diversion can take place
- Define appropriate target populations
- Develop the ability to supervise juvenile offenders and monitor treatment progress
- Define the roles of all those involved
- Consider diverse cultures and ethnicities and gender-specific needs
- Adopt a clear vision statement
- Establish a scope of work
- Select a leadership structure
- Conduct regular meetings
- Be aware of barriers that interfere with the diversion process
- Identify program management capabilities
- Conduct system oversight.

Develop a policies and procedures manual approved by all involved agencies. It should explain

- Lines of authority



- Functions and responsibilities of all systems
- Links among all systems
- Methods by which the costs of treatment and referral services will be reimbursed.

Active communication and continuing dialog among all key parties are essential for an effective diversion program.

*(For more information, see TIP 21, pages 27-31.)*

## **Task 2. Secure Funding**

Funding can come from

- Program participants' assessment fees
- Allocation of a percentage of fines imposed on those convicted of substance abuse-related crimes
- Proceeds from drug forfeitures (sales of dealers' assets handled by Federal and local law enforcement)
- Private insurance
- License fees
- Government and private foundation grants
- Private-sector funding.

Several scenarios exist for securing funding.

- Explore possible funding sources, design a program, and then formally request funds for it.
- Obtain startup funds to develop a program and then obtain more funding to implement the program.
- Obtain funding and then design and implement the program.
- Get agencies to commit part of their budgets to support the program.

### **Task 3. Identify a Lead Agency**

The role of the juvenile court judge is vital, and he or she needs to take an active lead in encouraging participation by all the agencies involved in the diversion program.

The juvenile court judge

- Has the most clearly defined responsibilities of all participants
- Helps develop and sustain a community's collaborative effort to develop a program
- Is the key leader.

The role of the court is pivotal to the overall success of any juvenile diversion program and can make or break a diversion program.

#### **Task 4. Develop Goals and Objectives**

An effective program should

- Use valid screening and assessment tools to identify eligible youth
- Place all eligible youth in appropriate treatment
- Design an individualized treatment plan for each youth
  - Assign a case manager
  - Provide appropriate substance abuse treatment, physical/mental health treatment, and social services
  - Provide appropriate continuing care and relapse prevention to ensure recovery
- Evaluate and revise each youth's substance abuse treatment plan regularly.

#### **Task 5. Establish Interagency Links**

Develop written agreements such as memoranda of understanding or interagency agreements that clarify

- The responsibilities and roles of all agencies

- How to accomplish interagency coordination
- Cross-training procedures and schedules
- Procedures for liaisons with community organizations
- How to deal with funding issues.

### **Task 6. Establish Interagency Dispute Resolution Guidelines**

Develop and document a dispute resolution mechanism that is approved by all groups. For example

- Designate an interagency committee with representatives from all agencies as a mediating body
- Specify the juvenile court judge as the final arbiter of whether a youth is meeting his or her diversion criteria on the issue of juvenile accountability.

### **Task 7. Develop Eligibility Criteria for Diversion**

Eligibility criteria should include

- A juvenile's age, educational background, and level of development
- The nature and history of the juvenile's offending conduct

- Any statutes that may prevent his or her participation in diversion
- The nature and extent of the juvenile’s substance abuse problem
- His or her amenability to treatment and to sharing information with the diversion system
- His or her previous court contact and involvement with substance abuse treatment programs.

The eligibility criteria must be documented clearly, disseminated to everyone involved, and reviewed regularly.

### **Task 8. Develop Grievance Procedures**

Grievance procedures should be documented and may include

- An investigatory process
- A mediation process
- A review process that involves a panel of representatives from all participating agencies.

### **Task 9. Establish Information-Sharing and Confidentiality Guidelines**

Develop guidelines for sharing information between substance abuse providers and the court in accordance with Federal and State confidentiality

rules, privilege laws, and ethical considerations. Make JJS personnel aware of the information-sharing concerns affecting substance abuse treatment. Court-mandated treatment plans must be monitored to ensure a youth's participation in treatment and that treatment diversion is meeting the youth's needs.

### **Task 10. Ensure Timely Access to Screening and Assessment**

Screen and assess youth at the earliest possible opportunity to ensure that

- The court has access to accurate, helpful information.
- The juvenile has access to immediate treatment.

Screening should

- Take place during intake
- Be based on the needs of the youth
- Involve a simple tool
- Consider factors such as the nature of the youth's offense or disclosure of a substance problem by the youth or family (or the suspicion of one based on a physical sign [e.g., dilated pupils] or language or the intake officer's intuition).

If screening determines the youth has a substance abuse problem, perform a comprehensive assessment and include

- Any history of substance use/abuse
- A medical history and a physical examination
- A developmental assessment
- An inventory of strengths or resilience factors
- Family, school, and vocational histories
- Sexual history
- Descriptions of any peer relationships and leisure activities
- Information about any previous involvement with JJS and social service agency programs.

### **Task 11. Establish a Continuum of Services**

Base the continuum of treatment services on local substance abuse demographics and

- Include all agencies to which referral may be made for needed healthcare or social services.
- Describe the resources available from assessment through the various levels of treatment; develop a directory of services (a resource book).
- Establish relationships with the programs and facilities nearby.

- Identify treatment gaps, and bridge the gaps by establishing innovative relationships among providers or by using treatment resources available in surrounding communities.

### **Task 12. Develop Accountability Measures**

Diversion with substance abuse treatment requires

- A youth's personal accountability
- System accountability on the part of the participating system components and referral agencies
- Assurances of treatment integrity and effectiveness.

Holding the offending youth accountable is critical. Treatment cannot be perceived (by the youth or the community) as a way to avoid personal responsibility or punishment. System accountability ensures that a diversion to substance abuse treatment is legitimate.

*(For more information, see TIP 21, pages 55-60.)*

## **GLOSSARY**

**Adjudication:** A juvenile court decision that either finds a child a delinquent, a status offender, or a dependent of the court or dismisses the petition and releases the child.



**Disposition:** A juvenile court activity that determines whether a child should be placed in a correctional facility, foster care, or a treatment program; should be required to meet certain standards of conduct; or should be released.

**Diversion:** Removing a juvenile from the juvenile justice system and referring the child to treatment or care providers who are outside the justice system. This step may be taken at any point in formal processing from the initial custody to the judgment phase.

**Intake:** The process of receiving a juvenile referred or taken into custody into the juvenile justice system. After an investigation, the decision is made to file a petition, release the juvenile, place the juvenile under supervision, or refer him or her to another agency.

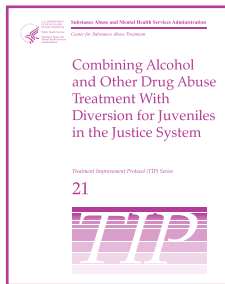
**Petition:** A document filed in juvenile court, usually by a prosecutor, that asks the court to take jurisdiction over a juvenile alleged to be a delinquent, a status offender, or dependent.

**Probation:** Conditional release of an offender into the community. The release is supervised by the court and has specified conditions.



# Ordering Information

## **TIP 21** *Combining Alcohol and Other Drug Abuse Treatment With Diversion for Juveniles in the Justice System*



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1. Call SAMHSA's National Clearinghouse for Alcohol and Drug Information (NCADI) at **800-729-6686**.  
TDD (hearing impaired) **800-487-4889**
2. Visit CSAT's Web site at **[www.csat.samhsa.gov](http://www.csat.samhsa.gov)**



## **Other Treatment Improvement Protocols (TIPs) that are relevant to this Quick Guide:**

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**TIP 7**, *Screening and Assessment for Alcohol and Other Drug Abuse Among Adults in the Criminal Justice System (1993)* **BKD138**

**TIP 12**, *Combining Substance Abuse Treatment With Intermediate Sanctions for Adults in the Criminal Justice System (1994, Reprinted 2000)* **BKD144**

**TIP 17**, *Planning for Alcohol and Other Drug Abuse Treatment for Adults in the Criminal Justice System (1995)* **BKD165**

**TIP 30**, *Continuity of Offender Treatment for Substance Use Disorders From Institution to Community (1998)* **BKD304**

**See the inside back cover for ordering information for all TIPs and related products.**