

Engaging Justice-Involved Youth and Families

Council of Accountability Court Judges Annual Training Conference September 11, 2023

Tameka Chatman, MA, LCADC, SAP

Program Coordinator

Rutgers University Behavioral Health Care

Next 2nd Chance Center for Behavioral Health & Criminal Justice

Juvenile Justice and Youth Development Certificate Program







INTRODUCTIONS

REFLECTIVE ACTIVITY/OVERVIEW

IMPACTS ON ENGAGEMENT

A TRAUMA-INFORMED LENS

CULTURAL CONSIDERATIONS

SUSTAINABLE STRATEGIES

DISCUSSION

Reflections on Engagement

- Is it easy to engage youth involved in the justice system? What makes it easy for you? What makes it challenging for you?
- How can you tell when a youth is engaged?
- How does it feel for adults/professionals when a youth is engaged?



Reflections on Engagement

- What challenges you when you engage families? Are some families more challenging than others?
 - How so?
- What does it look and feel like when families are engaged?
- What are the benefits of engaging youth and families involved in the juvenile justice system?



A conversation about engagement...

- Engagement is the healing connection formed between clients and the people that support their recovery.
- The continuous development of an emotional relationship
- The state of being in gear
- A pledge

It is an active process!



Engagement is a dialogue

Debate

Assuming that there is one right answer, and you have it

Combative: participants attempt to prove the other person is wrong

Focus is winning

Listening to find flaws and make counterarguments

Defending our own assumptions as truth

Seeing only two sides to an issue

Searching for faults and weakness in others' positions

Creating a winner and a loser feel, shutting down further conversation

Seeking a conclusion or vote from others to ratify one's position.

Dialogue

Assuming that many people have pieces of the answer

Collaborative: participants work together toward common understanding

Focus is exploring common ground

Listening to understand, find meaning and agreement

Revealing our assumptions for re- evaluation

Open to seeing all sides of an issue

Searching for strengths and value in the people's positions

Honoring the conversation after the discussion ends

Discovering new options, not seeking closure

Family Engagement

- Family engagement in juvenile justice involves establishing a **collaborative** relationship in which families are **partners** in both their children's treatment and in developing the policies, programs, and practices of the system.
- Efforts to increase family engagement have focused on how the juvenile justice system's role in engaging families is to **facilitate their ongoing participation** while taking into **consideration the multiple challenges they face**.

Characteristics of Family Engagement

- Treating families with dignity and respect
- Peer-to-peer support
- Collaboration and partnerships between service professionals and family members
- Meaningful communication across all involved parties
- Sustained familial engagement

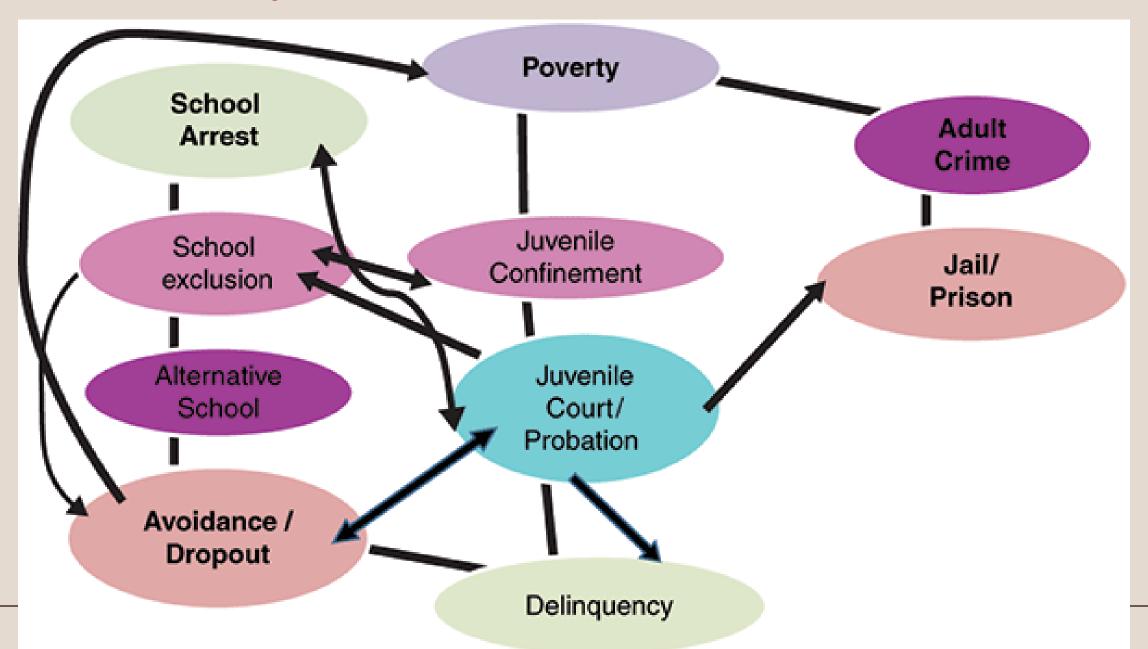
How we think things should look in our systems...

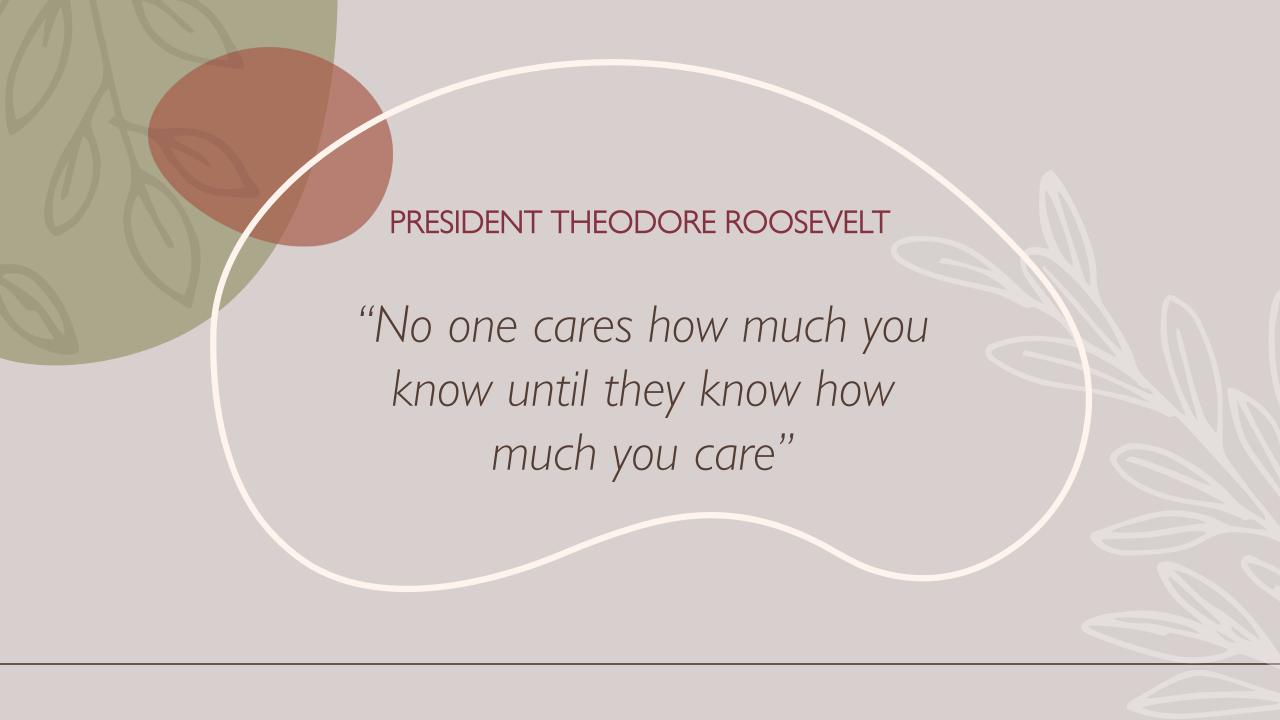
Family has a need

Evidence-Based Intervention

They will buy-in and everything will be okay

What it actually looks like...





What negatively impacts engagement?

Factors to Consider

TRAUMA

COMPETING PRIORITIES/
TIGHT DEADLINES

STAFF BURNOUT/ HIGH STRESS

FUNDING CHALLENGES

CULTURE

BIAS AND/OR RACISM

> BUREAUCRACY/ RED TAPE

SOCIAL DETERMINANTS

OF HEALTH

40% SOCIAL AND ECONOMIC FACTORS

Adverse childhood experiences High trauma exposure and stress Unemployed or underemployed Limited social supports Financial instability Limited education Literacy barriers Low income

FACTORS

20% **HEALTH OUTCOMES DRIVEN** BY ACCESS TO QUALITY CARE

Out of pocket medical expenses Poor health monitoring Provider availability Noncompliant with medical advice Difficult access

Only 20% of an individual's health outcomes are a result of the health care they receive.

SOCIAL DETERMINANTS OF HEALTH Influencing Factors SOCIAL AND **ECONOMIC**

> LIVING CONDITIONS

HEALTH

CARE

INDIVIDUAL **BEHAVIORS**

30% HEALTH OUTCOMES DRIVEN BY INDIVIDUAL BEHAVIORS

Alcohol and other substance use Low physical activity Poor diet and obesity Social disconnection Tobacco use

10% HEALTH OUTCOMES DRIVEN BY LIVING

CONDITIONS

Inadequate housing Evictions, Homeless Unreliable transportation No access to healthy food Unsafe neighborhoods Exposure to violence

Alliance of Mental Health Providers of Oklahoma

The impact oftrauma



Adverse Childhood Experiences

Maternal Depression

Physical & Emotional Neglect

Emotional & Sexual Abuse

Divorce

Substance Abuse

Mental Illness

Domestic Violence

Incarceration

Homelessness

Adverse Community Environments

Poverty

Community

Disruption

Discrimination

Lack of Opportunity, **Economic Mobility &** Social Capital

Source: Adapted from Ellis (2017)32



USING A TRAUMA-INFORMED LENS Trauma impacts not only the

youth and families we serve,

but us as well.

Stress in Childhood

Stress is a natural & inevitable part of childhood, but the TYPE of stress can make a difference in the impact on a child's brain & body.



Positive Stress

Mild stess in the context of good attachment



Temporary, mild elevation in stress hormones & brief increase in heart rate



Increased **RESILIENCE** and confidence
Development of coping skills



Tolerable Stress

Serious, temporary stress, buffeted by supportive relationships



More severe, continuing cardiovascular and hormonal response





buffering caring adult

Adaption and recovery with some possibility for physical/emotional damage



Toxic Stress

Prolonged activation of stress response system without protection

Prolonged activation of stress response system & disrupted development of brain and immune system



No adult

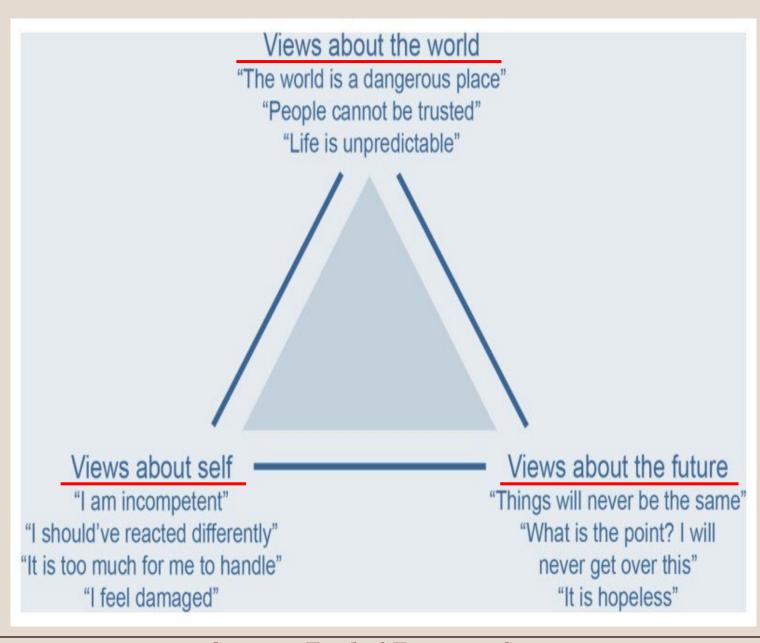


buffers

Lifelong consequences:

- Heart disease
- Alcoholism
- Memory & learning difficulties
- Anxiety/depression
- Cancer





It is likely that the youth you serve AND their caregivers have experienced toxic stress.

Cultural Considerations

Culture

- ...represents the values, norms, and traditions that affect how individuals of a particular group perceive, think, interact, behave, and make judgments about their world.
- ... is the body of learned beliefs, traditions, principles, and guides for behavior that are commonly shared among members of a particular group.
- ...can be characterized as shared beliefs and values forming the basis upon which people interpret experiences and behave, both individually and in groups.
- ...serves as a roadmap for both perceiving and interacting with the world.



Trauma & Culture

The cultural norms people have around expressing discomfort, reaching out for help will impact, and identifying/defining trauma:

- How trauma(s) is experienced.
- The meaning assigned to the event(s).
- How trauma-related symptoms are expressed (i.e. somatic expressions, emotionality displayed, avoidance, etc.).
- Willingness to identify and share a trauma with a provider and their sense of safety in doing so.
- Whether a particular behavior pattern, emotional expression, or cognitive process is considered abnormal.
- Willingness to seek help inside and outside of their culture.
- Response to treatment and the treatment outcome.

"The Talk"

- "The Talk" refers to a specific type of racial socialization message that many black parents have with their children about how to safely conduct themselves when interacting with law enforcement and other people in positions of power.
- Includes 4 Dimensions
 - Cultural socialization (promotes ethnic pride)
 - Preparation for bias (awareness and strategies)
 - Promotion of mistrust (caution and suspicion)
 - Egalitarianism (silence about race)

Racial Socialization:

Conversations about race, societal perceptions, and measures that youth should employ to safeguard themselves from harm are referred to as racial socialization in family and psychological sciences.



Sustainable Strategies



- Youth and families need choice and voice in their process- especially when they have lost much of it
- First Impressions
 - Correct names
 - Eye Contact
 - Tone of voice
 - Body language and position
- Effective and balanced use of helping skills and protective authority
- Ask the right questions!

First Impressions

- "A series of experiments by Princeton psychologists Janine Willis and Alexander Todorov reveal that all it takes is a tenth of a second to form an impression of a stranger from their face, and that longer exposures don't significantly alter those impressions."
- "In fact, for all judgments—attractiveness, likeability, trustworthiness, competence, and aggressiveness—increased exposure time did not significantly increase the correlations." Wargo (2006)
- "...people who strongly express their emotions nonverbally, with facial expressions and body language, for example, are better liked than less expressive people." Healthline (2018)
- "So, it appears that simply being expressive especially showing positive emotions like joy or happiness can make a good first impression." Healthline (2018)



Balancing Skills and Authority

Effective engagement requires the effective and balanced use of helping skills and protective authority to produce an ongoing worker/client relationship that results in the pursuit and accomplishment of agreed upon goals.

- Tuning into self & others
- Focused listening
- Clarification of role and purpose
- Respect
- Clear and accurate response to youth and family's questions
- Honesty
- Dependability
- Identification and support of strengths
- Collaboration

- Seeking to understand the youth and family's point of view
- Culturally sensitive and responsive practice
- Connecting system, agency, and youth and family goals
- Investment in the youth and family's success
- Outcome-oriented practice
- Regular feedback
- Appropriate use of authority

Ask the Right Questions!

Regarding the Youth/Family

- 1. What has this child/family experienced?
- 2. In what ways might those experiences have influenced this child? This family?
- 3. What do the patterns we observe suggest about the child's (or family's) learned adaptations to these experiences? In what ways do current behaviors make sense, given historical experience?
- 4. Do patterns of current behavior give us clues about key triggers?
- 5. What behaviors do we observe are linked to these triggers?
- 6. What other stressors are present?
- 7. What resources are present?
- 8. What strengths does the child / family have?

Ask the Right Questions!

Regarding the Yourself

- 1. Am I a collaborator or regulator?
- 2. How are my own attachment skills (affect management, attunement, consistent response, routines) being applied in the context of this relationship(s), and in support of skill development?
- 3. What biases do I have that may be impacting engagement?
- 4. What is the stake? Why does this concept (goals, service/treatment targets) matter in this child's life? This family's life?
- 5. How will this (child, family, system) define success (in general, and around individual targets)? What is needed to support that success?
- 6. What are the potential barriers? How can we get in front of (versus react to) those barriers?

Discussion



thank you

Tameka Chatman

Tameka.Chatman@rutgers.edu

juvenilejustice.rutgers.edu