

# Advancing Juvenile Justice Reform: Integrating Occupational Therapy into Diversion Programs to Support Youth Development and Reduce Recidivism



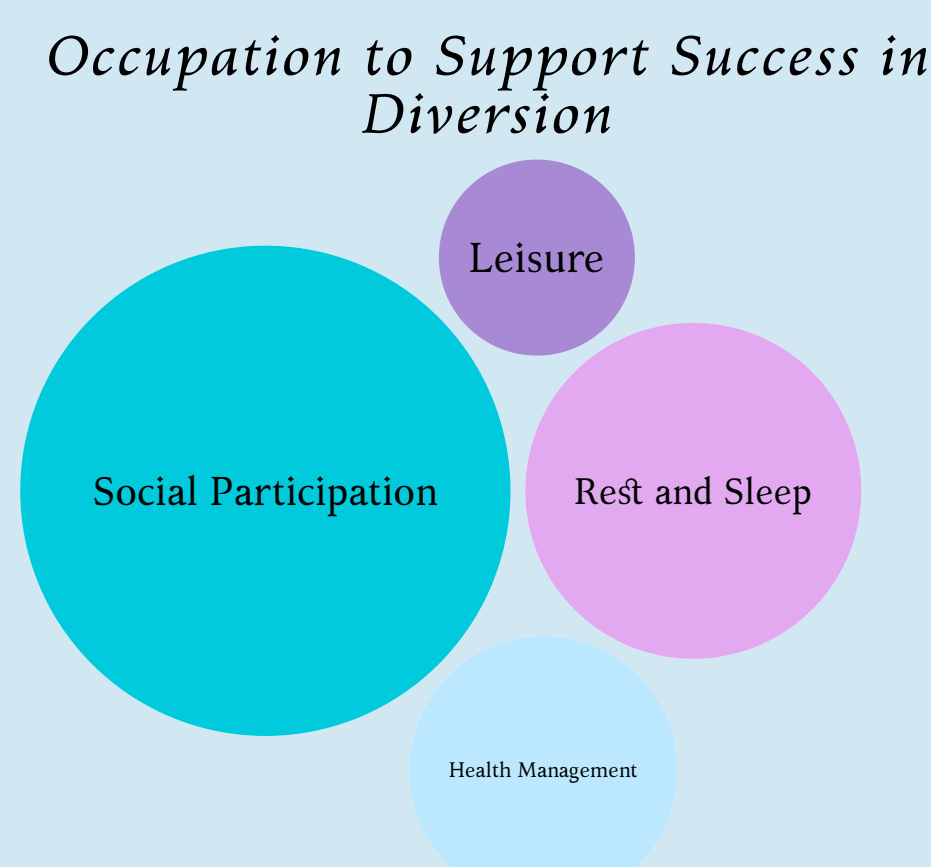
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## 01. Background

- Juvenile Court Diversion Programs exist throughout the United States to provide adolescents an alternative to formal court processing or incarceration. These programs are funded at the local, state, and federal level with grants. Diversion programs are rooted in accountability for unlawful actions. Opportunity to remedy inappropriate behavior is best explained by a teen's ongoing brain development (Wilson et al., 2018).
- Diversion supports teens in understanding the underlying causes behind their behavior to then make necessary changes with skill development to be successful in the future. Historically, these restorative programs consist of an interdisciplinary team to address biopsychosocial cause yet lack OT intervention (Dowdy et al., 2020).
- While completing the requirements of a Diversion contract, the charge is temporarily suspended. Successful completion of a Diversion program prevents a teen from having a charge filed on their juvenile record and the case is dismissed. The empowered teen will then apply the new strategies (Linkugel et al., 2020).
- This work was made possible by partnership with the BHWET-CAY HRSA Grant.

## 02. Objectives

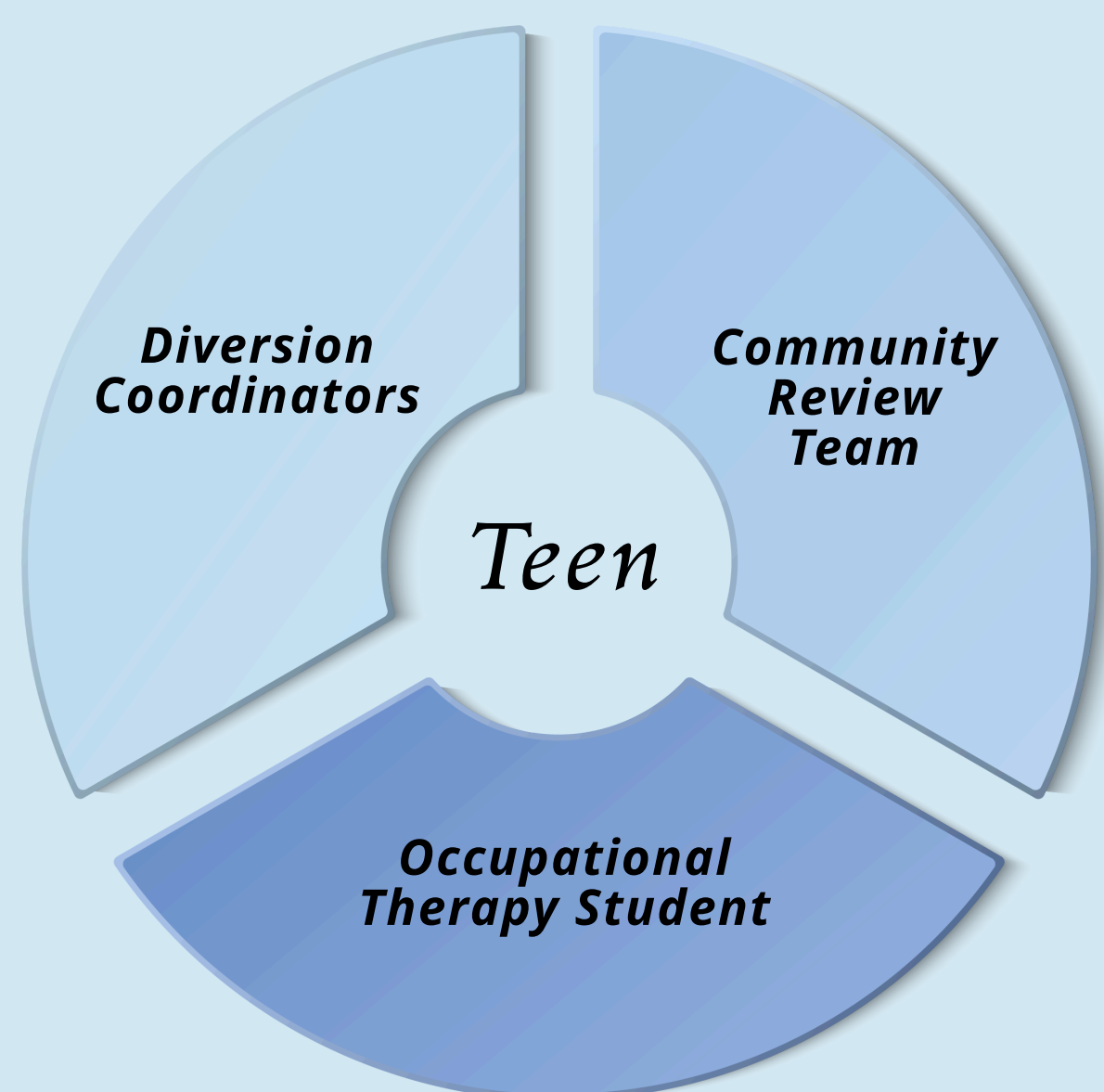
- Describe the unique role of occupational therapy in addressing biopsychosocial risk factors among youth in juvenile diversion programs.
- Identify strategies through which occupational engagement can enhance youth capacity, foster participation, and reduce the likelihood of future judicial involvement.



## 03. Experiencing Greater Derry's Juvenile Diversion



## 04. The Diversion Team



## 05. Identifying a Gap: Advocacy for the OT Role

- I recognized that OT could tailor individualized intervention within contracts to meet the biopsychosocial needs of teens through enhancement of performance skill deficits in everyday functioning.
- I met with The Upper Room's Diversion Coordinators to share the gap I noticed in our practice.
- I offered my services with advocacy of both the holistic and client centered lens of the OT profession to support building skill capacity for sustainable change.
- I attended Diversion Contact Hearing meetings weekly to advocate for client's individual needs.

## 06. OT Evaluation in Diversion

I requested trust from the Diversion team for opportunities to work with the teens. Overtime, I received 10 Diversion referrals for OT intervention based on perceived need.

### DEMOGRAPHIC

- 6 Males and 4 Females
- Teens ages 12-17
- Families seeking community-based alternative to court

### DOSAGE

- Number of sessions: 1, 2, or 4
- Length of each session: 45 minutes
- Time span: 1 week - 1.5 months
- Individuals recommended back: 1

### ASSESSMENT TOOLS

- Sensory Profile 2 (SP-2)
- Behavior Rating Inventory of Executive Function (BRIEF)
- Canadian Occupational Performance Measure (COPM)

## 07. OT Clinical Reasoning in Diversion



<p><b>Food Insecurity</b></p> <p><b>Housing Insecurity</b></p> <p><b>Adverse Childhood Experiences:</b> including violence, abuse, neglect, or a family member dying by suicide</p> <p>Growing up in a household with: substance use struggles, mental health crises, instability due to divorce, or having a family member who in incarcerated</p> <p><b>Overall lack of caregiver engagement</b></p>	<p><b>Executive Functioning:</b> examples include planning, decision making, impulse control, inhibition, problem-solving, and task initiation.</p> <p><b>Sensory Processing:</b></p> <ul style="list-style-type: none"> <li>- Quicker to react</li> <li>- Slower to react</li> </ul> <p><b>Life Skill Challenges:</b></p> <ul style="list-style-type: none"> <li>- Positive skill building</li> <li>- Promotion of healthy habits and routines</li> </ul> <p><b>Social Skills</b></p> <ul style="list-style-type: none"> <li>- Setting boundaries</li> <li>- Self-advocacy</li> </ul>	<p><b>Self-Regulation and Sensory Processing</b></p> <p><b>Positive Coping Skills</b></p> <p><b>Skill Building</b></p> <p>Exploration of Adaptive Occupations as a Means of Positive Leisure</p> <p><b>Social Participation, Self-Advocacy Skills, Communication Skills</b> to build trust/empathy with peers, family, adults</p> <p><b>Identity Formation</b></p> <p>Vocational Readiness</p> <p>Caregiver training to increase carryover of life skill topics</p>
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## 08. OT Intervention in Diversion

The main goal of the treatment sessions was to utilize meaningful and purposeful activities to promote positive functional outcomes with hope to reduce health risk behavior and replace with health promoting behavior.

### PRACTICE FRAMEWORKS

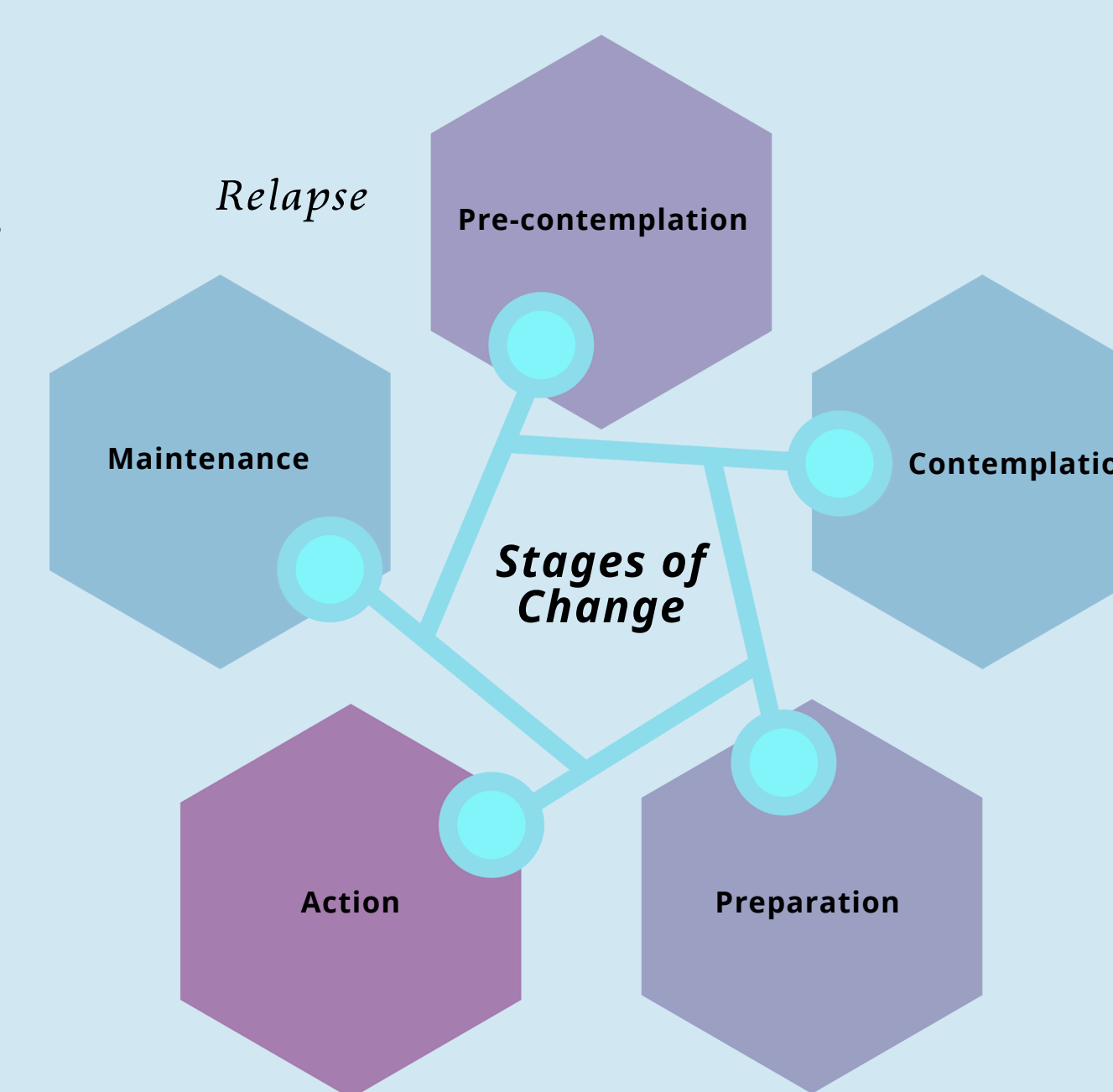
- Harm Reduction
- Anti-Opressive Practice
- Motivational Interviewing
- PEO
- Cognitive-Behavioral FOR
- Transtheoretical Model of Behavior Change with a stage match intervention approach

### SKILL DEVELOPMENT

- Body systems education
  - o Neuroscience of habit change
  - o Strategies to support self-regulation
- Zones of regulation
- Time and routine management
- Building interoceptive awareness
- Job readiness skills
- Emotional regulation
- Sensory processing
- Executive functioning skills
- Metacognitive training
- Anger and stress management
- Behavioral Modification versus Habit Modification
- Distress tolerance
- Life skill development
- Positive coping skill utilization
- Identity Formation
- Exploration of motivations



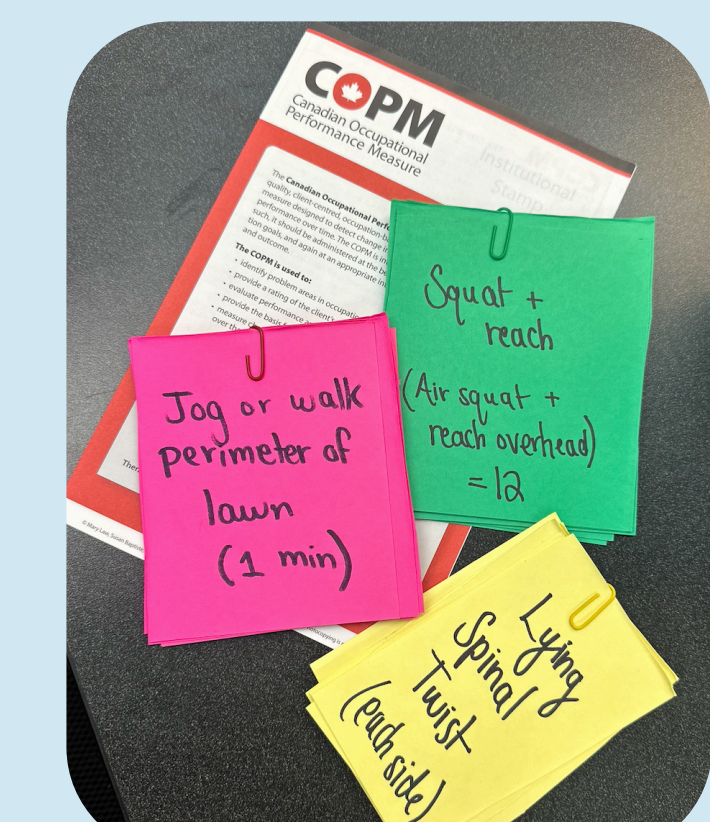
### The Transtheoretical Model Of Behavior Change



## 09. Aligning OT Intervention to Diversion Goals



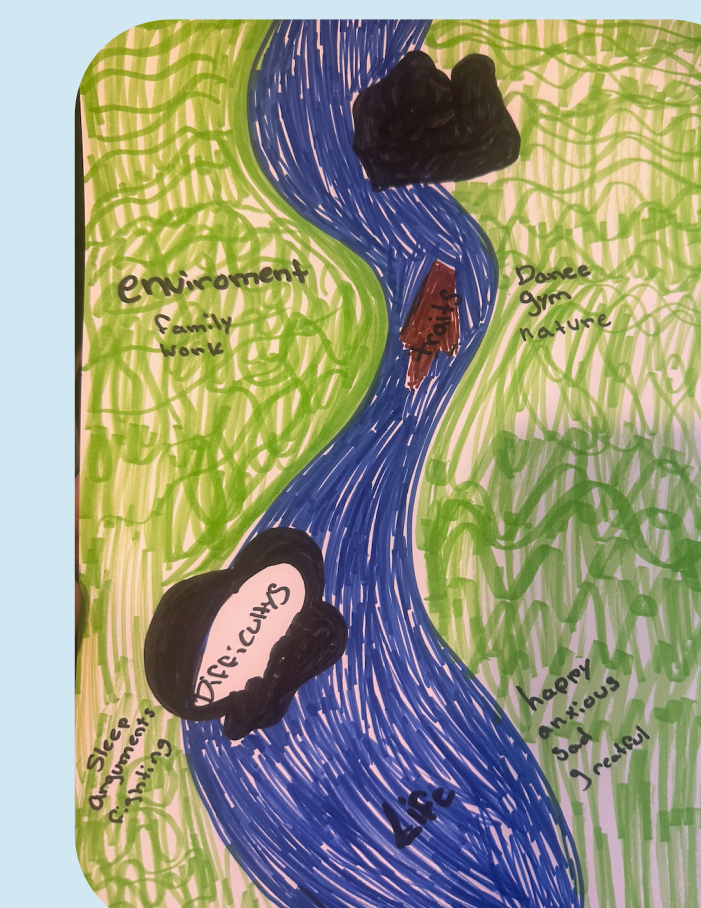
Self-Monitoring in Executive Functioning



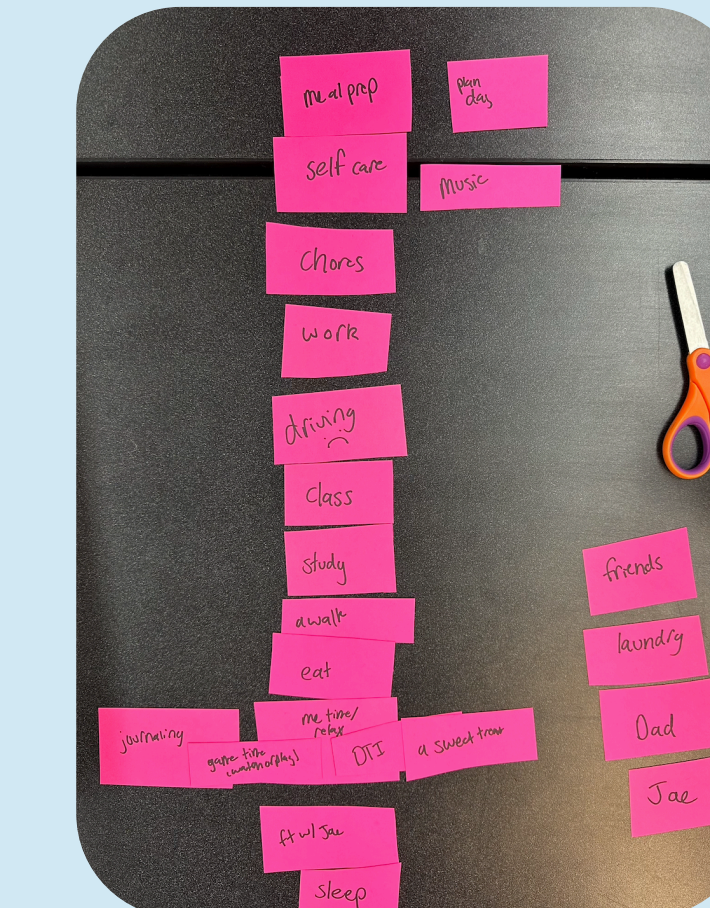
Self-Regulation in Leisure



Interoceptive Awareness of Anger



Self Awareness of Life Flow



Behavioral Activation for ADLs



Emotional Expression in Adaptive Coping

## 10. Next Steps

- I intend to continue this impactful work in the future. For now, there will be a Doctorate Level OT Student starting at The Upper Room who is enthusiastic about continuing this innovative work.
- Advocate at the state level for increased funding sources to sustain a role in this space beyond a grant as Diversion shows to reduce recidivism (Wilson et al., 2018).
- Continue to attend Diversion Contact Hearing meetings and expand this niche area with advocacy to the local police departments.
- Consider advocacy in correctional facilities, Forensic settings, or related Behavior Health roles as there are significant opportunities for OT in fostering teen resilience with second chances.
- Ensure all youth have the tools to participate meaningfully in the occupations that shape their lives and communities.

## References

- Dowdy, R., Estes, J., Linkugel, M., & Dvornak, M. (2020). Trauma, sensory processing, and the impact of occupational therapy on Youth Behavior in juvenile Corrections. *Occupational Therapy in Mental Health, 36*(4), 373-393. <https://doi.org/10.1080/0164212x.2020.1823930>
- Linkugel, M., Dvornak, M., Estes, J., Snodgrass, R., Klein, K., & Williams, A. (2020). Trauma, sensory processing, and the impact of OT on youth in juvenile corrections. *The American Journal of Occupational Therapy, 74*(4, Supplement 1). <https://doi.org/10.5014/ajot.2020.74s1-rp301c>
- Wilson, D. B., Brennan, I., & O'laghere, A. (2018). Police-initiated diversion for youth to prevent future delinquent behavior: A systematic review. *Campbell Systematic Reviews, 14*(1), 1-88. <https://doi.org/10.4073/csr.2018.5>

## Subjective Skill Improvements

- "I have been getting better sleep with less worry. When I wake up, I ground myself by going outside."
- "I hang out with family instead of poor influences now. We go to the the mall and I do better that way."
- "I have not been in many fights, at least less fights."
- "I learned how to advocate for my needs in school."

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