Combating Racial Disparity in the Juvenile-Justice System with MST
INTRO

Unquestionably, the disparity in minority youth coming in contact with the justice system is a problem. MST has been shown to be part of the solution.

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MST as Part of a System-Wide Solution

Attention needs to be focused on the critical and pervasive issue of disproportionate minority contact in the juvenile-justice system. What follows is a broad review of the problem, including the theories of its causes. Because this is a macro-level issue, the solutions will have to go well beyond what one treatment model can accomplish. However, research indicates Multisystemic Therapy (MST) can play an important, albeit limited role, in a comprehensive strategy to address this major systemic and social problem.

Outcomes of research studies with significant representation of black and Latino youth will be reviewed. Finally, actual case examples will highlight how MST is singularly positioned by being a family-driven treatment that is culturally responsive and centered in homes and communities. When partnered with law enforcement and the juvenile-justice system, it plays a unique bridge-building role in achieving shared outcomes for youth, families, schools, neighborhoods and the justice system itself.

The Problem

There is an imbalance in our nation’s juvenile-justice system that is not a secret known only within communities of color. The painful reality that many families have perceived and grappled with is that black and Latino youth are more likely to be arrested than their white peers. This has been well documented over the years. Black youth are less likely to be diverted, more likely to be sentenced to secure facilities and even more likely to be transferred to the adult system. Disparities exist at nearly every point in the juvenile-justice system, according to the U.S. Department of Justice’s Department of Juvenile Justice and Delinquency Prevention (OJJDP).

In 2011, the national residential-placement rates of minorities to whites was 2.7 to 1. Placement rates vary widely by racial and ethnic group. For example, in that same year, out of 100,000 youth of each racial/ethnic group, 112 white juveniles were in residential placement compared to 521 black youth. Using the same rate of per 100,000, 202 Latino youth and 361 Native Americans were in placement compared to 36 Asians.

With this disproportionate representation, a logical, yet sensitive, question to be asked is do youth of certain racial and ethnic groups commit more crimes? It is beyond the scope of this paper to attempt to settle a longstanding debate over differential involvement (certain populations commit more crimes) versus differential selection (certain populations are overly represented for reasons that are not related to actual differences in criminal behavior, but instead by policies and policing practices that have a disproportionate impact on ethnic minority communities). Regardless of the reasons for the racial differences in crime rates, clearly there is a problem that is significantly impacting youth and communities of color that requires comprehensive and multi-systemic solutions.

Research throughout the decades reflects differential crime rates. In 2003, data from the National Longitudinal Survey of Adolescent Health revealed that black, Latino and Native American youth self-reported significantly higher levels of engaging in violent offenses (serious fighting, assault and weapon use) than whites and that Asian youth reported significantly lower rates than whites. They found factors related to violence varied by racial group. With black juveniles, violence was related to community disadvantage. It was gang involvement for Latinos. Social bonds were the relevant factors when it came to
Native American youth. Whereas for Asians, it varied according to the situation. This echoes research from Peeples and Loeber\(^3\) in the previous decade when they found that when one controls for community factors, racial and ethnic differences in delinquency disappear.

This was supported once again with the 2005 findings\(^4\) by researchers from Harvard University and the University of Michigan who cite that though black youth commit violent offenses at two times the rate of white and Latino youth, there are community factors at play. Interestingly, in this review of more than 3,000 youth in Chicago, it was determined that Mexican Americans were 10 percent less likely than white youth to engage in violence, though Puerto Rican youth were more likely than white youth. This research also revealed that black youth were some six times more likely to die by homicide. The researchers determined that “disproportionality is largely social in nature amendable to intervention in the community rather than in individual settings.” They identified the powerfully deleterious effects of black youth being segregated residentially and noted that “segregation concentrates factors that influence violence rates . . . Black youth are living in a much more compromised environment because of residential segregation.”

Many studies reveal contributors to disproportionate minority contact,\(^5\) including selective enforcement, indirect effects of socio-economic status, differential offending and administrative practices, institutional racism and biased risk-assessment instruments. Also zero-tolerance policies at schools that criminalize infractions tend to be more common in poor, urban districts in which ethnic minorities are well represented. A 2015 study\(^6\) looked at the impact of race and severity of crimes to the youth’s treatment at various points along the juvenile-justice continuum from contact with law-enforcement officers to sentencing by the judge or magistrate. It was found that certain stops in the juvenile-justice system seemed to be more or less affected by racial biases and sometimes in unexpected ways.

Some of these factors may help explain why in 2011, black youth were 269 percent more likely to be arrested for curfew violations than whites (The Sentencing Project, 2014). Geographic separation has been one specific explanation for this vastly different arrest rate, given that a higher percentage of black juveniles live in urban areas where curfew enforcement becomes a major priority compared to suburban communities. In that same year, black juveniles were 44 percent more likely to be arrested for drug offenses than were whites. However according to self-reports, the percentage of black and white youth who used marijuana was relatively similar. “The Youth Risk Behavior Survey (YRBS),” which is the national survey of high-school students conducted by the Centers for Disease Control and Prevention, revealed that black and white youth used marijuana at least once over the last 30 days at 25 percent and 22 percent respectively. Although both groups reported relatively similar rates of using and buying on school property, interestingly, urban adolescents were more likely to use marijuana in public. Suburban youth were more likely to use in homes. Obviously, this makes those using in public much more visible to law enforcement. Despite black youth’s higher arrest rates for drug use in 2011, this is a vast improvement from when the disproportionality peaked in 1991 at the height

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of the War on Drugs. Then they were 579 percent more likely to be arrested than white youth. Prior to the launch of the War on Drugs in the 1980s, arrest rates for drug offenses between whites and blacks were relatively similar at the rate of about 1 in 300.

These varying arrest rates matter tremendously because “policies and practices that have a disparate impact on communities of color,” even though they may be unintentional, have far-reaching consequences at the individual and community level. Contact with the juvenile-justice system decreases options for housing, education and employment. It weakens the stability of communities of color and results in a deepening divide between whites and non-whites.

MST’s Role and Research Findings

It is beyond the scope of a local Multisystemic Therapy program to bring about wide-scale desegregation of communities or even large-scale juvenile-justice reforms. Such changes would include overhauling policies that have an unequal impact on ethnic minority youth and ensuring that validated and standardized risk-assessment measures are used by court personnel when making decisions concerning treatment and sentencing. However, there is a specific and significant role that MST can fill in the juvenile-justice system. Diversion into treatment versus corrections is indicated whenever feasible with consideration to community and youth safety. Black youth are less likely to have treatment for behavioral or mental-health issues prior to coming into contact with the courts than whites. Latino youth are also less likely to have received treatment due to language barriers and a lack of neighborhood services. As courts look for effective options for reducing re-offending, there are tremendous opportunities at the family and individual level for intervention.

A critical consideration for juvenile-justice systems is what the science reveals about helpful interventions for treating the complex issues that often lead to a youth’s involvement in the court system. It is also important to determine whether those positive effects are also achieved with youth from various racial and ethnic backgrounds. In 2010, Huey and Polo cited positive outcomes from their meta-analysis with MST effectively treating African American youth with conduct, substance use and suicidal behavior. Additionally, they cited MST’s positive findings with treatment of multiracial Hawaiian youth having co-morbid problems. (See MST’s Research at a Glance for a summary of findings for more than 25 randomized studies.)

A 2014 study found that MST was an effective intervention for Hispanic youth with significantly lower rates of arrest and higher rates of completing probation than comparison groups. This was the first MST study that contained enough Latino youth to analyze its impact on this population. The researchers looked at outcomes for 757 adolescents between the years 2003 and 2010. This is a particularly positive
finding given that Latino youth are over-represented in the juvenile-justice system and have not fared as well in traditional psychological treatments. However, disappointingly, the black youth who received MST in this one study did not show better outcomes than the control group. This was unexpected given previous studies indicated similar positive outcomes for blacks and whites. However, the researchers hypothesized that this might have been due to the higher level of detention for black young people in the Los Angeles justice system. A review of national crime statistics indicates variability for any given racial group depending on the community, and local contextual factors are clearly powerful contributors to arrest data and must always be considered.

Finally, Huey, Tilley, Jones and Smith make a strong case that overall psychotherapy is as effective with minorities as with whites and that evidence-based treatments should be a first-line intervention.
MST Therapists as “Bridge Builders”

Communities should consider the overall body of research that indicates MST has a record of achieving positive results for black and Latino youth, and then explore integrating an MST program into the system of care for those involved in the juvenile-justice system. In doing so, decision makers will discover an added bonus. MST therapists are uniquely positioned to be effective advocates for the adolescent and family as they come in contact with the court system. This is the opportunity to move from a macro-level problem to more micro-level solutions for the family and individual youth. MST therapists have the advantage of becoming deeply aware of the home, neighborhood, school and peer systems that the child resides in with all of their unique strengths and struggles that need to be taken into account as treatment proceeds. Families often view their MST therapist as a person who understands their situation well and is in a position to best assist them. It is in this role of trusted advocate that MST therapists can have a vastly different experience with families than the courts or law enforcement with the exact same youth and family.

It is not unusual for an MST therapist to meet a family who feels that their child is targeted by the police, schools or courts. This then requires the MST clinician to achieve a delicate, yet critical balance in order to function in the role of bridge builder between the broader systems and the family and youth. The therapist must be able to align with the family’s view that their child has found him or herself under scrutiny and then move them forward in treatment toward the juvenile taking responsibility for his or her actions and developing prevention plans for the future. Phillippe Cunningham, Ph.D., a professor in the Department of Psychiatry and Behavioral Sciences at the Medical University of South Carolina, describes the process this way. “How do you get a black kid, a minority kid, not to become a victim of the system? You can help a kid be less of a target down to how you talk, how you dress like I’ve learned how to do, because you don’t want to be arrested. I learned how to talk respectfully when interacting with police no matter how I feel. Then that goes into how to prepare for court. How to articulate concern for public safety versus making it more adversarial than it needs to be. Police and courts need to know the community is safe. The reality is that often when you live in high-crime areas, there are more police, and you are under higher scrutiny. The perspective kids need to see is that their parents, the therapist and police are working together, and they are not at odds.”

In addition to the comprehensive view of the ecology surrounding the adolescent, experienced MST practitioners have a similar understanding of the court system in their community. Generally, they have strong relationships and partnerships with officers of the court. It is this multi-systemic approach and position in the service system that leads to a key role that MST therapists play, that of bridge builder. The skilled therapist is keenly aware of shared desired outcomes for this particular youth and for the well-being of the community in which he or she resides.
What Does MST Treatment Entail?

Commonly, family sessions focus on increased supervision and monitoring. This leads to improved curfew compliance, fewer negative peer associations, better school attendance, elimination or reduction of substance use and more effective discipline. When done well, this should bring about decreased contact with law enforcement. Uniquely, MST therapists often spend a significant amount of treatment time devoted to assisting school personnel in addressing the youth’s problem behaviors in the school setting. It is not uncommon for MST therapists to assist caregivers in establishing more positive interactions between youth and school resource officers, as police officers in schools are often called.

Additionally, the therapist works with the family, court and school personnel to build perspective-taking skills. Careful planning for court and school hearings often entails role-playing in preparation for how the youth and a family addresses the court or school. It is also relatively common for MST therapists to assist court and school personnel in interacting differently with the family to alter fixed patterns between these systems in the youth’s life. If not addressed, these patterns can lead to increasingly punitive and hostile confrontations. MST therapists know that first, the family needs to show that the child will be held accountable.

Second, it should present plans for reducing the problem behavior. This is paramount for how the proceedings will unfold.

Here is one probation officer’s perspective on sharing a case with an MST therapist.

“My experiences with the program have all been positive, and the therapist was very helpful with one of my most challenging cases. I was able to work the case of a young teen who had been habitually running away, disruptive both at home and school, associated with negative peers and overall made very poor choices. The therapist supported me in decisions made in order to help both the youth and her mother regain trust, work on their relationship and gather the appropriate consequences for her age. Through my experiences, I would recommend the program and look forward to working with other MST therapists in the future.”

Shannon Turner
Probation Officer II, Cuyahoga County (Ohio) Juvenile Court
Case Examples

Another unique role of MST therapists is teaming up with law-enforcement officers on shared cases. The goals of including law enforcement into family sessions can vary. In one case, a single black mother in a rural area told the local white sheriff her plans for dealing with her teenage son’s aggression in a way that did not get him deeper involved in the legal system. With the MST therapist’s help, she realized she shouldn’t get sucked into negative communication patterns with her child that led to escalation and in the end, no accountability at home. Up until this point, the sheriff would step in to discipline the boy with the best of intentions and with a genuine concern for him and the family. He would arrest the boy and take him to jail. Mom would get a much needed break. However, the sheriff’s intervention led to mom being disempowered while criminal charges accumulated. The sheriff inadvertently and unknowingly undermined the mother’s role as the primary disciplinarian of her son.

After a session with the MST clinician, the officer was able to coach the mom to follow the crisis plan and knew how to encourage her to use her family supports to get a needed break from her son. In this way, mother and son could cool down, preventing aggression in the home. Afterward, mom was more likely to hold the youth accountable for his misbehavior because she did not lose self-control. Previously, the guilt over losing control led her to not hold him accountable for his actions, which started the home conflict in the first place. Before long, mom called her family supports in lieu of the sheriff.

The most common disciplinary measures used by law enforcement are lecturing, arrest and detainment. However, parents and families have a much broader repertoire of interventions they can use daily to drive their important lessons home. We have to reverse the reliance on the formal system to make long-lasting changes in the home and the youth more likely.
With another family, a single black mother and her MST therapist invited a police officer who “walked the beat” in a high crime area of the city into a session. They wanted critical information from him on the youth’s negative peer associations. Given how compliant and respectful her son was at home, it was very hard for the mother to understand that he was not always following the rules outside the home. What she did not take into account was the heavy influence of his delinquent friends. After gaining the officer’s perspective on the boy’s peers, the mother realized it was essential to address her son’s outside behavior. She increasingly structured his time to get him off the streets as much as possible. That included him going to work with her and his older brother.

These experiences collaborating with law enforcement and families are just a couple examples of what is possible and what is happening across the nation and in other countries with MST programs. Recently a police officer who works for a public-housing authority said, “As police officers, we often get called to help with parenting, such as waking a kid up for school, and we are happy to help.” Despite these noble intentions, MST therapists are well aware that if a family is more self-sufficient in addressing the needs of a troubled teenager, it will be much less likely that young person heads down a path into the criminal-justice system. That path may result in terrible, unintended consequences that are perpetuated for generations.

MST therapists working in homes and neighborhoods afford a singular opportunity for increased partnership between the youth, family, law enforcement and court officers to most effectively address what’s best for the youth and community. An important benefit is not only to the youth and families who receive the program, but also to the taxpayers and citizens of a community. There are significant cost savings\(^\text{13}\) that have been demonstrated through the years from reduced crime and placements for youth who receive Multisystemic Therapy.

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Endnotes


7. Rovner, Ibid.


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