# **APPENDIX C**

The following annotated bibliography was provided the Nation Center for Mental Health and Juvenile Justice (NCMHJJ). The *National Center for Mental Health and Juvenile Justice* was established in July 2001 to assist the field in developing improved policies and programs for youth with mental health disorders in contact with the juvenile justice system, based on the best available research and practice. The Center, which is operated by Policy Research, Inc. in Delmar, NY in partnership with the Council of Juvenile Correctional Administrators (CJCA), is supported by a grant from the John D. and Catherine T. MacArthur Foundation, and operates current projects with funding from the Office of Juvenile Justice and Delinquency Prevention (OJJDP) and the Substance Abuse and Mental Health Services Administration (SAMHSA). The reader is referred to their website (<a href="http://www.ncmhjj.com/">http://www.ncmhjj.com/</a>), which contains a wealth of information about this most challenging population.

**Resource #: 013281** (Journal Article: 11 pages)

Citation: Abram, K., Teplin, L., McClelland, G., Dulcan, M. Comorbid Psychiatric Disorders in Youth in Juvenile Detention. Archives of General Psychiatry 60(11): 1097-1108, 2003.

**Abstract:** The purpose of this study was to estimate six-month prevalence of comorbid psychiatric disorders among juvenile detainees by demographic subgroups (sex, race/ethnicity, and age). The study concluded that comorbid psychiatric disorders are a major health problem among detained youth. The authors recommend directions for research and discuss how to improve treatment and reduce health disparities in the juvenile justice and mental health systems. (authors)

**Resource #: 011236** (Presentation: 19 pages)

Citation: Brannan, A., Heflinger, C. Comparison of Youth with Co-Occurring Substance Abuse Disorders to Other Youth. Presentation to Florida Mental Health Institute 13th Annual Conference, February 2002. Abstract: This presentation gives a brief description of youth with co-occurring disorders including: comparison with youth with only mental health or only substance abuse problems, examination of two separate samples, description of distinguishing characteristics and changes over time.

Resource #: 007819 (Journal Article: 3 pages)

Citation: Cocozza, J.J. Identifying the Needs of Juveniles With Co-Occurring Disorders. Corrections Today: December 1997.

**Abstract:** This article provides an overview of some of the issues relating to juveniles with co-occurring disorders who enter the justice systems. The author describes what needs to be done to respond to the situation, and describes some of the work that has been done recently to help alleviate some of the problems. The work of the GAINS center relating to juveniles in the justice system is also described.

**Resource #: 012625** (Journal Article: 9 pages)

Citation: Curry, J., Wells, K., Lochman, J., Craighead, W.E., Nagy, P. Cognitive-Behavioral Intervention for **Depressed, Substance-Abusing Adolescents: Development and Pilot Testing.** Journal of the American Academy of Child and Adolescent Psychiatry 42(6): 656-665, 2003.

**Abstract:** The purpose of this study was to develop a cognitive-behavioral treatment for depressed, substance-abusing adolescents, determine its feasibility, and test its association with symptomatic improvement. Based on the efficacy of cognitive-behavioral interventions for either adolescent depression or substance abuse, an integrated group and family therapy intervention was developed for adolescents with both problems. The study found that high retention in treatment and attendance at sessions supported feasibility. Parent interviews demonstrated significant improvement in adolescent substance abuse, and adolescent measures demonstrated significant improvement in both domains. It concluded that integrated outpatient cognitive-behavioral intervention is feasible and associated with improvement for depressed, substance-abusing adolescents, though more studies are needed.

**Resource #: 010661** (Journal Article: 27 pages)

Citation: Dembo, R., Turner, G., Sue, C., Schmeidler, J., Borden, P., Manning, D. **Predictors of Recidivism to a Juvenile Assessment Center.** The International Journal of the Addictions 30(11):1425-1452, 1995.

**Abstract:** This article reports the results of a study of the predictors of recidivism to a Juvenile Assessment Center in Hillsborough County, Florida, involving over 2,000 youth processed at the center during its first eight months of operation. Consistent with previous research, the results show that those more likely to recidivate were younger aged youth, youth with abuse or neglect histories, with previous arrests for property, violence, or drug offenses, with potential vocational, leisure-recreation, and family problems, or who were arrested on property felony charges. The program activity and policy implications of these results are discussed.

**Resource #: 010179** (Guide: 219 pages)

Citation: Embree-Bever, J., Mankey, J., Nissen, L.B., Vanderburg, J. Strategies for Integrating Substance Abuse Treatment and the Juvenile Justice System: A Practice Guide Denver, CO: Denver Juvenile Justice Integrated Treatment Network, August 1998.

**Abstract:** The purpose of this Guide is to promote the most desirable practices in the field of substance abuse treatment with juvenile offenders. Drawing on practice experience, expert opinion and available research, the Guide provides an overview of the types of services available in the juvenile justice and alcohol and drug treatment systems, highlighting selective innovative approaches.

**Resource #: 011867** (Report: 61 pages)

Citation: Federation of Families for Children's Mental Health. Blamed and Ashamed: The Treatment Experiences of Youth with Co-Occurring Substance Abuse and Mental Health Disorders and Their Families. Alexandria, VA: Federation of Families for Children's Mental Health, 2001.

**Abstract:** This report presents the findings of a two-year project intended to document and summarize the experiences of youth with co-occurring mental health and substance abuse problems and their families the opportunity to reflect on and give voice to their experiences, to identify their successes and concerns, and to formulate recommendations so that a national audience might learn from their experiences and improve services. **Available from:** Federation of Families for Children's Mental Health, 1101 King Street, Suite 420, Alexandria, VA 22314, www.ffcmh.org

**Resource #: 010164** (Report: 50 pages)

Citation: Glover, R.W., Gustafson, J. S. National Dialogue on Co-Occurring Mental Health and Substance Abuse Disorders. Washington, DC: National Association of State Mental Health Program Directors, 1998.

Abstract: This report is a result of The National Dialogue on Co-Occurring Mental Health and Substance Abuse Disorders held in Washington, DC in June 1998. The event was co-sponsored by the Substance Abuse and Mental Health Services Administration (SAMHSA), the National Association of State Mental Health Program Directors (NASMHPD) and the National Association of the State Alcohol and Drug Abuse Directors (NASADAD). Invited participants included state mental health commissioners and alcohol and drug abuse directors, expert panelists, and federal officials. Their extensive, collective experience framed the groups' discussions and shaped recommendations for systems change.

**Available from:** New York State Office of Mental Health, 44 Holland Avenue, Albany, NY 12229, (518) 408-2026, www.omh.state.ny.us/omhweb/Dualdiag/dualdiag.htm.

**Resource #: 010165** (Report: 46 pages)

Citation: Glover, R.W., Gustafson, J.S. Financing and Marketing the New Conceptual Framework for Co-Occurring Mental Health and Substance Abuse Disorders: A Blueprint for Systems Change. Washington, DC: National Association of State Alcohol/Drug Abuse Directors, 1999.

Abstract: This report summarizes the June 1999 meeting of the National Association of State Mental Health Program Directors (NASMPHD) and the National Association of State Alcohol and Drug Abuse Directors (NASADAD) Task Force on Co-occurring Disorders, and the group's progress in finding ways to finance a system of care for people with co-occurring disorders and market the work of the task force (i.e., the conceptual framework) to help bring about widespread improvements in care for persons with co-occurring disorders. After the success of the first National Dialogue on Co-occurring Mental Health and Substance Abuse Disorders in breaking down traditional barriers between the mental health and substance abuse systems, participants urged their respective national associations to formally name this joint task force.

**Available from:** National Association of State Alcohol/Drug Abuse Directors, 808 Seventeenth Street NW, Suite 410, Washington, DC 20006, (202) 293-0090,

www.nasadad.org/Departments/Research/ConsensusFramework/financial/co1999.htm.

Resource #: 003725 (Journal Article: 9 pages)

Citation: Greenbaum, P.E., Foster-Johnson, L., Petrila, A. Co-Occurring Addictive and Mental Disorders Among Adolescents: Prevalence Research and Future Directions. American Journal of Orthopsychiatry 66(1): 52-60, 1996.

**Abstract:** Recent epidemiological research documenting the pervasive co-occurrence of addictive and mental disorders has been concerned primarily with adults. This paper proposes the need for similar studies of adolescents, considers the special problems inherent in the assessment of co-occurrence in this age group, reviews evidence suggesting that the prevalence of co-occurring disorders in adolescents parallels that documented for adults, and delineates future research strategies (authors).

#### Resource #: 010313 (Journal Article: 9)

Citation: Grella, C.E., Hser, Y., Joshi, V., Rounds-Bryant, J. Drug Treatment Outcomes for Adolescents with Comorbid Mental and Substance Use Disorders. Journal of Nervous and Mental Disease 189: 384-392, 2001. Abstract: This study compared the pretreatment characteristics and post-treatment outcomes of substance-abusing adolescents with and without comorbid mental disorders in the Drug Abuse Treatment Outcome Studies for Adolescents. Although comorbid youth reduced their drug use and other problem behaviors after treatment, they were more likely to use marijuana and hallucinogens, and to engage in illegal acts in the 12 months after treatment, as compared with the non-comorbid adolescents. Integrated treatment protocols need to be implemented within drug treatment programs in order to improve the outcomes of adolescents with comorbid substance use and mental disorders.

Resource #: 012947 (Journal Article: 19 pages)

Citation: Jenson, J., Potter, C. The Effects of Cross-System Collaboration on Mental Health and Substance Abuse Problems of Detained Youth. Research of Social Work Practice 13(5): 588-607, 2003.

**Abstract:** This study examined the effects of a collaborative intervention targeting juvenile detainees with co-occurring mental health and substance abuse problems. Changes in mental health problems, substance use, and delinquency were assessed. The results indicated significant time effects were found for anxiety and depression and for the frequency of substance use and delinquency. Significant time by cluster interactions were found for mental health problems of obsessive-compulsive behavior and interpersonal sensitivity and for property and drug-related offending. The study concluded that cross-system collaboration among mental health, substance abuse, and juvenile justice systems is a promising approach for treating delinquent youth with co-occurring problem behaviors. (authors)

**Resource #: 013300** (Report: 125 pages)

Citation: Juvenile Rehabilitation Administration. Integrated Treatment Model Report. Olympia, WA: Washington State Dept. of Social and Health Services, Juvenile Rehabilitation Administration, 2002.

Abstract: This report was compiled by the Juvenile Rehabilitation Administration's (JRA) Integrated Treatment Model Committee. This workgroup, as it was termed, was charged with the task of developing a research-based treatment model that utilized cognitive-behavioral principles. The model was to be tailored for use in both residential and community settings in the juvenile justice continuum of care. This model views all behavior, including a youth's criminal behavior as occurring in a larger social and historical context, serving a specific function. As such, criminal behavior is a product of one's learning history, encompassing family dynamics, specific circumstances, and thoughts and feelings. This report summarizes and expands on this model as it will be implemented within the JRA in Washington State. In addition to the specifics of the focus of the treatment model, it also outlines costs and staff time necessary for successful implementation and ongoing support. (authors)

**Resource #: 003693** (Journal Article: 15 pages)

Citation: Kessler, R.C., Nelson, C.B., McGonagle, IK., Edlund, M.J., Frank, R.G., Leaf, P.J. **The Epidemiology of Co-Occurring Addictive and Mental Disorders: Implications for Prevention and Service Utilization.** American Journal of Orthopsychiatry 66(1): 17-31, 1996.

**Abstract:** This article presents general population data from the National Comorbidity Survey concerning persons with co-occurring mental health and substance use disorders. Findings indicate that co-occurrence is highly prevalent in the general population and is usually due to the association of a primary mental disorder with a secondary addictive disorder. It is also associated with a significantly increased probability of treatment, although the finding that fewer than half of the cases with 12-month co-occurrence received any treatment in the year prior to interview suggests the need for greater outreach efforts (authors).

**Resource #: 012472** (Journal Article: 20 pages)

Citation: Potter, C., Jenson, J. Cluster Profiles of Multiple Problem Youth: Mental Health Problem Symptoms, Substance Use, and Delinquent Conduct. Criminal Justice and Behavior 30(2): 230-250, 2003. Abstract: This article discusses the prevalence and patterns of co-occurring mental health problem symptoms, substance use, and delinquent conduct, which were examined in a sample of multiple problem detained youth. Three distinct patterns of co-occurrence were found using cluster analysis. Youth in two of the clusters had moderate mental health problems but differed in the severity of substance abuse and delinquent conduct. A third group displayed serious mental health symptoms and suicidality coinciding with high rates of substance use and crime.

Resource #: 007555 (Manuscript: 22 pages)

Citation: Prescott, L. Adolescent Girls with Co-Occurring Disorders in the Juvenile Justice System. Delmar, NY: The National GAINS Center for People with Co-Occurring Disorders in the Justice System, 1997.

Abstract: This paper is meant to be an outline of some of the major topics concerning adolescent girls with co-occurring disorders in the juvenile justice system. It is not meant to be a synthesized compendium of answers, but rather a source of generation for questions and dialogue that can facilitate further understanding, program development, collaboration, and policy development. Demographic statistics on this population is provided, along with information regarding policy and service systems. The author also discusses future challenges and creative redirection for dealing with this issue.

Available from: The GAINS Center, 345 Delaware Ave., Delmar, NY 12054, (800) 311-GAIN.

**Resource #: 007820** ( Report: 27 pages)

Citation: Prescott, L. Improving Policy and Practice for Adolescent Girls with Co-Occurring Disorders in the Juvenile Justice System. Delmar, NY: The National GAINS Center for People with Co-Occurring Disorders in the Justice System, 1998.

**Abstract:** While attention has begun to focus on the mental health and substance recovery needs of youth in the juvenile justice system in general, little attention has been given to the gender-specific needs of adolescent girls. This report provides an overview of female adolescents with co-occurring disorders in the justice system, discusses the critical issues in this area, and offers specific recommendations for supporting gender-specific, culturally and developmentally sensitive policy and practice.

Available from: The GAINS Center, 345 Delaware Ave., Delmar, NY 12054, (800) 311-GAIN.

Resource #: 010129 (Journal Article: 7 pages)

Citation: Randall, J., Henggeler, S., Pickrel, S., Brondino, M. Psychiatric Comorbidity and the 16-Month Trajectory of Substance-Abusing and Substance-Dependent Juvenile Offenders. Journal of the American Academy of Child and Adolescent Psychiatry, 38(9):1118-1124, September 1999.

**Abstract:** The objective of this study was to examine the concurrent correlates of internalizing and externalizing disorders among substance-abusing and substance-dependent juvenile offenders and to determine the association between psychiatric comorbidity and psychosocial functioning of the youth 16 months later.

**Resource #: 010035** (Report: 55 pages)

Citation: Robertson, A., Husain, J. Prevalence of Mental Illness and Substance Abuse Disorders Among Incarcerated Juvenile Offenders. Mississippi State University Social Science Research Center, 2001.

Abstract: This study examines the co-occurrence of mental health and substance abuse disorders among incarcerated juveniles held in Mississippi detention centers and training schools. In addition, the study examines, by gender, the types and severity of disorders prevalent in Mississippi incarcerated juveniles.

**Resource #: 010767** (Journal Article: 15 pages)

Citation: Rounds-Bryant, J., Kristiansen, P., Fairbank, J., Hubbard, R. Substance Use, Mental Disorders, Abuse, and Crime: Gender Comparisons Among a National Sample of Adolescent Drug Treatment Clients. Journal of Child and Adolescent Substance Abuse 7(4):19-34, 1998.

**Abstract:** This paper describes important gender comparisons in drug and alcohol use, illegal activity, physical and sexual abuse, and mental health problems among a large sample of adolescents who were treated from 1993 to 1995 in adolescent-oriented drug programs that participated in the Drug Abuse Treatment Outcome Study of Adolescents.

**Resource #: 011195** (Journal Article: 32 pages)

Citation: Sacks, S. Co-Occurring Mental and Substance Use Disorders: Promising Approaches and Research Issues. Substance Use and Misuse 35(12-14): 2061-2093, 2000.

**Abstract:** This paper surveys the mental health and drug user treatment literature, identifying promising approaches and research issues in the treatment of co-occurring mental illness and substance use disorders. The prevalence and classification of co-occurring disorders are briefly reviewed, and selected treatment models currently in use are described. Three models are cited as representing particularly promising approaches - comprehensive integrated treatment, assertive community treatment, and the modified therapeutic community - and best practices are summarized. This paper proposes a research agenda focused on relevant emerging treatment issues.

**Resource #: 013577** (Journal Article: 12 pages)

Citation: Stevens, S., Estrada, B., Murphy, B., McKnight, K., Tims, F. Gender Differences in Substance Use, Mental Health, and Criminal Justice Involvement of Adolescents at Treatment Entry and at Three, Six, Twelve and Thirty Month Follow-Up. Journal of Psychoactive Drugs 36(1): 13-25, 2004.

Abstract: This paper states that many adolescents entering substance abuse treatment have coexisting mental health problems and are criminally involved. Examination of the complexities of substance use, mental health, and criminal justice involvement along with changes in these issues following treatment is needed. This study includes males and females enrolled in seven drug treatment programs located in geographically diverse areas of the United States. Comparisons between males and females at treatment entry and three, six twelve and thirty months later were examined with regard to substance use, mental health, and criminal justice involvement. Results indicate that females showed significantly greater severity in substance use, problems associated with use, and mental health related variables at intake while males had significantly more days on probation/parole. With respect to change over time, the rate of change in mental health and days on probation/parole differed between the sexes. Results indicate that while rate of change is different for males and females on most variables, there was positive change following treatment for both groups with regard to substance use, mental health, and probation/parole status. The high severity levels of females at intake calls for gender-specific outreach and identification along with gender-specific treatments (authors).

**Resource #: 012129** (Report: 57 pages)

Citation: Substance Abuse and Mental Health Services Administration. Strategies for Developing Treatment Programs for People with Co-Occurring Substance Abuse and Mental Disorders. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2003.

**Abstract:** This report is a part of the SAMHSA initiative to address the issues surrounding the delivery effective treatment to people with co-occurring substance abuse and mental disorders. The authors highlight challenges to service delivery, delineate strategies to overcome these challenges, identify methodologies to help public purchasers build integrated care systems, and describe core competencies and training from which treatment professionals and the people they serve can benefit.

**Available from:** Substance Abuse and Mental Health Services Administration, 1 Choke Cherry Road, Rockville, MD 20857, www.nccbh.org/cooccurringreport.pdf.

**Resource #: 011820** (Report: 218 pages)

Citation: Substance Abuse and Mental Health Services Administration. SAMHSA Report to Congress on the Prevention and Treatment of Co-Occurring Substance Abuse Disorders and Mental Disorders. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2002.

Abstract: This is a report to congress on the prevention and treatment of co-occurring substance abuse disorders and mental disorders. It includes: a summary of the manner in which individuals with co-occurring disorders are receiving treatment, including the most up-to-date information available on the number of children and adults with co-occurring disorders, and the manner in which Federal Block Grant funds are used to serve these individuals; a summary of practices for preventing substance abuse disorders among individuals who have mental illness and are at risk of having or acquiring a substance abuse disorder; a summary of evidence-based practices for treating individuals with co-occurring disorders and recommendations for implementing such practices; and a summary of improvements necessary to ensure that individuals with co-occurring disorders receive the services they need.

Available from: Substance Abuse and Mental Health Services Administration, 1 Choke Cherry Road, Rockville, MD 20857, www.samhsa.gov.

**Resource #: 013235** (Journal Article: 9 pages)

**Citation:** Teplin, L., Abram, K. **Co-Occurring Disorders Among Mentally Ill Jail Detainees.** American Psychologist 46:1036-1045, 1991.

**Abstract:** In this study, data on the co-occurrence of severe mental disorder, substance abuse, and antisocial personality disorders were gathered from randomly selected male urban jail detainees. The authors demonstrated that most subjects with a severe mental disorder (schizophrenia or a major affective disorder) also meet criteria for a substance abuse or antisocial personality disorder. These findings suggest several changes in public policy regarding health care delivery in correctional settings and for the general population. Studies have demonstrated that police often arrest the mentally ill when treatment alternatives would be preferable but are unavailable. Thus, jails may contain disproportionate numbers of severely mentally ill persons who have co-occurring disorders. (authors)

**Resource #: 010127** (Unpublished Paper: 14 pages)

Citation: Teplin, L., Abram, K., McClelland, G., Dulcan, M. Psychiatric and Substance Abuse Disorders Among Juveniles in Detention: An Empirical Assessment.

**Abstract:** This paper reports on psychiatric and substance use disorders of detained juveniles. Data are from a sample of 1800 detained juveniles at the point of intake at a large urban detention facility in Cook County, IL. The sample is stratified by race, detention status (adult transfer vs. delinquent), age and gender.

**Resource #: 010949** (Journal Article: 9 pages)

Citation: Underwood, L. Screening and Assessing the Mental Health and Substance Use Needs of African-American Youth. Juvenile Correctional Mental Health Report, 2(4):49-50, 56-62, 2002.

**Abstract:** Out of necessity, most juvenile justice systems offering screening and assessment services to African-American youth with co-occurring mental health and substance use needs have relied on inappropriate instruments and methodologies. This has led to the inconclusive and unreliable analysis of the actual needs of African-American youth with co-occurring disorders. There is an urgent need for proper guidelines, testing and interview materials and acceptable procedures for African-Americans' treatment upon entering the juvenile justice system. This paper discuses topics such as minority overrepresentation, cultural competency, selection of instruments, and recognizing key clinical signs and symptoms. It offers recommendations on future research (author).

**Resource #: 010490** (Program Description: 9 pages)

**Citation:** University of Washington Division of Public Behavioral Health and Justice Policy. **Prime Time Project.** Seattle, WA:University of Washington.

**Abstract:** The Prime Time Project is a community-based intervention for youth in the juvenile justice system, formed through collaboration between Children's Hospital and Regional Medical Center and King County Department of Youth Services. The target population is youth who (1) have a recent (past three months) history of problematic or excessive substance use (2) exhibit signs of a psychiatric illness (i.e., Mood Disorder, Anxiety Disorder, PTSD), in addition to an externalizing behavior disorder, and (3) exhibit persistent antisocial behavior that has resulted in multiple incarcerations.

**Available from:** http://depts.washington.edu/site/index/html

**Resource #: 012163** (Report: 50 pages)

Citation: Wells, L., Bane, B. Colorado Adolescents with Co-Occurring Disorders: Assessment of the Needs. Denver, CO: Colorado Committee on Adolescents with Substance Abuse and Mental Health Disorders, 2001. **Abstract:** This report is based on a statewide assessment of the needs of adolescents with co-occurring disorders, focusing on the availability of current services, and priorities for allocation of resources. The needs assessment has two parts - a survey aimed at professionals and community members involved in adolescent services and focus groups with adolescents with co-occurring disorders and their parents. The report has three sections: conclusions on availability of and need for services, conclusions on barriers to accessing services and recommendations for change.