



The National Center on
Addiction and Substance Abuse
at Columbia University

Model Bill of Rights for Children in Juvenile Justice Systems

Whereas, research has shown that up to 80 percent of juveniles in juvenile justice systems have a nexus to substance abuse: 18.2% are under the influence of alcohol or drugs while committing their offenses, 53.9% test positive for drugs at the time of arrest, 12.1% are arrested for committing an alcohol or drug offense, 62.5% report having substance abuse problems, and many exhibit some combination of these characteristics¹; and

Whereas, 44 percent of arrested juveniles meet clinical criteria for substance use disorder requiring medical treatment², only 3.6 percent of arrested juvenile offenders with substance abuse and addiction problems receive any form of substance abuse treatment³; and

Whereas, up to 75 percent of all incarcerated juveniles have some diagnosable mental health disorder⁴, yet mental health services remain scarce⁵; and

Whereas, incarcerated juveniles have an increased need for basic and special education⁶, but they are progressively left behind in systems that often rely upon uncredentialed teachers, crowded classrooms, inadequate facilities and have no educational plan or curriculum⁷; and

Whereas, juveniles who drink and use drugs are more likely to be arrested multiple times, with each conviction raising the likelihood of transfer to adult court and eventual adult felony conviction⁸, and transferred juveniles recidivate faster with more serious offenses than those retained in juvenile court⁹; and

Whereas, at least 30 percent of adults in prison for felony crimes were incarcerated as juveniles¹⁰; and

Whereas, instead of spending nearly \$50,000 annually to incarcerate a juvenile offender¹¹, in appropriate cases, states could rehabilitate court-involved juveniles in need through diversion to treatment programs and other appropriate services for well under \$5,000 a year per juvenile¹²; and

Whereas, if treatment options are successful in only 12 percent of cases, reducing the population of adult prisoners with juvenile records by the same amount would create annual savings of 18 billion dollars, as well as reducing overall crime¹³; and

Whereas, with comprehensive screening, the needs of juveniles can be identified and appropriate care provided while maintaining the safety of the community; and

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Whereas, with appropriate care, juvenile offenders will recidivate less¹⁴, and can become productive, healthy and law-abiding members of society;

We Therefore Resolve and Recognize that all juveniles in the system have the following rights:

Right to Rehabilitation: In the handling of each juvenile case, the State shall use its best efforts to rehabilitate the juvenile, in furtherance of which, a comprehensive assessment shall be made of each juvenile's substance use, medical and mental health, education and family issues that may be linked to the delinquency.

Right to Treatment: All juveniles in the system have the right to effective, evidence-based treatment services for substance abuse problems and disorders as well as health (medical, mental, dental) issues, based on comprehensive assessment of their needs, and provided by trained professionals.

Right to Education: All juveniles in the system have the right to a public education, including special education where needed, that meets criteria as established by the state education department.

Right to Family and Social Services: All juveniles in the system have the right to services to improve family and social functioning.

Right to Least Restrictive Alternatives: All juveniles in the system shall be entitled to the least restrictive means appropriate to their individual cases throughout their contact with the juvenile system. At no time shall a child be subject to more restrictive means than his or her case otherwise warrants in order to secure appropriate services.

Right to Reintegration: All juveniles in the system have the right to be provided with appropriate aftercare to support successful reentry into the community that incorporates a continuity of care from placement through release.

We Further Resolve and Recognize that all juveniles in the system have the following rights, which are essential for the realization of the foregoing rights:

Right to Non-Discrimination: All juveniles in the system have the right to have all determinations in their cases made without regard to religion, race, national origin, ethnicity, gender or sexual orientation.

Right to Safety and Security: All juveniles in the system have the right to be housed in safe, dedicated juvenile facilities, to be kept free from any form of abuse, including protection from disproportionate means and the use of force.

Right to Counsel: All juveniles in the system have the right to free, competent counsel at all stages of proceedings;

Right to Protection from Self-Incrimination: All juveniles in the system have the right to appropriate safeguards against self-incrimination, including the vesting in the juvenile of a privilege for any statement by the juvenile given in furtherance of treatment or assessment for treatment.

Right to Evidence-Based Practice: The state shall track and evaluate the effectiveness of treatment and assessments over time to ensure that the means employed are scientifically supported and improved.

Right to Speedy Review: All juveniles in the system have the right to have their cases processed fairly and quickly.

We Further Resolve that none of the foregoing rights shall abridge or abrogate any other recognized rights, entitlements or privileges enjoyed by those in whom these rights are vested.

¹ The National Center on Addiction and Substance Abuse (CASA) at Columbia University. (2004). *CASA analysis of the Arrestee Drug Abuse Monitoring Program (ADAM) 2000* [Data file]. Washington, DC: U. S. Department of Justice, Office of Justice Programs, National Institute of Justice.

² The National Center on Addiction and Substance Abuse (CASA) at Columbia University. (2004). *CASA analysis of the National Survey on Drug Use and Health, 2002* [Data file]. Rockville, MD: U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration, Office of Applied Studies.

³ The National Center on Addiction and Substance Abuse (CASA) at Columbia University. (2004). *Criminal Neglect: Substance abuse, juvenile justice and the children left behind*. New York: The National Center on Addiction and Substance Abuse (CASA) at Columbia University.

⁴ Coalition for Juvenile Justice. (2000). *Coalition for Juvenile Justice 2000 annual report*. Washington, DC: Coalition for Juvenile Justice.

⁵ Stephens, R., & Arnette, J. (2000). *From the courthouse to the schoolhouse: Making successful transitions: OJJDP juvenile justice bulletin* (NCJ Pub. No. 178900). Washington, DC: U.S. Department of Justice, Office of Justice Programs, Office of Juvenile Justice and Delinquency Prevention; Portner, J. (1996). Jailed youths shortchanged on education. *Education Week*, 16(5), 1.; Meisel, S., Henderson, K., Cohen, M., & Leone, P. (2000). *Collaborate to educate: Special education in juvenile correctional facilities*. [On-line]. Retrieved October 9, 2001 from the World Wide Web: <http://www.edjj.org>.

⁶ Stephens, R., & Arnette, J. (2000). *From the courthouse to the schoolhouse: Making successful transitions: OJJDP juvenile justice bulletin* (NCJ Pub. No. 178900). Washington, DC: U.S. Department of Justice, Office of Justice Programs, Office of Juvenile Justice and Delinquency

Prevention; Portner, J. (1996). Jailed youths shortchanged on education. *Education Week*, 16(5), 1.

⁷ Ch 5 41 Portner, J. (1996). Jailed youths shortchanged on education. *Education Week*, 16(5), 1.

⁸ Washington State Institute for Public Policy. (1997). The class of 1988, seven years later: How a juvenile offender's crime, criminal history, and age affect the chances of becoming an adult felon in Washington State. [Online]. Retrieved August 26, 2004 from the World Wide Web: <http://www.wsipp.wa.gov>.

⁹ Howell, J. (1998). Abolish the juvenile court? Nonsense! *Juvenile Justice Update*, 4(1), 1-2, 10-13.

¹⁰ The National Center on Addiction and Substance Abuse (CASA) at Columbia University. (2004). *CASA analysis of Religiousness and Post-release Community Adjustment in the United States 1990-1998* [Data file]. Ann Arbor, MI: Inter-university Consortium for Political and Social Research; 2004 *CASA analysis of the 1997 Survey of Inmates in State and Federal Correctional Facilities* [Data file]. Washington, DC: U.S. Department of Justice, Office of Justice Programs, Bureau of Justice Statistics; 2004 *CASA analysis of the 1976 Survey of California Prison Inmates* [Data file]. Ann Arbor, MI: Inter-university Consortium for Political and Social Research; 2004 *CASA analysis of Cross-validation of the Iowa Offender Risk Assessment Model in Michigan, 1980-1982* [Data file]. Ann Arbor, MI: Inter-university Consortium for Political and Social Research; 2004 *CASA analysis of Employment Services for Ex-offenders, 1981-1984: Boston, Chicago, and San Diego* [Data file]. Ann Arbor, MI: Inter-university Consortium for Political and Social Research; 2004 *CASA analysis of Profiling Inmates in the Los Angeles County Jail, 1996-1998* [Data file]. Ann Arbor, MI: Inter-university Consortium for Political and Social Research; 2004 *CASA analysis of Psychological Classification of Adult Male Inmates in Federal Prison in Indiana, 1986-1988* [Data file]. Ann Arbor, MI: Interuniversity Consortium for Political and Social Research; Edmund S. Muskie School of Public Service. (2003). *Reoccurring criminal behavior analysis: Snapshot survey of 400 Maine state prisoner files*. [On-line]. Retrieved September 23, 2004 from the World Wide Web: <http://www.state.me.us>; 2003 *CASA analysis of the Drug Treatment Alternative-to- Prison (DTAP) Program* [Data file].

¹¹ Juvenile Justice FYI. (2004). *Juvenile justice FAQ*. [On-line]. Retrieved August 16, 2004 from the World Wide Web: <http://www.juvenilejusticefyi.com>; Fass, S. M., & Pi, C.-R. (2002). Getting tough on juvenile crime: An analysis of costs and benefits. *Journal of Research in Crime and Delinquency*, 39(4), 363-399; Byrnes, M., Macallair, D., & Shorter, A. D. (2002). *Aftercare as afterthought: Reentry and the California Youth Authority: Prepared for the California State Senate Joint Committee on Prison and Construction Operations*. [On-line]. Retrieved September 23, 2004 from the World Wide Web: <http://www.cjcj.org>.

¹² National Criminal Justice Reference Service. (2003). *Drug Court Resources: Facts and Figures*. [On-line]. Retrieved October 24, 2003 from the World Wide Web: <http://www.njcrs.org>; The National Center on Addiction and Substance Abuse (CASA) at Columbia University. (2004). *Criminal Neglect: Substance abuse, juvenile justice and the children left behind*. New York: The National Center on Addiction and Substance Abuse (CASA) at Columbia University.

¹³ The National Center on Addiction and Substance Abuse (CASA) at Columbia University. (1998). *Behind bars: Substance abuse and America's prison population*. New York: The National Center on Addiction and Substance Abuse (CASA) at Columbia University.

¹⁴ Center for Substance Abuse Treatment, & Denver Juvenile Justice Integrated Treatment Network. (2000). *Strategies for integrating substance abuse treatment and the juvenile justice system: A practice guide* (DHHS Pub. No. (SMA) 00-3369). Rockville, MD: U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration, Center for Substance Abuse Treatment.; Lipsey, M., Wilson, D., & Cothorn, L. (2000). *Effective intervention for serious juvenile offenders* (NCJ Pub. No. 181201). Washington, DC: U.S. Department of Justice, Office of Justice Programs, Office of Juvenile Justice and Delinquency Offenders; Lipsey, M. W. (1999). Can intervention rehabilitate serious delinquents? *Annals of the American Academy of Political and Social Science*, 564, 142-166.