

Youth with Brain Injury in Virginia's Juvenile Justice System

CONCERN

- The incidence, management and treatment of TBI in offender populations is of significant concern because TBI is implicated as a causative factor in behaviors such as aggression, impulsivity and substance abuse that may lead to arrest and incarceration.

Secretary of Public Safety Workgroup

- 2008 Virginia Acts of Assembly directed the Secretary to “... analyze the incidence of TBI in the adult and juvenile ... offender populations”.
- Over the summer of 2008, the workgroup reviewed relevant literature, collected and analyzed data from DOC and DJJ, and surveyed other states regarding their experience.

Workgroup Conclusions

- The prevalence of TBI in Virginia's offender populations cannot be established with a reasonable degree of certainty based on available data
- Available data do suggest that a significant proportion of the offender population may have a history that suggests the possibility of TBI

Workgroup Conclusions

- Other states do not appear to have reliable data available regarding prevalence or a best practices model
- DOC, DJJ, and DRS do not have the necessary resources or expertise to conduct the needed research

Workgroup Recommendations

- Funding be secured for research to establish the scope of the problem and develop a best practices model
- Research effort should begin with population of juveniles committed to Virginia's juvenile correctional centers
- Subsequently, the Commonwealth Neurotrauma Initiative Board agreed to prioritize funding in this area

Purposes of Study

- Study DJJ's screening, evaluation, and intervention for youth with TBI
- Determine the strengths, limitations, and inadequacies of the present system
- Formulate guidelines for brain injury screening, evaluation, and intervention for the DJJ population
- Develop training materials and facilitate ongoing training for DJJ staff

Study Design Year 1

- Develop brain injury and related disability prevalence estimates for youth committed to DJJ institutions; develop and conduct a needs assessment; identify best practices

Study Design Year 2

- Pilot test revised screening and assessment plan; develop user friendly assessment and screening manual; educate and train staff

Study Design Year 3

- Implement new screening and intervention guidelines; develop updated prevalence estimates; complete updated needs assessment and project evaluation; disseminate results to other agencies and providers

Anticipated Results

- Improve our ability to identify and successfully intervene with youth whose delinquent behavior may be influenced by TBI
- Reduce recidivism through appropriate identification, treatment, and management of delinquent youth with TBI
- Develop a best practices model for this population