Overview of Michigan’s Initiative

Police are often the first point of contact for entry into the juvenile justice system and represent the largest avenue to detention and court involvement. As such, this point of contact provides an excellent opportunity for early intervention and diversion from formal judicial processing for youth with co-occurring mental and substance use disorders. The goal of this initiative in Michigan was to minimize, through police response alternatives and diversion, the number of youth with co-occurring disorders entering the formal court adjudication process. The objective was to develop a model that provides both alternatives and training to police officers on the use of diversion instead of arrest for these youth. If this strategy proved effective, it was believed that the number of children entering the formal juvenile justice system solely for mental health treatment and the use of secure detention for youth with co-occurring disorders would decline. Wayne County (Detroit) was selected as a pilot site for this initiative. Michigan chose to participate in the cross-site workgroup, Implementing Screening for Justice-Involved Youth with Co-occurring Mental and Substance Use Disorders.

State Diversion Activities

Process

Michigan convened a core team of senior-level officials representing state and local juvenile justice, behavioral health, and family advocacy. The project began with participation in the Policy Academy meeting, where the team learned about successful methods of cross-systems collaboration, front-end diversion, research-based screening, and evidence-based treatment. The coordinating agencies held regular technical assistance calls with the core team and provided technical assistance to support Michigan’s diversion implementation efforts.

Strategy

An existing collaborative relationship between Wayne County Children and Family Services, Detroit Community Mental Health, Detroit Police Department (DPD), and the Juvenile Assessment Center (JAC) provided a solid foundation for implementing a police behavioral health diversion project. The county developed a referral procedure for youth who come into contact with police, where eligible youth are taken to the JAC to be screened for possible mental illness and substance use needs. With consent, JAC staff administers the Juvenile Inventory for Functioning (JIFF), an alcohol and other drug urine screen, and the GAIN-SS. If need is indicated, youth are referred to a clinician for follow-up assessment and referral to treatment. Wayne County invested in a contract-based model to enable private agencies to respond more quickly to emerging trends, financial challenges, and local needs. As a result, new programs and home-based interventions for troubled youth and their families are expanding across the county.

During the course of the initiative, it became clear that the Crisis Intervention Teams for Youth (CIT-Y) developed by the Models for Change Mental Health/Juvenile Action Network model was particularly well-suited to addressing Michigan’s challenges. At that time, Crisis Intervention Teams (CIT) were available in Michigan for interventions with adults in Kalamazoo County only. Recognizing the necessity of statewide training on both CIT and CIT-Y, Michigan defined regions throughout the state and established regional police officer/clinician training teams. Over a six-month period, these training teams participated in both CIT and CIT-Y train-the-trainer sessions. Each region is now prepared to help youth who are experiencing mental health crises and their families.

Accomplishments

Through this initiative, collaboration has become an embedded practice in the pilot site and collaboration at the state-policy level has been enhanced. Partners in juvenile justice, education, behavioral health, public health, and child welfare have collaborated with parents and youth to design, develop, and implement Wayne County’s system of care. CONNECTIONS develops and maintains a comprehensive array of quality services that meets the unique needs of targeted youth and their families.
The JAC has credentialed clinicians who actively provide mental health therapy and substance use treatment for youth and their families. So that parents clearly understand what the diversion process entails, a brochure was created outlining the structure of referrals and services in Wayne County.

Two DPD police officers and two JAC clinicians attended the CIT-Y Train-the-Trainer (TTT). These teams are now available to train additional DPD officers on CIT-Y, with an aim to improving communication with and engagement of youth experiencing a mental health crisis and their families. Additional teams of clinicians and police throughout the state participated in the TTT as part of the statewide dissemination of this model.

Cross-Site Activities

Process

The Michigan team sent a participant to the cross-site Action Network meeting on Implementing Screening for Justice-Involved Youth with Co-occurring Mental and Substance Use Disorders. For the diversion strategy to work, it was understood that effective screening and referral processes needed to be implemented in the Wayne County JAC. The team identified early steps towards implementation as priorities, specifically: identifying the target population, selecting an appropriate screening method, and creating a plan to implement services and treatment.

Accomplishments

Through participation in the Action Network, it became clear that additional screening and assessment procedures were necessary to identify substance use disorders. The JAC developed a process to obtain consent and screen youth over the age of 14, using the alcohol and other drug urine screen and JIFF.

The JAC has added more therapists credentialed in substance abuse treatment and was approved by the State Bureau of Substance Abuse as an adolescent substance abuse provider. The JAC secured a contract with the Detroit Bureau of Substance Abuse to provide substance abuse services to this population of youth.

Next Steps

Collaboration and dialogue among the various state and local departments involved in this initiative will continue to support expansion of necessary services for these youth.

Wayne County will continue to track program outcomes from this project, hopefully adding strength to the argument for investing in community-based interventions and a system-of-care approach to youth in contact with the juvenile justice system.

The results of this demonstration project, outcomes, and lessons learned will be widely shared with other counties, the legislature, police, and the state departments involved in the project.

Michigan hopes to obtain additional funding to support dissemination and implementation of CIT and CIT-Y to additional areas around the state, including Battle Creek, Detroit, Flint, Kalamazoo, Saginaw, Pontiac, and Sault Saint Marie.

For More Information

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The John D. and Catherine T. MacArthur Foundation and the Substance Abuse and Mental Health Services Administration collaborated on an initiative entitled Improving Diversion Policies and Programs for Justice-Involved Youth with Co-occurring Mental and Substance Use Disorders: An Integrated Policy Academy/Action Network Initiative. The goal of this initiative was to increase the number of youth with co-occurring mental and substance use disorders diverted out of the juvenile justice system to appropriate community-based services. Eight states participated in this initiative: Arkansas, Kentucky, Michigan, Minnesota, Mississippi, New York, South Carolina, and Virginia.

Using SAMHSA’s Policy Academy model, core teams consisting of senior-level state and local policymakers were convened to learn about the latest research and effective diversion strategies for youth with co-occurring disorders in contact with the juvenile justice system. Individual state teams, consisting of the core team and an expanded home team, then developed and implemented front-end diversion strategies for youth with co-occurring disorders. Ongoing technical assistance was provided to support their efforts.

Using the Foundation’s Action Network model, which supports and links teams working on similar innovations in policy and practice, the states worked to identify and implement effective practices for screening and treating youth with co-occurring disorders. National experts provided guidance and support.

This initiative was coordinated by the National Center for Mental Health and Juvenile Justice at Policy Research Associates and the Technical Assistance Collaborative.