

Mental Health Screening and Assessment in Juvenile Justice

Edited by Thomas Grisso, Gina Vincent, and Daniel Seagrave. New York: The Guilford Press, 2005. 397 pp. \$50.00.

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The editors of *Mental Health Screening and Assessment in Juvenile Justice* start with the premise that every year an increasing number of children with associated mental health disorders enter the juvenile justice system. They note that an administrator of a juvenile justice correctional program stated that the “three most pressing issues in juvenile justice facilities today are mental health, mental health, and mental health.” When asked the same question 15 years earlier, another mental health administrator stated “public safety, public safety, and public safety.” The difference in these quotes highlights the shift in focus from juvenile crime prevention to the current crisis with, and recognition of, mental health disorders among incarcerated youths today.

Mental Health Screening and Assessment in Juvenile Justice is a comprehensive book organized into six sections: Preparing for Screening and Assessment, Multidimensional Brief Screening Tools, Unidimensional Screening Tools, Comprehensive Assessment Instruments, Risk for Violence, and Recidivism and Forensic Assessment Tools. Each section reviews tools principally developed after 1990 in the context of increasing focus on juveniles and their mental health needs. The tests reviewed in the book were chosen for four basic reasons: (1) they are easily available through commercial test publishers; (2) they have been developed for use in juvenile justice settings; (3) their procedures satisfy basic test construction criteria; and (4) they have shown reliability and validity in juvenile justice settings. The book lends itself to a comprehensive and thorough review of each instrument because the developers of the tests are typically the authors of the chapters.

The preface, citing a recent review by the U.S. House of Representatives subcommittee, states that 15,000 youth are incarcerated every year because of mental health-related disorders. In this context, detention centers have a “custodial obligation” to these

children and must be prepared to identify them and to facilitate their treatment in a timely manner. Moreover, a child’s rights around “due process,” such as the rights to avoid self-incrimination and to waive or obtain representation by an attorney, may be placed in jeopardy if a mental health disorder goes untreated. Clearly, treatment of a child’s mental health needs is important on many levels, and a lack of appropriate screening and assessment tools within a detention center does not absolve the center of their responsibility to the child.

Section I, Chapter 2 is entitled “A Developmental Perspective on Adolescent Personality, Psychopathology, and Delinquency.” In it the authors provide a comprehensive review of how developmental issues affect the understanding of child psychopathology. As an example, the authors introduce the concept of “instability of youth” or mental health-related phenomena that may reflect serious psychopathology as an adult but is seen as developmental and more age-appropriate for a juvenile. Issues surrounding the concept of developmental appropriateness come up again in Section V around the Hare Psychopathy Checklist: Youth Version. Also in Chapter 2, the authors discuss a juvenile’s risk for violence. While the literature is described as “largely inconsistent,” the authors state that youth who manifest disruptive disorders in combination with a lack of empathy and remorse are at higher risk for delinquency and violence. The authors report a 5 to 20 times greater likelihood that children involved with substances will exhibit violent and delinquent tendencies later in life. Mood disorders are also cited as a potential risk for violence. As an example, a sullen, depressed, irritable youth could elicit abrupt and aggressive responses from others. His depression may also result in a greater propensity to interpret annoyances as “direct threats,” thereby leaving him at risk for interpersonal discord and physical altercations.

The functionality and practicality of screening devices are reviewed in Chapter 3. At a minimum, the authors state that screening tools must focus on depression and anxiety; provide an indicator around the likelihood of short-term aggression; have the capacity to identify suicidal youth; and indicate the likelihood of a substance abuse or dependence diagnosis. These elements allow for more effective decisionmaking and an increasingly efficient allocation of resources surrounding a child’s mental health and/or substance abuse needs.

Chapter 4, "Evaluating the Properties of Instruments for Screening and Assessment," is outstanding. The authors state that it is targeted toward increasing the understanding of administrators, judges, lawyers, and counselors in juvenile justice settings around psychometric and mental health assessments. They certainly achieve this goal. Focused on seven terms—construct, content, procedure, norm sample, internal integrity, reliability, and validity—the chapter allows the reader to understand and relate to technical concepts in "a more friendly and consultative way to try to communicate what otherwise may seem to be a morass of impossibly technical concepts and considerations." The chapter also prepares the reader for Sections II through VI and the process of comparing and contrasting the various research outcomes associated with each tool.

Section II begins with a review of brief screening instruments, described as typically requiring less than 30 minutes to administer. Specifically, the chapter evaluates the Massachusetts Youth Screening Instrument-Version 2 (MAYSI-2), the Problem-Oriented Screening Instrument for Teenagers (POSIT), and the Child and Adolescent Functional Assessment Scale (CAFAS). The descriptions are concise and comprehensive, allowing for easy comparison by administrators. As an example, both the MAYSI and CAFAS are identified as brief screening tools. However, the CAFAS is also described as useful in developing treatment plans for children court ordered to receive community-based services. In this context, it serves as both a screening and an assessment tool, as opposed to the MAYSI, which serves only as a screening tool. This difference between the tools is vital information for an administrator considering purchasing an instrument for use in a particular juvenile justice setting.

Part III, "Unidimensional Screening Tools," focuses on Substance Abuse, Post-traumatic Stress Disorder (PTSD), and Attention-Deficit/Hyperactivity Disorder (ADHD), as each is over-represented in juvenile justice populations. In contrast to Part II, these tools focus on a sole disorder. Specifically, the section reviewed the Substance Abuse Subtle Screening Inventory-Adolescents, Second Version (SASSI-A2), the Trauma Symptom Checklist for Children (TSCC), and three tools to evaluate ADHD: the Conners Rating Scales-Revised, the ADHD Rating Scale-IV, and the Attention Deficit Disorders Evaluation Scale-Second Edition. I found the review of

the SASSI-A2 particularly poignant as the authors cited a range of 35 to 68 percent of children who tested positive for a drug as part of the National Institute of Justice's Arrestee Drug Abuse Monitoring (ADAM) 2000 survey. This statistic becomes even more compelling when one considers that 53 percent of youth had been under the influence of drugs at the time of their arrest. The SASSI-A2, focused on matters including attitudes toward drug use, defensiveness, and emotional pain, lends itself as a valuable tool in helping to address system-wide and national concerns about relapse and recidivism.

Part IV, "Comprehensive Assessment Instruments," is focused on youth with specialized mental health needs. The tools reviewed are divided into two types: those administered directly to the youth and those that are termed "families of instruments." The latter allows for multiple collateral informants and a more comprehensive review of a child's life. I particularly liked the case example given for the Millon Adolescent Clinical Inventory (MACI), a test intended to target a child's psychopathology, including suicidality. The vignette focuses on a child transported by the police to a detention center subsequent to a harassment charge. After a couple of days, she appeared depressed and withdrawn. However, because the detention center did not use a screening device for all children at intake, no one had assessed her mental health needs. Upon being referred for evaluation, the child's collateral contacts reported her to be in therapy for depression (with a prior suicide attempt), receiving medication, and currently struggling with substance abuse-related problems. The MACI evidenced elevations on the "doleful, self-devaluation, body disapproval and identity diffusion scales," suggesting that there may be the presence of a thought disorder in the context of her depressive presentation. Based on these results, the child was kept under close observation at the detention center and then transferred to an inpatient facility for hospitalization. Although difficult to quantify, it is possible that by virtue of administering the MACI, a psychotic child was provided help who otherwise may have attempted suicide while detained within the center.

"Risk for Violence and Recidivism Assessment Tools" comprises Part V, in which the tools reviewed are generally used to assess concerns regarding disposition, including community safety and community reentry. Focused on the Washington State Juvenile

Court Assessment (WSJCA), Youth Level of Service/Case Management Inventory (YLS/CMI), Early Assessment Risk Lists for Boys and Girls (EARL-20-B and EARL-21-G), and the Structured Assessment of Violence Risk in Youth (SAVRY), the authors report that although the field lacks consensus about the range of risk factors resulting in youth violence, there is nonetheless a small percentage of males who engage in such delinquency at an early age and later display antisocial behavior as adolescents and adults. They state that it is this segment of the population who commit more than 50 percent of all crimes.

There were several chapters in Section V that I particularly liked and found effective. The discussion comparing the terms “clinical judgment,” “actuarial assessments,” and “structured professional judgment” was excellent, as was the review of the guidelines necessary for effective implementation of the Youth Level of Service/Case Management Inventory (YLS/CMI). The latter requires reflection in the agency’s mission statement that screening and assessment tools are necessary and that all relevant personnel, including judges and lawyers, receive training in the utilization of the tool. This type of an implementation process helps to promote cooperation, collaboration, and effective communication throughout the system. Again, significant information is included for administrators comparing various tools prior to purchase. The Hare Psychopathy Checklist: Youth Version (PCL:YV) was also reviewed in Section V. The authors suggest that, while not intended as a measure to assess risk, it can be valuable in identifying those youth who may pose serious institutional problems and require more resources. The stigmatization of adolescents as “psychopaths” is also addressed, and the reader can easily connect this discussion to Chapter 2 with its review of childhood psychopathology and the instability of youth.

The last section of the book is entitled “Forensic Assessment Tools” and focuses on forensic and legal questions posed by the court. Chapter 21 reviews the Risk-Sophistication-Treatment Inventory (RST-I), which targets three specific areas: a juvenile’s level of dangerousness, the child’s level of maturity or sophistication, and the degree to which the child is amenable to treatment. Chapter 22, entitled “Instruments for Assessing Understanding and Appreciation of *Miranda* Rights,” is equally interesting, as the authors provide an outstanding case review surrounding police interrogation and “perception of coer-

cion.” In it they describe a young boy who during a police interrogation understood a “right to remain silent” as an obligation to remain silent until he was questioned by officers. At that point, he believed he was obligated to speak with the police. He further believed the judge would order him to answer questions and that his lawyer had no right to argue the judge’s order. Examples like this are clear and pragmatic and make their points cogently. As a caveat, the authors remind us that tools intended to measure a youth’s capacity to understand his or her rights at the time of the evaluation were typically not made available until months, or even years, after the interrogation took place. In this context, a child’s understanding and appreciation of his or her rights may have improved due to attorney contact and/or maturation, among other possibilities. While this concept may seem basic to a forensic examiner, it is extremely important information for those whose focus is in other areas such as policy, mental health, corrections, or law enforcement.

In summary, this is an excellent book and one that provides an outstanding overview for mental health professionals, judges, lawyers, and others involved with youth and the juvenile justice system. The organization of the book allows the reader to translate complicated material into practical terms, as all too often books reviewing psychometrics leave readers caught in a web of statistical detail and vocabulary for which they are ill prepared. While this book may be somewhat elementary for a forensic examiner, it provides a comprehensive review of screening and assessment tools and should stand as one of the premier desk references for mental health and legal professionals alike.

Evil and Human Agency: Understanding Collective Evildoing

By Arne Johan Vetlesen. Cambridge, UK: Cambridge University Press, 2005. 313 pp. \$34.99 (paperback).

Reviewed by Jeff Feix, PhD

Nazi Germany, Bosnia, and Rwanda: for all the evil done by whole groups of people to other groups of people throughout recorded history, the 20th cen-